Development and Evaluation of a Medical Communication Scale

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ABSTRACT

Objective: To evaluate the degree of communication with patients and their relatives based on a pre-designed medical communication scale.

Design: A Prospective random sample assessment study.

Setting: Intensive Care Unit, King Hamad University Hospital.

Method: We studied the scale randomly in 50 adult patients admitted to ICU. The degree of communication with the patient’s next of kin was assessed by a native English speaking intensivist according to a scale designed for the purpose.

Result: Twenty-three (46%) relatives required the help of an interpreter for communication (class 4). Full communication was possible with 15 (30%) relatives (class 2). Twelve (24%) relatives did not have a full grasp of the working language or were informed to a below average level or were unwilling or uninterested in obtaining further knowledge. There was no relative with whom communication was impossible (class 5) nor was there any well-informed relative with whom communication was fully fluent (class 1).

Conclusion: The medical communication scale can help the physician to objectively quantify the ease or difficulty in communication with the patient’s relatives. In the ethnically mixed workforce of our hospital, while the physician could fully communicate with many relatives, a significant percentage of the relatives were not proficient in the working language of the hospital and required the help of an interpreter to communicate with the physician.

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