

Therapeutic relationship

[Life](#), [Relationships](#)



Meantime I communicated with my best with her so that she felt comfortable. As a result, she gave a good cooperation and enjoyed the meal until finished. In my evaluating, I feel I made the right decision to accompany and assist Mrs. A in feeding. Furthermore, I could develop my nurse-patient relationship. Although McCabe (2004, p. 44) would describe it as a task-centred communication as one of the elements caused the lack of communication among nurses, but I think my nurse-patient relationship communication both involved a good patient-centred communication and task-centred communication.

In my personal opinion, I attended to Mrs. A as a patient to show my empathy because she was unable to feed herself. It was also my duty to feed her so that I could make sure the patient gets the best care in the ward. So my involvement in this nurse-patient relationship does not only restrict to the task-centred communication because (Burnard 1990, and Stein-Parbury 1993, cited in McCabe 2002, p. 44) define attending as a patient-centred process as well as to fulfil the basic conditions as a nurse to provide the genuineness, warmth and empathy towards the patient.

I was able to improve my non-verbal communication skills in my conversation with her during the feeding. As she was having a hearing problem and could not communicate in the first language properly, so the non-verbal communication plays a role. Caris-Verhallen et al (1999, p. 809) state that the non-verbal communication becomes important when communicating with the elderly people who develop a hearing problem. Hollman et al (2005, p. 31) suggests some effective ways to maximize the communication with hearing impairment people such as always gain the person's attention before

speaking, visible yourself to prevent them feel frighten and try to use some sensitive touch. I feel this is a good experience to me because I learn to develop my non-verbal communication. I used most of the body gestures because of the language barrier was being a gap in my conversation with Mrs. A. She could speak very limited in the first language so I tried to speak in her dialect. Furthermore, Wold (2004, p. 6) mention that gestures are one specific type of non-verbal communication intended to express ideas and are useful for people who cannot use much words. However I also used my facial expressions to advise her to finish the meal. It might be not so delicious because she withdraws the meal after few sips but I smiled and assured Mrs. A that it was good for her health to finish her meal. In addition, the facial expressions are most expressive which are not limited to certain cultural and age barriers (Wold, 2004, p. 6). Therefore my facial expression worked out to encourage her to finish the meal. Although I could not explain detail to her about the important nutrition diet that she should take, but I could advocate her to finish the meal served because the meal was prepared according to her condition. In order to analysis of the event, I could evaluate that, my communication skills are very important to provide the best nursing care to Mrs. A. My communication with Mrs. A was the interpersonal communication.

This is because the interpersonal communication is a communication which involved of two persons (Funnell et al 2005, p. 438). I realized that my nonverbal communication did help me a lot in my duty to provide the nursing care to Mrs. A. Even though she could understand few simple words when I was asking her but I noticed that one of the problems occurs within

the communication was the language barrier. As the patient was not using the official language and the second language, I tried to speak in her language. I still could manage the communication in our conversation.

However, it was quite difficult to promote the effective verbal communication with the patient. Besides, White (2005, p. 112) recommend that a nurse should learn a few words or phrases in the predominant second language to put a patient at ease for better understanding. Although it was quite difficult but using the nonverbal simultaneously with the verbal communication did encourage her to speak on her best to make me understand her words. In the event showed that, there was a response from Mrs. A. when I was asking her questions. Funnel et al (2005, p. 38) point out that a communication would occur when a person responds to a message received and assigns meaning to it. She nodded her head to assign that she agreed with me. Delaune and Ladner (2002, p. 191) explain that the channel is one of the component of the communication process which act as a medium during the message is sent out. In addition, Mrs. A also gave me a feedback that she understood my message by transmitting the message via her body gestures and eye behaviour. Thus I could consider that the communication channels used in my conversation were visual and auditory.

Delaune and Ladner (2002, p. 191) state a feedback is that the sender receives the information after the receiver react to the message. However, Chitty and Black (2007, p. 218) define feedback as a response to a message. In my situation, I was a sender who conveyed the message receiving the information from Mrs. A, the receiver who agreed to take lunch and allow me to feed. Consequently, I could analyse that my communication

with Mrs. A involved of five component of communication process which are sender, message, channel, receiver and feedback (Delaune and Ladner, 2002, p. 91). In a nutshell, for my reflection of this event explores about on how the communication skills play a role on the nurse-patient relationship in order to deliver the nursing care towards the patient especially the adult. She needed quite sometime to adapt the ability changes in her daily activities living where I was trying to help her in feeding. I was concerning my feeling and thoughts during the feeding so that I could improve more skills in my communication. I successfully communicated with her effectively as she enjoyed finishing the meal.

So it is vital to build rapport with her to encourage her ability to speak up verbally and non-verbal. Moreover, this ability could help her to communicate effectively with other staff nurses. Later, she would not be neglected because of her age or her disability to understand the information given about her treatment. (Hyland and Donaldson 1989, cited in Harrison and Hart 2006 p. 22) mention that communication express what the patients think and feel. In order to communicate with adult, it is important to assess her common communication language and her ability to interact in the other languages.

As I used some words in her dialect, I essentially encouraged the patient to speak out verbally and communicate non- verbal so that the message could be understood and do not break the nurse-patient communication. In my opinion, I evaluated that it does not a matter whether it was a patient-centred communication or task-centred communication because both communication mentioned by McCabe (2004) actually does involves

communication to the patients. So it was not a problem to argue which type of communication involves in my conversation with my patient.

After analysed the situation, I could conclude that I was be able to know the skills for effective communication with the patient such as approach the patient, asking questions, be an active listening, show my empathy and support the patient emotions (Walsh, 2005, p. 34). Actually helping the adult was a good practice in delivering the nursing care among adults. My action plan for the clinical practice in the future, if there were patients that I need to help in feeding or other nursing procedure, I would prepare myself better to handle with the patients who would have some difficulty in communication.

This is because, as one of the health care worker, I want the best care for my patients. So in related to deliver the best care to my patients, I need to understand them very well. I have to communicate effectively as this is important to know what they need most during warded under my supervision as a nurse. According to my experience, I knew that communication was the fundamental part to develop a good relationship. Wood (2006, p. 13) express that a communication is the key foundation of relationship.