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Patient-Centered Communication: Where Does the Time Go?
Cynthia Ann Leaver, PhD, APRN, FNP-BC

Malek School of Health Professions, Nursing, Marymount University, Arlington, Arlington, VA, USA

*Kathleen T. McCoy, DNSc, RN, APRN, PMHNP-BC, PMHCNS-BC, FNP-BC, FAANP
College of Nursing, Community Mental Health, University of South Alabama, Mobile, AL, USA*

Laura A. Khouvongsavanh, MLIS

Emerson G. Reinsch Library, Library and Learning Services, Marymount University, Arlington, Arlington, VA, USA

Nurse Practitioners (NP) diagnose, prescribe, treat and manage the care of patients with aims to provide high quality, timely, patient centered, evidence informed care. Increased demands for managing more patients, providing more care, in less amounts of time, are placed upon NPs by the marketplace and payers. This confluence of market demands on time spent with patients and nursing art and science aimed towards patient centered care, has challenged the allowance of time for conversation between patient and provider. This confluence may render less encounter engagement in which concerns ought be expressed. Less than optimal communication pattern manifests in either/or provider-to-patient and/or patient-to-provider communications. Time constraints placed on time allowance between NPs and patients, with less engagement opportunity for patient centered communication, can lead to patient and provider encounter dissatisfaction. Ultimately encounters with time constraints may lead to increased demands for follow up care and increasing expenses for care. Further, when presented with the suffering patient, complaints and laments can ensue, optimally requiring proficient conservation and judicious use of time. If effective communication skills are not implemented, both the patient and provider may view encounters as less than optimal. Use of time and patient centered communication is of especially great import with consideration to populations of global migration where there may be language barriers and need for identification of needs unique to the diverse patient. The bundle of time management, diverse needs in communication, compassion and culturally appropriate care can be introduced on all levels of nursing education, as well as in the return to graduate school for the NP programs of study. The OPEN framework supports optimal communication in patient encounters, lending to expanded impressions of time, engaging patients in health care thereby enhancing patient outcomes. The CAMPS framework supports conversation where the patient is offered the opportunity to identify meaning and purpose in life, rendering the global migrant populations moments to express unique beliefs and needs. The literature provides reasonable support for exploration of outcomes where the OPEN framework and CAMPS framework are integrated into NP education. The OPEN and CAMPS frameworks provide new NPs with new communication frameworks to rely upon. Likewise, the same frameworks can be utilized by experienced NPs. Organized continuing education, institutional support and Quality Assurance indicators of best practice can assist NPs to continue development of patient centered communication skill sets across time. NPs continued capacity for patient centered communication supports sustaining patient centered care

and encounter management, while ensuring evidence informed care, therapeutic communication, compassionate care and patient follow through with care plans.

Title:

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References:

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Abstract Summary:

Confluences of increasing demands upon NP time, of more care in less time challenges therapeutic patient-provider conversation. Expression is thwarted in which valid concerns expressed are less welcome. Changes to formational/continuing education are recommended in meeting challenges to increase culturally competent, compassionate, patient centered care, patient/provider satisfaction.

Content Outline:

Body

1. Nurse practitioner (NP) in the current healthcare environment and market
Supporting evidence

1. The public acknowledges the competent nurse needs a strong knowledge base and technical skills.
2. The public also expect nurses to be caring, compassionate, communicative, spending meaningful time in relationship with them.
3. Healthcare markets and payers place time constraints on provider visits, including NP visits.
4. The NP meeting both patient and market needs must balance time while maintaining patient satisfaction and improving outcomes.

Supporting evidence

1. It is known that patients identify high levels of satisfaction with NP provider experiences.
2. Studies show that NPs spend more time with their patients than General Practitioners.
3. It is known that positive patient experiences in nurse-led clinics were related to therapeutic relationships, effective communication and collaboration and clinical skills, and patient adherence to plans of care.
4. The response noted from patient satisfaction has been mapped to a patient centered framework.
5. Studies have identified “time” as perceived by the patient, is an important commodity in patients’ lives, “time” matters to patients, whether it is time to discuss problems fully or “time” saved as a result of having issues resolved, and so that further visits are minimized.

1. How are NPs acquiring communication skills in today's academic setting?

Supporting evidence

1. Nurses are taught to spend time with patients. However, nurses are not taught how to manage time versus competing demands of patient needs, including communication, and system demands of time.
2. It is identified that few tools are available and implemented to teach nurses how to acquire and balance the qualities of caring, compassion, and communication.

1. What are market, profession and patient expectations for the level of NP-patient communication ? Do NPs expect to have acquired these skills in the academic setting, on the job, or simply over intuitively?

Supporting Evidence

1. Experiential learning continues be identified as the primary means of acquiring “relational skills”, where “relational skills” demonstrate attunement to patient needs.
2. Communication skills have been identified as a skill set acquired “over time”, and “with experience”.
1. How do we prepare NPs to manage communication, patient centered communication, and time in the patient encounter? How do we prepare NPs to manage the ultimate challenge of lament in the suffering patient, in a therapeutic, time sensitive manner, supporting both provider and patient with satisfaction with encounter?

Supporting Evidence

1. OPEN framework supports collaborative communication, yielding shared. decision making, increasing patient adherence to plan of care, increasing both patient and provider encounter satisfaction.
2. CAMPS framework offers opportunity to discuss meaning and purpose of life, with impact in global migrant, culturally diverse populations.

First Primary Presenting Author

Primary Presenting Author

Cynthia Ann Leaver, PhD, APRN, FNP-BC
Marymount University, Arlington
Malek School of Health Professions, Nursing
Visiting Faculty, Graduate Nursing
Nursing
Arlington VA
USA

Author Summary: Cynthia A. Leaver is a nurse researcher, nurse faculty, and FNP. Her research focus aims to improve patient outcomes and provider resilience. Her degrees conferred are- BSN, Mount Saint Mary's; MSN, University of San Diego, and a PhD, Catholic University, School of Nursing. She is a Bravewell/NIH/NINR/CC post-doctoral research fellow.

Any relevant financial relationships? No

Signed on 11/19/2018 by *Cynthia A. Leaver*

Second Secondary Presenting Author

Corresponding Secondary Presenting Author

Kathleen T. McCoy, DNSc, RN, APRN, PMHNP-BC, PMHCNS-BC, FNP-BC, FAANP
University of South Alabama
College of Nursing, Community Mental Health
Associate Professor
Mobile AL
USA

Author Summary: Dr. McCoy holds a practice doctorate in family psychiatric nursing. She practices as a triply certified APRN while contributing as fulltime academic as Associate Professor at the University of South Alabama. A PMHNP, a PMHCNS and an FNP, and Fellow in AANP, she is an exemplary contributor to both practice and policy. A community engaged scholar, she exerts diversity, inclusion and equity into practice, using therapeutic encounters and patient centered communication.

Third Author

Laura A. Khouvongsavanh, MLIS
Marymount University, Arlington
Emerson G. Reinsch Library, Library and Learning Services
Reference Librarian
Arlington VA
USA

Author Summary: Laura Khouvongsavanh earned her MLIS from the University of Wisconsin Milwaukee and is currently a Reference Librarian at Marymount University. She previously served as a Reference and Instruction Librarian at the George Washington University for over 15 years.