

Avant factsheet:

Connecting with patients

Building rapport and connecting with your patient underpins the doctor-patient relationship and is key to developing and maintaining a good doctor-patient relationship and reducing your risk of a complaint.

The consultation

It is important to ensure you connect with your patients whether it's an enduring relationship or a single interaction. The first few minutes of a consultation can be the most important. Only begin a new consultation when you have finished with the concerns of the previous consultation so you are not distracted. Take a few minutes to prepare and update yourself about the patient before meeting them. Reviewing the patient's file before meeting them enables a case specific discussion to occur and helps the patient to feel that a relationship exists.

If you are seeing a patient in a hospital, don't continue a conversation with a colleague as you walk into the patient's room, be ready to greet them and introduce yourself. If there has been a delay, or you are running late, apologise to the patient and, if appropriate, offer an explanation. Pull the curtains around the bed to encourage a more private environment. While it is preferable to not stand over a patient while you talk with them, it is not always appropriate to sit on the patient's bed; seek permission if this is where you want to sit.

In a practice setting, ensure you are facing the patient. Let the patient know where you want them to sit if there is more than one chair. If there is anyone else in the room such as a student, introduce them to the patient. If the patient has other people with them, introduce yourself and also check if the patient is happy for them to stay.

Be aware of the way you present yourself. If your voice is naturally loud make a conscious effort to speak quietly. Be aware of your body language and facial expressions. Consider focusing on:

- a smile
- eye contact
- a warm greeting
- a calm demeanour.

Patients will often have a prepared summary of their concerns; allow them some time to speak uninterrupted (this is often referred

to as "the golden minute"). This will convey your interest in their issues. Active listening is a key tool when connecting with patients.

There are always time pressures in a busy clinical environment, but it is important not to appear rushed. Taking time to greet the patient warmly and allowing them time to speak will not unduly lengthen the consultation – rather, it is good manners and may also increase patient satisfaction with the consultation.

Be aware of how you respond to the patient

Be candid, open and honest in your response.

- Assert your opinions respectfully.
- Include empathetic statements when appropriate. (e.g. "It sounds like this has been a really difficult time for you.")

Listen attentively

Give the patient your undivided attention and acknowledge their concerns.

- Look at the patient directly.
- Put aside distracting thoughts – mentally prepare a question for follow-up.
- Avoid being distracted by environmental factors.
- When listening to a patient in a group setting, refrain from side conversations with others.

Show that you are listening

Use your own body language and gestures to convey your attention.

- Nod occasionally.
- Smile and use other facial expressions, as appropriate.
- Note your posture and make sure it is open and inviting.
- Encourage the speaker to continue with small verbal comments like "yes" and "uh huh".

Provide feedback

Our personal filters, assumptions, judgments and beliefs can distort what we hear. As a listener, your role is to understand what is being said. This may require you to reflect on what is being said and ask questions.

Reflect what has been said by paraphrasing:

- "What I'm hearing is ..." and
- "Sounds like you are saying ..."

Ask questions to clarify certain points:

- "What do you mean when you say ...?"
- "Is this what you mean?"

Summarise the patient's comments periodically.

Respond appropriately

There are many benefits to developing a good connection with your patients:

- developing rapport helps the patient to feel understood, valued and supported
- it reduces the potential for conflict between you and your patients
- it enables you to get the most out of the consultation including information gathering, explaining and planning
- you develop and maintain a continuing relationship
- your patients grow to trust you and are comfortable with coming to see you.

One model (*Calgary Cambridge Observation Guide*) outlines the following stages of a consultation:

Type of incident	Level of response
1. Initiating the session	<ul style="list-style-type: none">• establishing initial rapport• identifying the reason(s) for the consultation
2. Gathering information	<ul style="list-style-type: none">• exploration of problems• understanding the patient's perspective• providing structure to the consultation
3. Building the relationship	<ul style="list-style-type: none">• developing rapport• involving the patient
4. Explanation and planning	<ul style="list-style-type: none">• providing the correct amount and type of information• aiding accurate recall and understanding• achieving a shared understanding; incorporating the patient's perspective• planning: shared decision making
5. Closing the session	

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What if you don't connect with the patient?

There will always be some people you do not connect with easily despite your best intentions.

Strategies to manage this situation include:

- treat all patients with empathy and respect
- avoid being judgmental
- don't make assumptions about why you are not connecting with the patient, try and explore this lack of connection if possible and appropriate
- maintain your professionalism and apply the same standard of care and communication for all patients
- seek support from colleagues if you have a difficult patient relationship
- be prepared to end the relationship if necessary, but seek advice from Avant if you are unsure about how to do this.

In summary, building rapport with your patients involves:

- listening attentively
- implementing skills such as:
 - reflective listening
 - summarising
 - paraphrasing
 - empathetic statements
- avoiding judgmental statements and clarifying when necessary
- acknowledging when you are not achieving a connection with the patient and responding to this appropriately.

References

Kurtz, S., Silverman, J. The Calgary-Cambridge Referenced Observation Guides: an aid to defining the curriculum and organizing the teaching in communication training programmes. *Med Educ* 1996;30:83-89.

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