

# Critiquing communication and interviewing skills assignment



Critiquing communication and interviewing skills of a health assessment interview with a client

Introduction

Communication is one of the basic survival skills of human and also a fundamental part of nursing. Effective communication would help to promote a positive nurse-client relationship which is crucial for the delivery of quality nursing care (Sheppard, 1993; McCabe 2003). Health assessment is also vital in collecting information in the nursing process.

In order to collect data in a systematic and standardized approach, and enable the nurse to determine different aspects of health and human function, the Gordon Functional Health Patterns which have 11 categories are usually used as a framework of the assessment. The pattern named “sexuality and reproduction” is being chosen as the focus of this assignment. The assessment of this pattern focuses on the person’s satisfaction or dissatisfaction with sexuality patterns and reproductive functions.

Also, concerns with sexuality may be identified (Gordon, 1987). This assignment aims at equipping students to interview a client about his or her concerns with sexuality and reproduction effectively. A video-taped interview was made in order to review the communication skills being used. The performance was criticized with the aid of some references. Finally, the insights and reflections of the interview were shared. Critique of the interview

All criticisms are based on the questions being asked and nurse-client interaction in the video tape.

The whole set of questions as well as the background information of the client are listed in appendix 2 and appendix 1 respectively. Strengths

observed in the interview The nurse used appropriate icebreakers which are the words and phrases that can help to put the patient at ease, set the stage, and promote a relaxed situation. (Doenges , Moorhouse, 1992). For example, she asked the client “ Do you feel cold here? ” and “ Do you want to go to the toilet first? ” before directly referring to the actual interview questions.

Therefore, she opened the interview well and smoothly. Secondly, the nurse provided professional information of the breast self examination (BST) and the correct method to prevent sexually transmitted diseases (STDs) for the client. She also gave suggestions to the client to relieve pain during menstruation. By offering technical information and correcting client’s misconception of using diaphragm as prevention to STDs, the nurse successfully demonstrated her professionalism.

As stated by Craven and Hirnle (2000), providing information would assist the client to become more aware of her body and how it functions. Thirdly, a gentle touch was offered by the nurse when the client was crying. This helps to comfort the client as gentle touch is therapeutic and can signify support when used judiciously with messages of caring and comfort are accompanied with it (Barnum, Stevens, 1997; Dewit, 2001). Fourthly, a few seconds of silence was given to the client when she cried. This allows client time to gather her thoughts and sort them out (Dewit, 2001).

This act would also help the client to relieve some of her emotions.

Weaknesses analyzed from the interview Giving false assurance was the major weakness of the nurse. By saying “ your husband would not dump

you” and “ everything will be fine” would negate the patient’s feelings and may give false hope. The trust between the nurse and client would be destroyed when things turn out differently (Dewit, 2001). It would also demonstrate a lack of understanding when the client really has valid concerns. Poor sensitivity was another weakness of the nurse.

When encountered with questions involving sensitive areas for the client such as questions about sexuality or behaviors which may lead to sexually transmitted diseases, the nurse often ignored the non-verbal cues of the clients such as the tears and other facial expressions of unhappiness. It is very important for the nurse to proceed gently in order to minimize the feeling of uncomfortable or embarrassed of the client (Doenges , Moorhouse, 1992). The third weakness observed is the frequent use of cliché such as “ don’t worry too much” and “ that’s normal” which would give the client an impression that the nurse does not address and understand her situation well. This is because clichés sounds flippant , do not always suit the current situation and could prevent the building of trust between the nurse and client (Dewit, 2001). One more weakness encountered is that the nurse might have frightened the client by saying “ that’s serious! ” and the final outcome of the breast cancer when the client said she had discovered a hard substance on her left breast. The nurse may not be able to handle this situation as the client burst in to tears the moment that she heard the frightening statements.

This would distract and confuse the client and therefore the pace of the interview would be disrupted (Hodgson, Martin, 2006). Rooms for

improvement If time is allowed, the nurse could teach the client how to  
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perform a thorough self examination in order to assist her detecting the body changes as the client seemed not to have enough knowledge on BSE.

Secondly, open-ended question should be adopted as the major type of interview questions because it allows maximum freedom for the client to respond in his or her own way (Balzer, Julia, 2004).

Finally, nurse should rehearse the whole set of question before conducting a real interview so that she could be more relaxed when dealing with client's responses. Insights and reflections from the interview We found that using the communication skills appropriately and accurately is crucial as this would not just facilitate data collection in health assessment, but also promote a positive nurse-client relationship. Also, we need to maintain a high level of sensitivity throughout the interview.

We should always avoid giving false assurance and frightening statements to clients as these would affect the client and disrupt the pace of an interview easily. More practice like performing interviews staged at different scenarios would be useful to equip students with various kinds of communication skills. This could also provide them an opportunity to really see the way we talk and react during an interview. We could improve a lot if we are able to criticize and evaluate our performance. Conclusion People often underestimate the difficulty of mastering the communication skills and think that they have already mastered the skills.

However it is not as easy as they think because there are indeed many theories behind. Effective communication is the key to develop a positive nurse-client relationship. Instead of taking it as an easy task, we should learn

and fully understand them before doing clinical health assessments by doing practical interviews and rehearsals in our 4 years of study. Reference

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*Journal of Advanced Nursing*, 18, 246-259. Appendix 1 The background information of the client in the interview is provided as the following: Mrs.

Wong Liang Ling Ling is Chinese who was born in Gong Zhou. She is now 40  
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years old and a housewife who takes care of her husband and two sons. She has married for 18 years and has been living in Hong Kong for 15 years so she is a permanent resident. She has only received primary education in Gong Zhou and has not taken any other academic courses afterwards. Her husband (Wong Wai Fat) is now 50 years old and working as a lorry driver.

He is the bread-winner of his family who used to work in both Hong Kong and the mainland. Her elder son (Wong Chi) is born in Gong Zhou and now is 16 years old. Her younger son (Wong Keung) is born in Hong Kong and now is 13 years old. Appendix 2 5 types of Questions which were used in the interview regarding sexuality and reproduction health pattern are listed below:

- ? Getting general information such as identity, feeling as well as permission:
  - 1)What is your name?
  - 2)The assessment will take you about 15 minutes, is it okay?
  - 3)Do you feel comfortable about the environment? Is it too cold or too hot?
  - 4)Are you single or married?
- ? Interviewing client on their reproductive pattern:
  - 1)When did you begin to have your menstrual cycle?
  - 2)How many days do you have menstrual cycle?
  - 3)Do you have a normal menstrual cycle? Like having it once a month.
  - 4)Did you experience any problems associate with menstruation, any pain?
  - 5)Were you having pressure or other psychological problems that affect your menstrual cycle?
  - 6)Have you tried any method to relieve the pain?
- ? Investigating the client on her reproduction:
  - 1)Do you have any problems in pregnancy?
  - 2)Have you done any reproductive related surgery before?
- Getting specific information of sexual intercourse:
  - 1)Is your husband the only sexual partner of yours?
  - 2)Do you use any contraceptive method during sexual intercourse?
- ? Asking the client about her sexuality and reproductive concerns:
  - 1)Do you have any

sexually transmitted diseases (STDs)? 2)Do your partner(s) have any STDs?  
3)Do you know any method to protect yourself against STD? 4)Do you know  
what BSE is, Breast self examination? 5)Have you ever tried to press your  
breast to see if there any substance or abnormal tissue inside? 6)Do you  
know any of your family members has got this breast cancer or cervical  
cancer?