Communicating with Patients

Communication has been defined as “the transmission of information, thoughts, and feelings so that they are satisfactorily received or understood.”¹ Good patient communication involves recognizing and responding to the patient as a whole person—an approach frequently termed “patient-centered” care. It also involves recognizing that in any provider-client interaction two experts are present: the provider who has the clinical knowledge and the client who has the knowledge of the individual and cultural factors that influence effective treatment and care. The RESPECT model, presented below, crystallizes the patient-centered approach to communication.²

The RESPECT model outlines some simple strategies for promoting good patient communication within the constraints of today’s clinical environment. Research indicates that health care providers who believe in the importance of the psychosocial aspects of patient care are more effective in communicating with patients and attending to their psychosocial needs.³ Nonetheless, time pressures and other stressors take a toll on clinicians as well as their patients, or clients, and can interfere with their ability to communicate with patients in a way that will ensure the best possible clinical outcomes. Thus these suggestions are offered with an appreciation of the barriers to compassionate, patient-centered care that confront today’s health care providers. Although most providers will already be familiar with at least some of the communication strategies included, reviewing them may identify new approaches to strengthening patient communication and serve as a useful reminder to use the familiar ones as consistently as possible.
THE RESPECT MODEL

Rapport
- Connect on a social level.
- See the patient’s point of view.
- Consciously suspend judgment.
- Recognize and avoid making assumptions

Empathy
- Remember that the patient has come to you for help.
- Seek out and understand the patient’s rational for his/her behaviors or illness.
- Verbally acknowledge and legitimize the patient’s feelings

Support
- Ask about and understand the barriers to care and compliance.
- Help the patient overcome barriers.
- Involve family members if appropriate.
- Reassure the patient you are and will be available to help

Partnership
- Be flexible with regard to control issues.
- Negotiate roles when necessary.
- Stress that you are working together to address health problems

Explanations
- Check often for understanding.
- Use verbal clarification techniques.

Cultural competence
- Respect the patient’s cultural beliefs.
- Understand that the patient’s view of you may be defined by ethnic or cultural stereotypes.
- Be aware of your own cultural biases and preconceptions.
- Know your limitations in addressing medical issues across cultures.
- Understand your personal style and recognize when it may not be working with a given patient

Trust
- Recognize that self-disclosure may be difficult for some patients.
- Consciously work to establish trust
Reference Guide


Other Resources


Savett LA. *The human side of medicine: learning what it’s like to be a patient and what it’s like to be a physician*. 2002; Westport, CT: Auburn House.


**Adapted from:**

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**What patients want from their doctors**
Mike Stone, director, Patients Association, Harrow