

Communication and building professional relationships

Communication – effective and ineffective – is a major factor in determining whether a relationship is successful or not. Part of a GP supervisor’s role is to relax the needless yet present fears that the learner has. Sometimes they are upfront about their fears, sometimes GP supervisors have to listen deeply.

Good communication

There are many thoughts on what factors comprise good communication and what makes a good communicator. In a clinical and education setting between a GP supervisor and learner, these factors may broadly be narrowed down to:

- **Specific** – What is being communicated? Who should it be directed to? This is particularly important for GP supervisors when giving feedback and directing learners.
- **Two-way** – Good communication is not one person ‘telling’ another person something. Both the GP supervisor and learner need the opportunity to respond to each other.
- **Owned** – It needs to be clear who the person or organisation delivering the message is.

Listening

Ever had a conversation with someone who didn’t make eye contact, kept interrupting or rushed you to finish? If so, you probably felt like what you were trying to tell them didn’t really get through.

Communication is often only thought about in terms of messages that are given out. But the information we take in is just as important to enabling us to communicate well and build relationships.

TABLE 1: EXAMPLES OF SPECIFIC, TWO-WAY AND OWNED COMMUNICATION

	Good communication	Poor communication
Specific	“Can you please email me your presentation on diabetes management by COB Wednesday? We are at the hospital on Thursday and I need time to review it before you present to the team on Friday.”	“I’ll need to see that presentation before the meeting.”
Two-way	“Melanie on the front desk says Mrs Peterson wasn’t given a referral for additional blood work. What was your understanding of what was meant to happen?”	“Mrs Peterson needs to be sent for additional blood work.”
Owned	“The other doctors may have their own preferences, but I prefer you to come and knock on my door rather than phone through if you have a question.”	“If you have a question, just knock on a door.”



Active listening

Active listening is when the listener feeds back to the speaker to confirm that both parties have a mutual understanding of a situation. For GP supervisors, this skill is particularly important when providing training, counselling and conflict resolution to a learner.

Tips for active listening:

- Make sure you are free from potential interruptions (if possible) – email, telephone, mobile phone, computer.
- Turn to face the speaker front on and make sure you can both see each other clearly
- Maintain eye contact.
- Repeat, paraphrase and reflect on what the speaker is saying (see Table 2).
- Use simple physical cues nodding, facial expressions and short verbal responses (“I see”, “yes, go on”, “right”...etc) without interrupting the speaker to confirm you are listening.
- Ask short questions to prompt clarification by the speaker (“When did this happen?”, “Was it a double appointment?”, “Had she mentioned this before?”).

TABLE 2: ACTIVE LISTENING EXAMPLES

<p>Repeat points made by the speaker, using exactly the same words they used to show that you heard what they said.</p>	<p>“I’m hearing that you get “uptight” and “on-edge” when you see Mr Clark because he gets right “in your face.”</p>
<p>Paraphrase using similar language and words used by the speaker, but put into your words to show a mutual agreement of what they said.</p>	<p>“So, is it fair to say you feel nervous and anxious because you feel that Mr Clark encroaches on your personal space?”</p>
<p>Reflect on what they have said and attempt to understand it and respond appropriately.</p>	<p>“Having Mr Clark as your patient is causing you a degree of stress and discomfort. Apart from him encroaching on your personal space, do you think there are any other reasons you feel this way? Let’s talk about that and look at some strategies for addressing the personal space issue.”</p>

