

UAN:	Y/505/1264
Level:	3
Credit value:	7
GLH:	55
Aim:	The aim of this unit is to enable the learner to develop understanding of the communication skills necessary to work in a healthcare team within general practice, hospitals, social care and other associated organisations. The unit can be used as a progression route from level 2 Communication Skills in a Medical Environment or can be a development for learners with general administrative skills. It will enable the learner to support the work of the healthcare team through production of appropriate documentation. This will include correspondence, documents to support meetings and documents designed for information gathering, all in an accurate and professional standard with an appropriate form and with a suitable tone. In addition, the unit will equip the learner with the skills to communicate effectively in a range of difficult situations, including face-to-face and on the telephone.

Learning outcome
The learner will: 1. know how to administer meetings in a medical environment
Assessment criteria
The learner can: 1.1 describe the requirements of different types of meetings 1.2 describe the role of meetings personnel 1.3 explain meetings terminology 1.4 describe the purpose of meetings documentation .
Range
Types of meetings Formal, informal, team, case conference, working group

Meetings personnel

Chair, secretary

Terminology

standard agenda items (apologies for absence, minutes, matters arising correspondence, AOB), minutes, notice, chair, proposer, seconder, proposal, motion, resolution, item, action, tabled, present, in attendance, quorum, abstention, unanimous

Meetings documentation

Notice, agenda (including timed agenda), chair's agenda, minutes (narrative, resolution, action), meeting notes

Learning outcome

The learner will:

2. be able to summarise and present information for use in a medical environment

Assessment criteria

The learner can:

- 2.1 synthesise information from different **sources**
- 2.2 **present** summarised information in a suitable format.

Range**Sources**

Continuous prose, text presented in schematic formats, tables, charts and diagrams, instructions and guidelines

Present

Use suitable formats to present information: informal report, newsletter, information sheet, itinerary, schedule, draft slide/visual

Present information for a range of readers to include healthcare colleagues, the general public

Use paragraphing to give a meaningful structure to documents for the reader

Use appropriate sentence structure and accurate spelling for both common business vocabulary and medical terminology

Apply numbering, bullets, headings and schematic layouts to enhance meaning and achieve clarity

Incorporate pie charts, bar charts, diagrams, line graphs into documents alongside written text.

Learning outcome

The learner will:

3. be able to design documentation for collecting information and data

Assessment criteria

The learner can:

3.1 design **documentation** for collecting **information**.

Range

Documentation

Questionnaires and evaluation sheets, simple forms and reply slips to accompany standard letters and e-mails, checklists for own use to monitor and record progress.

Information

Qualitative and quantitative

Learning outcome

The learner will:

- 4. be able to produce correspondence

Assessment criteria

The learner can:

- 4.1 produce different types of **correspondence**
- 4.2 use **structure and tone** to guide the reader.

Range

Correspondence

Routine and complex emails and faxes, standard letters and circulars for familiar and new contexts, appointment letters, letters of application for medical secretarial/administrative, vacancies

Structure and tone

Show courtesy and maintain a professional tone through conventional greetings, complimentary closes and careful choice of language within the limitations of their role, use paragraphing and headings to structure a message, apply house style format

Learning outcome

The learner will:

- 5. understand oral communication

Assessment criteria

The learner can:

- 5.1 explain the **barriers to communication**
- 5.2 describe communication **techniques** in **group situations**
- 5.3 describe **techniques** used in **one-to-one** communication.

Range

Barriers to communication

Aggressive behaviour, facial expression, gestures and body postures showing anger, defensiveness, irritation, impatience, boredom, poor listening skills, bereavement, illness, drugs, alcohol, patients and visitors with impairments,

second language needs, presence of a third party (interpreter, signer, chaperon, relative), cultural differences and dress needs, attitudes to the opposite sex, environment and location, physical barriers, distance and telephone, lack of non-verbal signals, specialist language and medical terminology, awareness of confidentiality

Techniques (AC2)

Planning what to say, listening more than speaking, allowing other time to speak and complete the message, clear speech, active listening, summarising to the group at key points, using the agenda or visual aids, moving a discussion on, making suggestions and floating ideas, eye contact, body language and posture used positively when speaking and listening, confirming agreements and decisions, going through the chair in formal meetings

Group situations

Formal and informal meetings, tele- and videoconferences

Techniques (AC3)

Non-verbal signals (facial expression, posture, gesture, level of eye contact), active listening, questioning styles, checking, reflecting back, clarifying and summarising, showing empathy, responding to emotive language, assertion, techniques to project confidence and deflect aggression, confirming action, maintaining confidentiality

One-to-one

Telephone and face-to-face

Unit 332 Managing communication in a medical environment

Supporting information

Guidance

Learning outcome 1

- Learners will gain from practical experience in taking notes at planning or team meetings in either classroom or work-based situations.
- Simple notes with actions are often sufficient although tutors should ensure that learners also have practice in recording minutes in a more formal style. For this they will need to work on tenses and writing concisely.

Learning outcome 2

- Learners should be familiar with a range of summarising techniques so they can develop their own method of working when selecting information. They should be able to use different strategies to identify information including scanning, highlighting and annotating.
- The learner will need to be familiar with informal reports but writing a formal report will not be required in the assessment although it is useful to be aware of the headings used.
- Different report formats should be introduced to ensure the learner is confident with set structures and using their own free choice of headings: 3 section (Introduction, Information, Conclusions); Memo report with free choice of headings. In the final assessment, learners will be asked to apply logical structure to given information; they will not be required to supply extensive information from memory. The only exception to this would be a personal review or evaluation report. In preparing for assessment, research reports with an individual interest may be a useful learning tool.
- Slides, charts and diagrams should be clear and purposeful; complex graphics and decorative illustrations are not required.
- Learners should be aware that reports, newsletters and information sheets are often required for PDF documents for patient readers and the staff intranet.
- Itineraries and schedules can be prepared for travellers or delegates to a healthcare event.
- Itineraries will not require extensive travel experience or knowledge from the learner but user-friendly, clear documents will be needed so the traveller can see key timings and stages at a glance.
- For assessment purposes, learners will not be required to provide medical information or terminology.

Learning outcome 3

- Learners might produce a booking form or evaluation sheet for a healthcare seminar or a patient questionnaire on reception service.
- Checklists could be linked to health and safety, or a meeting or event planning with the learner preparing a document to monitor his/her own actions (more than a "to do" list). Practical examples might be a schedule with timescales for an office move.
- Learners will need to become confident in using spacing, layout and balance to make documentation user friendly, purposeful and readable.

Learning outcome 4

- The learner will need to understand business convention and what constitutes consistent letter layout, good paragraph structure and style. Some medical terms may be used but learners will not be required to produce terminology for themselves. Understanding the need for confidentiality underpins all tasks.