

GP MEDECONOMICS

HOW TO...

Hone your communication skills

Do not allow dislike or physical discomfort to stop you listening to the patient, says *Elizabeth Gates*

A female patient aged 55 presents with symptoms of lupus. Her GP tells her: 'The good news is that, some days you'll feel so ill, your daughter will have to look after you for a change, which might make her feel a bit better.'

There are reasons why that little speech goes over badly. For a start, the patient, an active post-menopausal woman, is shocked to learn she will experience disabling illness at a relatively young age. And she is also distressed by the prospect of being a burden to her daughter, who is also the GP's patient and a diagnosed chronic depressive.

Breaking bad news

With these ill-judged remarks, the GP has shattered this patient's trust and broken faith with her daughter. This is, quite clearly, not good doctor-patient relationship management.

As a GP, you need to be careful what you say and how you say it. Your patients may remember it for the rest of their lives. And in our patient-centred NHS, any lack of empathic communication concerns medical educators, researchers and managers.

Rigorous training

While reviewing its 2003 guidance, *Tomorrow's Doctors*, the GMC commissioned research relating in part to medical school graduates' communication skills. Published in December 2008, this revealed how some new doctors feel ill-prepared for complex communication tasks such as breaking bad news to patients or dealing with distressed and/or angry relatives.

GPs are generally thought to be in a much stronger position. GPC negotiator Dr Beth McCarron-Nash says: 'GPs are rigorously trained in communication. And there is nothing like experience along with the opportunity to reflect on learning needs existing on a daily basis.'

The RCGP also recognises, in its core statement for GP training, that effective communication oils the wheels of the GP-patient relationship.

Common complaints

According to RCGP chairman and inner-city Birmingham GP



Empathic listening is distinguished by signals including eye contact and positive body language

COMMUNICATION BARRIERS

- Fatigue.
- Stress.
- Environment (stuffy room, feeling cold, noise, etc).
- Personal animosity (disliking the individual who is consulting you).
- Prejudice (for example, the next appointment is a patient who blusters annoyingly).
- Pre-judgment (for example, 'This patient has told me the same things several times before').

Professor Steve Field: 'Good communication skills are essential for GPs. Most complaints about GPs centre on failures in communication rather than clinical diagnostics, for example.'

The RCGP has been working on communication skills for decades, adds Professor Field, so GPs' communication skills surpass those of all other doctors.

Empathic communication is also an effective management tool for creating good interpersonal relationships at all levels of any organisation. GPs are both managed and managers, dealing

with colleagues, practice staff, local hospitals and primary care organisation staff.

Team management

The GP is often responsible for the smooth functioning of multi-disciplinary teams. The success of this is largely dependent on the quality of their communication skills.

If communication skills within a team are poor, unhealthy relationships result. Bullying is an example of this, tending to be produced by a high blame/low trust organisational culture.

Secondary care interface

As the GMC guidance *Management for Doctors* recognises, GP managers are also responsible for what happens at the interface between primary and secondary care. 'Although current communication systems are on the whole good, there are some gaps,' warns Dr McCarron-Nash.

Communication systems can break down when GPs are trying to keep track of patient referrals to consultants or maintain links with healthcare team members relocated within the community, she explains.

'As individual clinicians, we all have room for improvement,' she says.

Communication basics

The ability to communicate well requires a facility for reading, writing, speaking and listening. Listening, for example, is a communication skill that takes practice to become good at. You may find yourself listening at several

levels, some more effective than others.

Most GPs at some point will listen to the patient while simultaneously a voice in their head is saying 'I'm too busy for this' and 'I'm late for my next patient' and 'My partner wants to speak to me' and 'I wonder what that symptom means'.

This mind chatter may drown out the patient's remarks and you could miss something important. But even though a clinically significant remark may be made at an inconvenient moment (according to some GPs, usually on the patient's way out), you are obliged to deal with it. If not, a court case or iatrogenic disease may follow.

Empathic listening

A better way is empathic listening, which centres on the patient. This form of listening can clarify the issue, make hearer and speaker into partners in healthcare and promote creative problem-solving.

You will know it is happening if you find yourself leaning forward and seeking (non-threatening) eye contact. You will recognise not just what is being said and not being said, but also the significance of how it is said. You may well encourage the patient to make another appointment for further exploration.

But in a busy surgery you may also find yourself distracted by physical barriers such as fatigue or stress, or by psychological barriers such as not liking the patient or feeling they have gone over the same ground before.

If your attention is straying, try asking yourself: 'What makes this case different?'

● *Ms Gates provides coaching on how to enhance personal/professional relationships through good communication, www.lonelyfurrowcompany.com*

● *GPs with communication difficulties can self-refer to the Interactive Studies Unit, Primary Care Clinical Sciences, School of Health & Population Sciences, University of Birmingham, www.isu.bham.ac.uk*