

# When Patients Have Concerns



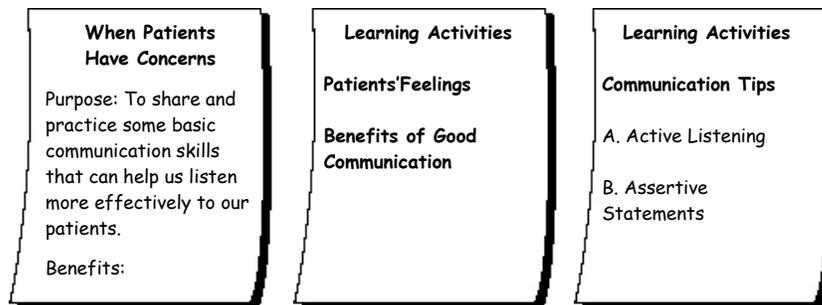
## TIME REQUIRED

**45 minutes**  
(55 minutes if optional pre-test and post-test are conducted)



## PREPARATION/MATERIALS NEEDED

- Set up training space. The training room can be set up in many different ways. The recommended arrangement is a circle or a U shape so that participants can see and interact with one another.
- Pens, pencils, paper for participants.
- Name tags and index cards.
- Case scenario cards (found at the back of this module). Photocopy each scenario as a handout or write scenarios on index cards (one scenario card for each pair of participants).
- Blank flip chart for taking group notes. If no flip chart is available, then use 8 ½ X 11 inch paper or a dry-erase board.
- Prepare and post the following information well before the participants enter the room (see diagram below):
  - ◆ Module title
  - ◆ Purpose of training
  - ◆ Learning activities, including definitions, benefits to staff and patients, and group discussions



- Optional: Photocopy pre/post-tests; 2 copies per participant.

## Welcome and Statement of Purpose

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(5 minutes)

**Trainer** states out loud:

*Welcome to the training called, **When Patients Have Concerns**. You'll see here on the flip chart that I've written the purpose of today's training.*

Trainer notes printed in italics should be stated

*The purpose of this in-service session is to share and practice some basic communication skills that can help us listen more effectively to our patients—especially when they have concerns.*

*By having good communication with our patients, we can help reassure and calm them. It's important to remember that patients have the right to raise concerns and ask questions—anytime. If we keep our focus centered on the patient, then they will feel comfortable enough to raise questions or concerns before they become bigger issues or problems.*

## Optional: Pre-test

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(5 minutes)

Hand out 1 pre-test sheet per participant. Explain that this pre-test will allow you to assess if the training is successful. Allow participants to work for a few minutes. Collect all sheets.

## Benefits of Good Communication

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(5 minutes)

**Trainer** states out loud:

*Research shows that patients who ask questions or raise concerns are more involved in their care, which should be our goal and part of our patients' care plans.*

*We can probably imagine some of the benefits to us as staff persons in practicing and using good communication with our patients. I've posted a few on the flip chart. Some of the benefits of practicing and using these methods might include:*

- ↪ More confidence in responding to patients*
- ↪ Reduced time dealing with disruptions (if they are prevented in the first place), and*
- ↪ Increased patient/customer satisfaction*

*What benefits of practicing and using good communication do you see for our patients? I'll post your answers on the flip chart.*



Listen for, and post, answers such as:

- ◆ Improved dialysis environment
- ◆ Increased relaxation during treatment
- ◆ Less confusion about expectations

**Trainer** states out loud:

*Right! You all did a good job of coming up with benefits to the patient. I don't think any of us would deny that we could use any tool that helps us communicate better with our patients and one another, especially when we're all so busy. We all know that:*

- ↪ We manage a high workload*
- ↪ Sometimes there are staff shortages*
- ↪ Patients can be demanding or difficult, and*
- ↪ Patients can be disruptive or even abusive*

*But we also know that:*

- ↪ Good communication helps us identify reasonable patient requests, so we can be responsive and provide good care;*
- ↪ Talking with patients calmly can avoid escalation of situations, and*
- ↪ Since we work directly with the patients, we are in a position to help identify problems early so that we can inform appropriate staff*

*So, let's take five minutes as a group to brainstorm some of the reasons patients may raise concerns. I'll write your responses on the flip chart.*



Listen for, and post, answers such as:

- ♦ Scared and simply have lots of legitimate questions and concerns about their care. They may ask you the same questions or raise the same concerns over and over again.
- ♦ Loss of control of their personal life, which they may express as anger, grief, stress, or depression.

**Trainer** states out loud:

*In this case, the patient needs acknowledgement that they have a right to their feelings, but they also need to be reminded that they can have direct involvement in their renal care. Remind them that they may have given up some control in one area of their lives, but that they can have great control over their renal care. In addition to feelings, patients may express concerns, legitimate or not, for a variety of other reasons. Be aware that questions and concerns may be raised because a patient experiences:*

Check this section and add any cultural differences you might see at your facility.



- ↪ *Mental illness, such as dementia*
- ↪ *Mood swings*
- ↪ *Alcohol use and abuse*
- ↪ *Drug use and abuse*
- ↪ *Lack of family/relationship support*
- ↪ *Cultural differences/misunderstandings*

**Trainer** states out loud:

*You all came up with a great list of feelings that may prompt a patient to raise questions or concerns. I agree with you all that most patients feel that their lives and their health are now out of their control. Patients often express their frustration here in the facility. I know it's difficult to do, but try not to take it personally. Instead, remember to reassure them and to remind them that they can have control over their renal care.*

*We also have to figure out, from what the patient says, if there's anything we can do to make the situation better for the patient. In other words, are their concerns valid? If so, how can we improve things? Can we ease their concerns? If so, how? Can we help them by referring them to other staff for other problems? If so, who?*

## Communication Tips

(10 minutes)

**Trainer** states out loud:

*You'll notice I've posted two communication tips on the flip chart that we all can try. The first is called active listening. Patients just want to be heard, so when you practice active listening, it shows you care about what the patient is saying and feeling.*

*Here's how to be an active listener:*

*Pay attention to what the patient is saying. Look at the patient and use body language (make eye contact, face the patient, don't cross your arms, nod your head in agreement) to show you're following what they are saying.*

*Can you all describe ways that show you're actively listening?*



Listen for, and post, answers such as:

- ◆ Direct eye contact, if culturally appropriate
- ◆ Facing the patient
- ◆ Sitting at the patient's eye level
- ◆ Nodding your head in agreement

**Trainer** states out loud:

*Right. Those are all good ways to actively listen. Another part of active listening is to:*

*Repeat back feelings that you're hearing. For example,*

↳ *"It sounds like you're feeling tired of this routine."*

↳ *"It sounds like you find it difficult to stick to your diet."*

*The second communication tip is called assertive statements. Sometimes patients aren't clear what we want them to do or what the facility rules are. We often need to repeat them and rephrase them in a way that is relevant to the individual patient.*

*By using an assertive statement, patients will hear that we're serious without us having to raise our voices. There are three parts to an assertive statement.*

↪ **Focus on the behavior by being specific about what you need the patient to do.** For example:

*"Mrs. Smith, could you please sit very still for just a moment?"*

↪ **Acknowledge the patient's feelings.** For example:

*"I know you're eager to get out of here today."*

↪ **Restate the behavior and desired outcome, from the patient's point of view.** For example:

*"So sitting still will mean I can get you on the machine quicker, so you can get out of here."*

*These communication tips—active listening and assertive statements—may seem simple, but they take practice. Even with lots of practice, it can still be hard to remember to use them when we're faced with a patient concern or a difficult situation on the unit. So, let's try to practice a bit now.*

## **Case Scenarios**

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(15 minutes)

**Trainer** states out loud:

*I'd like for you to choose a partner and pair up. If someone is left without a partner, let me know and I'll be your partner.*

*I'm handing each of you an index card with a situation on it. Working with your partner, take turns reading what's on your card, while your partner uses active listening or assertive statements to respond to you. In each scene, one of you is the patient, while the other plays the technician. When you finish each scenario, give your partner positive feedback on how they did. If you can think of other ways they could have communicated, then share that as well.*

*For example, “you did a really great job giving me direct eye contact. The eye contact would have been even better if you had sat down next to me and nodded in agreement once in a while.”*

**NOTE TO THE TRAINER**



If you have an even number of participants, you should circulate between the pairs and offer assistance. Don't allow participants to escalate their role-playing situations into arguments. The point is to use good communication so that conversations don't turn into arguments.

**Trainer** states out loud:

*Okay. It sounds like you've each had a turn being the patient and the technician so I'm going to call time. I heard lots of great conversations with active listening and assertive statements. You all did great.*

*Now I'd like to ask the group to share which communication tips you found most helpful in your scenario. Can you imagine using either of these tips in your workplace? Was anything about the scenario practice difficult? Can you share with the group what made it difficult?*

## **Wrap-up/Questions**

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(10 minutes)

**Trainer** states out loud:

*You all raised very interesting points about communicating with our patients. It sounds like many of you are already doing some active listening and assertive statements. I encourage you to keep it up.*

*We all know that even with these skills, we will sometimes have conflict or disruptive patients. Getting help early or reporting to appropriate staff sooner rather than later will help the situation. Let's help one another to provide support to the patients and help them manage their frustration.*

*Remember too, that patients sometimes have a valid complaint about their care. Patients have the right to file a complaint or grievance if they feel we have not met their needs. You can encourage patients to take such action.*

*Do you all have any questions about the information you heard here today?*



Answer any questions that are raised.

**Trainer** states out loud:

*Thank you all for coming and participating in the in-service! Please see me if you'd like some additional information or resources related to "When Patients Have Concerns"*

## **Optional: Post-test**

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(5 minutes)

Hand out 1 post-test sheet per participant. Allow participants to work for a few minutes. Collect all sheets.

## Want More Information?

Here are some resources to help you adapt this training module to your facility's circumstances or to share with your staff.

### Articles

- ◆ End Stage Renal Disease Network of Texas, Inc., "Intensive Intervention with the Non-Compliant Patient." Dallas, TX, 2002. Available from [www.esrdnetwork.org](http://www.esrdnetwork.org)
- ◆ Mid-Atlantic Renal Coalition. "Working with Noncompliant and Abusive Patients" Midlothian, VA, 1994. Available at: [www.esrdnet5.org/Education/Staff/NonCompPts.pdf](http://www.esrdnet5.org/Education/Staff/NonCompPts.pdf)
- ◆ Levine, D.Z., "What is Our Duty to a 'Hateful' Patient? Differing approaches to a disruptive dialysis patient." *American Journal of Kidney Diseases* 34(4), 1999, pages 775-789.
- ◆ Service Employees International Union, "Preventing Workplace Violence in Health Care Settings." SEIU Occupational Safety and Health, Washington, DC, 1995, [www.seiu.org](http://www.seiu.org)
- ◆ Mary Rau Foster, "Dealing with Challenging Situations." Available from [www.fosterseminars.com](http://www.fosterseminars.com)
- ◆ Russo, Rick, "Improving Communication in Patient-Provider Relations." *Journal of Nephrology Social Work* (23), May 2004.

# Case Scenarios

As you use these scenarios, don't forget to refer to your facility's specific policies and procedures. And feel free to develop your own!

**Read this situation out loud and ask your partner to respond as the care provider:**

I am a brand new patient. I'm very scared, nervous and anxious about starting dialysis. One way I deal with my anxiety is to ask lots and lots of questions. I want to have some control over my care. I don't want to be pushy, but I want to know everything there is to know about dialysis. What do you say to me?

**Read this situation out loud and ask your partner to respond as the care provider:**

I am a patient whom you see regularly. I'm often in a bad mood and often complain about dialysis and how miserable it is to be sick. Today, I start cursing at you and say that you aren't helping me and that you're just making it worse. What do you say to me?

**Read this situation out loud and ask your partner to respond as the care provider:**

I am a quiet patient who doesn't usually say much. Today, my arm is hurting, and I yell at you for making it hurt. I say it's your fault, and I appear to be shouting without making much sense. What do you say to me?

**Read this situation out loud and ask your partner to respond as the care provider:**

I am a patient whom you see regularly. I'm often late for dialysis, but usually willing to stay on for my entire treatment period. Today, I was late again, and I insist that you remove me 15 minutes early, so I can leave on time. What do you say to me?

# Pre/Post-test

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Today's date: \_\_\_\_\_

Today's session: **When Patients Have Concerns**

**Goal:**

Increase patient/customer satisfaction through identifying and practicing basic communication skills.

**Objectives:**

- Determine benefits of using good communication skills and identify effective management of patients' concerns.
- Understand how patients' involvement in their care improves outcomes.
- Through group discussion, identify patients' concerns and understand techniques used to resolve such concerns.
- Demonstrate, through role-playing, how to effectively listen to patient concerns to determine proper response and enhance the efficiency of patient care.

**Directions:** Please circle your responses. There is one correction answer for each question.

**Questions:**

1. As an ESRD clinic technician at the dialysis facility, I demonstrate use of good communication skills in dealing with my patients concerns by:
  - a. Listening and addressing their concerns appropriately and effectively
  - b. Letting them know I have no time to listen to their problems (because I have my own), and raise my voice while asking that they please not talk
  - c. Ensuring that I listen and show concern, while writing down areas of concern that should be addressed by other care staff
  - d. a and c
  - e. None of the above

2. As an ESRD clinic technician, I know patients have concerns about their care, and I use the following communication techniques to maintain good communication:
  - a. Allow them to leave 20 minutes before treatment is complete every Monday and Wednesday – this helps them like me
  - b. Create an environment where they feel comfortable to raise questions or concerns by using appropriate active listening and assertive statements in addressing them
  - c. Acknowledge the concern by making eye contact, nodding my head or using other methods to validate the concern
  - d. a and b
  - e. b and c
  - f. None of the above
  
3. Practicing good communication is beneficial to patients and clinic technicians because it:
  - a. Can improve the dialysis care
  - b. Creates an environment that relaxes patients during care and reduces confusion about expectations
  - c. Increases time to provide better care in responding to patients
  - d. Increases patient-centered care time, which benefits the patients
  - e. All of the above
  - f. None of the above
  
4. Examples of caring for patients' concerns through good communication include:
  - a. Screaming at them for arriving 10 minutes late to the appointment, just to get it off your chest
  - b. Asking your patient to "stop whining" about his illness because he gave you an earful last week
  - c. Not mentioning the candy bar and pretzels you saw them eat while on the dialyzer
  - d. Remaining empathetic but firm about their concerns, while providing professional and efficient care
  - e. None of the above
  
5. All of the following are good communication skills except:
  - a. Showing frustration at patient's slightest concern
  - b. Active listening
  - c. Assertive statements
  - d. Expressing concerns and sharing what you can do to help