

Generates rapport

Green – Uses open body language/friendly tone and shows warmth and interest

Red – Shows little warmth and appears rigid or overly familiar

Green – Interacts with the patient and modifies tone and language when the need arises

Red – Shows little interaction with the patient and follows a fixed or insensitive agenda

Green – Shows curiosity and a real desire to understand the patient’s perspective

Red – Does not demonstrate curiosity and shows little desire to understand the patient’s perspective

Green – Introduces questions about psychosocial functioning fluently and appropriately

Red – Introduces questions about psychosocial functioning in a jarring or insensitive manner

Green – Fluently and sensitively explores ICE and cues at an appropriate time in the consultation

Red – Elicits ICE and/or cues using jarring phrases and/or at an inappropriate time in the consultation

Green – Verbalises own thinking processes in order to encourage patient

Red – Rarely verbalises thinking process and demonstrates a judgmental approach

About this skill

In simple terms, rapport is getting on well with a person. More technically, it is “a state of harmonious understanding with another individual that enables greater and easier communication”. Good rapport is essential in a consultation and will make the whole consultation go well.

Rapport is closely linked with showing empathy - in general a doctor who is good at showing empathy is good at developing rapport. Many of the skills that are needed to develop rapport are also needed to develop empathy.

Empathy is defined as ‘the ability to understand and share the feelings of another’, some doctors describe it as the ability to put yourselves ‘in the other persons shoes’. When consulting with patients in a general practice setting, the ability to do this is valued highly by the patient.

Warning! – However, please take care to avoid **false** empathy, preconceived ‘set’ phrases as expressions of concern and/or inappropriate questions about the patient’s social situation.

Over enthusiastic or insincere attempts at demonstrating empathy will contribute to a non-fluent consultation or a consultation full of jarring and ‘set’ phrases or expressions.

Sometimes rapport with a patient is easy - you just naturally and easily seem to be able to relate to a patient. But there are communication skills that will make the process easier, and these can be seen in the word descriptors above. To summarise the RAG word descriptors above, rapport is enhanced by the following behaviours, during face-to-face consultations:

- Being relaxed and open
- Avoiding looking bored or disinterested
- Demonstrating that you understand by nodding, smiling and affirmatory words
- Showing non-verbal behaviours that enhance rapport such as leaning forward slightly, making eye contact, adopting an open stance (for example, avoiding having your arms folded)
- Asking open questions
- Not being judgmental

Audio consultations

Rapport is often more difficult to build and maintain during a telephone consultation, without the benefit of a friendly smile, eye contact and perhaps even a touch on someone's shoulder or hand. However, this skill is arguably even *more* important during the audio consultation as there is more potential for missing important psychosocial information. For example, failing to pick up a significant risk of self-harm, would make the consultation unsafe. Rapport can be enhanced by the following behaviours during audio consultations:

- Adopting a friendly tone
- Asking open questions to 'actively' explore psychosocial and ICE
- Taking turns to speak, minimising interruptions
- Listening carefully and responding to any verbal cues, for example a flat, depressed tone
- Modifying tone according to a patient's cues and story
- Not being judgmental or insensitive
- Verbal expressions of empathy, for example "I'm sorry to hear that, things sound tough at home..." or "It sounds as though you have your hands full with home schooling and work..."
- Leaving space for the patient to respond to your expressions of empathy

Educational Activities

Activity 1: Review a series of your face to face consultations, ignoring for now any clinical content but just measuring how *effective you are at developing rapport*. You will need to specifically look at the following behaviours:

- Do you look interested in the patient?
- Do you ask open questions frequently or are most of your questions closed questions?
- Do you look bored?
- How often do you repeat questions that you have already asked?
- How do you sit?
- What non-verbal behaviours do you show?

Activity 2: Review your consultations with your trainer and identify any jarring or 'false' attempts at empathy.

It is often less 'what' you say but more in what context and 'how' you say it. To help with this, have a look at the examples below.

"I'm so very sorry to hear that" as a response to a spouse dying 20 years ago

"It must really terrible for you not to be able to walk the dog" in response to patient saying that his claudication means he can't walk as far.

"I'm really sorry that you've been having these terrible headaches" in response to a patient breezing in cheerfully, asking for some stronger pain killers

Activity 3: Similarly, be careful with jarring, apparently random questions about psycho-social functioning. Analyse your videos and audio consultations and see if this happens. This can seriously damage rapport. Again, to help, there are some examples of these below.

Suddenly asking: "Oh I forgot to ask you before, how is your marriage?"

Asking an unemployed patient - "What do you do for a living?"

Activity 4: Observe the consultation style of a doctor who is good at showing empathy - write down what he or she does that enables him/her to be empathic. Are these strategies that you could try?

Repeat the process with other colleagues in the practice (joint surgeries including audio consultations are a good way to do this). Are there any differences? Are there any new approaches that you can adopt to improve your rapport with patients?

Activity 5: Once you have identified any of your 'empathy-reducing' behaviours in Activities 1,2 and 3 above, try and avoid them - get your trainer to watch/listen to you consult over a period of time to see if you have succeeded. Start at the beginning of the consultation, modifying your behaviours and making a conscious effort to avoid the types of jarring expressions given as examples above.

Audio consultations

Review the following behaviours during several of your telephone consultations, noting that developing and maintaining rapport on the telephone can be more challenging.

- How does your tone come across, especially at the beginning?
- Do you pick up verbal cues and explore or do you ignore them?
- How often do you interrupt the patient?
- How many open questions do you ask?
- How did you do when attempting to respond to the patient's tone?eg. Flat, sounding depressed
- Were there any opportunities to express verbal empathy? Did you use these opportunities?

Share your self-analysis with your trainer and consider whether any of the further activities above might help you improve your skills at rapport building.

Reflective Exercises

Exercise 1: Think about *why* you are trying to show empathy, or why it is so important to discover psycho-social information and ICE. How you do this may heavily influence the success of your approach. So, in other words if you irritate the patient with jarring clumsy enquiries you may fail to discover the patient's agenda or important information about the impact of their illness on their life. This will strongly affect the successful outcome of the consultation.

Exercise 2: Empathy - consider how it would feel to have to deal with the medical or social problems faced by the patient. You might like to think back to a time when you felt ill or had to seek help from health care professionals.

How did it feel when you were shown empathy, or alternatively not? How valuable a skill is the ability to show a patient empathy, in your opinion?

This may be a particularly important reflection is you have moved from a hospital specialty into general practice. Many hospital specialties will place considerably less emphasis on the value of showing empathy and therefore the skill may need to be developed.

Related tasks

Practicing and developing the skill of '*Generates rapport*' will allow you to achieve the following tasks more effectively:

- Opens consultation and explores problem
- Discovers patient's psycho-social context
- Identifies cues
- Discovers patient's ICE

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