

## Collaborative communication strategies Partner with patients



How clinicians communicate with patients can influence treatment adherence. Below are some strategies you can implement immediately to help you communicate more effectively.

| Strategy  | Example  |
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| Begin with open-ended questions about adherence, including recent medication use  | AVOID: "Are you taking your medicines?"<br>TRY: "How are your medications working for you?"  |
| Address "red flags" (e.g., missed appointments, prescription refills, requested labs, and lack of therapeutic response to medication change)  | <ul><li>AVOID: "Why did you miss your appointment?"</li><li>TRY: "I noticed you missed your clinic visit two months ago.</li><li>Is there something we can do to help you get your follow-up care?"</li></ul>  |
| Explore reasons for possible non-adherence  | <b>AVOID:</b> "Let me prescribe a different pill that might work better."<br><b>TRY:</b> "What do you think would make it easier?"   |
| Elicit patient views on options and priorities to customize a care plan for each patient  | AVOID: "Have you considered using a pillbox?"<br>TRY: "What do you think would work for you?"<br>or "What has worked for you in the past?"   |
| Remain non-judgmental at all times  | <ul> <li>AVOID: Educational statements like "It's really important to take your pill if you want to control your blood pressure."</li> <li>TRY: Supportive statements like "Let's think about this problem together; maybe we can come up with something that will work for you."</li> </ul>   |
| Use teach-back to ensure<br>understanding of the care plan  | <b>AVOID:</b> Close-ended questions like "Does this make sense to you?"<br><b>TRY:</b> "What is your understanding of what we've discussed today?"   |
| Use positive reinforcement to encourage<br>healthy ideas or behaviors   | <ul> <li>AVOID: "You haven't been eating healthy or losing weight, only walking.</li> <li>You are not helping lower your blood pressure like we discussed."</li> <li>TRY: "It's good that you've been walking. Let's talk about other things you can do to control your blood pressure."</li> </ul>  |
| <ul> <li>Use ask-provide-ask structure to</li> <li>Ask patients what they already know about an issue</li> <li>Give brief answers to fill in gaps in their knowledge</li> <li>Ask patients what they think</li> </ul> | <ul> <li>AVOID: Statements that give advice without first asking what the patient already knows or thinks.</li> <li>TRY: "What do you know about exercising to lower blood pressure?" Patient responds: "I know I should be exercising three days a week."</li> <li>You follow with: "That's right, 30 minutes, three days a week is ideal. You can break each of those 30-minute sessions into three, 10-minute sessions. Does that sound reasonable?"</li> </ul> |

This resource is part of AMA MAP BP<sup>™</sup>, a quality improvement program. Using a single or subset of AMA MAP BP tools or resources does not constitute implementing this program. AMA MAP BP includes guidance from AMA hypertension experts and has been shown to improve BP control rates by 10 percentage points and sustain results.