



National Healthcare  
Communication  
Programme

# Initiating the Consultation

A leaflet for healthcare staff



*Making conversations easier*

# Initiating the Consultation

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2. Establish initial rapport
3. Non-verbal behaviour
4. Identify the reasons for the consultation



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# Initiating the Consultation

## 1. Preparation

Evidence shows that the impression you give the patient at the start of the conversation has a significant impact on their view of you and their readiness to share sensitive healthcare concerns.

### Communication skills

- ☐ Prepare yourself
- ☐ Prepare the environment
- ☐ Prepare your information



# Initiating the Consultation

## 1. Preparation

### Prepare yourself



Be aware of your personal appearance, a professional approach is important

Make sure that you have completed any outstanding tasks and that you are in the right frame of mind for the consultation.

Clarify in your own mind the purpose of the conversation you are about to have.

Remember you are doing very many consultations each day but for the patient and their loved ones this is a unique and vital conversation.



# Initiating the Consultation

## 1. Preparation

### Prepare the environment

It is important to establish a therapeutic space for your consultations.

Where possible, put a sign on the door to your consultation area/space/room to ensure privacy and avoid interruptions.

If you are at the hospital bedside, it is also important to take any possible steps to respect the patient's privacy.

Ensure that you have switched off/turned to silent your phone and any computer applications and notifications.



Have pen, paper, healthcare record and any necessary equipment to hand.



# Initiating the Consultation

## 1. Preparation

### Prepare your information

Are there records that you need to read before the consultation? Read carefully information from colleagues, test results, referrals and letters.

Prepare a list of points to cover, and consider your agenda for the consultation.



Remember the patient will also have their own agenda which needs to be included.

### TIP

Using good communication skills at the start of the consultation results in mutually understood common ground. This helps to build rapport and trust and enables the rest of the consultation to flow more smoothly.



# Initiating the Consultation

## 2. Establish initial rapport

### Communication skills

- ☐ Warm greeting
- ☐ Introduce yourself
- ☐ Check the patient's name
- ☐ Check how the patient likes to be addressed
- ☐ Use the patient's name, particularly when demonstrating empathy
- ☐ Check who is with the patient (name/relationship)
- ☐ Tell that patient what you have done to prepare for the consultation

### Warm greeting

Consider non-verbal approaches like shaking hands.

Greet the patient with a warm 'hello'



# Initiating the Consultation

## 2. Establish initial rapport

### Introduce yourself (name and role)

Establish that the patient can hear and understand you. Identify any language barriers.

*Hello, my name is Dr Grace.  
I am one of the junior doctors  
on Dr Mannion's team.*

### Check the patient's name and how they like to be addressed

If the patient has a name that is difficult to pronounce, it's ok to ask how to do so. The patient will appreciate you taking the time to find out.

*It's Evelyn Walsh, is it?  
And what do you like to be  
called... is it Evelyn or...?*





# Initiating the Consultation

## 2. Establish initial rapport

Use the patient's name, particularly when demonstrating empathy

*That sounds like it was very tough for you Evelyn.*

Check who is with the patient (name/relationship)

Check if the patient consents to that person being involved in conversations about their care.



# Initiating the Consultation

## 2. Establish initial rapport

**Tell the patient what you have done to prepare for the consultation**

Don't rush, even if time is short. The patient needs time to settle into the consultation and will pick up on your nonverbals if you appear rushed.

*I read the letter from your GP/I talked to Dr O'Keeffe who saw you yesterday.*

### TIP

Even if you have already met the patient/family, re-introduce yourself and explain who you are, your role, the team – “Hello my name is \_\_\_\_\_. I am part of the team of doctors who are working together to treat your mother.” If more than one person, organise how you will run the consultation – “first I'll talk with you James and then I'd like to hear what Mary has seen and is concerned about...”



# Initiating the Consultation

## 3. Non-verbal behaviour

### Communication skills

- ☐ Facial expression
- ☐ Eye contact
- ☐ Open body language
- ☐ Pace, pitch and tone
- ☐ Touch
- ☐ Space
- ☐ Maintain focus on the patient

### Facial expression

Facial expressions are a common form of non-verbal communication. Examples include smiling, crying and grimacing.

Maintain a warm facial expression.



# Initiating the Consultation

## 3. Non-verbal behaviour

### Eye contact

Our eyes convey how we feel and what we are thinking.

Make and maintain appropriate eye contact with the patient.



### Open body language

Leaning forward can demonstrate interest. A relaxed posture is important so the patient doesn't feel rushed.

How we sit, stand or walk can convey strong messages.



# Initiating the Consultation

## 3. Non-verbal behaviour

### Pace, pitch and tone

It is often through our pace, pitch and tone that we reveal our feelings and attitudes.

Use appropriate pitch, slow pace and a warm tone of voice.



### Touch

A handshake or a hand on the arm or shoulder if the patient becomes upset.

Touch can be used to show support, care and empathy.



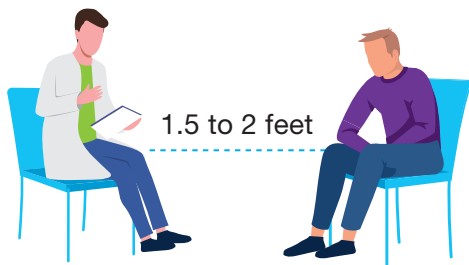
# Initiating the Consultation

## 3. Non-verbal behaviour

### Space

Consider the space between you and the patient. 1.5 to 2 feet is a comfortable space for talking in a healthcare situation. You can still easily touch the other person and discuss issues in relative privacy.

*Give your patient space while staying connected with them*



# Initiating the Consultation

## 3. Non-verbal behaviour

Maintain focus on the patient

Avoid taking notes unless essential.

*That's a really important point,  
I am just going to make a note  
of it now in your record...*



### TIP

Demonstrating relaxed and open non-verbal behaviour will build rapport and trust. Remember that non-verbals are 'two-way'. Observing and interpreting the patient's nonverbals helps us to understand how the patient is feeling or the extent to which they agree with or understand the information being shared with them.



# Initiating the Consultation

## 4. Identify the reasons for the consultation

### Communication skills

- ☐ Identify the patient's problems
- ☐ Listen attentively
- ☐ Confirm list and screen for further problems
- ☐ Find out what they know already
- ☐ Restate their concerns and summarise a shared agenda
- ☐ Negotiate the agenda

Begin the conversation with an open question, listen to patient and give them time them to tell their story. If you interrupt too soon, the patient will go back to the first problem. Ask for any other problems (this reduces the chance of the patient raising a 'late' problem). Summarise the problems to check accuracy and ask the patient to prioritise.





# Initiating the Consultation

## 4. Identify the reasons for the consultation

### Identify the patient's problems

Listen attentively to the patient's opening statement, without interrupting or directing the patient's response.

*What would you like to discuss today?/What questions did you hope to get answered today?*



Use verbal and nonverbal listening skills (nodding, leaning, summarising and so on) to acknowledge the patient's problems and show concern...



# Initiating the Consultation

## 4. Identify the reasons for the consultation

### Confirm list and screen for further problems

Screening allows the patient to raise other concerns and identify the most important concern that they wish to explore. Research shows that patients may not present multiple concerns in order of importance.

*Ok so before we look at that in more detail, was there anything else you wanted to discuss today?*



# Initiating the Consultation

## 4. Identify the reasons for the consultation

Find out what they know already and want to discuss

*We wanted to meet to update you on your father's condition. I've read through the notes and examined your father this morning. Before I start, can you tell me what you know already about your father's illness and what you most want to discuss today?*

Restate their concerns and summarise a shared agenda

*So you have noticed that your husband is getting weaker and struggling to breathe (pause). That is also our main concern and we need to talk about what the next steps are for his treatment (pause).*



# Initiating the Consultation

## 4. Identify the reasons for the consultation

**Negotiate the agenda taking both the patient's and your needs into account**

*That's quite a list to get through, and I don't think we'll have enough time to get through all of it today? Can I suggest...? How does that sound...?*



*Which is the one most important to you? Let's start going through them and see where we get to today... Which one shall we focus on first?*

### TIP

Establishing the reason(s) for the patient's attendance, and agreeing an agenda, is the foundation upon which the rest of the consultation is built. Getting off to a good start results in a better experience for you and for the patient.

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This Skills Card is the work of Paul Kinnersley (EACH & Cardiff University), Peter Gillen & Eva Doherty (RCSI) & Winifred Ryan (HSE) with the help and support of Jonathan Silverman, Marcy Rosenbaum and many others in EACH.

