Interpersonal Skills in Healthcare

First Impressions
Students must be aware that first impressions are critically important. A professional's dress, attitude, and appearance all influence his/her credibility. Patients and visitors to the medical office should always be treated as individuals who deserve the best customer service.

Verbal and NonVerbal Communications
There are two types of communication that occurs between individuals. Verbal communication depends on words and sounds. Nonverbal communication consists of messages that are conveyed without the use of words. Nonverbal communication is dependent on body language, eye contact, facial expressions, and hand gestures. Mixed signals can be sent to another if our verbal and nonverbal communication conflict with each other.

Space
Spatial separation should be considered when communicating with another especially someone you don’t know personally. Spatial separation can be defined as the space of comfort between individuals. Public space is usually considered to be 12 to 25 feet; social space is approximately 4 to 12 feet; personal space is usually 1 ½ to 4 feet; and intimate space would include touching up to approximately 1 ½ feet. The issue of personal space should be discussed with future healthcare professionals.

Touch
Touch is important in the process of communication as it projects an air of care and compassion to the patient. Professionals should not be afraid to touch patients, as long as precautions are taken with those who are contagious and their culture allows it. Touching the patient appropriately shows empathy and can often be more eloquent than the spoken word.

Transactional Communication
Students should learn the elements of the transactional communication model. The transactional communication model includes a sender and a receiver who both offer messages to each other using various channels. The sender encodes a message, then the receiver decodes it, to the best of his or her ability. Often some type of noise interferes as well, such as internal, external, and physiologic noise. Perception is important when communicating because messages are sometimes easily misinterpreted.

**Barriers to Communication**

There are several barriers to communication. They include: physical impairment, language differences, prejudice, stereotyping, and perception. Barriers can also be present during difficult times, such as when a crisis occurs, when a person is angry or in shock, or when a patient or family member is experiencing an impending death or illness or has experienced a serious accident. Students need to be aware of the barriers and need to be able to remove the barriers in order to communicate.

**Maslow’s Hierarchy of Needs**

Maslow’s Hierarchy of Needs includes five (5) levels, beginning with our most basic needs, such as food, rest, sleep, water, and anything that involves our physical well-being. The second level is related to safety issues, and the third level, our social needs, such as love and belonging and interaction with others. The fourth level deals with our self-esteem, and the fifth level is self-actualization, where our full potential is reached.

**Defense Mechanisms**

Students need to be able to recognize commonly used defense mechanisms. Defense mechanisms are psychologic methods of dealing with stressful situations and include sarcasm, denial, repression, compensation, and several others. Often these mechanisms are our only of dealing with circumstances that are difficult to cope with.
Listening

Listening is one of the most important skills the professional can possess. Listening involves not only silence, but active feedback as well. Open-ended questions help the professional to restate what the patient is saying, to be sure that the patient is understood clearly.

Dealing with Conflict

Everyone experiences conflict in daily living, so it is necessary to develop skills in dealing with conflict in as positive a way as possible. Conflict is not always negative and can be quite beneficial to relationships. Knowing the different types of conflict, as well as how people attempt to process conflict, will help the professional to recognize patterns and respond appropriately. Some individuals deal with conflict by being aggressive, assertive, or nonassertive. There are also many passive-aggressive methods of dealing with conflict, such as avoidance, changing the subject, distraction, blaming, and several others.

Process of Grief

Elisabeth Kubler-Ross suggests that there are five stages to the process of grief: denial, anger, bargaining, depression, and acceptance. She believes that all stages are experienced while grieving, but not necessarily in the same order. The professional can better care for the patient and the patient’s loved ones when a good understanding of the grieving process is present. Patients grieve when facing death, a surprise diagnosis, a life-changing accident or life situation, or the loss of a loved one.

Physical and Emotional Needs and our Work Performance

Everyone needs physical and emotional rest to function throughout the day. When these needs are not met, work performance may suffer and
the professional may not be able to give proper attention and care to the patients. Make every effort to completely focus on the patients.

**VOCABULARY WORDS**

1. aggressive-forceful or intended to dominate
2. battery-an offensive touching
3. channels-means of communication
4. decodes-converts into intelligible form
5. encodes-converts from one system of communication to another
6. proxemics-study of space
7. perception-capacity for comprehension
8. stereotype-something conforming to a fixed or general pattern

**TEXTS**

1. Kinn’s The Administrative Medical Assistant
2. Thomsom/Delmar  Allied Health and Communication Sciences
3. Potter’s Medical Office Administration Worktext

**WEBSITES**

1. www.aama-ntl.org
2. www.americancomm.org
3. www.iabc.com