



Medical Laboratory

NTQF Level -III

Learning Guide #3

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| Unit of Competence: - | Providing Compassionate, Respectful and Caring Service |
| Module Title: - | Providing Compassionate, Respectful and Caring Service |
| LG Code: | HLT MLS3 M01 0919 |
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LO 3: Demonstrating effective health care communication

**Instruction Sheet****Learning Guide #3**

This learning guide is developed to provide you the necessary information regarding the following **content coverage** and topics –

- Compassion and concern for the patient
- Effective communication with health care teams and patients

This guide will also assist you to attain the learning outcome stated in the cover page.

Specifically, upon completion of this Learning Guide, **you will be able to**

- Established (Rapport) Positive, respectful and collaborative working relationship
- Recognized, anticipated and expressed Compassion and concern for the patient
- Clearly and effectively elicited information
- Gathered proper information in order to facilitate accurate diagnosis
- Used Appropriate non-verbal communication
- Actively listened patient concern
- Effectively informed, educated and Counseled clients
- Established effective interaction with other people working within the health system
- Therapeutic instructions provided compassionately
- Used and implemented Non-violent communication techniques

Learning Instructions:

1. Read the specific objectives of this Learning Guide.
2. Follow the instructions described below.
3. Read the information written in the information “Sheet 1, Sheet 2, Sheet 3 and Sheet 4
4. Accomplish the “Self-check 1, Self-check t 2, Self-check 3 and Self-check 4”
5. If you earned a satisfactory evaluation from the “Self-check” proceed to the next topics



Thus, the requirements of a job, though specific to it, cover also a general spectrum.

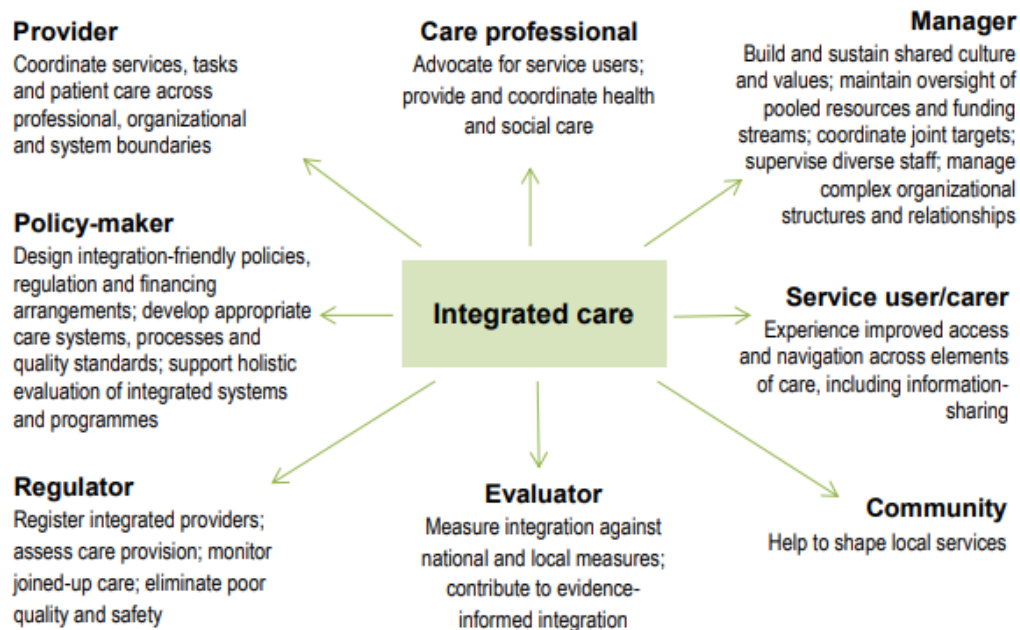
These make for better employees and better individuals.

3. Demonstrate effective health care communication

3.1. Work relationship (Positive, respectful and collaborative)

In many health systems, integrated care is seen as a possible solution to the growing demand for improved patient experience and health outcomes of multi morbid and long-term care patients. During the last decade different models and approaches to integrated care have been widely applied and documented across a variety of settings, which has resulted in the multiplicity of definitions and conceptual frameworks.

Integrated care is often contra posed to fragmented and episodic care, and it is used synonymously to terms like coordinated care and seamless care, among others. However, there is no unifying definition or common conceptual understanding of integrated care, which is most likely, a result of ‘the polymorphous nature of integrated care itself’ (7). In effect, the perspectives that construct the concept are likely to be shaped by views and expectations of various stakeholders in the health system.



Helping Relationship

The helping relationship is sometimes called therapeutic or client nurse relationship.



The goals of a helping relationship between a nurse and a client are determined cooperatively and are defined in terms of the client's needs.

Broadly speaking common goals might include:

- ✓ Increased independence,
- ✓ Greater feelings of worth and
- ✓ Improved physical well being

Basic Characteristics of a Helping Relationship

- ✓ Dynamic
- ✓ Purposeful and time limited

The person providing the assistance in a helping relationship assumes the dominant role
Collaborating positive work relationship is very important to provide respectful health care

Positive; - Encouraging good behavior, behavior which is morally good or *Affirmative behavior/action*.

- Associated with relational communication and the use of interpersonal skills in clinical communication, which convey compassion.

Compassion- related positive behaviors vary in expression; behaviors share a commonality that distinguish them from general caring of health care providers to give not only of themselves as a professional but as a person.

The primary behaviors associated with relational communication are described by patients as showing respect; physical displays of caring; and listening and supportive words

Respectful: - Is the kind of care, in any setting, which supports and promotes, and does not undermine a person's self-respect, regardless of any differences.

The action meanings of the word respect are:-

- ✓ Pay attention to
- ✓ Honoring
- ✓ Avoiding damage e.g. insulting, injuring
- ✓ Not interfering with or interrupting
- ✓ Treating with consideration
- ✓ Not offending



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| Information Sheet-2 | Compassion and concern for the patient |
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- **Compassion** can be defined as ‘A sensitivity to the suffering of self and others with a deep wish and commitment to relieve the suffering ’

Compassion: - Is a feeling of deep sympathy and sorrow for the suffering of others accompanied by a strong desire to alleviate the suffering? Therefore, we can say it is being sensitive to the pain or suffering of others and a deep desire to alleviate the suffering.

It lies at the intersection of empathy (in this case, understanding patients’ concerns) and sympathy (feeling patients’ emotions). A health professionals’ care without compassion cannot be truly patient-centered. Compassionate care addresses the patient’s innate need for connection and relationships and is based on attentive listening and a desire to understand the patient’s context and perspective.

Concern for patient:-Caring feelings (a feeling of worry, compassion, sympathy, or regard for patient or patient care.

Compassionate, respectful and caring (CRC) - means serving patients, being ethical, living the professional oath, and being a model for young professionals and students. It’s a movement that requires champions who identify with their profession and take pride by helping people.

Characteristics of CRC Health Professionals

CRC health professionals have the following four essential characteristics:

- Consider patients as human beings with complex psychological, social and economic needs and provide person-centered care with empathy;
- Effective communication with health care teams, interactions with patients and other health professionals over time and across settings;
- Respect for and facilitation of patients’ and families,’ participation in decisions and care.
- Take pride in the health profession they are in and get satisfaction by serving the people and the country.

Quality of Compassionate care

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| Medical Laboratory Level III | Vision :01 Sep. 2019: Copyright Info/Author: Federal TVET Agency | Page 5 of 28 |
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Compassion can be defined as a sensitivity to the suffering of self and others with a deep wish and commitment to relieve the suffering ’

Developing more compassion can be a way to balance emotions to increase the well-being of patients, healthcare professionals and facilitation of healthcare delivery.

For patients, compassion can help prevent health problems and speed-up recovery. Compassion can improve staff efficiency by enhancing cooperation between individuals and teams and between patient and healthcare professionals.

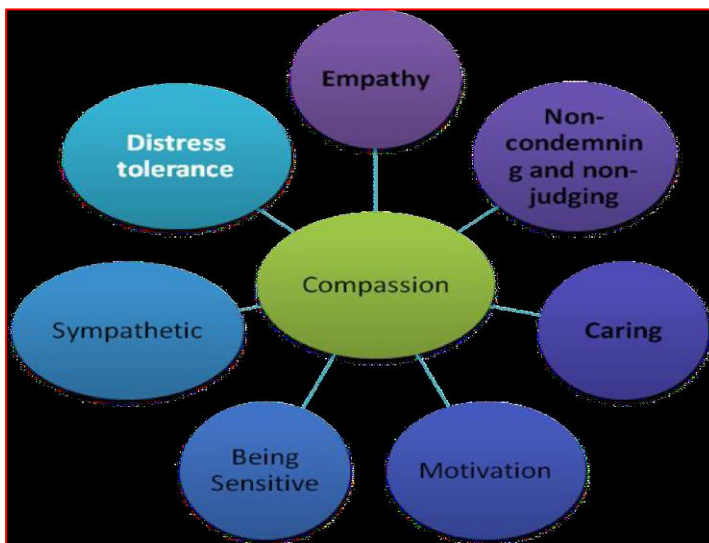


Figure 1.2: Qualities of compassion

Motivation: Making a decision to be compassionate and it is the commitment to try to do something about the compassionate care.

Being sensitive: Making an effort to train one’s mind to become **sensitive** to feelings and thoughts will heighten sensitivity to one’s needs. It is difficult to be self-compassionate if one is completely insensitive to feelings of pain, sadness, want or needs. One must learn to notice one’s thoughts and feelings as they come about. However, sensitivity does not mean merely react to situations without thought or reflection. To be sensitive means ‘openness and ability to recognize and listen in appropriate ways’.

Sympathetic: Compassion requires one to be emotionally open to one’s suffering, as well as to the suffering of others. To be sympathetic is to be emotionally affected by suffering of others. Sympathy is an emotional reaction to one’s own and other people’s emotions and states (e.g. flinching when one sees someone fall. Sympathy can also be expressed by the feeling of joy over the well-being of others.

Empathy: Understanding and how one perceives one’s feelings and thoughts is to empathize. To be open and curious helps one to understand how one feels, what one feels



and why. When we have empathy for others we try to understand the situation from their point of view, what others are thinking and how it may be different. Showing empathy requires work. For example, if client is shouting and complaining on you but you realize that they were under enormous stress and pain and then you don't take it personally and you forgive them: you are showing empathy. Compassion and empathy are closely related but the two terms cannot be used synonymously. Empathy is the ability to sense feelings or concerns of others; this often leads to compassion, which is a feeling of concern for the sufferings or misfortunes of others. Compassion leads to an act of trying to alleviate suffering or misfortune.

Distress tolerance: To be open to feelings, one must accept them. There are a number of different feelings ranging from being sad, angry or anxious and joyful. Some examples of reactions to feelings is sometimes to be critical, to run away from them, to hide or suppress them; but when one is compassionate, it is easier to be open, tolerant, accepting of different types of feelings . Therefore an important aspect of compassion is to learn how to tolerate and come to terms with, become familiar with, and less frightened of, one's feelings. At the same time, however, it is possible to change one's feelings for people, different events or even one's own person.

Not to condemn or judge: The suffering mind, for example, can be filled with condemning and critical thoughts of one's self or others. Letting go of these negative thoughts is linked to becoming kind and mindful; we become more aware of thoughts and feelings from an observational point of view. We should not judge them, nor try to suppress them or push them out of our minds, avoid or run away from them (this means, we have to accept as they are). Rather, one should learn to reflect more and not react too hastily. These abilities can be developed incrementally. These positive reflections are engaged with the feelings of warmth and a genuine desire to relieve suffering and increase growth and flourishing.

Caring: Promotes compassion. Because the action of caring has the potential to alleviate individual suffering. Care is the "action and activities directed towards assisting, supporting or enabling another individual **or** group with evident or anticipated needs to improve a human condition or life way or to face death".

Elements of compassionate care

According to researches the key elements of compassionate care has seven categories, each contains theme and subthemes.

Virtue

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| Medical Laboratory Level III | Vision :01 Sep. 2019: Copyright Info/Author: Federal TVET Agency | Page 7 of 28 |
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It is described as “good or noble qualities embodied in the character of the health care provider.

Specifically, patients felt compassion stemmed from virtues of genuineness, love, honesty, openness, care, authenticity, understanding, tolerance, kindness, and acceptance. Compassion is predicated on health care provider virtues, independent of patient behavior, relatedness, or deservedness.

Relational space:

Relational space is defined as the context and content of a compassionate encounter where the person suffering is aware of and is engaged by, the virtues of the health care provider.

The intent and depth of the health care provider-patient relationship was a defining feature of compassion, extending beyond simply acknowledging and understanding the needs of the patient to relating to them as a fellow human being and actively engaging their suffering.

The category of relational space comprised two themes.

Patient awareness which describes the extent to which patients intuitively knew or initially sensed health care provider capacity for compassion.

Engaged care giving which refers to tangible indicators of health care provider compassion in the clinical encounter that established and continued to define the health care provider-patient relationship over time.

Virtuous Response

It is the “Enactment of a virtue toward a person in suffering,” and it is both an individual category and an overarching principle of care that functions as a catalyst to the three core categories of compassionate care giving: “seeking to understand, relational communicating, and attending to needs”

The category of virtuous response contains three broad themes within it:

Knowing the person: Refers to the extent to which healthcare providers approached their patients as persons and view their health issues and suffering from this point of view.

Seeing the person as priorit;- Involves healthcare providers’ ability to prioritize patient needs, setting aside their own assumptions and healthcare system priorities in the process.



Beneficence;- Refers to healthcare providers wanting the best for the patient, informing the three more targeted core categories of compassionate care giving.

Seeking to Understand;-Seeking to understand refers to healthcare providers trying to know the patient as a person and his or her unique needs.

Health care providers' first act is to know and prioritize the patient as a person by pursuing a deeper understanding of the person and his or her unique illness experience to better diagnose the patient.

The need to understand a person's desires and tailor his or her care is identified by most patients as a fundamental feature of compassion.

- o Seeking to Understand the Person.
- o Seeking to Understand the needs of the Person

Relational Communication

The category of relational communication is an important element of compassion identified by patients consisting of verbal and nonverbal displays conveyed by the healthcare

Demeanor (“being”): Refers to the disposition of healthcare provider that is conveyed through nonverbal communication, such as body language, eye contact, tone of voice, posturing and expressions.

Demeanor is closely related to “patient awareness” within the category of “relational space”. It is more sensory-based and contextual to clinical communication.

☆ **Affect (“feeling for”):**

Describes the extent to which healthcare providers actively connects with their patients' emotions; as well as their influence over the process.

In relation to compassion, affect is characterized by vulnerability and action, requiring healthcare providers to enter the relational space and position themselves; to be in the “patient's shoes” as clinical information is being shared.

☆ **Behaviors (“doing for”):**

Associated with relational Communication and the use of interpersonal skills in clinical communication, which convey compassion.



- Compassion- related behaviors vary in expression; behaviors share a commonality that distinguish them from general caring of health care providers to give not only of themselves as a professional but as a person. The primary behaviors associated with relational communication are described by patients as showing respect; physical displays of caring; and listening and supportive words.

☆ **Engagement (“being with”):**

Refers to the degree to which patients feel healthcare providers are actively present in the clinical encounter.

The first aspect of engagement is attentiveness through nonverbal actions (e.g. sitting versus standing at the patient’s bedside) and temporal indicators (e.g. communicating regularly with patients about their needs or communicating potential health issues to other members of the patient’s care team).

☆ **Attending to Needs:**

It refers to “a timely and receptive desire to actively engage in and address a person’s multifactorial suffering”.

Attending to patients’ needs has three interrelated themes:

☆ **Compassion-Related Needs:**

Refers to the dimensions of suffering that patient feel compassion including

- ✓ Physical
- ✓ Emotional
- ✓ Spiritual
- ✓ Familial and
- ✓ Financial
- Compassionate healthcare providers are those who, regardless of their scope of practice, are willing to actively attend to a patient’s immediate needs.

☆ **Timely:**

Refers to addressing suffering in a “timely” manner. It has dual understanding of time, referring to both the desire of healthcare providers to address suffering in a responsive manner and at an opportune moment.



The responsive dimension of time is frequently referred to as acute suffering (e.g. a pain crisis)

☆**Action:**

- Refers to the initiation and engagement of a dynamic and tangible process aimed at alleviating suffering. Compassion is more action.

☆**Patient-Reported Outcomes:**

The impact of compassion on patients who are suffering is profound. Patient-reported outcomes refer to the effect of compassion on suffering, patient well-being, and care.

Although some patients feel that compassion directly improves the health outcomes, compassion primarily enhances patients' well-being and the quality of their relationship with their healthcare providers.

These experiences have an equally enduring effect on their well-being and the care-giving relationship, often exacerbating suffering in the process.

Principles of compassionate care

The universal principles of compassion will help us know one another in a more meaningful way where we discover one another respectfully. They create the conditions that allow a person who is suffering to experience the healing power of compassion.

1. **Attention** is the focus of healthcare provider. Being aware will allow the healthcare provider to focus on what is wrong with a patient; or what matters most to the patient.
2. **Acknowledgement** is the principle of what the healthcare professional says.
3. **Affection** is how healthcare providers affect or touch people. Human contact has the ability to touch someone's life. It is the quality of your connection, mainly through kindness and humor. Affection brings joy and healing.
4. **Acceptance** is the principle of being with mystery understanding or at the beginning of a new experience, and regard what is beyond with equanimity.

It is the quality of your presence in the face of the unknown, in the silence. Like the sun in the north at midnight, acceptance welcomes the mysteries of life and is at peace with whom we are and where we are, right now. It is the spirit of Shalom.





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| Self-Check -2 | Written Test |
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Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page:

Say true or false

1. Caring is promotes compassion?
2. Compassion can be defined as: sensitivity to the suffering of self and others with a deep wish and commitment to relieve the suffering?

Multiple choose

3. Which of the following quality of compassion requires the one to be emotionally open to one's suffering, as well as to the suffering of others?
 - A. Caring
 - B. Sympathetic:
 - C. Distress tolerance
 - D. Being sensitive
4. Which one of the following is not quality of compassionate care?
 - A. Distress tolerance
 - B. Motivation
 - C. Less sensitive
 - D. Sympathetic:

Note: Satisfactory rating - 3 points

Unsatisfactory - below 3 points

Answer Sheet

1. _____
2. _____
3. _____
4. _____

| |
|---------------|
| Score = _____ |
| Rating: _____ |

Name: _____

Date: _____



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| Information Sheet-3 | Effective communication with health care teams and patients |
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Review of communication

Definition of communication

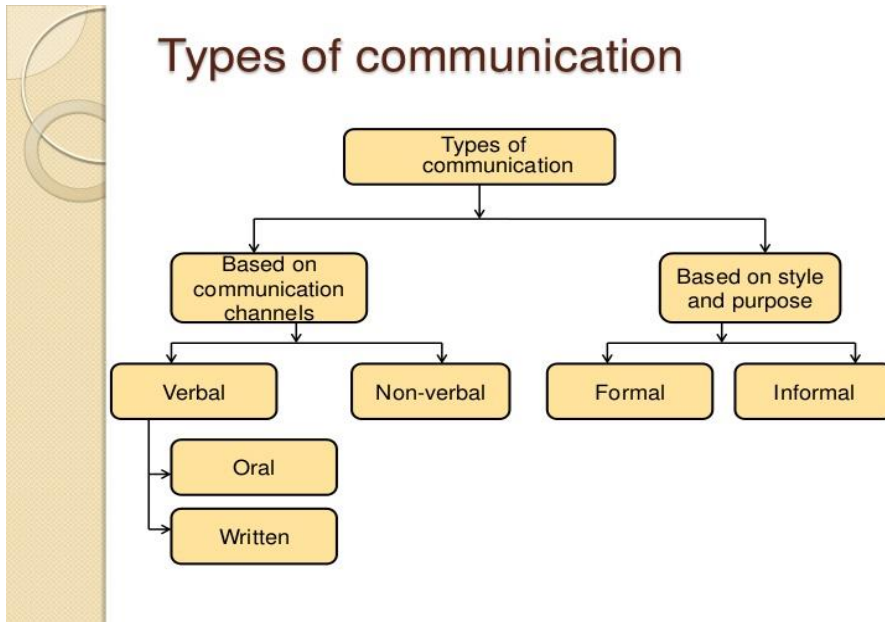
- The word communication come from latin word 'communis' meaning make common ground of understanding, to share information, ideas or attitude, to impart, to transmit.
- Evert M. Rogers (1993), defined “**communication** as the process by which an idea is transferred from a source to a receiver with intent to **change his/her behavior**”
- It is a process by which information is exchanged between individuals through a common system of symbols, signs, or behavior.



Types of communication

Communication of information, messages, opinions, speech and thoughts can be done via different forms of modern communication media, like Internet, telephone and mobile. Some of the basic ways of communication are by speaking, singing, sign language, body language, touch and eye contact. These basic ways of communication are used to transfer information from one entity to other.

There are many different types of communication but they can be classified into **four basic types**.



A. Verbal Communication

Verbal communication includes sounds, words, language and speaking. Language is said to have originated from sounds and gestures. There are many languages spoken in the world. The basis of language formation is: gender, class, profession, geographical area, age group and other social elements. Speaking is an effective way of communicating and is again classified into two type's viz. interpersonal communication and public speaking.

Good verbal communication is an inseparable part of business communication. In a business, you come across people from various ages, cultures and races. Fluent verbal communication is essential, to deal with people in business meetings. Also, in business communication self-confidence plays a vital role which when clubbed with fluent communication skills can lead to success.

Public speaking is another verbal communication in which you have to address a group of people. Preparing for an effective speech before you start is important. In public speaking, the speech must be prepared according to the type of audience you are going to face. The content of your speech should be authentic and you must have enough information on the topic you have chosen for public speaking. All the main points in your speech must be highlighted and these points should be delivered in the correct order. There are many public speaking techniques and these techniques must be practiced for an effective speech.

B. Non-Verbal Communication

Non-verbal communication involves physical ways of communication, like, tone of the voice, touch, smell and body motion. Creative and aesthetic non-verbal communication includes



singing, music, dancing and sculpturing. Symbols and sign language are also included in non-verbal communication. Body language is a non-verbal way of communication. Body posture and physical contact convey a lot of information. Body posture matters a lot when you are communicating verbally to someone. Folded arms and crossed legs are some of the signals conveyed by a body posture. Physical contact, like, shaking hands, pushing, patting and touching expresses the feeling of intimacy. Facial expressions, gestures and eye contact are all different ways of communication. Reading facial expressions can help you know a person better.

C. Written Communication

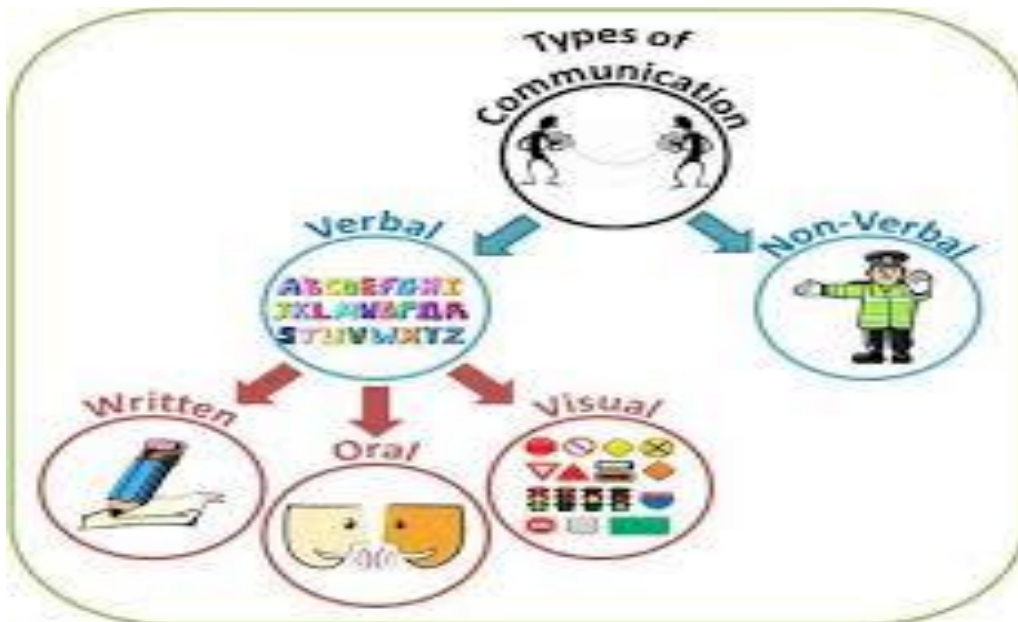
Written communication is writing the words which you want to communicate. Good written communication is essential for business purposes. Written communication is practiced in many different languages. E-mails, reports, articles and memos are some of the ways of using written communication in business. The written communication can be edited and amended many times before it is communicated to the second party to whom the communication is intended. This is one of the main advantages of using writing as the major means of communication in business activity. Written communication is used not only in business but also for informal communication purposes. Mobile SMS is an example of informal written communication.



D. Visual communication

The last type of communication is the visual communication. Visual communication is visual display of information, like topography, photography, signs, symbols and designs. Television and video clips are the electronic form of visual communication.

Effective communication is essential for the success of any type of business. Informally too, nothing can be achieved without proper communication. Therefore, developing communicative skills is a must. One must understand that all the four types of communication are equally



3.5. Effective communication with health care teams and patients

- Relational Communication
- ✓ The category of relational communication is an important element of compassion identified by patients consisting of verbal and nonverbal displays conveyed by the healthcare provider’s engagement with the person suffering.
- There are four specific themes and associated subthemes that convey compassion within clinical communication:
 - A. **Demean or (“being”)**: refers to the disposition of healthcare provider that is conveyed through nonverbal communication, such as body language, eye contact, tone of voice, posturing and expressions. Demean or is closely related to “patient awareness” within the category of “relational space”. It is more sensory-based and contextual to clinical communication.
 - B. **Affect (“feeling for”)**: describes the extent to which healthcare providers actively connects with their patients’ emotions; as well as their influence over the process. In relation to compassion, affect is characterized by vulnerability and action, requiring health care providers to enter the relational space and position themselves; to be in the “patient’s shoes” as clinical information is being shared.
 - C. **Behaviours’ (“doing for”)**: associated with relational communication and the use of interpersonal skills in clinical communication, which convey compassion. Compassion-related behaviours vary in expression; behaviours share a commonality that distinguish them from general caring of health care providers to give not only of themselves as a professional but as a person. The primary behavior associated with



relational communication is described by patients as showing respect; physical displays of caring; and listening and supportive words.

- D. **Engagement (“being with”)**:refers to the degree to which patients feel healthcare providers are actively present in the clinical encounter. The first aspect of engagement is attentiveness through nonverbal actions (e.g. sitting versus standing at the patient’s bedside) and temporal indicators (e.g. communicating regularly with patients about their needs or communicating potential health issues to other members of the patient’s care team).Acknowledgment, the second essential aspect of engagement, involves recognizing the personal impact of suffering, reflecting back to the patient, and integrating this information into subsequent interactions. The final aspect of engagement is dialogue, which consists of healthcare providers communicating clinical information accurately and sensitively, including the effective use of silence and allowing patients to participate in the clinical conversation.



3.5.2. Principles of effective communication

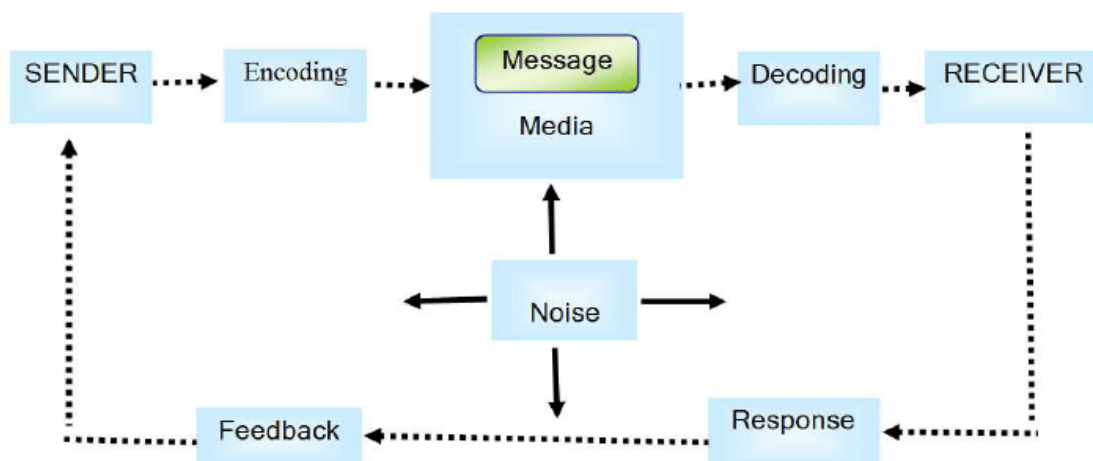
- ✓ Good communication is one of the keys to your success as an early intervention provider.
It is the means of establishing and building relationships with families, with your co-workers and teammates, and community agencies.
- ✓ Your communication skills will play an important part in your ability to support families and their children as they learn new skills.
- ✓ Communication requires good listening skills, awareness of cultural differences, sensitivity to nonverbal cues, dissemination of information, and appropriate documentation.
- ✓ Using good listening skills involves asking open-ended questions, and active listening strategies.

3.5.3. Components of effective communication

We know that communication is a process of transmitting and receiving messages (verbal and non-verbal). Communication is a dialogue not a monologue. So, a communication is said to be effective only if it brings the desired response from the receiver.

Communication consists of six components or elements.

1. Context
2. Sender/Encoder
3. Message
4. Medium
5. Receiver/Decoder
6. Feedback





1. Context

Every message (Oral or written), begins with context. Context is a very broad field that consists of different aspects. One aspect is country, culture and organization. Every organization, culture and country communicates information in their own way.

Another aspect of context is external stimulus. The source of external stimulus includes; meeting, letter, memo, telephone call, fax, note, email and even a casual conversation. This external stimulus motivates you to respond and this response may be oral or written.

Internal stimuli are another aspect of communication. Internal Stimuli includes; you opinion, attitude, likes, dis-likes, emotions, experience, education and confidence. These all have multifaceted influence on the way you communicate you ideas. A sender can communicate his ideas effectively by considering all aspects of context mentioned above.

2. Sender/Encoder



Encoder is the person who sends message. In oral communication the encoder is speaker, and in written communication writer is the encoder. An encoder uses combination of symbols, words, graphs and pictures understandable by the receiver, to best convey his message in order to achieve his desired response.

3. Message

Message is the information that is exchanged between sender and receiver. The first task is to decide what you want to communicate and what would be the content of your message; what the main points of your message are and what other information to include. The central idea of the message must be clear. While writing the message, encoder should keep in mind all aspects of context and the receiver (How he will interpret the message). Messages can be intentional and unintentional

4. Medium

Medium is the channel through which encoder will communicate his message. How the message gets there. Your medium to send a message may be print, electronic, or sound.



Medium may be a person as postman. The choice of medium totally depends on the nature of your message and contextual factors discussed above. Choice of medium is also influenced by the relationship between the sender and receiver.

The oral medium, to convey your message, is effective when your message is urgent, personal or when immediate feedback is desired. While, when your message is long, technical and needs to be documented, then written medium should be preferred that is formal in nature. These guidelines may change while communicating internationally where complex situations are dealt orally and communicated in writing later on.

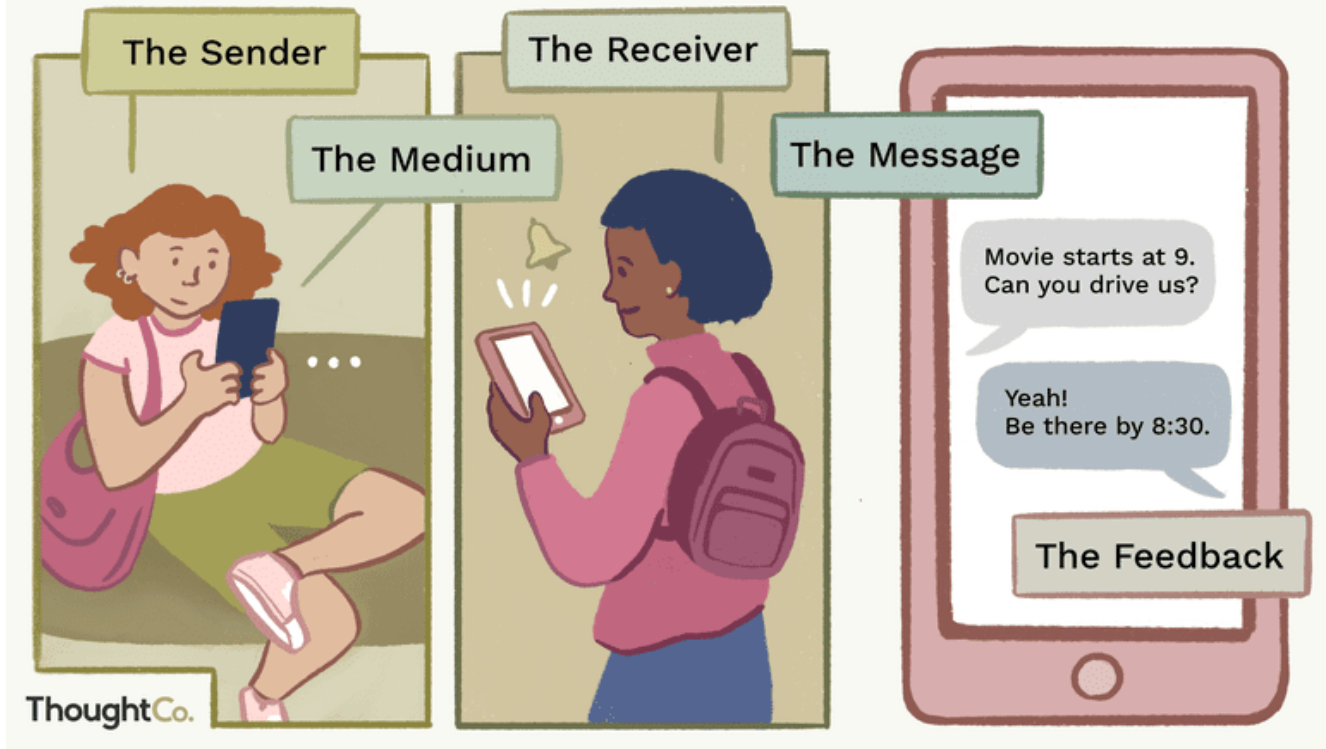
5. Receiver/Decoder

The person to whom the message is being sent is called 'receiver'/'decoder'. Receiver may be a listener or a reader depending on the choice of medium by sender to transmit the message. Receiver is also influenced by the context, internal and external stimuli. Receiver is the person who interprets the message, so higher the chances are of mis-communication because of receiver's perception, opinion, attitude and personality. There will be minor deviation in transmitting the exact idea only if your receiver is educated and have communication skills.

6. Feedback

Response or reaction of the receiver, to a message, is called 'feedback'. Feedback may be written or oral message, an action or simply, silence may also be a feedback to a message. Feedback is the most important component of communication in business. Communication is said to be effective only when it receives some feedback. Feedback, actually, completes the loop of communication.

Elements of the Communication Process



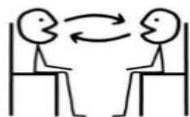
3.5.4. Interpersonal relationship

- ✓ Is a person to person, two-way, verbal and non-verbal interaction that includes the sharing of information and feelings between individuals or in small groups that establish trusting relationships
- ✓ Takes place between service providers and their clients and members of the community and is a key element in maximizing access to quality care.
- ✓ Includes the process of education, motivation and counseling and starts with understanding the critical role of good client service.

COMPONENTS of THE INTERPERSONAL COMMUNICATION MODEL

Much research has been done to try to break down interpersonal communication into a number of elements in order that it can be more easily understood. Commonly these elements include:

1. sender,
2. message,
3. receiver,
4. Feedback
5. barriers.



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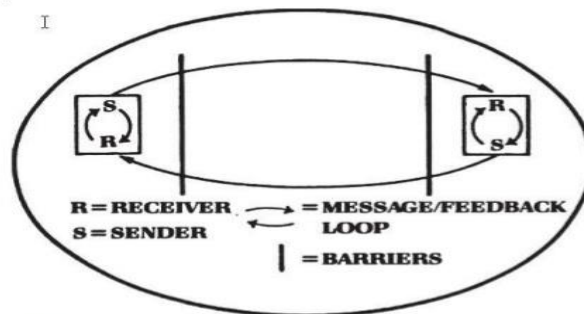


FIGURE 2-1. The interpersonal communication model.

6



3.5.4.1. Laboratory technician in relation to his/her patients

- ✚ Laboratory technician have the obligations to act in the best interest of the individual patient.
- ✚ Laboratory technician should always strive to provide information to patients regarding professional services truthfully, accurately, and clearly.
- ✚ Laboratory technician shall provide professional service to the best of their capabilities and to conduct themselves in such a manner as to hold their profession in high esteem and use professional judgment by following the laws and regulations pertaining to laboratory.
- ✚ Laboratory technician shall bear the responsibility and accountability in the control and supply of service contributing to public health.
- ✚ Laboratory technician shall seek to maintain professional relationships with other coworkers, colleagues, other members of the health care team and other stakeholders to achieve the highest standard of care for the best interest of the patient.
- ✚ Always follow the rule: Patient first or Service first.
- Therefore, the Laboratory technician /technologists should.
 - ✓ Be morally obliged to the gift of trust received from the patients; be responsible to help individuals to achieve optimum benefit from their diagnosis.
 - ✓ Do not show partiality between his patrons i.e. He/she should not discriminate between patients by nationality, color, religion, social status, political standards, etc...
 - ✓ Do not abuse his/her relationship with the patient for personal use.
 - ✓ Dedicate him/her to protect the dignity of the patient i.e. He/she should respect the patient right not to take a drug unless the disease condition requires otherwise by law.
- ✚ Respect and treat all patients equally, and protect their dignity and privacy.
 - ✓ Laboratory technician shall treat patients without prejudice of race, age, gender, sexual orientation, nationality, religion, disability or socio-economic status; and not allow personal beliefs to influence the management of patients.
 - ✓ Laboratory technician shall hold the details of patient information in confidence by taking all reasonable steps to prevent accidental disclosure or unauthorized access to confidential information and should not disclose such information to anyone without proper patient authorization/consent except where the best interest of the patient requires or required by law.



3.5.4.2. Laboratory technician in relation to the public

- ✚ Comply with the laws/legal requirements; uphold professional standards and consistency in the promotion and provision of health services and products.
- ✓ Laboratory technician shall comply with the laws that govern practice in the course of their professional responsibilities.
- ✓ Laboratory technician shall ensure that the premise of practice must fulfil professional practice guidelines and standards so as to enable the provision of safe, high quality and cost effective health services and products.
- ✓ Laboratory technician shall take responsibility for all work done by them and ensure that those under their direct supervision are able to carry out duties competently.
- ✓ Laboratory technician shall ensure appropriate standard operating procedures exist and are adhered to for the diagnosis and safety of the patient.
- ✓ Laboratory technician shall make sure that their professional judgement is not impaired by personal or commercial interests, incentives, targets or similar measures.
- ✚ Behave in a way that justifies trust and maintains the reputation of profession.
- ✓ Laboratory technician shall act with honesty and integrity to uphold public trust and confidence in their profession.
- ✓ Laboratory technician shall maintain proper professional boundaries in the relationships they have with patients and other individuals that they come into contact with during the course of professional practice.
- ✓ Laboratory technician shall comply with legal requirements, mandatory professional standards and accept best practice guidance, and adhere to acceptable standards of personal and professional code of conduct.
- ✓ Laboratory technician shall honor commitments, agreements and arrangements for the provision of professional services.
- ✓ Laboratory technician shall refrain from publicly criticizing their colleagues and other healthcare professionals.
- ✓ Laboratory technician shall demonstrate respect for the dignity, views, ability and rights of colleagues and other healthcare professionals in forming and maintaining professional relationship.
- ✚ Always provide quality service.
- ✚ Therefore the Laboratory technician/technologists should:
 - ✓ Maintain good personal qualities.
 - ✓ Be on duty with clear mind.



- ✓ Be presentable.
- ✓ Master communication skills.
- ✓ Be knowledgeable.
- ✓ Always provide accurate and appropriate information.
- ✓ Always update him/herself

3.5.4.3. Laboratory technician in relation to health professionals

The technician/technologists should:

- Respect the skills and competencies of other health care providers and endeavor to work cooperatively with them.
- Do not enter into any secret arrangements or negotiation, with other health professionals.
- Endeavor to maintain the confidence and trust placed in other health professionals by patients.
- Expose any act of malpractice committed by other health professionals through the appropriate channel.
- **Always**
 - ✓ Communicate
 - ✓ Correct
 - ✓ Cooperate
 - ✓ Support
 - ✓ Respect



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|---------------|--------------|
| Self-Check -2 | Written Test |
|---------------|--------------|

Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page:

Multiple choose

1. Which of the following is **false** according to Lab technologists in relation to the public?
 - A. Lab technologists shall not take responsibility for all work done by them and ensure that those under their direct supervision are able to carry out duties competently.
 - B. Lab technologists shall ensure appropriate standard operating procedures exist and are adhered to for the care and safety of the patient.
 - C. Lab technologists shall abide by governing laws, standards and guidelines pertaining to the research, manufacture, distribution, sale, promotion and advertising of all health services and products.
 - D. Lab technologists shall refrain from misleading the public by promoting or criticizing any health product or services, through advertisements or other endorsements
2. Which Types of communication involves physical ways of communication, like, tone of the voice, touch, smell and body motion?
 - A. Non-Verbal Communication
 - B. Verbal Communication
 - C. Written Communication
 - D. Visual communication
3. Laboratory technologist should _____
 - A. Maintain good personal qualities.
 - B. Be on duty with clear mind.
 - C. Be presentable.
 - D. Master communication skills.
 - E. All of the above



Note: Satisfactory rating - 3 points

Unsatisfactory - below 3 points

Answer Sheet

- 1. _____
- 2. _____
- 3. _____

| |
|---------------|
| Score = _____ |
| Rating: _____ |

Name: _____

Date: _____

Short Answer Questions

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| List of Reference Materials |
|------------------------------------|

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- 3. Cheesbrough, M.(2005)Medical Laboratory Manual for Tropical Countries. Vol.1 Cambridge: Butterworth-Heinemann. Ltd
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Prepared By

| No | Name | Educational Background | LEVEL | Region | College | Email | Phone Number |
|----|------------------|------------------------|-------|--------|-------------|--|--------------|
| 1 | Kalicha Boru | Laboratory | B | Oromia | Nagelle HSC | boru9683@gmail.com | 0912493885 |
| 2 | Furo Beshir | Laboratory | A | Harari | Harar HSC | nebi.furo@gmail.com | 0911739970 |
| 3 | Motuma Chali | Laboratory | B | Oromia | Nekemte HSC | lammiifcaalii@gmail.com | 0938456753 |
| 4 | Abdirahman Mahad | Laboratory | A | Somali | Jigjiga HSC | abdirahman7584@gmail.com | 0911044715 |
| 5 | Adisu Tesfaye | | B | Somali | Jigjiga HSC | adistesfaye21@gmail.com | 0931747320 |
| 6 | Kebebe Tadesse | Laboratory | B | BGRS | Pawi HSC | no | 0926841290 |
| 7 | Tagel Getachew | Laboratory | A | Harari | Harar HSC | tagegetachew@gmail.com | 0915746748 |