

6 simple ways to master patient communication

Randa Zalman, chief strategy officer and partner at marketing-communications firm Redstone, said during a presentation at the 2015 AMA Annual Meeting. Zalman has devised an easy way to help medical students remember the communication skills they need for practice, summed up in a catchy acronym: RESPECT. <https://wire.ama-assn.org/education/6-simple-ways-master-patient-communication>

Here are the 6 things you need to know in this acronym:

- **R—Rapport.** “This is imperative,” Zalman said, noting that the smallest details—such as physical appearance, your level of eye contact with patients or how often you use their names in conversation—can shape your relationships with patients. When it comes to treatment, you want patients to feel that “we’re in this together,” Zalman said. To boost team morale, she recommends providers give patients their “full, undivided attention,” listen carefully and “hear their stories.”
- **E—Explain.** Ask patients a variety of questions that encourage them to explain more about their health and habits outside their appointments, Zalman recommended. Questions such as, “Can you tell me more about yourself? What is important to you? And what can I do to help you?” can incite patients to fully engage in conversation.
- **S—Show.** Regardless of your specialty or practice setting, you will have to deliver constructive criticism during your career. In those instances, it’s best to show patients “collaborative thinking, and work with them in an active way rather than telling them what to do,” Zalman said. With the proper approach, a critique can become an opportunity to bond with your patient. For instance, try a “7:1 compliment ratio.” Give your patients seven compliments for every one statement of criticism, Zalman said. She also suggests providers show—not tell—how supportive they are by giving patients educational materials, websites, resources and information about support groups that may help them better understand medical terms or issues that apply to their treatment.
- **P—Practice.** The old adage rings true for a reason. Practice may not always “make perfect,” but it certainly can help physicians in training get ahead of tough conversations with patients. Practice good communication as much as possible. Ask patients for raw feedback, identify communication roadblocks and review communication techniques with others, Zalman said.
- **E—Empathy.** Avoid being judgmental by providing encouragement to your patients. This can be expressed through verbal and non-verbal cues, Zalman said.
- **C—Collaboration.** Partner with your patients, Zalman said, noting that people are far more likely to positively respond to recommendations and questions in collaborative settings. “Explain your recommendations, what you’re doing and how you’re doing it,” she said. She also recommended that providers identify potential “barriers”—such as an overbearing spouse or a hearing difficulty—that may interfere with patients’ communication.
- **T—Technology.** Because technology gives providers so many ways to communicate with patients, it’s a particularly important consideration. But don’t overdo it, Zalman cautioned. Instead of inundating patients with messages from multiple platforms, “choose no more than three communication channels, and [use] them well,” she said.