

Sample scenario

The sections of the toolkit covering the individual principles include exercises based on scenarios and possible questions that healthcare consumers and healthcare professionals might ask. The following scenario is included in Principle 4 — Perceptions of risks and benefits are complex, and priorities may differ between healthcare consumers and healthcare professionals.

Joe is a 65 year old man who has been referred to an orthopaedic surgeon because of difficulty with walking. The surgeon recommends to Joe that he have a hip replacement. Joe's wife does not drive, and the couple need a car to get to the shops and to visit family and friends. Although he is very concerned about not being able to drive for some time after the operation, Joe has not raised his concerns with the surgeon, as he does not want to bother him with personal issues.

Questions Joe might ask:

Which of the risks and benefits are most real and relevant to me?

What does a high risk mean to me?

What are my main priorities?

How can we reach agreement on a course of action that seems right for me?

Questions Joe's surgeon might ask:

Might this person see the risks and benefits differently from me?

How could I encourage them to say how they see the risks and benefits?

How can we reach agreement on a course of action that seems right for this person?

How do I obtain a copy?

The toolkit is available in print and online through the NHMRC:

- Email: nhmrc.publications@nhmrc.gov.au
- Phone: 13 000 NHMRC (13 000 64672 or 02 6217 9000)
- Website — <http://www.nhmrc.gov.au>

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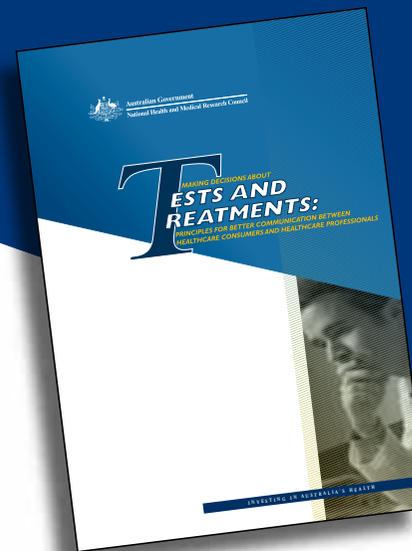
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A toolkit for improving communication in the healthcare setting ...

Why is a toolkit needed?

The toolkit uses the terms:

- *healthcare consumers* to refer to patients, their carers and their families
- *healthcare professionals* to refer to medical practitioners, nurses, occupational and speech therapists, dieticians, physiotherapists, podiatrists, pharmacists, midwives, dentists, and other healthcare professionals.

Good communication can make a difference in healthcare; for example, helping healthcare consumers to feel more satisfied and empowered, and healthcare professionals to be more effective and trusted. The National Health and Medical Research Council (NHMRC) has therefore produced a toolkit, titled *Making decisions about tests and treatments — Principles for better communication between healthcare consumers and healthcare professionals*. The purpose of the toolkit is to help healthcare consumers and professionals to communicate more effectively about these issues. The toolkit uses text, diagrams, exercises, scenarios and case studies to outline the principles of effective communication, and the potential barriers to such communication.

Since communication is a two way process, the NHMRC has chosen to produce a single toolkit aimed both at those taking up and those delivering healthcare, rather than separate versions for consumers and professionals.

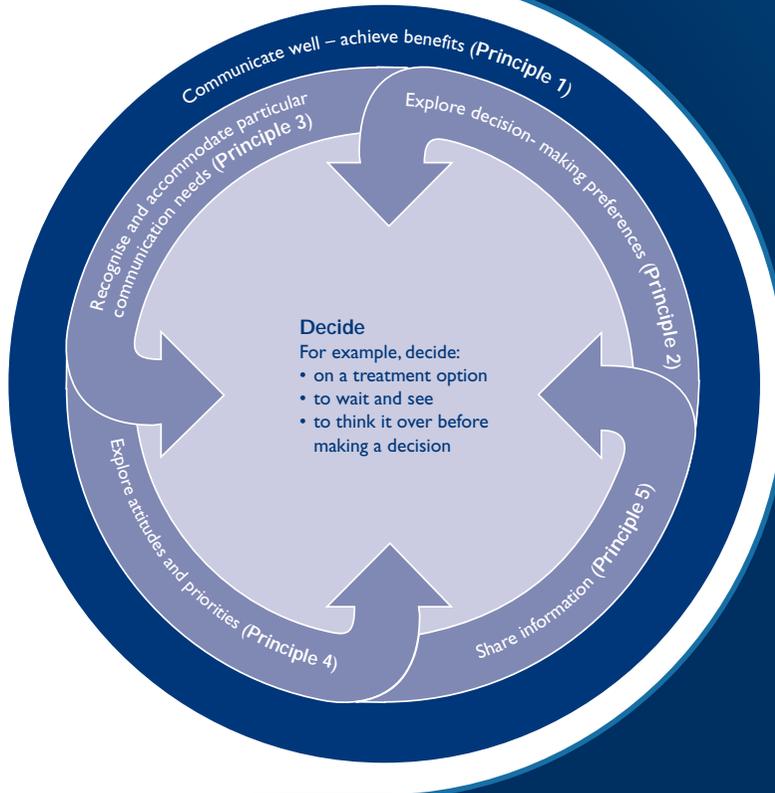
Principles of effective communication

The toolkit is built around five principles of effective communication in healthcare, which were developed from a review of the published scientific literature:

- **Principle 1** — Good communication between healthcare consumers and healthcare professionals has many benefits
- **Principle 2** — Healthcare consumers vary in how much participation in decision making they desire
- **Principle 3** — Good communication depends on recognising and meeting the needs of healthcare consumers
- **Principle 4** — Perceptions of risks and benefits are complex, and priorities may differ between healthcare consumers and healthcare professionals
- **Principle 5** — Information on risks and benefits needs to be comprehensive and accessible

The diagram shows how to apply these five principles to achieve action and reach an appropriate decision.

Although the principles of effective communication apply to 'informed consent', the toolkit has a much broader focus than this particular issue.



Who is the toolkit aimed at?

Although the toolkit may assist individual healthcare consumers and healthcare professionals, it is primarily intended as an educational resource. For example, it could be used to develop workshops and training modules for:

- healthcare consumer groups, carer organisations and support groups
- undergraduate and postgraduate healthcare professionals
- overseas-trained healthcare professionals
- professional development courses
- senior staff within health services
- medical defence organisations
- students in years 11 and 12 (as part of a module about health)
- participants in the University of the Third Age (U3A).

How is the toolkit structured?

The toolkit has three parts:

- **Part 1** covers each of the five principles, giving background information, an explanation of what the principle means for consumers and professionals, examples of relevant published studies, tools and exercises (such as the scenario shown below) to help consumers and professionals to put the principles into practice, and sources of further information.
- **Part 2** contains case studies covering three specific situations — a screening test, a procedure and a medication. Each case study gives some background information, and then illustrates how the principles outlined in Part 1 apply to that particular situation.
- **Part 3** provides sources of further information, such as relevant publications, organisations and websites, and a list of the key references.