

Six Essential Relationships in Health Care

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Poor communication in just one area can affect the entire health care experience.

As physicians, we often like to think that the doctor-patient relationship is the key to effective health care. In reality, while the doctor-patient relationship is very important, it isn't the only relationship that matters. There are numerous "touch points" in our health care system. They occur whenever someone interacts with a patient or acts on behalf of a patient. Often, communication across these touch points is lacking, even though we all know that sharing the right information with the right individuals can avoid mistakes and save lives. Good communication also reduces patient anxiety, enhances patient well-being, and reduces frustration and confusion. Our focus, then, should be to improve communication across all of these vital touch points:

1. Between physician and patient. When our patients get sick, it is just as important for us to listen to them and educate them as it is to treat their illness. Education and dialogue can reduce stress and promote healing. In addition, techniques such as "teach-back" and motivational interviewing can help us be sure that our patients understand our instructions and are ready to take steps toward behavior change.

2. Between office staff and patient. In this relationship, patients have a responsibility to be open and honest about the reason for their visit, their history, lifestyle habits, and any concerns and questions they may have. In turn, the staff's responsibility is to communicate empathy and trustworthiness while collecting this vital information.

3. Between physician and caregivers/family. For many patients, it is crucial to include nonmedical caregivers and family in the information loop. Elderly patients with visual or hearing impairment, those with language

or cultural barriers, and those suffering from dementia all will need help managing their health care needs. Involving, educating, and responding to caregiver and family needs can go a long way toward promoting health and wellness and avoiding or delaying hospital admissions, readmissions, and nursing home placement.

4. Between physician and physician. When primary care doctors and other specialists share information with one another, they are ultimately helping the patient avoid duplicate medications and tests, drug interactions, and a whole host of other problems. Ideally, all patient information should be funneled to the primary care physician and then be available at this "hub" to other specialists. Until everyone can exchange data electronically, the burden is unfortunately on patients and primary care physicians to keep everyone informed.

5. Between physician and allied health professionals. Nurses, therapists, counselors, pharmacists, medical assistants, and other allied health professionals are often physicians' eyes and ears in the field. Working collegially with these individuals is in our best interests. If successfully raising a child takes a village, then successfully caring for a patient takes a team, and allied health professionals are an important part of that team.

6. Between physician, inpatient facility, and patient. Effective transitions in care complete the circle from health to sickness and back to health again. When handled poorly, however, they can cause suffering, relapse, and readmissions, which unnecessarily cost the system and all of us billions of dollars annually.

Good communication in these key relationships is the linchpin of a highly functioning health care system. 

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