



World Health Organization

**INTERNATIONAL PROGRAMME ON CHEMICAL
SAFETY**

INTOX Project

POISONS CENTRE TRAINING MANUAL

Training materials for poisons information staff

TRAINEE'S VERSION

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Foreword

The contents of this manual have been developed by an international working group of experienced poisons centre staff. The aim of the manual is to provide source material for those needing to train poisons information staff, either when setting up a new poisons centre or when establishing a training programme in an existing centre. The materials are written from a general perspective and may need to be adapted to local circumstances.

This volume is written for the trainee. It contains the same content as that for the trainer, though without the answers to the test questions.

Each of the chapters stands alone, however they have been compiled into a single volume for convenience.

A Word version of the chapters in the manual can be obtained by contacting ipcsintox@who.int.

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CHAPTER 2.1	TELEPHONE COMMUNICATION SKILLS - Trainee's version
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Objectives

On completing this chapter, you will be able to:

- Understand the unique characteristics of telephone communication for advising on the diagnosis and treatment of poisoning cases
- Identify the factors that impede and those that enhance good telephone communication in the context of providing poisons information.
- Identify the efforts required by the telephone information service professional to ensure that the necessary information is conveyed clearly.
- Become familiar with the different steps needed to compensate for the disadvantages of telephone communication.

Subject content

Introduction

This chapter discusses the relevant skills that you must develop to ensure good telephone communication and to maximize the information obtained from the caller and their understanding of the response that you give. The chapter also provides guidance on dealing with situations of crisis in which you and the caller may be involved.

Telephone communication for the purposes of diagnosis, treatment or prevention of poisoning is a unique situation in the health care delivery system. Good telephone communication is a particular skill that poison information specialists have to learn,

particularly the factors that can impede and promote the exchange of poisons information.

Often, poisoning cases or toxic exposures at home or in the emergency room may represent a crisis situation for the caller. You may, therefore, be confronted with a distressed caller, and your voice and manner will be your key tools for taking a proper history and giving an adequate reply.

A combination of a good subject knowledge and effective communication skills makes the ideal poison information specialist.

Factors that add to the stress of a poisons call

Very often, a poisons call carries an element of stress or crisis. There are a number of factors that may make this more likely, including:

- When there is a real or potential poisoning case the caller may be anxious, impatient or demanding and will almost always be in a hurry to get an answer.
- If the caller is personally involved e.g. they are the patient or parent, they may be in a panic or aggressive or hostile.
- Often the caller calls the centre with poor or incomplete information about the incident or the patient and may feel disadvantaged when asked for information that they do not have.
- Telephone calls from emergency rooms or ambulances are often surrounded by background noise or distracting activities.
- A poor telephone line can cause difficulties in hearing or understanding the other person.
- There may be other calls waiting for your attention.
- You may realize that:
 - there is no available toxicological information about the agent;
 - the centre has not developed specific management protocols for that poisoning;
 - the specific management requires many diagnostic and treatment steps that are difficult to explain in a single, brief conversation

Skills required for telephone communication in a poisons centre

Communication is a multi-layered process involving not only the exchange of information but also feelings and attitudes as well and it is important to be aware of this. The large part of communication between people occurs at a non-verbal level

and the scope for non-verbal communication is much less over the telephone. Moreover, as described above, there may be particular stresses involved in a poisons call. Thus additional skills are required for good telephone communication. In particular it is important that you show respect for the caller, ask appropriate questions, listen carefully and present the necessary information in a clear and comprehensible way.

If you have some prior experience in a work environment similar to that of the caller's e.g. in a hospital emergency department, then you may understand the problems at the other end of the telephone, and this may help you to communicate better. Previous experience in communication-related fields or teaching may also be useful.

You need the following qualities and skills to manage this particular type of communication.

1. In taking the history

- Self-control: capacity to stay calm enough to listen and direct the conversation to a better communication.
- Ability to empathise with the caller and the ongoing situation without being over sympathetic.
- A respectful manner, avoiding behaviour that can provoke resentment in the caller e.g. behaving in a superior way or being deliberately obstructive.

2. In giving the appropriate reply

- Personal initiative in finding the information where there may be a number of sources, such as a large range of documents, other professionals or others who may have the required knowledge.
- Capacity to synthesize or integrate information from several sources quickly.
- Good judgment in order to adapt and interpret the data in accordance with the specific case you are dealing with.
- Capacity to communicate the risk evaluation in understandable terms.

The telephone call: a disadvantageous situation

You should keep in mind the disadvantages of telephone communication, which include:

- Loss of visual information leading to a risk of misinterpretation of facts or feelings:
 - colour is highly subjective (white, yellowish? pale? cyanosis?)
 - shape and pattern can be difficult to convey reliably

- some medical terminology is ambiguous: a 'flat' patient can be semi-conscious or psychiatrically depressed.
- Your mental image of what the caller is describing might be different from the reality.
- Because you have no visual information you may find your attention wandering.
- Incorrect assumptions may be made by the caller about how the poison centre works. The caller may think that you have all the necessary information available with one computer "click", whereas in fact you may have to search in several places for this information.
- Assumptions and stereotyping about what you think the caller ought to know, e.g. because they are a doctor or because they are a member of the public, can hinder proper listening and can lead to a patronizing, disrespectful or unhelpful response which, in turn, may antagonise the caller.
- There may be other calls waiting so you may feel that you must finish the conversation quickly at the expense of taking a proper history or giving an adequate reply.
- When spelling a name over the telephone some letters may sound the same, e.g. in English 'f' and 's' sound the same.

Some steps to compensate for the disadvantages of telephone communication

You can minimize the above-mentioned problems by understanding how they can arise and by compensating with particular communication techniques and more explicit information

1. The first is to **establish empathy** with the caller so that they have confidence in your competence and in the information that you give them:

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