

LESSON PLAN

ON

THERAPEUTIC COMMUNICATION

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ICON.

Therapeutic Communication

NAME OF THE TEACHER : **Mrs. Jayanthi K, Assoc. Prof, Dept. of MHN**

COLLEGE : **Indirani College of Nursing**

COURSE : **B.Sc. (N) III YEAR**

SUBJECT : **Mental Health Nursing**

TOPIC : **Therapeutic Communication**

DATE AND TIME :

METHOD OF TEACHING : **Lecture cum Discussion**

DURATION : **2 Hours**

AV AIDS : **Black Board, Roller Board, Chart, Hand Out, PowerPoint.**

GENERAL OBJECTIVE:

The students will be able to acquire adequate knowledge about application of therapeutic communication in psychiatric setup and to develop a desirable attitude and skill in practicing therapeutic communication in psychiatric health care settings.

SPECIFIC OBJECTIVE:

At the end of the class the students will be able to,

- ❖ introduce the topic
- ❖ state the components of therapeutic communication
- ❖ enumerate the phases of therapeutic communication

S.No	Time	Specific Objective	Content	Type Of Av Aids Used	Teachers Activity	Learners Activity	Evaluation
1.	15 mins	introduce the topic	A relationship is defined as a state of being related or a state of affinity between two individuals. The nurse and client interact with each other in the health care system with the goal of assisting the client to use personal resources to meet his or her unique needs.	Black Board	Teaching	Learning	Introduce the topic
2.	45 mins	state the components of therapeutic communication	<p>COMPONENTS OF THERAPEUTIC RELATIONSHIP</p> <p>1. Rapport</p> <p>Rapport is a relationship or communication especially when useful and harmonious. It is the crux of a therapeutic relationship between the nurse and the patient. It is:</p> <ul style="list-style-type: none"> • a willingness to become involved with another person • growth towards mutual acceptance and understanding of individuality 	Handouts	Teaching	Learning	What are the components of therapeutic communication?

the end result of one's care and concern for another.

The nurse establishes rapport through demonstration of understanding, warmth and nonjudgmental attitude. A skilled nurse will be able to establish rapport that will alleviate the patient's problems. When rapport develops, the patient feels comfortable with the nurse and finds it easier to self-disclose. The nurse also feels comfortable and recognizes that an interpersonal bond or alliance is developing.

2. Empathy

- ❖ Empathy is an ability to feel with the patient while retaining the ability to critically analyze the situation.
- ❖ Satisfying the needs of each other Varies may last for years Both are responsible and accountable Personal/ emotional attachment and interest involved Relationship may exist lifelong or terminate gradually.
- ❖ It is the ability to put oneself in

another person's circumstances and feelings.

- ❖ The nurse need not necessarily have to experience it, but has to be able to imagine the feelings associated with the experience.
- ❖ In empathy process the nurse receives information from the patient with an open, non judgemental acceptance, and communicates this understanding of the experience and feelings so that the patient feels understood. This serves as a basis for the relationship.
- ❖ Sympathy is often confused with empathy. In sympathy, the nurse actually feels what the patient feels but in the process objectivity is lost, and the nurse becomes focused on relief of personal distress rather than on assisting the patient to resolve the problem. With empathy while understanding the patient's thoughts and feelings, the nurse is able to maintain sufficient objectivity to allow the patient to

achieve problem resolution with minimal assistance.

3. Warmth

Warmth is the ability to help the client feel caredfor and comfortable. It shows acceptance of theclient as a unique individual. It involves anon-possessive caring for the client as a personand a willingness to share the client's joys andsorrows.

4. Genuineness

- ❖ Genuineness involves being one's own self. This implies that the nurse is aware of her thoughts, feelings, values and their relevance in the immediate interaction with a client.
- ❖ The nurse's response to the client is sincere and reflects her internal response. It is also important that the nurse's verbal and non-verbal communication correspond with each other.

3	45 mins	enumerate the phases of	PHASES OF THERAPEUTIC RELATIONSHIP	Pamphlets	Teaching	Learning	What are the phases of therapeutic
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		therapeutic communication	<p>Four phases of relationship process have been identified</p> <ul style="list-style-type: none"> • Pre-interaction phase • Introductory or orientation phase • Working phase • Termination phase <p>Pre-interaction Phase</p> <p>➤ This phase begins when the nurse is assigned to initiate a therapeutic relationship and includes all that the nurse thinks, feels or does immediately prior to the first interaction with the patient. The nurse's initial task is one of self-exploration. The nurse may have misconceptions and prejudices about psychiatric patients and may have feelings and fears common to all novices. Many nurses express feelings of inadequacy and fear of hurting or exploiting the patient. Another common fear of nurses is related to the stereotyped psychiatric patients' abusive and violent behavior.</p>				communication?
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- The nurse should also explore feelings of
- Inferiority, insecurity, approval-seeking behavior etc. This self-analysis is a necessary task because, to be effective, she should have a reasonably stable self-concept and an adequate amount of self-esteem.

Nurse's tasks in the pre-interaction phase

- Explore own feelings, fantasies and fears
- Analyze own professional strengths and limitations
- Gather data about patient whenever possible
- Plan for first meeting with patient

Introductory or Orientation Phase

During the introductory phase that the nurse and patient meet for the first time. One of the nurse's primary concerns is to find out why the patient sought help. This forms the basis of the nursing assessment and helps the nurse to focus on the patient's problem and to determine patient's level of motivation.

Nurse's tasks in the orientation phase

- Establish rapport, trust and acceptance
- Establish communication; assist in the verbal expression of thoughts and feelings

Working Phase

- Most of the therapeutic work is carried out during the working phase.
- The nurse and the patient explore relevant stressor and promote the development of insight in the patient. By linking perceptions, thoughts, feelings and actions, the nurse helps the patient to master anxieties, increase independence and coping mechanisms.
- Actual behavioral change is the focus of attention in this phase of the relationship.

Nurse's tasks in the working phase

- Gather further data; explore relevant stressors
- Promote patient's development of insight and use of constructive coping mechanisms
- Facilitate behavioral change; encourage him to evaluate the results of his behavior
- Provide him with opportunities for

independent functioning

- Evaluate problems and goals and redefine as necessary

Termination Phase

This is the most difficult, but most important phase of the therapeutic nurse-patient relationship.

The goal of this phase is to bring a therapeutic end to the relationship.

Criteria for determining patient's readiness for termination:

- Patient experiences relief from presenting problems
- Patient's social function has improved and isolation has decreased
- Patient's ego functions are strengthened and he has attained a sense of identity
- Patient employs more effective and productive defense mechanisms
- Patient has achieved the planned treatment goals

Nurse's tasks in the termination phase:

			<ul style="list-style-type: none"> • Establish reality of separation • Mutually explore feelings of rejection, loss, sadness, anger and related behavior <p>Review progress of therapy and attainment of goals</p> <ul style="list-style-type: none"> • Formulate plans for meeting future therapy needs 				
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SUMMARY:

Till now I have discussed about the introduction components and phases of therapeutic communication.

CONCLUSION:

I hope that you all understand about therapeutic communication and its components and phases.

Assignment

Write an assignment on Therapeutic Communication Phases

Test

1. Explain Therapeutic Communication Components (5)
2. Elaborate Therapeutic Communication Phases (10)

BIBLIOGRAPHY:

STUDENT REFERANCES:

1. Sreevani, R. A Guide to Mental Health and Psychiatric Nursing. 4th ed. Jaypee Brothers Medical Publishers. New Delhi. 2016
2. K. Lalitha (2007),”Mental health and psychiatric nursing and Indian perspective” 1st edition, Bangalore, VMG book house.
3. Niraj Ahuja, A short textbook of psychiatry, Jaypee brothers, New delhi, 2002.
4. Bimla Kapoor, Textbook of Psychiatric Nursing, Vol. I & II Kumar publishing house Delhi, 2001

TEACHER REFERANCES:

1. Dr. Ellakkuvana, Bhashara (2014),”DEBR’ s Mental health Nursing ”, first edition, Emmess publication.
2. CL Subash Indra Kumar (2014), “textbook of psychiatric and Mental health nursing”, 1st edition, New Delhi, Emmess publication.
3. Stuart (GW), Principles and Practice of Psychiatric Nursing, Elsevier, 8th Edition, 2005
4. Mary C Townsend. “Psychiatric Mental Health Nursing”. Concept of care, 4th edition. F.A.Davis Co. Philadelphia 2003.
5. Sreevani, R. A Guide to Mental Health and Psychiatric Nursing. 4th ed. Jaypee Brothers Medical Publishers. New Delhi. 2016
6. K. Lalitha (2007),”Mental health and psychiatric nursing and Indian perspective” 1st edition, Bangalore, VMG book house.
7. Niraj Ahuja, A short textbook of psychiatry, Jaypee brothers, New delhi, 2002.
8. Bimla Kapoor, Textbook of Psychiatric Nursing, Vol. I & II Kumar publishing house Delhi, 2001