



COMMON LANGUAGE for PSYCHOTHERAPY (clp) PROCEDURES
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EMPATHY DOTS

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Definition: Empathy dots are marks which a high-volume mental health worker puts into the margin of a pre-printed or hand written psychotherapy interview schedule that is about to be followed during an appointment - seeing the dots reminds the worker to say something warmly empathic and/or understanding at intervals within the interview.

Elements: Just before seeing a patient the mental health worker puts simple dots at intervals down the right-hand margin of their assessment-, treatment-, and follow-up interview schedules. Each dot is a reminder that regular empathic statements convey understanding and improve patient satisfaction in therapy. For example, “*that must be very difficult for you*”, “*I can see your anxiety is causing you distress*”. As therapists navigate through the questions in their interview schedule they see the empathy dots at intervals. These remind workers that as well as covering the required specific factors in the interview, they must also express empathy. Such reminders are extremely useful when therapists treat large numbers of patients with typical individual caseloads of 45-60 patients.

Related procedures: Expressing verbal empathy; reward.

Application: When using therapy-interview schedules in high-volume clinical environments.

1st use? Richards & Whyte (2008)

References:

1. Richards DA, Whyte M (2008). *Reach Out: National Programme Educator Materials to Support the Delivery of Training for Practitioners Delivering Low intensity Interventions*. London, Rethink.

Case illustration: (Lovell, unpublished)

(This - unlike in other clp-website entries – details a therapist’s procedure with many patients, not just one). `I run a guided-self help clinic 1 day a week in a deprived area. On an average day I complete about 4 30-minute assessments and 17 15-minute follow-up appointments, which means I see about 21 patients a day. I give low-intensity help to people with common mental health problems which are often severe and enduring and complicated by a risk of suicide and a wealth of social problems, so I must also liaise with many other agencies. I’m kept very busy. Though I enjoy the work I sometimes feel frustrated. Gathering information in patient-centred interviews to obtain a shared understanding, agree goals and offer the right guidance/support means I must think carefully about every question I ask so that I maximise the value of my limited time with each patient. Working under such pressure can make one risk forgetting to engage patients by warm empathy, particularly when one is seeing the 20th patient of the day and still has 10 phone calls to make to other agencies.

`I know I can't always feel warm empathy but can try to express it by my facial, body and verbal language. Just before I see each patient I spend a few seconds reminding myself that `this person is trying to cope, ... is honest, ... is responsive'. To ensure that I show warm empathy I put and look for prominent 'empathy dots' in the right-hand margin of my interview schedule (I usually increase the number of dots as the day goes on!). The dots remind me to check that I've expressed empathy, warmth and understanding to enhance engagement and partnering with the patient.' For example, "Life seems to be pretty tough for you at the moment", "I can see how your feelings of depression are stopping you doing what you want to do right now".