Communicating Effectively as a Clinical Instructor

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Allied health-care professionals have a unique opportunity to provide care to individuals in a variety of settings, and they need communication skills to be effective. Effective interpersonal communication provides clinical instructors (CIs) with a set of skills to create a positive learning environment for students. One challenge of an athletic training education program is combining a student's classroom knowledge and practical skills gained through clinical experience while working with the CI. This clinical experience takes place in an environment where interpersonal communication between the CI and student becomes imperative for effective learning. It is vital for the CI to use effective communication skills such as feedback in order to instruct the student in proper psychomotor, affective, and cognitive processes.

Interpersonal communication can be defined as the verbal or nonverbal interaction between two individuals that ideally involves an exchange of thoughts, ideas, and opinions (Spitzberg & Cupach, 1989). Using this definition, it is probable that the mentor relationship between CIs and students will have a strong emphasis on interpersonal communication. Furthermore, athletic training education programs are faced with the task of modifying the curriculum by including interpersonal communication skills for their CIs to meet new accreditation standards, such as training for approved clinical instructors. The purpose of this article is to explore areas of interpersonal communication, such as student interaction and feedback in athletic training education, and the importance of effective communication.

Communication Pathway

Communication between CIs and their students is critical for learning. In allied health, the communication pathway moves in two directions. The first is between the CI and the athlete; the second is between the CI and the student and is key for student achievement (Figure 1). Interpersonal communication in either pathway is necessary to provide high-quality patient care. This quality of patient care is at times based on how a CI retrieves information such as a family history from the athlete. For example, when a CI is performing an evaluation, the dialogue between the CI and athlete can affect the outcome of the assessment. If the CI does not communicate effectively, the athlete might not understand what he or she is asking.
Communication between CIs and students allows each person the opportunity to learn from the interaction, such as the dialogue that can occur during a feedback session. The research challenge is to better understand the relationship between CIs and students so that future certified athletic trainers will be effective in their respective positions.

**Clinical Instruction and Interpersonal Communication**

Clinical instruction is the thoughtful and proactive teaching of psychomotor skills and professional behaviors, with the primary focus on the student rather than the patient (Weidner & August, 1997). Based on this definition, CIs are responsible for providing an effective learning experience for students. An effective learning experience should include positive feedback and feedback for improvement. Jarski, Kulig, and Olson (1989) state that the role of the CI is an important element in allied health education. Clarifying the roles and responsibilities, qualities and characteristics, effective behaviors, and verbal communication skills of CIs are several ways to facilitate the transfer of knowledge and skill application from CI to student. Evaluation of the association between interpersonal communication and clinical instruction provides insight into the relationships between CIs and students. For example, giving feedback to students is a form of communication that allows them to acquire additional knowledge to help them refine their skills and behaviors.

**Communication**

As discussed earlier, the communication pathway moves in two directions, and each pathway depends on a relationship to reach mutual understanding. One way of reaching mutual understanding is through the dialogue of asking and answering questions.

The relationship between CIs and students can benefit from an investigation of the strengths and weaknesses of the pathway and how students learn from communication. Communication between CI and patient must occur in order for a student to observe and learn from this interaction. The learning process in this situation directly relates to the CI using a “real-life” example as a teaching tool. This real-life interaction is important to students’ education because it helps them transfer knowledge from the classroom to clinical application. The experiential learning cycle could be used to debrief students after this experience and help them glean insights from it (see the Harrelson and Leaver-Dunn article in this issue).

CIs provide a model of education that allows students to observe them in different settings and interactions with patients. Kalbfleisch and Bach (1998) looked at the mentor relationship between nurses and their students. They concluded that mentors convey supportive communication to their students by encouraging them to do their best, helping them gain additional training, and providing them with needed information. This positive feedback, or supportive communication, can build self-esteem and provide crucial information that can reduce students’ stress.