

Rebuilding Trust in Healthcare



Trust is a cornerstone of healthcare, serving as the glue that binds patient relationships, treatment adherence, and overall health outcomes. Yet, in recent discussions, such as those at the American Board of Internal Medicine (ABIM) Foundation conference themed "Being a Trustworthy Professional in an Untrusting World," trust was highlighted as both essential and elusive. Healthcare organisations like CVS are actively working to build community trust, recognising its link to financial returns and quality care. But how do we measure and prioritise trust? Is the challenge of rebuilding trust in healthcare too big to repair or simply too important to fail? The answer is complex and depends on whether the focus is on return on investment (ROI) or equitable care for all.

Trust: The Unseen Foundation of Healthcare Engagement

Trust permeates all aspects of healthcare. It is fundamental to patient engagement and adherence to medical advice, yet it remains an abstract concept—rarely prioritised or measured directly. Patients are more likely to follow through with treatment plans, engage in preventive care, and maintain ongoing relationships with their healthcare providers when they trust those providers. When trust is missing, people may choose less effective options like emergency departments or unreliable internet sources for healthcare guidance.

Engagement without trust is fleeting, and trust without active efforts to build and sustain it is fragile. If healthcare aims only to maximise ROI without concern for equitable outcomes, trust will continue to be a problem too big to fix. However, if the goal is high-quality care accessible to all, then it is undoubtedly a task too critical to fail. The question then becomes: How can healthcare systems be redesigned to prioritise and nurture trust?

Trust and Mutual Respect: Two Sides of the Same Coin

Trust is a two-way street built on respect and understanding. It's not just about patients trusting their healthcare providers but also about providers showing respect and empathy towards their patients. Consider the woman who gave a healthcare worker a banana, insisting that he eat it while she watched. Her test was simple: to see if he would trust her enough to accept and consume the fruit, indicating mutual respect. This act underscores the need for healthcare providers to see their patients as equals, deserving of dignity and humanity. Trust cannot be gained solely through clinical expertise; it requires establishing an emotional connection where the provider genuinely cares for and values the patient as a person.

Furthermore, healthcare communication must be grounded in the patient's perspective. A doctor's use of unintelligible medical jargon can inadvertently erode trust, as patients may feel excluded from understanding their own care. Just as one expects plain language when consulting a lawyer, mechanic, or accountant, patients deserve the same level of clarity in healthcare. Yet, it is common for patients to seek clarification from friends or family members who can "translate" the medical jargon. Training for healthcare professionals should emphasise plain language skills, ensuring that every patient fully understands their options and potential outcomes.

The ROI of Trust: Connecting It to Health Outcomes

The notion of trust often surfaces in discussions about healthcare quality and equity, but its impact is more than just theoretical. Measuring the ROI of trust is crucial in demonstrating its role in tangible health outcomes. Trust influences a patient's willingness to engage in preventive care, adhere to medication regimens, and follow through with treatment plans—all factors directly affecting health outcomes and costs. For example, clinic "no-shows" and avoidable hospital admissions are often tied to a lack of trust and connection between patients and their healthcare providers.

Prioritising trust can lead to significant cost savings and improved health outcomes. For instance, earlier engagement in care can prevent the progression of chronic diseases. At the same time, clear and empathetic communication can improve medication adherence, reducing the need for more complex and expensive interventions later. Suppose healthcare systems recognise trust as a measurable driver of outcomes. In that case, they can better allocate resources to foster patient-provider relationships, ultimately improving the quality and cost-effectiveness of care.

Trust in healthcare is not just a nice thing; it is fundamental to patient engagement, adherence, and outcomes. As conversations about building trust take place at conferences, like the ABIM Foundation event, the hope is that these dialogues translate into actionable strategies within healthcare organisations. Rebuilding trust may be challenging, but it is far too crucial to overlook or consider "too big to fix." The task requires that trust be woven into the fabric of every interaction and system process within healthcare. From clear communication to equitable care practices, the path to trust begins with seeing patients not as numbers but as partners in their health journeys. Ultimately, if healthcare is to provide high-quality, accessible care for all, the trust deficit must be addressed at its roots, starting in boardrooms and clinical training programmes.

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