"What tools can I use to ensure good communication with my mentor(s) and preceptors throughout the year?"

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The key to any successful relationship, whether personal (i.e., with friends, spouse, children, etc.) or professional (i.e., with coworkers, supervisor, etc.), is effective communication. This concept is also true for the relationships you will have with your mentor(s) and preceptors throughout your residency year. It is most important to set shared goals for effective communication at the start of your training year. After orientation, even though you may not have your entire schedule finalized for the year, you should know who your adviser is, as well as any longitudinal experience preceptors. Now is the time to determine optimal ways for communicating with each other for the course of the year.

First, you will want to determine **how** you and your preceptors will communicate most effectively throughout the year. Different communication methods or mediums include, but are not limited to, email, text, instant messages, and telephone. Even though these methods will continue to expand, with human expectations for instant communication in every aspect of life, we must not forget the art of face-to-face communication. Specifically, when you have a delicate matter to discuss (i.e., conflict, frustration, etc.), it is always best to discuss the matter face-to-face. Be sure your preceptors are aware of the potential gravity of the matter so that they can accommodate you with both their time and attention. Make sure you do the same if the roles are reversed. The delivery method (how) should be selected according to the medium most effective to convey the meaning of the message.

Second, you will want to determine the *frequency* of communications/meetings with your mentor(s) and preceptors. For example, for a 1-month rotation, goals should be set between you and your preceptor at the beginning of the month, with a discussion of your progress toward these goals at the halfway point of the rotation (to provide formative feedback) and at the end of the rotation (to provide summative feedback). Of course, meetings may occur more frequently if either party deems it necessary. For a longitudinal experience such as a research project, the frequency of communication may vary greatly depending on the time of year. For example, while preparing the institutional review board materials, you as the trainee and your preceptor may need to meet weekly, if not more frequently, to ensure important deadlines are met. During the data collection phase, once you are comfortable with the process, the meetings may only need to be monthly. For a longitudinal experience such as ambulatory care, quarterly feedback is probably sufficient given that you and the preceptor are working closely from week to week, allowing for ongoing formative feedback. As a trainee, you should meet with your adviser or program director no less often than quarterly.

Next, the *content* of the communication, whether it is an e-mail or a face-to-face meeting, should be clear as well as presented and described in enough detail to be understood by the other person. The type of content communicated will vary greatly depending on the context of the communication. Throughout your training, items such as professional goals, work-life balance, successes, failures, and general questions will commonly be the content of most communications. When there is a time that you, as the trainee, would like to discuss a potential conflict or frustration, be sure to come to the meeting with a potential solution. Also, it will be very common for your preceptors to discuss with you

your strengths as well as areas for improvement. Be open to and reflect on this feedback. If necessary, request additional meetings with preceptors to discuss specific plans for improvement.

Finally, whether preceptor or trainee, everyone should continue to hone his or her communication *skills*. For example, one cannot just hear what the other person is saying. One must demonstrate effective listening skills by listening carefully, asking questions for clarity, and paraphrasing to confirm that the receiver shares the meaning with the sender. This type of effective listening is especially helpful when discussing matters of conflict. Also, nonverbal communication skills, such as gestures, body language, facial expressions, and tone of voice, are necessary to consider when interacting with one's mentor(s) and preceptors.

These are just a few of the tools you might use to communicate more effectively during your residency year. As the trainee, you should meet with your mentor(s) and preceptors early in the year or at the start of the particular learning experience to make sure expectations for effective communication are clear for both parties. As the year progresses, you will learn which communication strategies work best for you and in what situation. This is just one of the many invaluable pieces of experience you will gain during your training.

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