EFFECT OF STAFF COMMUNICATION SKILLS IN HOSPITALS ON PATIENTS TO REVISIT

Bhawna Agarwal               Rohini Rode

Hospital Administration comes into play for a patient at his entry and ends only with his exit. Doctors are responsible for cure and therapy, ensuring that the rest of the infrastructure and facilities are in place is the role, hospital support staff plays. Support staff will include all non medical staff. Receptionist, manager, medical superintendent, laboratory assistants, attendants, chemists, housekeeping staff, cleaners and other service vendors will be included in support staff. The mentioned staff has to play their own roles while interacting with patients, that is the reason the authors consider them as direct support staff in hospitals. Communication skills of direct support staff are as crucial as that of medical staff, for patients interact with them till such time that he or she exits or is discharged from hospital. The entire process of communication is imperative to be followed here as in any other situation of communication. The 7 Cs of communication need to be followed in hospitals and that has been assessed by the authors. In this paper the authors explain the effect of communication skills of staff in hospitals on the revisit intention of patient by conducting a survey on Indians and International audience. A survey based on a questionnaire by considering 7 Cs of communication has been conducted of fifteen respondents. A question bank based on the 7Cs formed the basis of the variables on which the survey was conducted and responses were sought. Further, logistic regression analysis has been done to check whether communication of support staff matter enough in a decision taken by patient to revisit hospital as the categorical data has been collected.

Keywords: Hospital administration, communication skills, regression analysis.
INTRODUCTION

In hospitals, administration consists of the management of operations. Hospital administration can be defined as the universal process of organizing people and resources efficiently so as to direct activities towards patient’s cure and satisfaction which is the main objective of hospital and is done with the help of support staff available to the administrator. In a hospital, the role of Support staff becomes more crucial. Organizing doctors and support staff and resources of hospital to ensure timely care of patient is integral to hospital administration. Day-to-day operations of all the departments in hospitals are taken care of by support staff. Efficacy and efficiency are tools employed by them. They act as liaisons between governing boards, medical staff, and department heads and integrate the activities of all departments so they function as a whole. Support staff plans, organizes, directs, controls and coordinates medical and health services as also follows policies set by the governing board of trustees. They plan departmental activities, evaluate hospital employees, create and maintain policies, help maintain set standards of quality, patient services, and public relations activities such as active participation in fund-raising and community health planning. Support Staff also attends and participates in health planning councils, goes to fund-raising events, and travels to professional association conventions. Support staff’s job is arduous and demanding. They need to keep up with advances in medicine, computerized diagnostic and treatment equipment, data processing technology, government regulations, health insurance changes, and financing options. While doctors strive to keep the heart beating and the brain functioning, support staff does their duty by keeping hospital alive and kicking (www.princetonreview.com).

Listening, speaking, reading and writing skills are inherent to communication and need to be developed by each one of us. Communication is thus a process by which we give and convey meaning to ideas, thoughts, opinions to create shared understanding. This process requires a vast range of skills in intrapersonal and interpersonal processing, listening, observing, speaking, questioning, analyzing, and evaluating if you use these processes it is developmental and transfers to all areas of life: family, education, society, workplace and beyond (http://en.wikipedia.org).

A person is said to have good communication skills if he can encode information and impart it to a sender via a channel/medium. The receiver then can decode the message and give the sender a feedback, which ensures that complete communication has taken place. Effective communication
involves accuracy in the sending and receiving processes. The seven qualities of effective communication are termed as the 7 C’s and have been used as variables to measure efficiency in communication skills of support staff and the impact thereof on the intention of a patient to return to a hospital. The seven Cs taken into account for this study are as follows:

**Clarity:** Clarity is of utmost importance and communication by hospital support staff should have a definite purpose for communication.

**Comprehensive:** Little knowledge is dangerous and therefore it is imperative to include all the necessary facts and background information to support the message while communicating, more so, in hospitals. Totality of communication is integral to the process.

**Conciseness:** Brief and short pieces of communication ensure effective communication, however, one needs to keep in mind the reader’s knowledge of the subject and their time constraints. Information should be conveyed as quickly and easily as possible.

**Concreteness:** This element needs to be used with utmost care as it could lead to confusion. The message needs to be based on facts and be real.

**Courtesy:** Keeping the ambience of hospital in mind, courtesy needs to be given due credit for patient may arrive at hospital in a state of distress or traumatized.

**Correctness:** This is a very important C. It is of utmost importance that all pieces of information released by hospital support staff are checked to ensure that it is accurate and timely. Double-checking all information, be it written or verbal, will ensure right communication occurs all the time.

**Coherence:** Logic and rationale need to be used while communicating. A delicate balance needs to be stroked in order to ensure effective communication. Sound and consistent communication will ensure that patient comes back.

**LITERATURE REVIEW**

Balaraman (1989) suggested that reception at hospital has to be courteous to the visiting patient or his relatives. Reception should advise the patients to visit concerned clinics and diagnostics centers in the hospital suitably as
quickly as possible without making them wait. According to Kumar (1989) the hospital receiving staff should not act as hurdle or respond impolitely failing which it may be construed as hospital’s reluctance to admit the patient. According to Prakash (1989) nursing and paramedical staff should listen to the patients’ problems sympathetically and try to solve them to win over their confidence. According to Das (2000) it is relevant and imperative in a hospital to develop and practice effective communication as it leads to effective patient relationship, which ultimately results in a satisfied patient.

IMPORTANCE OF COMMUNICATION IN HOSPITALS

A hospital is an important entity in society, which looks after healthcare needs of people, both curative and preventive, with outpatient services reaching out to households, and a hospital of a medical school is also a center for the training of health workers and biosocial research. A system as per a commonly understood definition is anything formed of parts placed together or adjusted into a cohesive whole. A hospital system is more than mere sum of its parts. For example, a hospital system interacts with its immediate environment, boundaries of which are separate from other social interfaces, produce invaluable output, has to maintain dynamic equilibrium with the wider social system and functions as part of larger healthcare system. Hospital systems tend to become more specialized in their elements and elaborate in structure, technologies including services given the very curative nature of their work.

<table>
<thead>
<tr>
<th>Type of Personnel</th>
<th>Communication between</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical staff</td>
<td>Medical staff and patients</td>
</tr>
<tr>
<td>Physicians</td>
<td>Physicians and nurses</td>
</tr>
<tr>
<td>Nurses and paramedical staff</td>
<td>Nurses, paramedical and medical staff</td>
</tr>
<tr>
<td>Support staff</td>
<td>Support staff and community</td>
</tr>
<tr>
<td>Patients, attendant staff and their relatives</td>
<td>Patients and attending staff and their interface with hospital administrator medical and paramedical staff.</td>
</tr>
</tbody>
</table>
Communication is the process of transferring information from one source to another. Communication is commonly defined as “the imparting or interchange of thoughts, opinions, or information by speech, writing, or signs”. Communication can be perceived as a two-way process in which there is an exchange and progression of thoughts, feelings or ideas towards a mutually accepted goal or direction. The elements of this process are the sender, the message, the medium, the receiver and feedback. In a hospital communication between patient and support staff occurs at various stages of treatment (Table 1).

The person who sends messages starts the process of communication. Support staff in this case will have an idea, a piece of information, an experience, an order or a directive to execute. The message will get formed to be conveyed. This is called encoding. In case of a written message it has to be clearly stated so that the receiver fully understands the message. In case of a verbal message support staff has to encode for making the right choice of words while being considerate and creative enough not to distort the message. Encoding the message, be it, verbal or written, is a crucial element in communication process and holds to key for its effectiveness. This can make or break the purpose of communication (http://en.wikipedia.org/wiki/communication).

The one which is encoded is the message which should be clear and concise and include all vital information needed for the recipient. It should be complete in all respects covering entire hospital and visiting patients. One needs to keep target audience in view while drafting the message. Composing the message in a positive manner will create a better and productive impact. While communicating with seniors in hospital, the support staff could present recommendations, along with criteria at the first instance. While interacting with juniors, hospital support staff could start by inviting recipient’s attention in the best possible manner.

A message is sent through a channel. Letter, telephone, fax, e-mails or face-to-face conversation, all these are mediums through which communication is directed. Choice of the medium will depend on the context and need. While most written communication is done via the internet using e-mail, the written medium is used where legalities and record come into play. Face-to-face conversation remains the most commonly used for personal and confidential communication.

Support staff should remain updated about ongoings in hospital to
communicate effectively with all concerned. Effective and quick dissemination of information is very much desirable in hospital otherwise it might lead to disastrous consequences. Delay is a word that cannot exist in hospitals. Be it, in form of posters, signage or verbal communication if an integral part of a hospital as it is elsewhere. Staff needs to take every step possible to keep the communication flow running, which means that while they are senders of messages, they are also recipients of feedback. Feedback is an essential and integral part of communication and completes the process.

Decoding is the stage which includes recipient and needs complete understanding of the message. This is the stage where the message has reached its target audience and it has to be deciphered. Decoding requires mutual recognition of symbols used. This is will bear test of communication for not all meanings transmitted are meanings received. There is no assurance that the message has been interpreted as it was intended. The message transmitted then becomes source for communication to start all over again. In form of feedback given by the recipient, the process of communication starts anew. The response generated by decoding is feedback.

In this day and age of communication where technology plays an important role in communication support staff needs to ensure that it does not create any hurdles. Databases are created wherein complete information, including medical history of patient is stored. From the moment patient steps in, while he/she waits for the doctor, is attended to by the doctor and direct support staff till such time that he is discharged, patient is always communicating and needs to be given correct and concise information.

Communication is important in hospital business. Communication enables human beings to work together. In a hospital, as in any other business, it is the vehicle through which management performs its basic functions. Support Staff manage through communication, coordinate through communication, and staff, plan and control through communication. The quality objectives of a hospital may include satisfying customer needs, enhancement of quality systems, effective performance measurement and compliance systems, and much more. However, achieving all this is possible only if requirements of effective communication skills are met with as also seven Cs of communication are followed.

Surveys conducted in recent years have proved that communication is ranked at or near the top of the business skills needed for success. However,
it is not too often that hospital’s need for support staff with good communications skills is met with. By ensuring clarity in communication ability hospital support staff can improve their chances of success. Performance is judged by ability to communication. The more coherent the communication the better the chances for hospital to serve its patients better.

DATA COLLECTION METHODOLOGY

A questionnaire keeping in mind communication and its essential 7Cs was designed. Apart from asking the name, age, and sex, the respondents were asked to give information about the last time that they had visited a hospital. Whether their queries had been answered properly and if they were satisfied with their answer was also asked. The respondents were also asked about duration of their relationship with hospital to get an idea of how long they had been associated with that place. The use of English was established before getting into effectiveness of communication. The staff’s clarity in replies, conciseness in answers and if they were concrete was also asked. Whether support staff replied correctly and was coherent and complete in their replies was also asked. The question of courteously was also raised in the questionnaire. Where felt necessary alternate words with similar meaning were given to ensure that the questionnaire was understood correctly. They were then asked if their decision to visit that hospital again would be affected by effective communication of support staff.

Simple random sampling was done to ensure wide coverage of respondents. Only adult section of society was targeted to get clear replies. The questionnaire was distributed to men and women alike to ensure a balance in answers. Respondents were asked personally to fill out the questionnaire.

REGRESSION ANALYSIS

Regression analysis is carried out to determine relationship between dependent and independent variables. While the dependent variable is intention of patient to revisit hospital and the independent variables are the 7Cs of communication skills. Logistic regression was carried out using SPSS (Statistical Package for Social Sciences).

H0: There is no relationship between the revisit intention of the patients to the hospital and the communication skills of support staff.
H1: There is a relationship between the revisit intention of the patients to the hospital and the communication skills of support staff.
A questionnaire based on 7Cs of effective communication skills was developed. Respondents covered 15 individuals of different age groups and economic background who responded in terms of ‘Yes/No’ responses which were encoded as Yes (1) and No (0) (Appendix1).

\[ Y = \hat{\alpha} + \hat{\alpha}_1 X_{\text{Clarity}} + \hat{\alpha}_2 X_{\text{Comprehensive}} + \hat{\alpha}_3 X_{\text{Conciseness}} + \hat{\alpha}_4 X_{\text{Concreteness}} + \hat{\alpha}_5 X_{\text{Courtesy}} + \hat{\alpha}_6 X_{\text{Correctness}} + \hat{\alpha}_7 X_{\text{Coherence}} + \hat{\alpha} \]

Table 1 Logistic Regression of Variables representing Communication Skills in Hospitals for Patients to Revisit

<table>
<thead>
<tr>
<th>Item</th>
<th>( \hat{\alpha} ) (Regression Coefficient)</th>
<th>Standard Error</th>
<th>Wald Statistic</th>
<th>Degrees of Freedom</th>
<th>Significance</th>
<th>Exponent(B)</th>
<th>Cox &amp; Snell R square</th>
</tr>
</thead>
<tbody>
<tr>
<td>( \hat{\alpha} )</td>
<td>1.2</td>
<td>0.66</td>
<td>3.35</td>
<td>14</td>
<td>0.07</td>
<td>3.33</td>
<td>0.66</td>
</tr>
</tbody>
</table>

It shows that nearly 66 per cent of the independent variables representing communication skills of staff based on 7Cs affect the revisit intention of the patients. P-value of the observations is 0.07 which is less than 0.10 which shows that the relationship between revisit intention of the patients and communication skills of support staff is significant at 90 per cent confidence level. Standard error of the observations is 0.66 which is considered low and hence, the statistical result is valid. The criteria of validity of model and data are R-square, P-value and standard error is valid in this case. The findings indicate that there exists a relationship between the communication skills represented by 7Cs and patient’s intent to revisit the hospital.

CONCLUSIONS

Hospitals deal with human beings under stress and strain. Proper communication by hospital support staff can reduce stress level of patients and relatives. Earlier communication skills in healthcare industry were considered of minor importance but in recent periods this has been duly recognized. Hospitals staff should be trained in communication skills not only for possessing required skills in explaining information charts, brochures, pamphlets, etc but also dealing with them courteously. . When the support staff is endowed with communication skills represented by 7Cs of communication it shows patients intent to revisit hospital. The above analysis shows that patients are affected moderately by communication skills of support staff. The relationship, however is not strong enough to change
patient’s decision adversely to revisit. That means there may be other factors as well which affect the revisit intention of the patients such as doctor’s care and treatment effectiveness which may turn out to be a significant factor to affect the patient’s decision to return.

References


Sahni, A. (1992) Hospital and Health Administration. Bangalore: ISHA.

Effect of Staff Communication


http://en.wikipedia.org/wiki/Administration_(business) (accessed on 31.03.09)


http://en.wikipedia.org/wiki/Communication (accessed on 15.03.09)


### REAL LIVING PRAYER

Prayer has been the saving of my life. Without it, I should have been a lunatic long ago. A heartfelt prayer is not recitation with the lips. It is a yearning from within which expresses itself in every word, every act, nay every thought of man. When an evil thought successfully assails one, he may know that he has offered but a lip-prayer and similarly with regard to an evil word escaping his lips or an evil act done by him. Real prayer is an absolute shield and protection against this trinity of evils.

- Mahatma Gandhi

**Source:** Bhavan’s Journal, August 10, 1958.

### IDENTIFICATION OF FRIENDS

In prosperity our friends know us, in adversity we know our friends.

- John Churton Collins

STRUGGLE

Indians have always arisen, the highest ideals in life through the conflicts, acquiring nothing but a victorious experience.

**Source:** Bhavan’s Journal,
## Appendix

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>Name</th>
<th>Age</th>
<th>Sex</th>
</tr>
</thead>
</table>

1. When did you last visit a hospital? ____________

2. Since how long have you been going to that Hospital?
   - 0-5 years ⡱
   - 5-10 years ⡱
   - more than 10 years ⡱

3. Were you satisfied with the services provided by hospital? Please tick
   - Doctor ⡱
   - Receptionist ⡱
   - Lab Assistant ⡱
   - Nurse ⡱
   - Infrastructure ⡱

4. Were your queries handled to your satisfaction?  Y ⡱ N ⡱

5. Did support staff team communicate in English  Y ⡱ N ⡱

6. Could they communicate clearly?  Y ⡱ N ⡱

7. Did that impress you?  Y ⡱ N ⡱

8. Was support staffs clear in what they said?  Y ⡱ N ⡱

9. Were they concise with their information?  Y ⡱ N ⡱

10. Where there answers concrete (factual)?  Y ⡱ N ⡱

11. Did they reply correctly to what you asked?  Y ⡱ N ⡱

12. Were they coherent (understandable)?  Y ⡱ N ⡱

13. Did they answer their question completely?  Y ⡱ N ⡱

14. Were they courteous?  Y ⡱ N ⡱

15. If that was the first visit to that hospital, will you go there again?  Y ⡱ N ⡱

16. Will your decision to visit that hospital again be affected by attitude of support staff?  Y ⡱ N ⡱
GITA AS EMBODIMENT OF HUMAN VALUES

In Indian ethos, purusarthas are divided into four broad categories, namely, dharma, artha, kama and moks, of which the first dharma, forms the science of values. While being in society one has to live with, and relate to other people, and it is in this context the message of dharma becomes central. Concern for others or welfare of others is the central message of Gita, as evident by the advice of Lord Krishna in Gita; “Achieve the highest welfare for all by practicing concern and help for each other (Parasparam bhavayantah sreyah param avapsyatha)”. No stable society can exist without dharma, without the operation of ethical and moral values, such as love, truthfulness, justice, tolerance, devotion, fearlessness, compassion, service, etc.

- Swami Ranganathanananda


RAJENDRA PRSAD ON GANDHIJI

Mahatma Gandhi did not set out to evolve a philosophy of life or formulate a system of beliefs or ideals. He had probably neither the inclination nor the time to do so. He had, however, firm faith in truth and ahimsa and the practical application of these to problems which confronted him constituted his teaching and philosophy.

There was hardly any aspect of life in India which he did not influence and fashion according to his own pattern, beginning with the small details individual life regarding food, dress, daily occupation, right up to big social problems which had, for centuries, become a part of life— not only unbreakable but also sacrosanct — like the caste system and unapproachability. His views appeared to be startlingly fresh, unhampered by tradition or prevalent custom. So also his methods of dealing with problems, big and small, were no less novel and apparently unconvincing, but ultimately successful.

- Rajendra Prasad