



Huddle Up

Relationship-Centered Care

Relationship-centered care (RCC) can be defined as care in which patients, families and healthcare providers appreciate the importance of their relationships with one another. In RCC, the patient is the central concern, but is not considered in isolation of all others. The staff is mindful of the contributions of the family, the care team, their organizations and the community.

RCC involves the following principles:

1. Relationships in healthcare ought to include dimensions of personhood as well as roles.
 - Both the patient and providers are unique individuals with their own sets of experiences, values and perspectives.
 - Providers remain aware of their own emotions, reactions and biases and monitor their own behavior.
2. Affect and emotion are important components of relationships in healthcare.
 - Providers should not be detached.
 - Providers are encouraged to empathize with the patient, as it may help patients to experience and express their emotions, thereby helping staff understand and serve the patient's needs and improve the patient's experience.
3. All healthcare relationships occur in the context of reciprocal influence.
 - Health and health-related actions do not occur in isolation but are related to one another.
 - Acknowledge that the providers also benefit from serving the patient.
4. The formation and maintenance of genuine relationships in healthcare is morally valuable.
 - Humans are more morally committed to those whom they are in a personal relationship with.
 - As a human participant, the provider behaves more genuinely than if he/she were acting out a role.

Outcomes of Relationship-Centered Care (RCC)

The anticipated outcomes of RCC include:

- increased patient engagement in their care;
- patient feeling honored, respected and satisfied with care;
- lower anxiety and a higher degree of trust in providers;
- greater agreement on treatment plans and increased adherence to treatment;
- better understanding of their illness and informed decision-making add depth to interactions;
- provider becomes support for the patient and the patient becomes source of professional gratification;
- decreased provider burn-out.

Source: Beach, M., Inui, T., and the Relationship-Centered Care Research Network. Relationship-Centered Care, A Constructive Reframing., [J Gen Intern Med.](#) 2006 Jan; 21(Suppl 1): S3-S8.

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After discussing the principles of relationship-centered care with your team, review the A.R.T. (Ask-Respond-Tell) of Communication as a strategy to incorporate relationship-centered care into your clinic's practices.