

## Performance Keys for Competency In - LISTENING SKILLS



### Active Listening

**Active listening** is nonverbal demonstration that the clinician is paying attention to the patient and to the patient's story. It includes appropriate eye contact, body posture and gestures; it encompasses effective note taking, organized pacing of the interview, and attentive silence to allow the patient time to gather thoughts and respond.

Active listening is a skill showing that the clinician is both receptive to and responsive to the patient. It is the 3-dimensional demonstration of engagement with the patient. As such, it cannot be choreographed ahead of time, and instead must be in constant creation with the dynamics of the interview. The underlying message of active listening is "I am here for you."

Active listening is not "preparing to speak".

#### More Effective

Displays positive habits of nonverbal communication

Effective eye contact. Looks the patient "in the eye" (but be aware that in some cultures this can be perceived as being too aggressive).

Appropriate eye contact, one that seems open when listening and narrowed when preparing to speak

Appropriate head nodding, one that indicates confirmation and validation of what the patient is saying

Appropriate leaning forward, one that invites the patient to speak and seems to open the channels of communication (a bridging motion)

#### Less Effective

Displays poor habits of nonverbal communication

Lack of nonverbal communication (rigid, lack of affect, robot-like)

No or poor eye contact, looking away from the patient

Inappropriate eye contact, one that seems narrowed when the dental student is listening and open when the dental student is speaking

No affirmative head nodding

Leaning away from the patient

Looks at the chart while the patient is speaking

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### Reflective Listening

**Reflective Listening** is verbal demonstration that the clinician is paying attention to the patient and to the patient's story. It includes repetition, paraphrasing and summarizing of the patient's statements; it encompasses active use of the patient's language, and it attempts to highlight significant statements from the patient.

Reflective listening then is more than simple reflection of patient utterances. It includes the reflective capacity of the clinician to perceive the plot of the patient's story. It is the skill that demonstrates understanding of the patient. It creates emphasis on various aspects of the patient's story and collects these aspects to form a perspective: a view of the patient. As necessary, this view is modified by patient input until both the clinician and the patient feel that an appropriate image of the patient has been achieved. In its dynamic process, reflective listening establishes a partnership.

The underlying message of reflective listening is "I hear you" and "We are working together."

#### More Effective

##### *To clarify, or to create emphasis*

Repeating patient statements  
Paraphrasing patient statements

##### *To establish the patient's story and to validate the patient*

Summarizing the patient's statements  
Actively using the patient's language in the above techniques  
Actively engaging in a dialogue with the patient

#### Less Effective

##### *To clarify, or to create emphasis*

With very few "output" statements from the patient, the clinician interrupts the patient and takes over the interview

"I see that..."  
"I understand that"  
"It's clear that"  
"It says in the chart that"  
"According to your medical and dental history..."  
Repeating *clinician* statements  
Paraphrasing *clinician* statements

##### *To establish the patient's story and to validate the patient*

With very few output statements from the patient, making assumptions about the patient and determining conclusions from those assumptions  
Taking a fragment of the conversation and running with it: If this, then that, so here!  
Demonstrating lack of active inquiry  
Summarizing the *clinician's* statements  
Actively using the *clinician's* language and/or jargon  
Active engaging in a monologue with the patient

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### Empathic Listening

**Empathic Listening** is the skill that demonstrates attention to the emotional aspects of the patient's story, not just the facts of the matter. It includes intuitive cueing of feelings from the patient's verbal and nonverbal messages, labeling of those feelings by mutual interaction of the clinician and the patient, and establishing comprehension of the effect of these emotions on patient alliance (often referred to as patient compliance). In other words, developing an emotional understanding of the patient is an effective tool in diagnosis and treatment planning. (Ex. An elderly woman presents as very stressed over the loss of a third tooth in the past 2 months, and wonders whether a partial will be "worth it.").

Empathic listening actively acknowledges and accepts that the concerns, feelings, perceptions, and attitudes of the patient are real and important. It validates the patient through caring affect and affirming words. It is nonjudgmental.

The underlying message of empathic listening is "I understand" and "We will work together based on this understanding."

#### More Effective

##### Verbal acknowledgement of patient affect

"You seem overwhelmed by all this information."

"You seem worried about your oral health."

"I notice you look upset when we talk about the number of appointments necessary to complete your treatment."

"I see that you're concerned about your symptoms and what they might mean."

*It is not necessary to be right when offering the observation, just approximately on target. Because such an observation is intended as a lead, ensuing discussion with the patient will provide clarification. These statements are meant to be spoken as "leads", invitations for the patient to speak, not as declarations of the clinician's opinions.*

##### Any statement that indicates valuing of and support for the patient's perspective.

"I see what you mean."

"I hear what you're saying."

"I understand."

"I believe I can be helpful in treating your condition."

"I appreciate everything you're already doing to deal with this condition."

"(Being specific here provides positive reinforcement for patient's health promoting behaviors.)"

##### Nonjudgmental attitude

*Caring nonverbal behavior (ex. Eye contact, leaning forward, compassionate touch, concerned facial expressions)*

#### Less Effective

##### Ignoring all affect

Discounting affect ("There's nothing to be worried, upset, concerned, overwhelmed about.")

Making authoritative declarations of the patient's affect (E.g., You certainly are the worrying type.)

Inattentive silence while the patient is speaking.

Attentive silence, but no verbal acknowledgement of the patient's perspective.

Stony silence followed by the expression of the attitude "Now let me tell you what I think."

Judgmental facial expressions

##### Any statement that indicates dismissal of the patient's perspective.

No statements of concern

No statements of empathy

No statements of a willingness to help

No positive reinforcement for patient's health promoting behaviors

##### Judgmental attitude

*Nonverbal behavior indicating indifference or even rejection*

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<b>Scoring Key</b>	
<b>Strongly agree (Skillfully done)</b>	<ul style="list-style-type: none"> <li>• <b>Consistent use of More Effective behaviors</b></li> <li>• <b>Absence of Less Effective behaviors</b></li> </ul>
<b>Agree (Adequately done)</b>	<ul style="list-style-type: none"> <li>• <b>A preponderance of More Effective behaviors over Less Effective behaviors</b></li> </ul>
<b>Neutral</b>	<ul style="list-style-type: none"> <li>• <b>Approximately equal use of More Effective behaviors and Less Effective behaviors</b></li> </ul>
<b>Disagree</b>	<ul style="list-style-type: none"> <li>• <b>A preponderance of Less Effective behaviors over More Effective behaviors</b></li> </ul>
<b>Strongly disagree (Needs improvement)</b>	<ul style="list-style-type: none"> <li>• <b>Absence of More Effective behaviors</b></li> <li>• <b>Consistent use of Less Effective behaviors</b></li> </ul>
<b>Not Done</b>	

## Observation Suggestions

Focus on generating observations of the **demonstration** of listening skills with less focus on the lack of demonstration. This method will provide a coaching process for skill acquisition.

Consider the effect of these skills on the patient. I.E. What do you observe in the patient's behavior when these skills are demonstrated?

### Active Listening Skills

*Nonverbal* demonstration that the student is listening to the patient

Consider:

- Eye contact
- Head nodding
- Body Posture

*Is engagement with the patient demonstrated?*

### Reflective Listening Skills

*Verbal* demonstration that the student is listening to the patient's story

Consider:

- Repeating the patient's statements
- Paraphrasing the patient's statements
- Summarizing the patient's statements
- Using the patient's language in the above techniques
- Engaging in a dialogue with the patient by encouraging the patient to speak through the use of open-ended questions

*Is comprehension of the patient's story demonstrated?*

### Empathic Listening Skills

*Nonverbal* and *Verbal* demonstration of attention to the emotional aspects of the patient's story

Consider:

- Nonverbal messages
- Verbal acknowledgement of the patient's feelings
- Demonstration of support, caring, or compassion for the patient's concerns
- Nonjudgmental attitude

*Is understanding of the patient's feelings demonstrated?*

### Ethical Issues

When asked for a second opinion, what ethical behavior did the student demonstrate?

## **Active Listening Skills**

## **Reflective Listening Skills**

## **Empathic Listening Skills**

## **Ethical Issues**

## **Acknowledgement Bibliography**

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