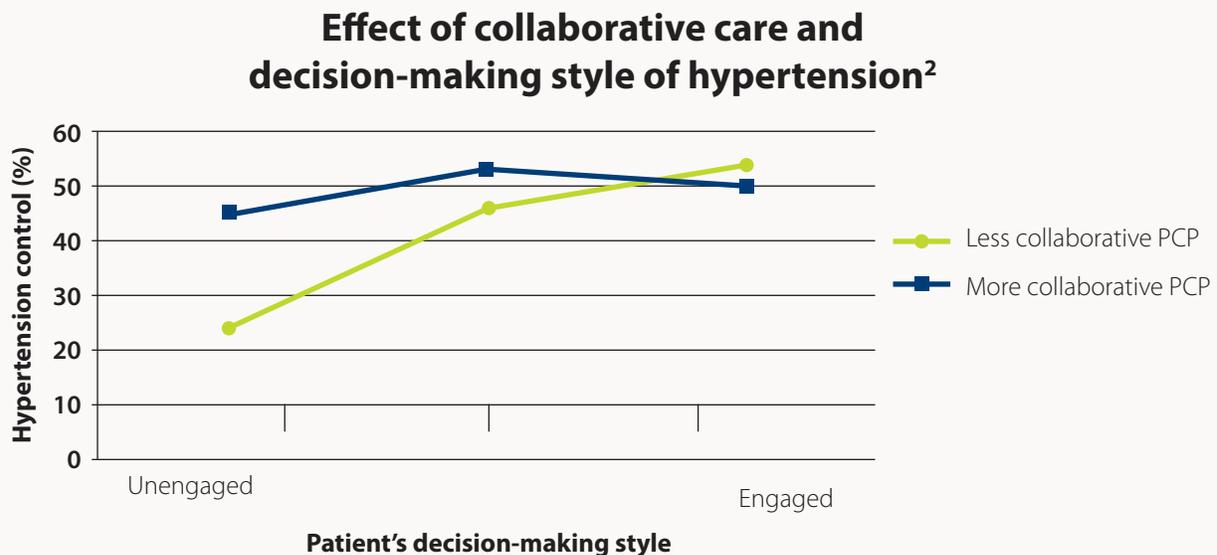


# Engaging patients through evidence-based communication strategies

## Did you know?

- Ninety percent of patients can achieve blood pressure control with lifestyle changes and by taking three or fewer blood pressure medicines.<sup>1</sup>
- Practices might have low blood pressure control rates because up to 30–50 percent of their patients do not take medications. But **you** can do something about this!

The chart below, from a study by Naik et al., shows what happens when clinicians adopt a more collaborative approach to decision-making when working with two types of patients<sup>2</sup>:



### • Unengaged

- Left alone, patients in this group made decisions without clinician input or let the clinician make treatment decisions for them.
- Patients in this group often simply “go along” with what their doctor tells them or assume their doctor will inform them of anything significant. Some might also want to avoid thinking about their high blood pressure.

### • Engaged

- Patients in this group actively sought out advice from their clinicians and took an active role in making treatment choices.
- Patients in this group are often already engaged in their health.

*Continued on next page.*

Always make sure patients know what to do should they have a blood pressure measurement that is outside the pre-determined acceptable range or if they experience any symptoms with a high or low blood pressure measurement, including seeking emergency treatment if appropriate. This guidance to the patient should be individualized by the clinician and reinforced by clinical staff at the initiation of any SMBP monitoring program.

The Naik study shows two things:

- Patients who are engaged in taking care of their health are, on average, 60 percent more likely to have controlled blood pressure than unengaged patients.
- When clinicians work with patients in a collaborative way, they help ensure that *all patients*, especially those who may benefit most, are engaged in their own care.

## Why is this important?

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- The way that clinicians communicate with patients can influence whether the patients take their medications or feel motivated to change their lifestyle, especially those who need the most help—patients who aren't always interested in managing their health.
- It's important for clinicians to involve patients in treatment decisions.
- Non-clinical staff who use a collaborative approach can also engage patients in managing their blood pressure.

## What practices or health centers should do

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The evidence suggests that health professionals—both clinical and non-clinical staff—can use the following five basic communication skills<sup>3,4,5</sup> to engage patients and still work within the time available in a typical office visit, especially if everyone on the team uses the same approach.

- Open-ended questions—ask questions that require more than a “yes” or “no” answer and that help discover what the patient thinks is important
- Reflective listening—ask for clarifications to get a better understanding of what patients say, or rephrase what patients say
- Positive reinforcement—encourage healthy ideas or behaviors that patients mention
- Ask-provide-ask—ask patients what they already know about an issue, give brief answers that fill gaps in their knowledge, and then ask for their thoughts on what you told them
- Teach-back—ask patients to tell you what they took away from the conversation and what they think the next steps should be

**For more information on improving blood pressure control, contact [ihobp.surveys@ama-assn.org](mailto:ihobp.surveys@ama-assn.org).**

## References

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1. Cushman, W. C., Ford, C. E., Cutler, J. A., Margolis, K. L., Davis, B. R., Grimm, R. H., Black, H. R., Hamilton, B. P., Holland, J., Nwachuku, C., Papademetriou, V., Probstfield, J., Wright, J. I., Alderman, M. H., Weiss, R. J., Piller, L., Bettencourt, J., Walsh, S. M. and For The ALLHAT Collaborative Research Group (2002), Original Papers. *J Clin Hypertens*, 4: 393–404. PMID: 12461301
2. Naik AD, Kallen MA, Walder A, Street RL Jr. Improving hypertension control in diabetes mellitus: the effects of collaborative and proactive health communication. *Circulation*. 2008 Mar 18;117(11):1361-8. PMID: 18316489.
3. Levensky ER, Forcehimes A, O'Donohue WT, Beitz K. Motivational interviewing: an evidence-based approach to counseling helps patients follow treatment recommendations. *Am J Nurs*. 2007 Oct; 107(10):50-8; quiz 58-9. Review. PMID: 17895731.
4. Rubak S, Sandbaek A, Lauritzen T, Christensen B. Motivational interviewing: a systematic review and meta-analysis. *Br J Gen Pract*. 2005 Apr; 55(513):305-12. Review. PMID: 15826439.
5. Elwyn G, Dehlendorf C, Epstein RM, Marrin K, White J, Frosch DL. Shared decision making and motivational interviewing: achieving patient-centered care across the spectrum of health care problems. *Ann Fam Med*. 2014 May-Jun; 12(3):270-5. Erratum in: *Ann Fam Med*. 2014 Jul-Aug;12(4):301. PMID: 24821899.

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