



Level 2 Certificate/Diploma in Medical Administration

4419-223

Communication Skills in a Medical Environment

Version: Sample Assignment

This assignment contains assessor and candidate instructions.

Sample

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**Level 2 Certificate/Diploma in Medical Administration
Communication Skills in a Medical Environment
4419-223**

Assessor's instructions

Assignment number	4419-223
Version	Sample

Sample

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Notes for guidance

This assignment comprises the assessment for the practical activities and underpinning knowledge requirements for Unit 4 Communication Skills in a Medical Environment.

The importance of safe working practices, the demands of the appropriate national and local Health and Safety legislation, associated regulations and Codes of Practice associated with the particular industry, must always be stressed. Candidates have responsibilities for maintaining the safety of others as well as their own. Anyone behaving in an unsafe fashion must be stopped and suitable warnings given. A candidate should never be allowed to continue working on an assignment if they have contravened these requirements. This may seem rather strict but, apart from the potentially unpleasant consequences, each candidate must acquire the habits required for the workplace.

The following notes for guidance are provided to assist assessors/tutors in planning the delivery of this assignment to candidates.

1 Location of assignment

- 1.1 Any suitable location in the workplace or learning environment.
- 1.2 This assignment must be taken under controlled conditions to ensure the time allowance is adhered to however it is not an examination.

2 Equipment/resources required for this assignment

- 2.1 No specific equipment or resources are required for this assignment although access to word processing and printer facilities would allow candidates to produce work more efficiently.

3 Evidence and recording

- 3.1 All work produced by the candidate should be kept together. The candidate is required to put their name, their City & Guilds registration number, task number and the date on all pieces of work, either handwritten or typed, however they will not be penalised for not doing so.
- 3.2 *Candidates will need to be able to organise their information clearly and coherently with accurate spelling and grammar.* Assessors are advised to use professional judgement when identifying errors, to determine whether work produced is fit for purpose.

4 Time considerations

- 4.1 This assignment should take no longer than **two** hours to complete, excluding research activities. You should make the candidate aware of your programme's time frame and deadlines for completion of this assignment.
- 4.2 A recommended period of seven days must have elapsed before an unsuccessful candidate can retake a task within this assignment. Further training/feedback should be given to candidates who are unsuccessful.
- 4.3 Should a candidate be unsuccessful in Section A then an alternative Section A from another assignment should be taken.
- 4.4 Should a candidate be unsuccessful in one task in Section B this task can be retaken but only a Pass awarded overall. Should a candidate be unsuccessful in more than one task, then a new assignment should be taken.

5 Additional information

- 5.1 Answers given in the marking and grading criteria are indicative of the type of answers candidates should give. They are **not** definitive.

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Outcomes

Section A – All learning outcomes are covered

Section B:

Task	Evidence	Outcome reference
1	Memo on communication breakdown and how to improve communication	1.1, 1.3, 4.1, 4.2
2	E-mail to arrange a visit	4.1, 4.2
3	Information sheet on telephone techniques	2.2, 4.1, 4.2

**Level 2 Certificate/Diploma in Medical Administration
Communication Skills in a Medical Environment
4419-223**

Candidate's instructions

Assignment number	4419-223
Version	Sample

Sample

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Section A

Answer **all** questions in this section – 40 marks.

- 1 Identify the **three** key features of face-to-face communication. (3 marks)
- 2 Give **four** examples of non-verbal communication which might act as a barrier when communicating face to face. (4 marks)
- 3 Describe **four** techniques an administrator can use to obtain information from patients in face-to-face situation. (4 marks)
- 4 Describe **two** ways to promote a professional and friendly image when greeting patients. (2 marks)
- 5 Give **three** reasons why communication may be difficult in the following situation: (3 marks)

A family member requests to see the doctor in the middle of morning surgery following the unexpected death of a close relative and patient of the surgery overnight.
- 6 Describe **four** ways in which an administrator can help communication in the situation described in Q 5. (4 marks)
- 7 State what details should be included in a telephone message. (4 marks)
- 8 State **four** examples of how to ensure confidentiality when using the telephone. (4 marks)
- 9 Explain what is meant by unconditional positive regard, giving an example. (2 marks)
- 10 Describe **three** ways of communicating effectively and sensitively with a person who is hearing impaired. (3 marks)
- 11 Explain how understanding cultural differences can help communication with patients and visitors, using an example. (3 marks)
- 12 Identify the method of communication that should be used in each of the following situations and explain why: (4 marks)
 - a) To send a short message and a copy of an urgent report to a team of six people.
 - b) To contact the GP who is out on his rounds.

Total (40 marks)

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Section B

Complete all tasks - 40 marks

Scenario

You work in general practice as a receptionist/administrator at Hollyfields Medical Practice. The team receives a letter of complaint (see p9). Using the information below and the templates provided complete the following tasks.

Manager Selina Sohal
Telephone: 01752 313311
Selina.sohal@hollyfieldsmed.co.uk
www.hollyfieldsmp.co.uk

Task 1

Your manager shows you the complaint as you were one of the team on duty that day. She asks you to think about the situations the patient described.

Prepare a memo to your manager identifying and explaining:

- **three** areas where communication broke down.
- how communication could have been improved in each case

Use the template provided on p10.

(10 marks)

Task 2

Your manager decides some new display boards for patients will help communication and leaves you the following note.

*Will you please contact Officeco by email. (Their address is info@officeco.co.uk)
They are a good local firm and should have some great ideas on how we can improve our information to patients. We could do with some details and a visit. Wednesday afternoons are always best for me.*

Selina

Prepare an email using the template provided on p11.

(10 marks)

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Task 3

The new work experience trainee asks for some help with telephone techniques in a medical environment. Prepare an information sheet for your colleague giving your top **eight** tips on telephone manner, explaining why each point is important.

(20 marks)

	22 Corner Road Marlow MA4 5JT
	14 August 2009
Hollyfields Medical Practice Church Lane Marlow	
Dear Sir/Madam	
I visited the surgery the other day and while I was waiting to be seen, I noticed some issues that I felt you should know.	
I have not been for a while and felt uncertain about what to do; I was just told to take a seat. There was a very long wait for the appointment - about 40 minutes and I have no idea why. The nurse eventually called my name and then disappeared so quickly along the corridor that I was lost and confused - I had to ask another patient where to go.	
The nurse was very positive and helpful but I did not pick up on what I was supposed to do next as I lost the end of her sentences. I was not even sure that the appointment was over!	
Yours faithfully	
Celia Collins	

Level 2 Certificate/Diploma in Medical Administration
Communication Skills in a Medical Environment
4419-223

Task 1 - memo template

Memorandum

To:

From:

Date:

Ref:

Subject:

Sample

Level 2 Certificate/Diploma in Medical Administration
Communication Skills in a Medical Environment
4419-223

Task 2 – e-mail template

To:	
Cc:	
Subject:	
	
Hollyfields Medical Practice Church Lane Marston 01752 313311	Manager Selina Sohal

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Marking & grading criteria

(Not to be shown to candidates until grading is complete)

Assignment number	4419-223
Version	Sample

Candidate name:	
Enrolment no:	
Signature:	
Date:	Pass / Merit / Distinction / Re-sit

Assessor name:	
Signature:	Date:

Internal Quality sampled by:	
Signature:	Date:

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Section A

Q no

- 1 Identify the **three** key features of face-to-face communication. (3 marks)
- Speaking, listening and non-verbal communication*
- 2 Give **four** examples of non-verbal communication which might act as a barrier when communicating face to face. (4 marks)
- Arms folded, looking down or away - avoiding eye contact, shuffling papers, frowning/brows furrowed, tapping pens, playing with hands/jewellery, yawning, sighing (not quite nonverbal but close enough)*
- 3 Describe **four** techniques an administrator can use to obtain information from patients in face-to-face situation. (4 marks)
- eg Collect basic facts first; speak clearly and précis; speak calmly with good pace; suitable volume to ensure confidentiality; use open questions to check feelings. Check facts by closed question eg what happened next. Check spellings carefully*
- 4 Describe **two** ways to promote a professional and friendly image when greeting patients. (2 marks)
- Smile warmly (but not too enthusiastically); maintain eye contact; focus on the visitor; nod to acknowledge; smart appearance; brief yourself on all systems and services; stop doing other tasks- concentrate*
- 5 Give **three** reasons why communication may be difficult in the following situation: (3 marks)
- A family member requests to see the doctor in the middle of morning surgery following the unexpected death of a close relative and patient of the surgery overnight.
- Any three: May be emotional eg shocked, upset, tearful. May be confused at what to do. May be showing signs of stress, exhaustion or lack of sleep. May be fearful or uncertain. May not be listening effectively and able to take in information. May be blaming self or angry at anyone around. May find it difficult to explain/express him/herself. May not have experienced this before.*
- 6 Describe **four** ways in which an administrator can help communication in the situation described in Q 5. (4 marks)
- Adopt a calm, reassuring tone. Speak carefully. Use the person's name/show that you recognise/acknowledge them. Show you understand the relationship to the deceased person. Speak to them/take them away from other people. Allow them time to think/respond and give them your full attention to show you are listening*

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

- 7 State what details should be included in a telephone message. (4 marks)
Caller's name, telephone number, 2 marks
Address, urgency, message for, message taken by, message itself, action required eg call back, date and time - any 2 for 2 marks
- 8 State **four** examples of how to ensure confidentiality when using the telephone. (4 marks)
Don't repeat or echo names
Don't spell difficult names – ask them to
Check who you are speaking to
Call the person back
Do not speak loudly – minimise the risk of being overheard
Do not volunteer extra information
Use a separate room if information is sensitive
Answerphone use – be sure you have the right number and are authorised to use it; never leave personal details – your name and number at most
- 9 Explain what is meant by unconditional positive regard, giving an example. (2 marks)
Showing respect to all individuals regardless of age; treating people equally and offering good service. 1 mark
Examples: irrespective of race, class, faith, sex, sexuality, disability and respecting different standards eg dress, personal hygiene, habits. 1 mark
- 10 Describe **three** ways of communicating effectively and sensitively with a person who is hearing impaired. (3 marks)
Use signing if you know it and they want to use it. Write things down.
Face them straight on. Speak carefully and slowly but stay natural as they might be lip reading. Smile and use eye contact
Don't distort your speech by speaking too slowly;
Don't shout
Don't repeat things excessively
- 11 Explain how understanding cultural differences can help communication with patients and visitors, using an example. (3 marks)
Being prepared for a range of situations so there is no hesitation or awkward communication and positive regard is maintained.

eg:
understanding dress code and why some visitors are covered – so eye contact is not easy; realising that the receptionist may be visible when the patient is not.

Naming systems can be confusing eg distinguishing male from female in the records system; using family name rather than DOB as an

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

identifier may be easier/what they have done in the past; be prepared to make mistakes and double check understanding

Knowing what language people speak – eg local groups in the community may have leaflets especially for them.

Understanding why women may be chaperoned; understanding why younger family members may be interpreters

Making bookings at the right time of day eg during religious festivals;

12 Identify the method of communication that should be used in each of the following situations and explain why: (4 marks)

a) To send a short message and a copy of an urgent report to a team of six people.

Email with attachment – sent immediately to multiple destinations

c) To contact the GP who is out on his rounds.

Pager or mobile phone – quick and easy; knows contact is required and who likely message sender is

Total (40 marks)

Pass = 20 marks

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Section B

Task 1

Headings correctly completed

1 mark

Subject heading

1 mark

Breakdown in communication - face to face or diversity points for this scenario - any three

- Lack of eye contact to acknowledge patient
- No initial greeting or attempt to establish contact/rapport to reassure patient – she felt she was just told to take a seat
- No obvious checking they have understood – giving attention and questioning can establish this quickly
- Nurse may have spoken too quickly or taken the patient by surprise after a long wait
- Surgery signage, nameplates, directions and instructions were unclear – should not have to ask another patient
- No monitoring of the waiting area to check for details or that everything is running smoothly
- Patient was not familiar with the routine or the layout of the surgery
- Patient might have been hard of hearing – receptionist and nurse would not have known

Ways to improve: any three

- Need for signage and clear directions
- Clarity of speech important when explaining/giving directions or instructions
- Suitable pace for speaking for all patients but also those with special needs
- Check understanding and summarise for the patient repeating key details
- Greet patients pleasantly and make eye contact to establish rapport quickly
- Maintain eye contact and face patients while speaking
- Speaking to a patient and making eye contact would help establish if the patient has particular communication needs
- Check for any signs of insecurity or needs – read body language
- Keep patients informed and up to date if there is a delay
- Be vigilant – check on who is still there after the initial reception
- Make allowances for patient's pace, age, other communication needs

6 marks

Expression/written communication skills:

Memo paragraphed – response to request followed by main body of information

1 mark

Accuracy: spelling, punctuation, grammar - to acceptable professional standard and no more than 3 different errors

1 mark

(Total 10 marks)

Level 2 Certificate/Diploma in Medical Administration

Communication Skills in a Medical Environment

4419-223

Task 2

Headings correctly completed to; subject	2 marks
Email message is logical purpose, main requirements, contact = best order	1 mark
Paragraphed	1 mark
Email key message details: display boards, best time, manager's contact details, brochure/information needed	4 marks
Accuracy - no more than 3 errors	1 mark
Courtesy/business-like tone	1 mark
(Total 10 marks)	

Task 3

Title	1 mark
Formatted like information sheet eg numbered or bulleted	1 mark
Sheet introduced or concluded eg Here are/given below are some hints; follow these for a professional image	1 mark
Accuracy - no more than 3 different errors of spelling	1 mark

Content:

- Clear identification of surgery (but not surgery barked in an officious way at patients)
- Clear polite greeting – what makes a suitable greeting
- Answer promptly – may give local procedure here
- Well-paced speech – deliberate, not too fast, try to stay natural
- Volume suitable – to be audible but maintain confidentiality
- Try not to swallow ends of words or sentences
- Make more effort with speech and voice because there are no visual clues
- Speech not too fast but not distorted by being too slow
- Smile in voice to convey interest and warmth
- Pen and paper to hand to record messages efficiently
- Check names and details carefully using a telephone alphabet to speed up communication
- Used suitable questions to collect facts/information efficiently eg what, when, who
- Repeat key details of bookings eg place, time, date but take care with confidentiality
- Ask permission to place callers on hold and apologise when returning to the caller
- Allow caller to finish call – check to see that that is everything they want to say
- Avoid unnecessary chatter as it may block the line – be pleasant and business-like
- End with a courtesy – thank the caller if appropriate and say goodbye (offer examples of how to end the call)
- Acknowledge the call (if appropriate) or end with a courtesy

Eight basic tips – with each point of technique explained 16 marks

(Total 20 marks)

**Level 2 Certificate/Diploma in Medical Administration
Communication Skills in a Medical Environment
4419-223**

Section B

Pass = 20 marks

Marks _____

Total marks achieved _____ (Pass / Merit / Distinction)

Candidate name:

Enrolment no:

Assessor name:

Date:

Assessor signature:

Grading criteria

Candidates must pass:
Section A – 50% **and** Section B – 50%

Overall grade:
Pass – 50% (40 marks)
Merit – 65% (52 marks)
Distinction - 75% (60 marks)