North West England **Consultation Toolkit** 

# Listens and shows curiosity

**Green** – Shows curiosity and a non-judgmental approach about the presenting problem, using active listening and a real desire to understand the patient's perspective

**Red** – Does not demonstrate curiosity about the presenting problem and shows little desire to understand the patient's perspective

## About this skill

Curiosity is defined as 'the strong desire to know or learn something'. Being curious and interested in the patient is key to discovering the reason for their presentation and their 'illness-behaviour' or in other words, what motivates and is behind a patient's response to illness or problem.

A curious approach to a patient's illness and life in the GP consultation, is particularly important for the following reasons:

- It helps with rapport & understanding of the patients' behaviours
- It improves the identification of ICE and cues and psychosocial information
- It helps the diagnostic process
- It helps the trainee to tailor a management plan to the specific needs of the patient

'Active listening' describes the ability of the doctor to show interest in the patient's contribution and is closely related to the skill of '*Generates rapport*' and the task of '*Identifies cues*'. By listening and facilitating a patient's contribution, the doctor can show curiosity. Good listening skills also allow you to understand the patient's perspective and treat the patient with sensitivity. Listening is not a passive process and requires concentration and careful attention to what the patient is saying.

### Audio consultations

Active listening is much more difficult without visual cues of encouragement from the doctor such as head nodding and smiling, eye contact and open body posture.

The doctor must therefore rely far more on using open questions, or phrases to encourage the patient. In order to remain curious, the doctor must work harder to explore any cues offered and verbalise why a line of questioning is used. It is also harder for the doctor to use silence to encourage the patient as this may be interpreted as a lack of interest, rather than a pause to allow the patient space to talk.

## **Educational Activities**

#### Listening

Activity 1: Watch a series of videos or listen to some audio consultations, to see how often you repeat the same question, or suggest management plans that the patient has already expressed concern about.

Activity 2: Poor listening skills often result in missing cues - so do the "cues" exercise (in the section on

'Identifying cues') with your trainer.

Activity 3: Now conduct a series of consultations where you try to avoid these problems - check later with your trainers that you are listening better.

#### Curiosity

**Activity 1:** Watch several of your consultations with your trainer and ask your trainer to tell you which additional bits of information about the patient they would want to know (these will be areas that the trainer was curious about, but you as the trainee were not)

Reflect on the value that this extra information might give you in managing the patient's problems

Activity 2: Try expanding your curiosity about the patient's life and illness in a series of consultations

Now ask yourself if it produces useful extra information for you? If it does not - why not? (You may be asking about areas that do not impinge on the consultation at all!)

#### Audio consultations

Listen to a series of your audio consultations and try and identify if there were any missed opportunities to be curious about the patient's contributions. How did you use silence, if at all? Discuss with your trainer the value of curiosity and how he/she remains curious during telephone conversations. Try using phrases such as "I'm curious as to why you think that..." "Or I'm really interested to hear that, talk me through your thoughts".

### **Related tasks**

Practicing and developing the skill of 'Listens and shows curiosity' will allow you to achieve the following tasks more effectively:

- Opens consultation and explores problem
- Discovers patient's psycho-social context
- Identifies cues
- Discovers patient's ICE

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