

Practice Tip Sheet

Developing Positive Telephone Relationships with Patients & Caregivers - Recommendations for RN Case Managers, Care Managers and Care Coordinators

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Many RN Case Managers use the telephone to reach out to clients, employees, and patients to assure adequate support or to identify potential or actual health problems.

Telephonic case management assistance can be used for smoking cessation, workers' compensation, appointment scheduling and coordination, disease management, high-cost case management, premature infant care support, and rural nursing care

The First Telephone Contact

The most important goal of the first telephone contact is to establish the relationship. This begins by introducing yourself using your full name and your professional status. For example, "I am Pat Smith, a Registered Nurse Case Manager calling from the Be Well Program."

Statements like "This is a service that helps you see how well you're doing" or "I'm calling to support you in your recovery" are very helpful.

Confirm that now is a good time to talk and if possible, the anticipated length of the phone visit.

Once the nurse case manager has effectively addressed basic barriers to communication and assured a level of trust during the first call, dialogue can begin.

Let the patient know that there's no charge, no cost to them for the program, and let them know that you are not trying to sell them something

It's better to use a conversational style, rather than a specific, "read a question, wait for an answer" style

For Telephone Contact to be Successful:

RN Case managers must convey a positive attitude toward clients, being genuinely interested in their well-being and clearly and concisely communicating the purpose of the call.

Nurse case managers must demonstrate effective listening skills.

With time, clients will look forward to receiving these calls, which do not have to be lengthy to be positive and effective.

Patients may share some professionally and clinically enlightening information during these calls, and the nurse case manager may be the only health care professional who is listening.

Nurse case managers must develop positive and effective relationships with clients over the phone for any intervention or program to be effective.

RNCMs can do so by overcoming communication barriers, being good listeners, and establishing trust.

Developing Your Telephonic RNC Practice:

Although RN Telephonic Case Manager practices can vary based on practice settings and population needs there are some tenants that always remain consistent:

1. **Maintain Confidentiality.** The same HIPAA requirements for face to face interactions apply to telephone visits. When calling a patient, make sure you confirm that you are talking with the correct person. Verify the identification of the patient by confirming name, date of birth, social security number, or address. Review your organization's policy on which patient identifiers are acceptable. Patient's may also give permission for family caregivers to have access to their health information and be involved in the telephone visit. This should be documented.
2. **Follow Up.** Call when you say you are going to and return phone messages that patients leave in a timely manner. This is key to building trust and a positive relationship.
3. **Listen to Understand.** Be aware of and control your own emotions as you choose to handle relationships with care and empathy.
4. **Prioritize Care.** Most telephonic RNCMs are managing larger caseloads of patients (40-80 patients on average). This requires the development of strong organizational and prioritization skills. In addition, telephonic RNCMs must be comfortable working autonomously demonstrating an ability to manage their work tasks.
5. **Select and Use Standardized Assessment Tools as Appropriate.** Many evidence-based assessment tools can be administered over the phone and can be helpful in advising patients as they make decisions about their health. Understand and practice using these tools prior to using with patients.
6. **Individualize Care.** Telephonic RNCMs, like all RNCMs, are responsible for developing a patient centered plan of care. Using assessment and short and long term goals setting, steps to improving self-management of chronic conditions and corresponding health outcomes can be determined and put in place. Decision making specific to the plan of care is shared between the patient and the RNCM.



7. **Communicate.** Telephonic RNCMs are responsible for providing updates and changes in the patient health status to the health care team. They are also responsible for communicating the plan of care with the patient and their health care team. In addition, it is important to determine how patients and their caregivers would like to receive general health updates and appointment reminders. For example, sending secured messages by phone, text or messages through the patient portal.
8. **Provide Anticipatory Guidance.** Patients with chronic conditions often experience or are at risk for changes in their health status. It is the responsibility of the RNCM to anticipate these changes, provide guidance and recommendations for preventing and/or managing these changes. This also includes assessing the patient’s mental or emotional status.
9. **Support Self-Management and Health Behavior Change.** Telephonic RNCMs can use many strategies to support self-management and health behavior change. While not all strategies are effective over the phone, Motivational Interviewing, Shared Decision Making, Teach Back are examples of evidence-based strategies that Telephonic RNCMs can use effectively in their practices.
10. **Provide Effective Referrals.** Telephonic RNCMs are responsible for making timely and appropriate referrals specific to medical services as well as needed community resources. The RNCM is responsible for knowing the referral process and ensuring services are a match with patient preferences. These referrals should be documented and communicated to the patient as well as their healthcare team.

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