

We Care: 10 Tips for Building Patient Rapport

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BY HEIDI PESTERFIELD

Building patient rapport is critical for creating patient loyalty and deserves attention at all levels of customer service. While rapport-building is paramount in the patient-physician interaction, relationships should be nurtured by anyone with whom patients have contact during their visit. After excellent clinical outcomes, patients have the same basic needs: they want to be heard, they want to be cared about, they want to collaborate, and they want respect.

FOCUS ON PATIENT NEEDS

These 10 tips will help all practice team members learn how to develop rapport so they can contribute to creating patient relationships that last a lifetime.

Introduce oneself and identify the patient's name preference. Practice members begin building rapport the moment they introduce themselves. During introductions, ask patients exactly how they prefer to be addressed. Many elderly patients appreciate being addressed as Mr. or Mrs., while other patients prefer a shortened version of a more formal first name appearing on their medical records (e.g., Margie versus Margaret, Jim versus James, etc.). The preference should be noted in the record and used consistently.

Use the patient's name. Once a patient's preferred name is learned, staff should use it—often. Saying a patient's name several times throughout the encounter creates a perception of familiarity and comfort, establishing a positive memory of the visit that will hopefully influence the patient's choice to return for care. Examples include: "Right this way, Mrs. Smith," and "Jim, please tell me about the symptoms you are experiencing."

Form an alliance. Patients like to have a "say" in their care and appreciate the opportunity to actively participate. Clinical staff can brainstorm and weigh out pros and cons of treatment options with patients, and front office personnel can solicit patients for ideas involving scheduling or billing issues. These acts of collaboration let patients know their opinions are anticipated and respected.

Express empathy. Expressing empathy—"identifying with and understanding somebody else's difficulties" (Encarta English Dictionary)—is a powerful rapport-builder. When empathy is expressed during a visit, patients feel the practice genuinely cares about and understands them. To communicate empathy, staff can employ statements like, "That has got to be very frustrating (or painful, disappointing, upsetting, etc.)," when appropriate. For example, sorting out a denied insurance claim is undeniably a frustrating and exhausting task. If billing staff acknowledges this hardship when navigating a patient through an insurance snafu, the patient will appreciate recognition of his/her difficulties and will view the practice as employing professionals who genuinely care.

Avoid rushing. Part of building rapport is making sure patients feel they are getting the full attention of the staff when it is their turn. Because of this, it is important that patients never feel rushed, even when the practice falls behind schedule. Staff should never skip introductions or avoid exchanging simple pleasantries in an effort to make up for lost time. Practices don't want patients at checkout making off-handed comments about being hurried through their appointment.

Keep patients "in the loop." Open communication is the cornerstone of building patient rapport. Patients want to know what is going on and appreciate a practice that keeps them informed. For example, patients who have to wait longer than expected are far more understanding when they receive frequent updates and time estimations. Explaining the "why" of a delay (when appropriate and only in general terms) can create a perception of intimacy between the patient and the practice. However unfortunate the delay is, it is a great opportunity to build rapport. Here's an example: "I apologize for the wait, Mrs. Smith, but Dr. Jones has had several emergencies (complicated cases, etc.) today. We should be ready for you in about 10 minutes."

Personalize the encounter. Every patient likes it when doctors or staff members recall something from previous

visits about the patient's personal life. When patients relate something interesting about themselves, practices should document it in their record and bring it up in conversation at subsequent visits. For example: "How is your grandson enjoying his first year of college, Jeanette?" Briefly discussing patients' personal lives is a beneficial bonding tool that serves the dual purpose of building rapport while providing valuable insight into the patient's world so the practice can better serve his or her needs.

Treat patients with respect. Don't talk down to patients or try to badger them into compliance, whether they are chronically late for appointments or forgetful about taking their medications. No one is perfect. Patients do not respond well to being scolded or spoken to as if they were naughty children. Also, whenever possible, avoid asking the question, "Do you understand?" as it sounds derogatory. Staff members who feel they are becoming intolerant when dealing with difficult patients should politely excuse themselves and ask for help from another team member who might be able to approach the situation with more objectivity. It's just not worth damaging valuable rapport that has been previously grown with deliberation and care.

Capitalize on non-verbal communication. It's not always what is said; it's how it is said—and received. When patients speak, rapport can be created by leaning in, sitting at eye level, using eye contact, and nodding. These simple techniques help convey to patients that they are being heard and are getting the most out of their visit. In addition, studies show that patients perceive providers are spending more time with them when providers sit rather than stand.

Follow up. Following up on patients is a strong rapport-builder that again sends the message "we care." For example, many physicians have come to recognize the value of a postoperative phone call following a patient's procedure or surgery. Patients are quick to recognize the rarity of a phone call from their physician and as such cannot deny that they are under the care of a practice that genuinely cares about their well-being.

EMBRACE SIMPLE TECHNIQUES

The never-ending process of developing and maintaining patient relationships begins with establishing rapport at all touch points of the patient-practice continuum. When all practice team members embrace the rapport-building techniques discussed in this article, the practice is well on its way to capturing the loyalty and advocacy of another lifetime customer. ■

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