

REPORT ON INEFFECTIVE COMMUNICATION IN HEALTH AND SOCIAL SETTINGS

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Introduction

There is a relevant relationship between a country's financial system improves, so does the health of its population. What can be much less obvious is that growing the health of a nation's population can immediately bring about financial growth, due to the fact extra people may be capable of adopting successful activities withinside the workforce (S. Collins, 2021).

Health is an issue for all countries; according to a Pew Research Center survey, 85 percent of participants feel it is an issue in their own country (The Outlook on the Global Agenda 2015, 2021). The health industry on the effective integration of many players known as stakeholders, among whom we may list a few (patients, doctors, nurses, employers, insurance companies, pharmaceutical companies and government). The goal of these participants is to deliver comprehensive health care that is framed in quality, which is why effective communication and coordination between the many participants is essential.

Companies recognize that communication with their individuals is significant if the energies and therefore the efforts of their workers are to purpose within the same direction.

There are numerous signs that clinical workplace has a useless verbal exchange. Incomplete or erroneous affected person information and verbal exchange breakdowns may have critical outcomes for the medical workplace team of workers and sufferers. One essential piece of facts now no longer communicated may have disastrous results. While some hurdles are inevitable, a powerful verbal exchange can bring about higher effects for sufferers and the general achievement of the clinical workplace. (HardTalk, 2019).

Communication in health-care organisations must be thoroughly researched and analysed. Communication is frequently critical to an organization's success. The several aspects of corporate communications must be studied, including its goals, methodologies, communication gap, ways to communicate more successfully, basic principles of business interactions, interaction types, and, last but not least, business communication forms

(verbal, nonverbal, Epistolary, public speaking, and telephone communication) (Spiridonov, 2021).

Healthcare workers play a key role in transmitting vital patient information to providers in order to keep patients safe. Many sentinel occurrences have been related to inadequate communication and suboptimal cooperation among healthcare workers, including falls, prescription mistakes, unnecessary or prolonged hospitalizations, and fatalities. When caring for elderly individuals, who frequently have complicated health requirements, health care workers confront several obstacles (Getzel and Mellor, 1982).

Ineffective communication was a verbalized, observable practice problem at a nursing home in a location in North of London. The purpose of this report is through the use of one of the decision-making techniques seen during the course to evaluate a range of solutions to the problem of ineffective communication that was presented in the place chosen for the analysis.

Problem definition

For the purpose of this report we chose an institution dedicated to the care of older adults located in North London where there are approximately 44 residents of which 20 are female and 22 are male. These residents are characterised by different types of dementia and different types of disability. The institution has 4 nurses on the day shift and only one on the night shift; with regard to carers during the day there are 16 carers distributed on different floors (4 floors) and only 2 carers during the night.

The problem that has been occurring is ineffective communication between staff, which causes some difficulties in care such as delays or missed medical appointments, resulting in delays in care and the resident having to wait for another appointment, which affects the resident's health. Another aspect encountered is delays in fulfilling scheduled activities inside or outside the institution, which generates anxiety and discomfort in the residents. With regard to care plans, it is observed that not all staff is continuously informed of the new guidelines or care plans to be followed with the residents.

PESTLE Analysis

CRICO Strategies' medical safety specialists looked over 23,000 medical malpractice claims and discovered that communication problems were responsible for almost 7,000 of them. These miscommunications cost \$1.7 billion in malpractice charges and caused in nearly 2,000 fatalities that may have been avoided. According to a Joint Commission research, misunderstanding between caregivers during patient handovers caused 80 percent of major medical mistakes (Effects of Poor Communication in Healthcare, 2021).

According to a recent Marie Curie research, poor communication in the NHS has a significant impact on patient care, staff fatigue, and public finances. Andrew McDonald, the report's author and a former top civil servant, claims that communication breakdowns are harming medical treatment and squandering much-needed NHS resources. The overall cost in England alone is expected to be in the billions of pounds each year. Better communication between healthcare providers and patients, according to the research, may

save money, promote health, and improve the quality of life for patients and those who support them (Mc Donald, 2021).

Ineffective communication is a key contributing factor in medical mistake, according to the Institute of Medicine's study "To Err is Human," with miscommunication accounting for nearly 60% of cardinal events reported to the Joint Commission. The majority of communication process in healthcare is communicated among healthcare workers, and accumulating data suggests that communication mistakes have an impact on patient safety. Evidence could be found in a number of care environments, including the surgery room, the intensive care unit, and nursing homes (Comission, 2021). Within the technological area we find that although there is communication equipment such as walkie talkies, telephones, loudspeakers, it is very often observed that a number of staff do not use this technology in their daily work, which produces communication barriers, delays in information and as a consequence affects the care of the residents.

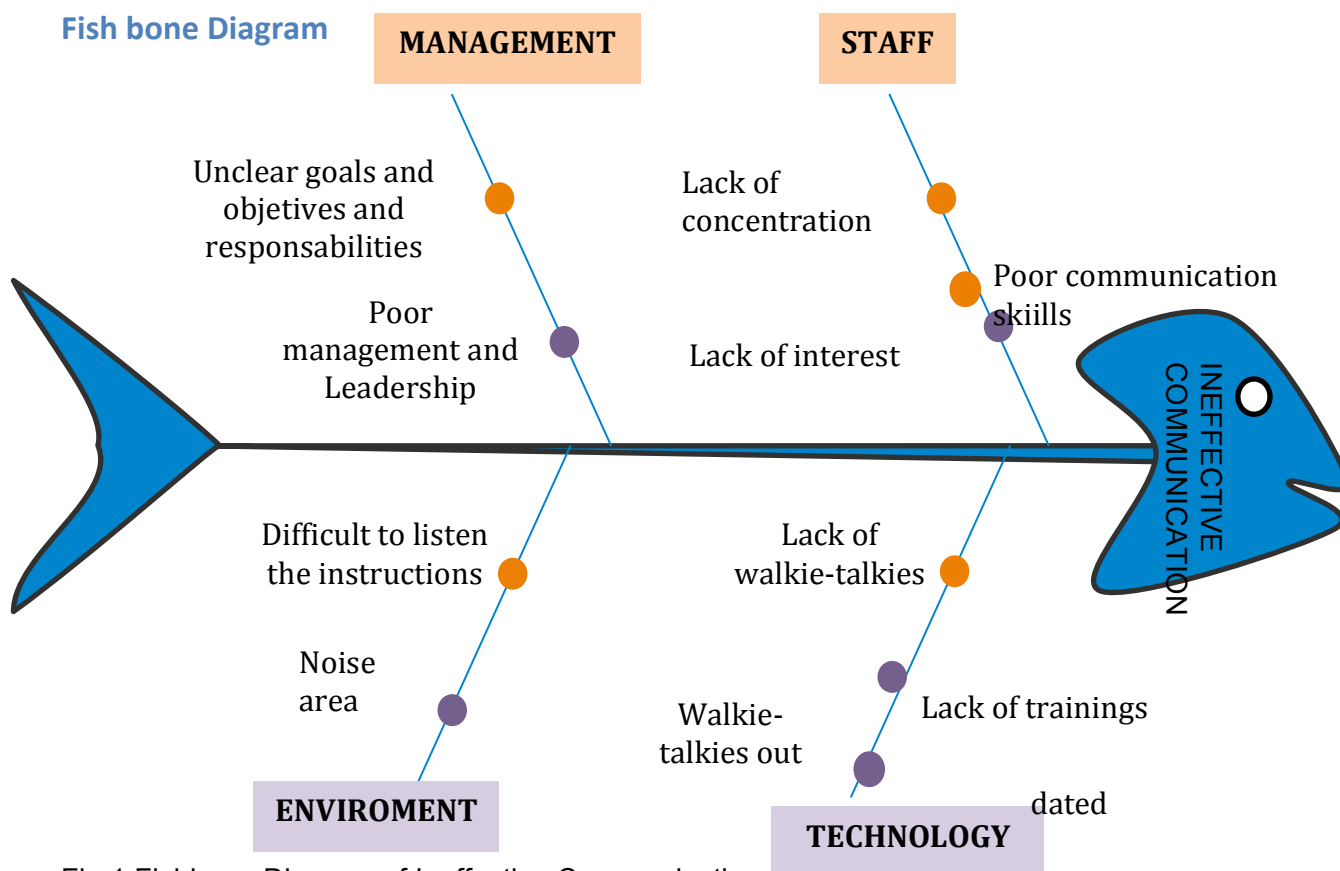


Fig.1 Fishbone Diagram of Ineffective Communication

Discussion

The impact of Ineffective communication between Health care workers can lead to misconceptions and misinterpretation of follow-up instructions, resulting in lower outcomes and hospitalisations, as well as the risk of harm to the patient. Inadequate informed consent can also come from poor communication, which can lead to medical malpractice. Also Ineffective policies and procedures, poor language skills, poor communication skills, work stress, EHR issues, inadequate record, disputes amongst staff members, and ineffective communication methods in hospitals all contribute to communication issues. Communication breakdowns can also be caused by the hospital hierarchy, which puts health workers at a disadvantage and makes it difficult for them to communicate effectively (HIPAA Journal. 2021).

It is important to know that throughout history communication has gone through several stages until the use of state-of-the-art technology as seen in this era. Communication problems have been the cornerstone of all organisations, not only in the field of health. There are several models of communication, which can be compared and related to the problem of ineffective communication as described below.

Shannon and weaver Model

The Shannon-Weaver model is the first to emphasise the importance of 'noise' in communication, which may interrupt or modify a message sent from one sender to another. Communication is broken down into five components: sender, encoder, channel, decoder, and receiver. It shows the significance of message encoding and decoding in order to send them (e.g. turning them into written words, morse code, etc.). Noise happens throughout the encoding, transmitting, and decoding processes, which can interrupt or distort a message (Chris Drew, 2021).

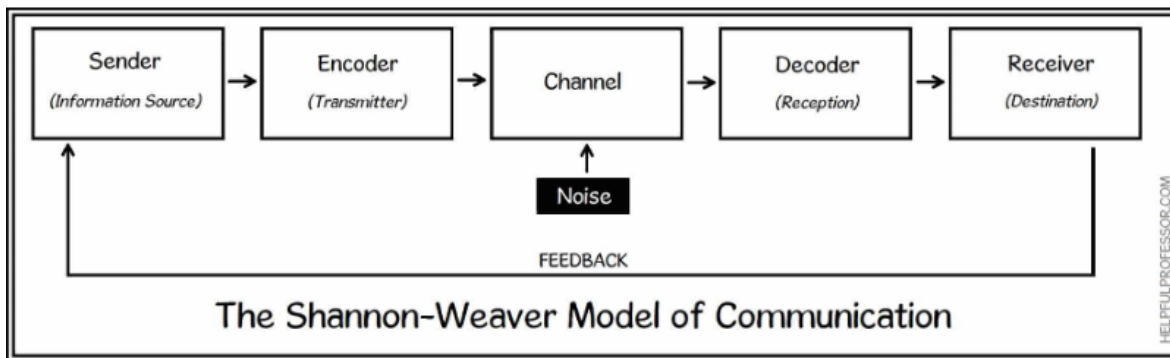


Fig 2. Shannon-Weaver Model.

Example of Shannon-Weaver Model in healthcare environment

At work (Nursing Home) all staff have to communicate by walkie talkie, the instructions from Nurses or managers are also answering using the same advice and most of the time the communication has noise because of the advice that they are using. So in this case is clearly example of Shannon-Weaver model.

The simplicity of Shannon-Weaver makes it ideal for basic requests. A straightforward request is made, the information is encoded and decoded and the physical noise of the channel, i.e. the static noise during the telephone call, is identified with feedback.

Berlo's S M C R model

Source, Message, Channel, and Receiver are the four stages that describe it. Berlo's approach is unusual in that it provides a thorough description of the important components in each stage that will influence how well the information is delivered (BERLO'S SMCR MODEL OF COMMUNICATION, 2021).

Berlo's S-M-C-R Model

Summary: Sees communication as occurring in four steps. There are several factors in each step that will impact the outcome of communication.

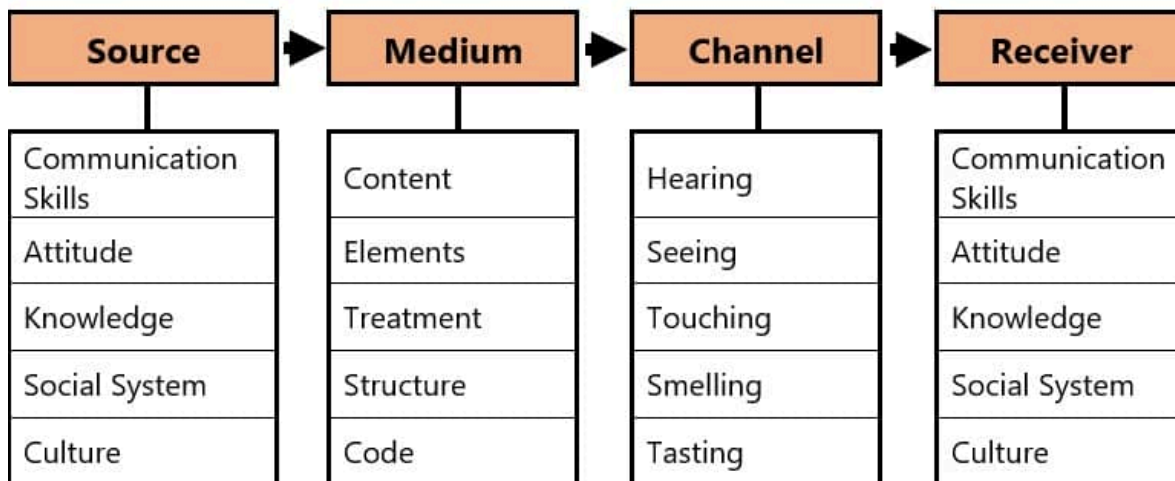


Fig 3. Berlo's S M C R mode

The major goal of the Health and Social Care Act 2008 was to set up a new regulator with the mission of preserving the quality and safety of care for service users by combining certification and auditing of health and adult social care services for the first time (CQC health and social care act 2008 | QCS, 2021).

The Care Act of 2014 urges caregivers to address vulnerable individuals with a person-centered approach. When you apply the rules, you, too, put the well-being and requirements of the vulnerable person at the centre of safeguarding procedures. When handling safeguarding issues and care plans, the principles enable you directly include the vulnerable person – and any nominated individuals who could lead to achieving choices in the fragile adult's best interest **In-text:** (Care Act 2014, 2021).

Analysis

Falling behind in terms of effective communication. Communication is also an important component for good care provision. Leadership and management skills, insufficient training and undertrained workers, lack of support for advanced communication technologies, malfunction and/or use of out-of-date technology, poor communication skills, improper communication channels, ineffective reporting system, lack of concentration and work pressure are all factors that contribute to ineffective communication in healthcare systems.

If all the healthcare workers and health system want to transition into a value-oriented healthcare system, the communication must be improving.

While there are several institutional and cultural obstacles to overcome, the good news is that patients, caregivers, administrators, and entrepreneurs are all working together to reach that objective. To accomplish so, we'll need to define clear success criteria, identify champions, establish agreement, and iterate based on our learnings. It won't be a quick trip, but at the very least we'll have something to speak about.

The purpose of duty of candour law is to guarantee that service providers are open and truthful with their customers. When problems occur with care and treatment, it lays out certain specific standards that providers should follow, including alerting individuals about the incident, giving appropriate assistance, providing honest information, and sincerely apologizing when mistakes are made (Duty of candour, 2021).

Through this analysis it has become clear that there are many variants that can affect communication among health care staff and of these we can highlight the lack of leadership training for new staff in which the importance of effective communication and its impact on the wellbeing of residents can be continually reinforced.

Another variant found was the lack of concentration when carrying out activities, which affects the harmony of the group and is reflected in poor communication.

Another important factor found is the lack of communication skills, which needs to be addressed through continuous training.

Recommendations

In order to achieve a successful solution to the situation mentioned in this report, the following tools have been taken as tools The Causal Model of Organisational Performance and Change, also known as the Burke and Litwin Model, which suggest interconnections that show how performance is affected by internal and external factors. This model provides a framework for analysis of key organisational and environmental dimensions of successful change and demonstrates how these dimensions must be causally linked to achieve performance change.

Burke and Litwin Model

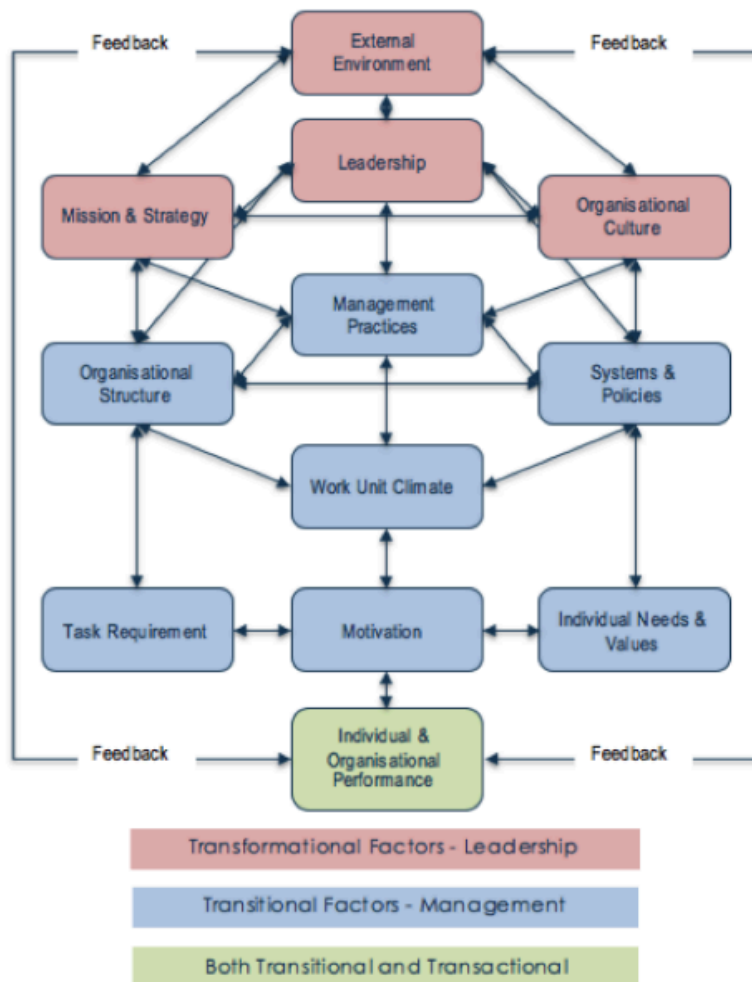


Fig 4. **Burke and Litwin model diagram**

The causal model links what is understood from practice with what is known from research and theory. This model not only examines how different dimensions are linked to each other; it also analyses how the external environment affects the different dimensions of an organisation. The model concentrates on providing a guide for organisational diagnosis and planned and managed organisational change, clearly showing cause and effect relationships (Medicaid Case Analysis: The Burke- Litwin Model | Accurate Essays, 2021).

Analysis

Mission and Strategy: To provide care to elderly people with high standards

Leadership: chief executive, Manager, Nurses, Senior Nurses, senior carers and Regional departmental heads.

Organizational Culture: workers are subject to their departmental heads, which are subject to the central office.

Structure: The organization has a central core office that is surrounded by the different departments, each headed by a departmental head.

Systems: leadership is hierarchical, and communication is passed up each department to the central office.

Management Practices: The organization is managed by a social services organization.

Work Unit Climate: The workers are not motivated they think that the environment is stressful; the communication is not effective between leaderships and workers.

Tasks and Skills: The organization is service oriented.

Individual Values and Needs: The workers value human life and health of the residents

Motivation Level: The workers are not motivated to work for the remuneration they receive from the organization.

Individual and Overall Performance: The organization has good performance with above average efficiency, productivity, and satisfaction.

Of the twelve factors analysed, it is found that the ones that need to be intervened are the level of motivation, unit work climate, attributed to ineffective communication between leaders and employees.

The following recommendations were made in order to enhance communication in the healthcare sector (Nursing Home) and to reduce the impact of inadequate communication.

Also according with the analysis lack of motivation was another factor and has to be included in recommendations.

Motivation

The process of initiating, guiding, and maintaining goal-oriented activities is known as motivation. It's what motivates you to take action, whether it's grabbing a glass of water to quench your thirst or reading a book to learn something new.

The biological, emotional, social, and cognitive variables that trigger behaviour are all part of motivation. The term "motivation" is commonly used in ordinary speech to express why someone does something. It is the force that propels human behaviour.

Motivation encompasses not only the variables that trigger behaviours, but also those that guide and maintain these goal-directed activities (though such motives are rarely directly observable).

In the context in which the workers in this report develop, they are focused on the care of patients or elderly people. Therefore we have to analyse all points of view starting with the motivation to work with this kind of people, as it is well known that there must be an interest for adults if one wants to work in this specific area, because in many cases workers are working in this field for different reasons but not because they like it or feel motivated to help this kind of population.

Often the motivation lies in this point, because of the accessibility to get a position in this area many people dedicate themselves to this work feeling frustrated at some point and as a result they become unmotivated and uninterested in their work. When the motivation problems come from the activity carried out, the best thing to do is to opt for another idea of work, as continuing will result in creating a bad atmosphere both personally and with co-workers, which is reflected in the lack of quality care for the residents (Campbell, Maxwell, Torrens and Pollock, 2021).

In another aspect and analysing it from the internal point of view is the other group of workers who are there because they are really passionate about the idea of helping this

group of population as well as growing in skills and knowledge, however in them there is also demotivation but due to the work environment that is perceived as a result of a little assertive relationship between staff such as managers, nurses, seniors, among others, which results in a tense and demotivating work environment.

For the reasons described above, the recommendations are aimed firstly at working hand in hand with the leaders of the institution in terms of promoting activities that generate a better relationship with the rest of the staff, programming recreational and leisure activities where staff can integrate not only in a work-related way but also generate bonds of friendship and good relations.

On the subject of salary, it would be advisable for the staff to have some economic incentives such as bonuses or discounts in order to solve salary problems.

Every carer should be sufficiently taught on how to communicate successfully with his or her colleagues, residents, or patients. In order to overcome poor communication, management assistance is also necessary. The strategy will usually specify the communication routes, as well as reporting and feedback mechanisms.

To avoid losing attention during conversation, all sources of distraction should be eliminated from the immediate vicinity of the working spaces. To minimise overload and job pressure, tasks should also be carefully planned and scheduled.

Employee duties should be clearly defined from the start so that they are aware of their obligations and what is expected of them. The staff should be well informed about the objectives.

In Burke's analysis, no problems related to technology were found, but it should be noted that it is a necessity in the institution as there is not enough communication equipment, especially in the case of new staff, as they have to wait a long time to acquire one. It is therefore recommended that a sufficient budget should be set up for the purchase of contemporary communication technology for usage inside the organisation in order to effectively disseminate information. Furthermore, with management support, old technologies are replaced, and faulty ones are fixed and maintained appropriately.

Conclusions

1. An in-depth investigation of health care employees' motivation with the goal of enhancing the quality and efficacy of communications in workplace relationships.
2. Providing continuous education on the influence of communication skills on the improvement of relationships among medical team members.
3. Development of a test programme to evaluate the danger of degradation of team relationships, as well as the individual chances for members to enhance their communicative talents, resulting in a variety of positive outcomes.
4. The need for effective communication in healthcare is urgent, and it is the key to achieving seamless patient experiences.
5. Communication between carers should be emphasised more throughout the training so that it becomes ingrained as a necessary skill and quality trait of each caregiver.
6. A motivated employee is enthused, focused, and proud of their work. They are prompt to complete work, rapid to act, and motivated to perform a good job for themselves and the organisation.
7. Employees that are motivated are more satisfied with their jobs and have a clear objective in mind. These employees are less inclined to skip work without good reason since they believe it will cause them to fall behind in their job.
8. Create more collaborative work cultures to reduce the negative impacts of poor communication.

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