

## Discovers patient's psycho-social context

**Green** – Takes a comprehensive history of the patient's psychological and social circumstances

**Red** – Makes a minimal or non-existent assessment of the patient's psychological and social circumstances

**Green** – Assesses any impact of the patient's symptoms on their psycho-social functioning

**Red** – Does not assess, or assesses in a very cursory way, the impact of the patient's symptoms on their psycho-social functioning

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### About this task

Obtaining information about psycho-social context is an essential data gathering task in the GP consultation. It is also very important to enable the sharing of *patient-centred* management plans.

Some trainees do not ask about psycho-social context at all, and some ask about it in a mechanistic way, not realising how important this information is for the management part of the consultation, and for the overall success of the consultation.

It's important to be able to do three things:

- Discover the relevant psycho-social information from the patient - this includes aspects of work life and home life
- Discover the impact of the problem on patient's work and home life
- Discover the way that home and work life impacts on the presenting problem

### Audio consultations

Patients may be reluctant to share psycho-social information over the phone - they may feel more time pressured than in a face-to-face consultation and may be reluctant to waste (as they see it) the doctor's time. So you need to be prepared to ask about their home and work environment and the impact of their symptoms on their life.

Audio only can also be an advantage however, when it comes to discussing potentially sensitive issues such as a relationship or sexual history. Sometimes patients will feel more able to disclose this type of information when they are NOT face to face.

Audio allows you to write down information as the patient speaks, without being intrusive or disrespectful. This allows the doctor to recall psycho-social information for use later in the consultation.

### Educational Activities

**Activity 1:** Review a series of your consultations and write down how often you a) ask about psychosocial context and b) how often you use this information later in the consultation, particularly when talking about the management plan.

**Activity 2:** Practice the skill of remembering information about psychosocial context and storing it for use later in the consultation

**Activity 3:** Now devote some consultations where you specifically ensure that

a) you ask about psychosocial information

b) you use that information to inform the management plan. Discuss any change by reviewing videos with your trainer.

## Audio consultations

Review a series of your audio consultations and any associated paperwork. In how many of these consultations do you: a) ask about the patient's psycho-social situation? b) use this information later in the consultation? How does this success rate compare with your success rate in face-to-face consultations?

Do you find writing down psycho-social information helps you to use this information more later on in the consultation? Repeat and practice this process and see if you start to ask more questions about psycho-social context? Do you think it helps?

## Reflective Exercises

**Exercise 1:** If you often *do not* ask about psychosocial context - ask yourself why? Possible explanations are:

- You get absorbed in the 'medical' part of the consultation and either forget about psychosocial questions or feel awkward going back and asking. It is essential you do not ask about psychosocial context in a 'tick box' way as this impairs rapport. This is one reason why it is important to ask open questions - using open questions first allows a conversation where this information can be discovered in a more natural way. (Refer to the Toolkit section '*Uses open questions appropriately*')
- You don't understand the importance of exploring this area. Please see above, if you think of this as a 'tick box' you will not discover enough information about the patient's life to share management options.
- Are you anxious about how to ask the question? or that doing so might 'open a can of worms' or irritate the patient? Discuss with your trainer.

**Exercise 2:** If you often don't use the information about psychosocial context, ask yourself why? Discuss with your trainer. Possible answers are:

- You forget the information that you have discovered about psychosocial context so you can't use it later in the consultation
- You lack the skill to introduce the information later in the consultation
- You are already overwhelmed with the complexities of sharing diagnosis and management plan

## Related Interpersonal skills

Practicing and developing the following interpersonal skills will allow the task of '*Discovers patient's psycho-social context*' to be achieved more effectively:

- Generates rapport
- Uses open questions appropriately
- Clarifies and explores cues offered
- Listens and shows curiosity

- Shares and uses ICE in plan
- Negotiates and uses psycho-social information in plan
- Supports in decision making

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