

Brick by Brick

3 Ways Professional Communication Helps You Build Your Practice

By Douglas Nelson, BCTMB, LMT

TIME TO READ: 8 MIN

AN IMPORTANT DETERMINANT of successful massage therapy outcomes is the depth and quality of the relationship between therapist and client. As in any relationship, effective communication skills are key to the health and strength of our connections to others. In the field of massage therapy, that communication process can take place in at least three domains: with clients, with other health care providers and with peers.

Communication with Clients

Over the years, I have observed that the common bond all high-performing therapists share is simple: These therapists are not only personally fulfilled in the practice of massage, but their client outcomes are remarkably and consistently positive. Furthermore, from what I have observed, the common trait they all share is remarkable communication skills.

It is true that high-performing therapists also possess a high degree of technical skill — but technical skills alone will not make for a satisfying and successful practice. These therapists possess the ability to relate to their clients and communicate in ways that engender trust and competency, maximizing the effectiveness of their work.

First Impressions Matter

Communication with a client begins at first contact, perhaps the moment we take their phone call or answer an email to inquire about an appointment. Some questions to consider about your communication with clients include:

- How clearly and concisely do I answer the client's questions?
- When the client enters the office, how do I greet them?
- What questions do I choose to ask before a session begins? Do I respond to their preferences?

- When they ask questions about what I am doing while in a session, is the explanation understandable to the client?
- Post-session, do I clearly communicate a potential plan for future sessions?
- What kind of follow-up do I employ?
- Have I developed a sense of trust where the client knows that their well-being is the focus of the relationship? Adherence to HIPAA guidelines is based on that trust; do I ensure the client is aware of steps I will take to ensure confidentiality, privacy and protection of their rights?

Verbal and Non-Verbal Cues

Many of the above questions center around our ability to communicate with our clients verbally. It is important to recognize that client communication can take many forms — non-verbal is just as crucial to achieving a positive outcome. There are so many clues in facial expressions, body language and verbal inflections that are far more revealing than the spoken word.

What training have most of us had in building these skills? Just as important, what inferences is the client gleaned from our own non-verbal communication?

It is easy to forget that communication is a two-way street; while we are reading them, they are reading us as well. It is important to recognize the verbal and non-verbal cues our clients provide are equally important forms of feedback during a session.

How do we apply that feedback to help guide our application of the massage? How do we apply that feedback to the session or future sessions?

Deepening of Therapeutic Alliance

Originally from the field of psychotherapy, *therapeutic alliance* refers to the quality of the relationship between client and

therapist. Its present importance is recognized by most disciplines in health care and can be one of the highest predictors of positive therapeutic outcomes.

At its core, the client needs to feel heard, understood and validated; how we communicate with them is often what engenders those feelings. Have we heard their desired outcome for the session? Are we agreeing on an approach to that outcome? To have an alliance means both parties agree on a desired course of action. Am I conveying to the client — in terms they can relate to — what I am doing, why and what the expected outcome might be? If a friend of theirs, at some later date, asked them to relate the plan, would they restate it in a way that reflects my intentions?

The Lens of Perception

Recently, I was engaged in a conversation with one of my clients as she was describing her physician's assessment of the origin of her pain. Initially, after hearing my client's summary of her assessment, I was disappointed in the accuracy of the physician's findings — but it quickly occurred to me what I was hearing was purely my *client's* perception of what the physician said. My client's description was filtered through the lens of her perception and likely not at all what the physician intended.

This experience illustrates that what *we say* and what a *client hears* and *understands* can vary greatly. It also reiterates that effective communication is a two-way street. Did the physician ask the client if she understood the assessment? Did the physician allow the client to ask questions? What verbal or non-verbal cues did the physician potentially miss out on that would have potentially produced a different outcome?

Communication with Other Health Care Providers

The ability to communicate effectively is also receiving more attention in every discipline of health care. I have had numerous conversations with medical school professors, and this is an area of renewed focus for them as well.

As we work with other health care providers, it is important we understand two key points: 1) how to document sessions

appropriately; and 2) how to communicate using proper medical terminology.

Documentation

In effective communication strategies, the form and structure of what is to be communicated is tailored to resonate with the receiver. When working in an environment where other health care providers may be reading our treatment notes, we should communicate in a form readily understandable to them.

Our notes should take the same format, abbreviations, language and structure of the environment in which we practice. In this way, the notes can be an accurate reflection of what was done, how and why.

Medical Terminology Matters

In the world of health care, the language spoken is the language of science. We need to know that language for two reasons. First, it gives the opportunity for us to fully understand the depth and magnitude of the challenges facing our health care system. For example: Musculoskeletal pain is high on the list of reasons people seek medical care, but what resources are available to address it? The profound personal and economic cost of the opioid epidemic is staggering. The high cost of unmanaged stress is similarly astounding. The need for effective, efficient and safe responses to these challenges is overwhelming.

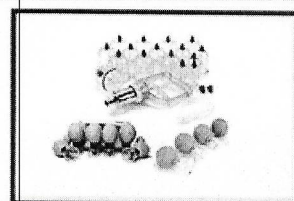
Secondly, speaking the language of science opens the possibility that other health care providers can gain insight into the full value and potential of massage therapy. As the research literature in massage deepens in quality and quantity, it is attracting the attention of leaders in every facet of health care. We are meeting them where they are, speaking to them in a medium they understand — even if the value of massage therapy was unknown to them previously. The research data not only invites the dialogue; it changes the nature of the conversation.

A Real-Life Example

A presentation I gave last year to fourth-year medical students illustrated many of these communication principles. First, seeing that a massage therapist was presenting to them, they had previously looked up my credentials and scanned the research

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literature on massage therapy. Having board certification and an ever-increasing amount of research in massage behind me helped make the case before I began.

After reviewing the research literature, their questions centered around when, where and how massage might be utilized — not whether massage has value. We had a delightful discussion about gaps in the research and ways to implement complementary therapies into health care, and I demonstrated some hands-on techniques. Meeting them where they were, in a language they could understand and relate to, was crucial to seeing the potential and promise of massage therapy for their future patients.

Communication with Our Peers

While client communication is fundamental, we also practice communication skills with our fellow therapists in multiple ways. Are our client notes understandable and in a language another therapist can understand? If so, the course of treatment can be seamlessly continued or altered, if the results are not satisfactory.

Many of my friends in the psychotherapy field meet monthly with peer review and mentoring groups, helping one another to serve clients more effectively. They help and support each other in remarkable ways, providing both personal and professional growth opportunities.

How many of those supportive, small groups exist in the massage therapy profession?

Build a Fulfilling Practice

As we have seen, better communication skills are likely to benefit our clients, our connections to other health care providers and our peers. Perhaps the most important reason to deepen our communication skills is for our own personal growth and development. In my experience, effective communication skills are one of the most important skill sets to master in the attainment of a truly fulfilling massage therapy practice. **M**

Douglas Nelson, BCTMB, LMT, wrote this article for *MESSAGE Magazine* on behalf of the National Certification Board for Therapeutic Massage & Bodywork (NCBTMB; ncbtmb.org). He has actively maintained his Board Certification for over 25 years and recently contributed as an item writer for the updated Board Certification exam in 2018. Nelson is celebrating his 43rd year in clinical practice and is the current president of the Massage Therapy Foundation (MTF).

Additional elements that go into building a professional massage practice include assessment; applied science; massage modalities; and professional ethics, laws and business practices. These elements, along with professional communication, all comprise a certain percentage of the NCBTMB's Board Certification Exam. Visit massagemag.com to read a special four-part series ("Brick by Brick") running monthly on those topics, written on behalf of the NCBTMB, beginning in August.

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