

## **Building a therapeutic alliance:**

### **Putting patients at the centre of patient-centred care**

*Written by: Dr. Joel Weisberg, DC*

#### **Patient centred care**

Patients and doctors have a shared interest in achieving better clinical outcomes and increased satisfaction with clinical encounters. Evidence based practice is a framework that is often used with the intention of providing effective care and improving outcomes. The evidence based practice framework supports clinical decision-making by including patient-centredness alongside clinical expertise and research evidence (Waite 2010). Patient-centredness refers to “providing care that is respectful of and responsive to individual patient preferences, needs, and values and ensuring that patient values guide all clinical decisions” (IOM 2001).

Previous research suggests that chiropractors consider patient-centeredness to be an important component of care (Stuber 2016). Providing patient-centred care goes beyond simply applying established protocols to deliver appropriate treatment. Known as the *therapeutic alliance*, practicing patient-centered care is principally dependent on the formation and nurturing of a therapeutic working relationship with the patient (Stuber 2018; Lambers 2016). The therapeutic alliance encompasses the patient's trust, confidence, and satisfaction with the provider (Stuber 2018; Lambers 2016).

#### **Therapeutic Alliance**

Building a strong therapeutic alliance requires more than just technical skill and expertise. It requires a humanistic approach, which often includes listening to the patient, understanding their needs, tailoring care to each individual, and effective communication (Stuber 2018; Lambers 2016). However, the therapeutic alliance is about more than simple communication between the patient and provider (Fuentes 2014).

Therapeutic alliance is a dynamic process of collaboration in problem solving and decision making throughout the entirety of the patient-provider relationship (Lambers 2016). The relationship and affective bond between the patient and provider can be approached as a

modifiable contextual factor for patient-centered care (Sherriff 2022; Fuentes 2014; Stillwell 2017; Fuentes 2014). Qualities such as empathy and a sense of trustworthiness in the face of anxiety or skepticism are considered essential elements in developing a therapeutic alliance (McParlin 2022; Connell 2020; Lambers 2016). As manual healthcare providers, chiropractors also have a unique opportunity to consider and utilize the role of therapeutic touch to further facilitate the therapeutic alliance (McParlin 2022).

A positive therapeutic alliance is associated with treatment adherence and improved clinical outcomes across healthcare professions (Fuentes 2014). Studies have shown that a well-established and positive therapeutic alliance can improve outcomes in areas such as non-cancer pain, disability, quality of life, and satisfaction with healthcare provider (Barranchia 2022; McParlin 2022; Fuentes 2021). Conversely, when a therapeutic alliance is compromised, the analgesic effect may diminish (Fuentes 2021).

By building a strong relationship with their patients, chiropractors can improve treatment outcomes and increase patient satisfaction, while providing personalized care that meets the patient's needs. A positive patient-provider relationship can be built by exhibiting active listening, open communication, personalized care, and empathy. Attention to the affective bond through collaborative decision making can also help chiropractors deliver patient-centered care.

Emerging evidence highlights the importance of a positive therapeutic alliance in the care of musculoskeletal conditions such as low back pain and knee arthritis (Sherriff 2022; Fuentes 2021; Stillwell 2017; Cuyul-Vásquez 2021). As musculoskeletal healthcare providers, chiropractors have an opportunity to improve patient outcomes and satisfaction during clinical encounters.

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