"Just flex your arm eh":
Communication on the Ward

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Nurses face many communicative challenges in their daily interactions on the ward. Persuading people to do all kinds of things – some of them painful or unpleasant - is just one of these challenges. Yet most ward nurses calmly manage a large number of patients, doctors, and visitors, as well as the wide-ranging daily demands these people make on them without giving any indication of the relentless ongoing stresses that their jobs inevitably entail.

A small team from Victoria University's Language in the Workplace Project recently tracked three nurses on the job in Wellington Hospital wards to try to get some idea of how they managed the minute-to-minute demands on their time and communication skills. In an earlier article we described some of the remarkable communicational skills these nurses demonstrated, including their ability to use humour to very good effect in interaction both with patients and doctors. Here we give another example of these nurses' communicative competence - the ways they got patients to co-operate and to do the things needed to assist with their recovery.

Our study showed that nurses spent at least as much time with patients chatting in sociable and friendly ways as they spent on more "medical matters". However, when they did need to get patients to do things, they usually selected very direct ways of expressing their intentions. The most direct way of giving an instruction is to use an imperative form: eg. flex your arm. But in many contexts imperatives are considered impolite, and so less direct, and usually longer, forms are frequently used, such as do you think you could flex your arm, or I need your arm to be flexed, or it would help if you could flex your arm.
To our surprise, the nurses in our study always used very direct forms of giving instructions and, in fact, they used an imperative, the most direct form, more than two thirds of the time. But in every case the imperative was softened in some way. Here are some examples of the kinds of instructions the nurses gave. The basic message (the imperative) is in bold. The rest of the words are skilfully used devices to soften the directness of the instruction.

- yeah just **flex your arm** a wee bit for me yeah
- **lift your arm up** a bit eh
- just **hold on to those** for a moment **OK**
- Casey just **pop this probe under you tongue** could you
- if you just **sit up** a bit perhaps
- just **let the nurse know** so she can collect it

The nurses' strategy of using a softened directive is an admirable way of conveying instructions in the ward context. The message is very clear since it is expressed directly, and usually as an imperative. But, by using a softening device, the nurse expresses the message in a way that very effectively makes patients feel comfortable and cared for.

Most nurses are almost certainly unaware of the interactional skills they demonstrate in making such choices, but from our perspective, the forms they select could not be bettered. They perfectly integrate the need to be clear and unambiguous with the nurse's concern to express respect and concern for the patient.

This is just one very small example of the kind of communication skills which effective nurses demonstrate all day every day. Over the next year, we aim to examine a range of areas in which nurses need to communicate with others, with the goal of assisting trainees to appreciate how good nurses manage verbal communication in the ward.
Information about the Language in the Workplace Project

Professor Janet Holmes is Director of the Wellington Language in the Workplace Project which is based at Victoria University. George Major was the research assistant for this the project. Other team members, and especially Maria Stubbe and Bernadette Vine, provided support and advice.