

When acrimony arises with patients, listen with empathy

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Tanya Albert Henry

Contributing News Writer

An internist gets an email from a patient's wife, who is deeply frustrated and complains that the practice's off-hours care is "lousy." To respond, the physician requested a face-to-face meeting and made use of empathetic-listening skills to defuse a tense situation.

The internist, Dr. Antonelli, had a 73-year-old patient, Robert, with chronic congestive heart failure. His wife, Naomi, a retired nurse who helps manage Robert's care at home, on more than one occasion emailed Dr. Antonelli and Robert's cardiologist, Dr. Salzwedel, expressing her concerns.

In one email sent through a non-secure email instead of the practice's patient portal, Naomi wrote: "I want to tell you that I think Robert's medical care off-hours is lousy. Unless I reach Dr. Salzwedel, the cardiologists on call don't take the job seriously. Once when I called, I talked to a doctor who didn't even seem like he had graduated from medical school. Is your night call any better? I haven't tried it, but I doubt it. I can't take him to the emergency department because it's actually dangerous. If it hadn't been for me, he would have died on two occasions. What can I do about it?"

Dr. Antonelli set up a face-to-face meeting with Robert and Naomi. Before the meeting, he decided to **listen with empathy**. He thought about what he would say and wrote himself a sticky note and put it in Robert's chart as a reminder of the goal. Listening with empathy helps physicians communicate more effectively and improve patient and physician satisfaction. The practice—outlined in an AMA STEPS Forward™ module—teaches physicians how to connect with patients and listen for underlying feelings and needs.

The approach worked for Drs. Antonelli, Salzwedel, Robert and Naomi. Their identifying details were changed so this story could be included in the AMA module without violating patient confidentiality.

Lay out the goal

Dr. Antonelli started by telling Robert and Naomi, “I believe our goal for our visit today is to find out how to provide you with more support. I want to make sure I understand the situation and what your needs are so we can figure out how to best support you.”

Then **he listened**. His **body language showed he was paying attention**. As Robert discussed his aggravation over how long he had to wait in the emergency department when he was sick, Dr. Antonelli nodded and acknowledged that he was listening by simply saying, “Mmm-hmm.” Naomi then took approximately five minutes to talk about her husband’s care and her frustrations. She said there were evenings when she needed to talk to a doctor and didn’t get the response she wanted. Naomi described the stress and pressure it put on her. “The health care system just doesn’t support us,” she said. “We just have to fend for ourselves when it’s not business hours.”

At a lull, Dr. Antonelli **reflected back what he was hearing** and said, “it sounds like in the evenings and on weekends you haven’t gotten the care that you’ve needed. That’s put you in the really uncomfortable position of having to be his wife and medical provider at the same time. Am I understanding that right?”

Naomi nodded and talked a little more about her dissatisfaction, but with less urgency and emotion. Then **Dr. Antonelli spoke**.

“Let me talk to you about access to care,” the internist said. “I understand that we let people down all the time; they can’t get an answer to a phone call when they want. May I tell you about some of the things I’ve done to help my patients get better access to care?”

When Naomi and Robert nodded, Dr. Antonelli explained the practice’s on-call system and the electronic patient portal. He told them that he could be the first point of contact when there were concerns. He ended by telling them, “I hear you loud and clear. You want to be able to trust that you will be able to reach a doctor when you need one.” Robert and Naomi said they didn’t know they could call a primary care doctor about a cardiac issue. Naomi said that would help.

Dr. Antonelli also explained it is hospital policy to not use email for any patient communication and that the patient portal was established for communication. He also told them, “I’d like to be able to give you my cellphone number, but I want to make my practice sustainable and I want to be fair to my family. I just can’t have patients call my cellphone directly.”

At the end of the conversation, the patient and Naomi said they understood. “I feel better about what you’re going to be able to do to help us in the evenings and on weekends,” Naomi said. Dr. Antonelli said he felt less stress following the positive experience.

Other tangible and intangible benefits to listening with empathy include:

- | Greater therapeutic efficacy
- | More trust, which leads to improved patient adherence to treatment
- | More effective communication between patient and clinician, resulting in patients who feel less anxiety and more able to cope emotionally
- | Enhanced patient disclosure of problems and concerns

The listening with empathy STEPS Forward module can teach you more about how to become an empathetic listener, including managing the first few “golden moments” in a clinical encounter and when to respond verbally. It also includes tools and resources to support your efforts.

This module may be completed for continuing medical education credit. There are seven new modules now available from the AMA’s STEPS Forward collection, bringing the total number of practice improvement strategies to 43; several thanks to a grant from, and collaboration with, the Transforming Clinical Practices Initiative.