

Radcliffe Primary Care

**Communication
and the Manager's Job**

Annie Phillips

Communication and the Manager's Job

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Foreword

In this book Annie Phillips takes a comprehensive look at ways of improving communication and management in general practice. She identifies the skills required of a practice manager and as any reader working in general practice knows, the job is more complex than that of the average manager working in the commercial world. It involves taking responsibility for not just one aspect of the business – for that is what general practice has become – but for everything, the finances, the premises, the staff, effective use of information technology and liaison with other health professionals locally and regionally.

There are many sound management practices described in this book that should help anyone trying to cope with the complexities of practice management. The author poses questions and sets exercises throughout the book that provide the reader with an opportunity to check the relevance of certain topics to their own particular experience.

In the chapter on team leadership, Annie Phillips mentions Belbin, quoted in most books on management, for his theory of the different types of people required to constitute an effective team. Having read this book, practice managers will no doubt be reminded when employing staff that effective teams are usually made up of complementary types of people, rather than similar ones. At least the word 'plant' should evoke thoughts of 'creative innovator' rather than 'garden organism' in future.

This book should be on the shelf in every practice, serving as a handy reference point for managers when undertaking staff appraisal, mediating in partnership disputes or improving communication between staff and patients.

Lyn Longridge
November 2001

About the author

Annie Phillips has written professionally about health and health management since she qualified as a speech and language therapist in 1978. She has over 20 years' NHS experience in primary and secondary care as a clinician and manager.

Her 10 years as a speech and language therapist led to the research and publication of an international dysphasia/dementia screening test, presented at the 1986 British Aphasiology Conference. She has won various prizes and awards for her subsequent work, and in the 1990s she was a finalist in the *Medeconomics'* Good Management Awards, and regional winner in a national British Institute of Management competition on change management.

She worked as a practice and fund manager for a five-partner training practice in central Brighton from 1989 to 1998; from then as an independent health advisor, trainer, and management consultant to general practice.

Throughout her career she has written extensively for the therapy, GP and management press. She currently writes on contemporary management issues for a range of publications, including the *Health Service Journal*, *Community Care*, *Doctor*, *Primary Care Manager* and Croner Publications, with a focus on healthcare politics and human resource management.

As a management consultant, her interest is in organisational analysis and the development of healthy organisations, with a focus on finding ways to manage stresses and conflicts, understanding and alleviating dysfunctional communication and developing effective management strategies.

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Part one

A broad look at communication



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CHAPTER 1

The foundations of good communication

What are communication skills and why is it important to learn about them? We know that communication skills involve:

- words (written or spoken)
- gestures (body language)
- delivery (tone of voice, pitch, timing)
- symbols
- listening.

Understanding communication is important, as the ability to communicate well is directly related to our ability to be successful – our happiness, relationships and personal growth all depend on effective communication. Good communication is especially important for those in leadership positions as it assists them to:

- make discoveries about themselves and others
- solve problems and develop new skills
- manage conflict, emotion and anger
- understand other people and how they communicate
- self-manage, question their position, adapt, change and grow.

Others appreciate the listening ability, clarity, and honesty of good communicators. Communication is a two-way process which involves sharing information. It is essential for getting along with others and getting things done.

This book's aim is to take those managing within primary care through all these functions. The aim is to improve and enhance the reader's interpersonal communication skills so that they become more effective listeners, responding skillfully and sensitively to the challenges modern healthcare presents us with.

The biggest complaint in general practice is poor communication. To avoid this, those holding leadership responsibilities need to be multi-skilled. To be an effective team leader, you need to share ideas, concerns, suggestions and

other information with those on your team, your superiors, and people outside your organisation. You may need to:

- give work assignments or instructions
- make or discuss changes in procedures
- respond to enquiries
- tell people how they are doing
- solicit ideas, thoughts or information.

The interpersonal communication skills needed in management are wide-based, functional or process-orientated and include such things as:

- motivating/leading/listening/instructing/organising
- writing/presenting/chairing/counselling
- facilitating/supervising/delegating/interviewing/appraising.

Each process has its own skill, and each skill can be learnt. Communication is complex. It involves:

- a message: statements, questions, commands or warnings
- a language: words, symbols and gestures make up the elements of language
- a system: communication occurs through touch, silence, voice, gestures, writing.

The way something is communicated – its delivery – tells us a lot about the content. Facial expressions, such as smiles and frowns, play a part in communication, as do:

- timing and speed: communication is affected when people talk too quickly, cut one another off, or wait too long to bring up an issue
- body language: clenched fists, eye contact, head position
- word choice: will tell us if the situation is public or private, doubtful or hopeful, formal or informal, serious or relaxed
- tone of voice: feelings such as sorrow, pride, anger, impatience, can all be expressed.

Words and symbols have different meanings among different cultures. Humour may help or hinder; gestures can be misinterpreted. We can never assume our communication is understood or accepted by others; good communicators check they have been understood.

Why is communication so important?

Many of those working in healthcare have lost sight of the importance of communication – there is so much to do, and so little time to accomplish what is needed. When stretched, it seems quicker and easier to get on with a job, and keeping people informed feels difficult because there is so much to do and tell.

Those leading in healthcare need to make a commitment to employee communication. Not to inform is to patronise – if we assume the staff do not need to know, they will feel undervalued and disrespected. Communication has to be two-way – all employees have views, good ideas or suggestions on alternative ways of working; just ask and be prepared to listen. Other people often have a clear outside vision on a project, whereas those working daily on the practicalities and details may lose sight of its simplicity. Managers and GPs do not always have the answers. Of course, if we accept that visibility and openness are important, we need to recognise that mistakes will be aired in the same way as triumphs.

The process of communication

Consider some of the functions of communication in more detail. Communication is multi-directional – it can be impersonal, often written, directional and one-way.

- It can be face-to-face.
- It can be outward – towards the patients or external organisations such as the employing trust.
- It can also go ‘up’ from employees to employer.
- It may go sideways – if you utilise team work.
- It may go ‘down’ from employer to employee.

To communicate successfully people need skills which can be learned or applied. Different types of meeting, for example, have different functions. Each one may utilise a different set of skills – chairing, facilitating, presenting, team-building, instructing, etc.

Communication may be defined as ‘the exchange of information between a sender and a receiver with the inference of meaning’. Thus an individual’s personality, history, motivation and personal development all affect the way s/he hears, or receives, information transmitted by another – these all affect communication accuracy. Some other less visible factors also have a big influence.

- Organisational structure.
- Interpersonal relationships.
- Incomplete information.

Organisational structure

Communication is a central organisational process. The exchange of information between different participants links the various subsystems of the organisation, and builds and reinforces interdependence between them.

General practice is hierarchical, with superiors (the medics) and subordinates (the staff). This arrangement can create communication difficulties, with the lower status members – those without much power – suppressing unfavourable information because they worry that their superiors may regard them unfavourably if they pass on negative material. Thus, less powerful members only communicate what they feel you want to hear. Depending where you fit into this hierarchy, you may or may not be party to these negative comments. If you are a manager who sees the partners as your peers, you will feel happier passing on 'bad' news to them. However, you then may not hear all you need to from your subordinates. On the other hand, if you stand with the staff, and represent their voice, you may find it difficult to stand your ground with the doctors. A skilled communicator will fit somewhere between, and gain respect from both.

The larger and more specialised your work groups are within your organisation, the greater the possibilities for misunderstanding, as the employees in different teams have access to more, and very different, information. This discourages sharing and increases the potential for misunderstandings. Differences in power, goals and expertise between departments (finance, personnel, secretarial, reception, management, nursing) may make communication difficult and give room for discord, gossip and backbiting to flourish.

Interpersonal relationships

The relationship between the two people communicating also affects the accuracy with which messages are given and received. An important factor in this is how much **trust** there is between the two – when people trust each other communication tends to be more accurate and open. When the receiver of the message has considerable **influence** over the sender, the communication may be modified or guarded – it would make sense that someone seeking promotion would modify their message in a way that enhances their position or personal development. **Group norms**, or expected standards of behaviour, may limit the amount or type of information people feel they can legitimately discuss. The type and content of communication also differs in different contexts – the relaxed chat of the staff room differs from the more formal discussion in meetings.

Incomplete information

This is particularly relevant when an employee's performance is being appraised or discussed. If relying on only one source of information when judging performance, persistent biases are likely to occur.

So, what are some of the barriers to effective communication and how can we make ourselves heard above these?

Barriers to effective communication

Lack of feedback

If we communicate something without any acknowledgement that we have been heard and understood, we cannot assume that our message has been understood. Managers often give large quantities of information and direction without provision or opportunity for their staff to indicate that they have understood. There are various reasons why this happens.

- Lack of trust in the other's ability to contribute.
- Lack of personal confidence ('They might think I don't know the answer').
- An assumption that people have the same goals, ideals and motivations as ourselves ('But it's obvious I meant ...').
- Poor communication skills – where two-way communication is not respected.

Everyone has a responsibility to encourage two-way communication. If the staff fail to inform their boss about their needs and values, or withhold information because they distrust him or her or are antagonistic, the boss has a responsibility to redefine the trust. Communication should be as open as possible, and one way this can be achieved is to create a supportive communication climate where people feel able to talk without feeling judged.

Managers need to avoid the following behaviours:

- *Ridicule, lecturing*: being dismissive, ordering. **Instead**, communicate respectfully.
- *Evaluating*: when we behave defensively we judge – we blame, call for different behaviour, praise. **Instead**, create a supportive environment by giving and asking for information – behave more neutrally.
- *Controlling*: when we attempt to persuade others by imposing our personal attitudes on them. **Instead**, collaborate with your colleague by jointly defining and solving the problem.
- *Strategic communication*: when we attempt to manipulate others. **Instead**, deal with them more spontaneously, openly and without deception.
- *Uncaring behaviour*. **Instead**, demonstrate your concern, show empathy by identifying with your colleague's position.
- *Superiority*. **Instead**, show your respect for others by de-emphasising the status and power differences.
- *Certainty*: being dogmatic, wanting to win rather than solve the problem. **Instead**, show your openness to new information and interpretations, postpone taking sides.

Noise

Interference that occurs during the communication process ('noise') may be audible or inaudible. The presence of a silent third party during a conversation may act as noise in that it distracts the receiver from hearing what the speaker says. The receiver's pre-occupation with an unrelated problem can have the same effect.

The use of language

The choice of words or language in which a sender encodes a message will influence the quality of communication. Because language is an abstract representation of a phenomenon, there is room for interpretation and distortion of the meaning.

Misunderstandings can arise through using words that are too abstract, too general or too vague. Jargon and technical terms frequently create misunderstanding, as does the use of slang or colloquialisms.

Listening deficiencies

The quality of listening by the receiver may help or hurt communication. Effective communication calls for active listening by individuals. Active listening requires the receiver to listen for the total meaning a person conveys, to try to determine both the content of the message and the feelings underlying it. Active listening also calls for noting all the cues, both verbal and non-verbal, in communication.

Improve your ability to be heard

Healthy organisations seem to be strongly influenced by humanistic psychology, where openness, trust and belief in individual growth are paramount. Build an organisational framework that is humanitarian, where the management style is open, reflective, listening and interested. For this to happen, be prepared to learn how to communicate well. Eighty-five percent of communication is non-verbal, communicated in gestures, facial expression and tone of voice.

How do you communicate verbally at work?

Through writing – memos, reports? Do you communicate in groups? In meetings? On the telephone?

Note down why you think there may be crossed wires in each situation.

In any communication:

- both sides need to be interested and involved
- both sides need to be willing to be open and honest
- both sides need to feel heard and understood
- the atmosphere needs to be comfortable
- even if the talking is difficult, the important things get said.

Conversations have to make a difference. Something useful or satisfying usually happens as a result.

To ensure effective communication:

- devote the time
- share
- keep in regular contact
- be assertive
- be specific
- be clear
- be open
- be prepared to negotiate
- value difference
- own your own thoughts and feelings: use 'I' instead of 'you', describe your feelings instead of the other person's behaviour, e.g. 'I feel angry because I don't like having to start all over again' instead of 'I feel angry when you are late'
- respect and recognise feelings
- don't assume
- repeat the message if misunderstood
- compromise if it is reasonable to do so

Table 1.1¹

<i>Good communication</i>	<i>Poor communication</i>
Working together in partnership	Scoring points to win
Co-operating, nurturing	Being competitive
Making feelings clear	Hiding feelings, being defensive
Explaining needs	Applying pressure, bullying
Sharing the airtime	Dominating the airtime
Responding sensitively	Showing insensitive behaviour
Understanding everyone has a different inner world, and different motivations and experiences	Wanting everyone to be like you, making assumptions
Understanding why the conversation is taking place	Misunderstanding why the conversation is taking place
Being open to anything	Attacking or being threatening
Being interested by difference	Patronising or putting down
Listening and watching	Ignoring, not paying attention
Advising and supporting	Lecturing, being critical or judgemental
Knowing yourself, and being true to self	Constructing a false public persona
Valuing your experience	Giving unwanted advice, preaching
Respecting and valuing your views	Trivialising views
Being clear, staying on track	Rambling
Reflecting back to show understanding, responding with interest	Always missing the point
Welcoming difficulties and conflict as opportunities to learn	Avoiding conflict
Checking that it is a good time to talk	Barging in regardless
Being open-minded	Being closed-minded
Balancing questions with talking about self	Asking too many questions, interrogating
Allowing plenty of time	Being impatient
Cutting the tale up into bite-size chunks	Dumping too much information
Giving people the opportunity to respond	Overloading or boring
Encouraging the flow	Avoiding
Prompting	Taking up all the room
Asking	Telling

- listen to the other person
- accept responsibility
- choose the right moment
- summarise
- keep an open mind
- show you understand, and say when you don't
- don't give advice unless asked for
- base any feedback on facts
- sandwich a negative between two positives
- express your feelings
- innovate: take chances and risks
- accept criticism when appropriate

- prompt others to express themselves honestly
- empower yourself
- be yourself.

In summary, good communicators:

- read the situation
- engage attention
- make the meaning clear
- tell the story
- look for clues
- check understanding
- say what is on their mind
- summarise.

Make a note of the good and poor communicators in your practice.

Non-verbal communication

How you dress, the apparent wealth and status reflected in your surroundings, your use of time and space could clarify the meaning of verbal communication or increase its impact.

Non-verbal signals may also contradict a verbal message or alter its meaning. In manager/subordinate communication there are also the obstacles to frank expressions of opinion or full disclosure of information. A good communicator watches out for signs of contradiction or discomfort and encourages a more honest discourse.

If you indicate your authority non-verbally through power dressing or use of office space, you may need to make an effort to meet others more equally. Watch for the non-verbal signs of dominance around the practice – who holds the biggest space, e.g. the largest consulting room; do they have a clear, uncluttered desk and surroundings? A polished wooden desk with only a blotter pad and fountain pen strikes fear in most of us! The higher up the organisation you go, the less you have to **do** (dirty your hands) – your job is only to think.

An insecure manager may place their desk a considerable distance from the door, so whoever comes in has to walk some way before being within communicable distance – a very humbling and humiliating experience. Unless you need to remind your staff you mean business, create a more comfortable, less oppressive, communication environment.

- Sit them at right angles to you, not opposite.
- Do not place a desk between you.

Status should come to you through being respected, not feared.

Watch out to see if the non-verbal messages you are receiving or giving serve to underline or undermine the verbal message. If the latter, try creating a more supportive communication climate to get and give a clearer picture.

Listen actively

Without confusing it with the professional role of counsellor in the practice, many managers and GPs have a first line counselling role. If anyone is distressed, angry or has something of importance to say, your role is to listen.

Good listeners:

- *Listen*: pay close, interested, attention.
- *Paraphrase*: demonstrate they have correctly perceived the sender's inner state and understood, e.g. 'are you saying you dislike that kind of work ...?'
- *Ask questions*: to clarify the position, or reflect back that you have heard, e.g. 'so that made you feel very angry?'
- *Never interrupt*.
- *Never advise* or suggest solutions.
- *Allow feelings*: do not try to stop them, but encourage them – suppressing feelings will only increase the sender's discomfort and discourage them from trusting you.

If people have the chance to talk, uninterrupted and with full attention on them, they usually unravel the problem themselves.

Discriminating language

Take care around the use of offensive language, and challenge it if you hear it. Unwitting prejudice, ignorance, thoughtlessness and stereotyping do nothing but disadvantage those in the minority. This prejudice often extends to discrimination against sexuality, class, disability or culture as well as race.

Certain factors in our society which shift our sense of power in relation to others are shown in Table 1.2.²