



National Healthcare
Communication
Programme

PROVIDING INFORMATION AND PLANNING

CALGARY-CAMBRIDGE GUIDE



Making conversations easier

Provide correct amount and type of information

- **Assess the patient's starting point:** find out what the patient already knows or understands and what they want to know. This will help you establish what advice or information might support the patient and enable self-management.
- **Chunk and check:** provide information in manageable chunks, check for understanding and use the patient's response (often non-verbal) as a guide to how to proceed. By simply not talking the clinician gives the patient opportunity to ask questions.
- **Check what information the patient needs:** ask what other information would be useful.
- **Avoid giving advice or reassurance prematurely:** clinicians often want to solve problems for patients but it is better if patients understand their predicament and work out what would work best for themselves.

Aid patient recall and understanding

- **Language:** use easy to understand language, avoid or explain jargon.
- **Slow down:** the patient has to process the information.
- **Organise the explanation:** divide the explanation into logical sections *'First I want to tell you what I think is wrong, then I am going to talk about the immediate treatment and then about the future. First, I think you have...'*

- **Use signposting:** *'I think this is the most important part of the treatment plan you need to remember'.*
- **Use visual aids for conveying information:** written information and diagrams are very helpful for patients.
- **Repeat information and summarise:** highlight key points and reinforce key information.
- **Check understanding:** observe non-verbals and ask *"So what do you understand from what I have said?" 'What questions do you have now?"* Ask them to restate it in their own words, to ensure the message is understood.

Incorporate the patient's perspective

- **Relate explanation to the patient's ideas, concerns and expectations:** *'You said you were worried the pain was angina. I can see why you thought that but I think it is more likely to be muscular pain'.*
- **Watch for and respond to the patient's nonverbal cues:** *"You look worried" (pause to allow patient to respond), 'are you concerned about the treatment?'.*
- **Allow time and opportunity for patients and families to contribute:** *'What questions do you have?'*

Shared decision making and planning

Share own thinking as appropriate

- **Explain your ideas, thinking and dilemmas** to the patient and encourage them to contribute their views: *'At this stage it's not completely clear what the diagnosis is, we could do some more tests...'*

Involve the patient

- **Offer suggestions and choices rather than directives:** *'I think there are two treatments we ought to consider together'*.
- **Encourage the patient to contribute ideas and suggestions:** *'What are your thoughts on this?'*
- **Explore management options with the patients:** *'Should I go through the risks and benefits of each treatment?'*

Establish the level of involvement the patient wishes

- **Directly:** 'Some patients like to be involved in these decisions and I welcome that. Others prefer the doctor to take the lead. *What approach suits you?'*
- **Indirectly:** consider the responses the patient makes to your efforts to share decisions with them. If they respond *'I'm not really sure'* this suggests they would prefer the clinician to take the lead.

Negotiate a mutually acceptable plan

- **Signpost your own preferences or position of equipoise:** shared decision making still requires clinicians to be clear on their view of what treatment would be most appropriate while recognising that the patient's views are just as important *'I personally would recommend surgery but it is still a question of balancing risks and benefits and your views are very important'*.

- **Establish the patient's preferences:** *'What do you think? What would work best for you?'*
- **Negotiate over differences:** *'I can see you have some doubts about surgery so let's think again and see if we can come up with a plan that suits us both'.*
- **Check with the patient:** at the end of the planning discussion check one more time to be sure the patient (and other family members if present) accepts the plan *'Can I just you are both happy with this plan'.*