CARD 10

What part does good communication play in safeguarding?
Good communication is a basic medical skill, and many of these points are common to all discussions between doctors and patients. Good communication can take time, particularly if there are language difficulties or some degree of cognitive impairment. There can be time constraints in hospitals, surgeries and care homes, which can challenge the delivery of personalised care. In these circumstances, it is important that professionals are sensitive to the potentially coercive effects of pressurised decision-making.

The basic principle is that all individuals should be offered information about their condition and the options for treatment or support in a manner appropriate to their needs. This should extend to the offer of information about their wider care. Adults at risk should be supported to explore choices about their safety and wellbeing. This includes adults who may lack capacity but who have some ability to participate in decision-making.

**Key aspects of good communication**

- Good communication involves an honest and sensitive exploration of health conditions, treatment options, prognosis, risks and side effects, as well as broader interests and issues including the involvement of social services, changes of residence and disclosure of information to the police or those close to the patient.
- Euphemism should be avoided, and thought should be given to timing of discussions and to the use of communication aids where appropriate.
- Information should be tailored to the individual’s needs. For example, it may involve the use of
pictures, or translators where English is not a first language.

- Consideration should be given to the use of fact sheets and other written communication supports.
- All patients should be encouraged to participate as far as possible in decision-making.
- Most patients will want those close to them to be involved in communication and decision-making, but all patients have a right to confidentiality – where an individual has indicated that information should not be shared, this should be respected.
- Health professionals must avoid the use of communication styles that inadvertently imply that patients lack autonomy, dignity or competence.
- Good communication is about more than conveying information; it is also about establishing positive professional relationships.
- Time should be taken to identify the patient’s underlying values and beliefs that may have a bearing on decisions that need to be made.
- Where the criteria in the MCA are met, consideration should be given to involving an advocate, such as an independent mental capacity advocate (IMCA). Although the IMCA’s role is to promote the best interests of the incapacitated adult, they can also help facilitate good communication.
- Discussion with adults can involve broaching sensitive subjects, including concerns about harm or abuse, and this requires good communication skills. Where health professionals are likely to be working with adults who may be at risk, appropriate training should be provided.