Optimizing the 6 Skill Sets of Patient Communication

Sacramento District Dental Society February 9, 2024 Facilitated by Brian DesRoches

Context

"It follows that dentists who, for the most part, avoid explanations in favor of helping patients to think clearly are more likely to influence their behavior."

Robert F. Barkley DSS, 1972

Emotional Influence

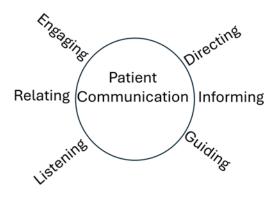
Emotion – to stir up

Influence – a flowing from the heavens that acts upon the character and destiny of people; today, it refers to the power of individuals to affect the experience and behavior of others.

Emotional Influence – an interpersonal process in which one person's emotional state affects another's emotional state and vice-versa.



6 Skill Sets of Patient Communication



1. Engaging - the skill of attracting and maintaining a patient's attention and generating a felt sense of emotional safeness

- ➤ Be aware of how your tone of voice, eye-to-eye contact, and facial expressions affect a patient's social engagement system outside of awareness
- > Practice SOLER
 - o **Square** face people squarely
 - o **Open** an open posture is generally experienced as non-threatening and involved
 - o **Lean forward slightly -** a slight leaning forward demonstrates active interest
 - <u>Eye</u> contact regular but varied eye contact is experienced as interest in the person
 - o **Relax** let your body relax
- ➤ What is the experience you desire for yourself as you engage with patients?

- ➤ Vagal Stimulation under stress
 - o Shake It Off
 - o Facial Massage

2. Relating - the skill of creating connection

- ➤ How do you connect with patients?
- > Do you have your favorite questions?
- ➤ Is it an intentional connection or just a well-used pattern?
- > Do you use the patient's name?
- ➤ Are you SOLER when you relate?

3. Listening - the skill of paying attention to a patient's communications and communicating that you are paying attention.

- ➤ Which of the 3 primary active listening skills do you think you use most often?
 - Paraphrasing a concise restatement of the essence of a verbal communication focus is on content
 - o **Reflecting** paraphrasing with the addition of an interpretation of the emotions/feelings being communicated both verbally and non-verbally
 - Clarify paraphrasing for the purpose of informing the speaker that you want to make sure you know the content of the communication
- ➤ When is your listening capacity most hampered?

4. Directing - the skill of clearly stating what the patient needs to do.

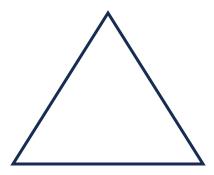
- > In what circumstances do you use directing as your primary focus of communication?
- ➤ When does directing work most effectively?
- > What do you do when patients are inattentive to your direct communication?

5. Informing - the skill of educating and instructing.

- ➤ Priming the brain (prefrontal cortex) to take in information.
 - Asking the Permission Question

6. Guiding - the skill of showing the patient the path <u>to</u> benefit from 21st-century dentistry.

- ➤ I-based communication
 - o I think ...
 - o I wonder about . . .
 - o I am interested in knowing more about ...
- Curiosity
 - o Tell me more about
 - What are your thoughts about . . .
 - o I am thinking what are your thoughts about that?
 - o What do you want to be different?
 - o I think this is what you mean . . . Am I accurate?
 - o I think that you are ... Are you?
 - o Please tell me more about whatmeans so I am sure I understand.
- > Triad of Effective Communication



- o I want to discuss And get your thoughts about it.
- o I am thinking that . . .
- o Let me tell you what I see and think, then I'd like to hear your thoughts.
- o I'd be interested in your thoughts about
- When I see . . . that is what I think . . . Do you have any thoughts about what I am seeing?