

Working With Challenging Patients

The wonderful thing about working in a chronic renal care setting is that we all get plenty of practice in the area of conflict resolution. While the Network acknowledges that each situation is unique, we would like to offer some general guidelines to managing challenging patients.

Facility Level Resolution

A proactive or preventive approach is always best. When you notice behaviors outside the norm, or at the first sign of changes in patient behavior, consider the following:

- ✓ Remind the patient of his/her rights and responsibilities, as well as facility policies and procedures. Advise regarding possible consequences of violations.
- ✓ Explore the contributing factors and precipitating events that lead to the behavior.
- ✓ Involve the social worker in conducting a new assessment of social/emotional functioning, and intervening with counseling or referral as needed.
- ✓ Ask the Medical Director for help in assessing etiology of behavior and for aid in addressing the behavior with the patient. The physician can reinforce adherence.
- ✓ Inform the team of ways to approach the patient, and ways to manage their own reaction to the patient's behavior.
- ✓ Consider having the team (Medical Director, Social Worker, Nephrologist, Nurse Manager, Dietitian) meet with the patient and any available support person to discuss the problem and a plan of action.
- ✓ Call the Network to brainstorm about ways to address the patient's behavior, before it turns into a crisis.
- ✓ Involve the corporate risk management or legal department.
- ✓ Thoroughly document the behavior and any facility efforts toward resolution.

How the Network Can Help

The Network can provide:

- ✓ Informational material
- ✓ Technical assistance
- ✓ Guidance
- ✓ Referral to appropriate resources
- ✓ Facilitation by phone

Final determination of action must be made by the facility staff. The Network is not in place to adjudicate any situation.

What if the Situation is Not Able to Be Resolved?

Title 42 of the Code of Federal Regulations Section 405.2138 requires that patients be transferred or discharged only for the following reasons:

- ✓ Medical reasons
- ✓ The patient's welfare or that of other patients
- ✓ Nonpayment of fees (except as prohibited by Title XVIII of the Social Security Act)

Dismissal from the facility should not be an option for dealing with the non-adherent patient. Non-adherence should be addressed with the following:

- ✓ Education
- ✓ Team meetings
- ✓ Assessment of obstacles to adherence
- ✓ Counseling
- ✓ Referral
- ✓ Other methods aimed at achieving improvement

Available Tools

The following are some tools available to facilities:

- ✓ www.workplaceissues.com/articles.htm links you to articles on workplace conflict, including violence in the dialysis unit, by Mary Rau Foster, RN, BS, ARM, JD.
- ✓ www.ikidney.com has several professional to professional articles that can be used as a resource in providing in-services to staff on challenging situations.
- ✓ www.esrdnetworks.org provides a link to all ESRD Networks, and many have excellent materials for dealing with challenging patients posted on their web pages.

Network Contact Information

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