

Dealing with the patients

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Therapeutic alliance : importance

- therapeutic alliance, refers to the **close and consistent association** that exists between at least two individuals:
- a health care professional
- and a person in therapy.

Therapeutic alliance : importance

- The purpose of a therapeutic relationship is to **assist the individual in therapy to change his or her life** for the better.
- Such a relationship is essential, as it is oftentimes the **first setting in which the person receiving treatment shares** intimate thoughts, beliefs, and emotions regarding the issue

Therapeutic alliance : importance

- Therapists are encouraged to show **empathy and genuineness**.
- As with any other social relationship, the therapeutic relationship has boundaries which help to define acceptable and unacceptable behaviors.

Therapeutic alliance : Effective Communication

- Establish **eye contact**
- Speak **clearly**
- Do not go **to fast**
- Be sure every one **hear**
- Speak in your natural **style.**
- Stand up **straight**
- **Use gesture** in natural appropriate way
- Encourage **question**
- **Respond** to question without being side track

Therapeutic alliance : Effective Communication

- Listening to patients—**trying to understand their thoughts and feelings**—is crucial to effective communication.
- However, empathic communication requires more than understanding. The **understanding you have must be conveyed back to patients** so they know you understand.
- Finally, patient **feelings must be accepted without judgment** as to being “right” or “wrong.”.

Effective Communication : Listening

- Listening well involves **understanding both the content** of the information being provided and the **feelings being conveyed**.

Skills that are useful in effective listening include:

- 1) summarizing,
- 2) paraphrasing, and
- 3) empathic responding.

Effective Communication :

Summarizing

- When a patient is providing information, such as during a medication history interview, it is necessary for you to try to **summarize the critical pieces** of information.
- Summarizing allows you to be sure **you understood accurately all that the patient conveyed**
- and **allows the patient to add new information** that may have been forgotten.

Effective Communication : Paraphrasing

- When using this technique, you attempt **to convey back to the patient the essence of what he or she has just said.**
- Paraphrasing condenses aspects of content as well as some superficial recognition of the patient's attitudes or feelings.

Non effective Communication : Judging responses

- a number of less helpful responses are frequently used in communication with others.
- Any message from you that indicates **you think patients “wrong” or “bad” or that they “shouldn’t”** feel the way they do will indicate that it is not safe to confide in you.

Non effective Communication : Advising responses

- We also tend to give advice. We get so caught up in our role as “expert” or “professional” that we lose sight of the **limits of our expertise**.
- Eg Advise on personal matters/problems

Non Effective Communication : Falsely reassuring responses

- A third mode of response to a patient's feelings is a placating or falsely reassuring response. **Telling a patient who is facing surgery "Don't worry, I'm sure your surgery will turn out just fine"** may seem to be helpful, but is really conveying in a subtle way that the person "shouldn't" feel upset.
- We often use this kind of response to try to get a patient to **stop feeling upset** or to try to change a patient's feelings, rather than accepting the feelings as they exist.

Problems in Establishing Helping Relationships

There are countless sources of problems in interpersonal communication between pharmacists and patients. However, **certain attitudes and behaviors are particularly damaging** in establishing helping relationships with patients. These include

- stereotyping,
- controlling behaviors.

STEREOTYPING

- Communication problems may exist because of **negative stereotypes held by health care practitioners that affect the quality of their communication.**
- a “psychiatric” patient may create artificial or false expectations of how an individual might behave.
- If you hold certain stereotypes of patients, you may fail to listen without judgment.

CONTROLLING

- Patients are “told” what they should do and what they should not do—decisions are made, often with very little input from the patient on preferences, desires, or concerns about treatment.
- Yet in the process of carrying out treatment plans, patients do make decisions about their regimens—decisions of which we may remain unaware.

Dealing with difficult patients : How to Recognize the Bully?

Angry/demanding patients are the easiest to spot as they tend to:

- Rely on **intimidation and threats** (“I’m gonna talk to my lawyer!”)
- Manipulate others through **guilt**
- Have great difficulty dealing with any type of **frustration**
- Are **largely inflexible**
- **Degrade others** (particularly staff)
- Yell and/or **resort to anger** very easily

Dealing with difficult patients : Strategies for dealing with the Bully

- Acknowledge the patient's entitlement - **not to unreasonable demands**, but to realistically good care.
- **Avoid** logical (or illogical) **debates** with the patient
- **Do not allow** the patient to push you to **lose control of your emotions** and, by default, the situation
- **Set boundaries** (offensive behavior will **not** be tolerated!)

Dealing with difficult patients : the Silent Type

- This patient is so quiet and unassertive (opposite of the bully or the internet expert)
- that it is near impossible to **obtain a health history or determine his current medical issue.**

Dealing with difficult patients : Strategies for dealing with the Silent Type

- Asking **open-ended questions** often helps: “You seem quiet today. Can you tell me why?”
- Use communication techniques to **pinpoint the cause** – shyness, fear of authority, cultural or language barrier, medication or a condition such as depression or even hearing loss.

Dealing with difficult patients : Internet Expert

These patients present with print-outs of either **complex and/or marginal information** about their problem from a Web site and **begin demanding unnecessary medical tests or treatments**

Dealing with difficult patients : Strategies for Dealing with the Internet Expert

- Address unnecessary demands to see what the patient's needs **really** are
- Consider agreeing with the patient **at first** while **sharing your rationale for treatment**
- Provide **empathy for patient's concerns**
- If possible, **refer patient to other Web sites that would be more appropriate** and are generally recognized as being authoritative

Ten Tips for Dealing with a Difficult Patient

- **Listen** (“What I hear from you is....is that correct?”)
- **Communicate** (The patient may not understand why a policy is in place)
- **Take a deep breath!** (Think before you reply)
- **Exercise self-control** (Easier said than done!)
- **Be constructive** (Focus on what you can do to help)
- **Share the problem** (Discuss difficult patients with colleagues)
- **Let go of your ego** (Ask yourself – what’s the best outcome?)
- **Practice makes perfect** (Role-play difficult scenarios or situations)
- **Break off the relationship** (Last resort)



THANK YOU