



CHALLENGING *behaviours*





People who work in healthcare need to manage *behaviour*

Being aware of factors that contribute to difficult patients and being prepared to address them will go a long way toward preventing these behaviours in the first place.

People who work in healthcare often say that the hardest part of their job is handling the behaviour of some patients.

People who are ill can, at times, be agitated and frustrated, often with good reason. You may also be speaking with people who are vulnerable and distressed.

Learning to manage the challenging behaviours and learning to watch out for the warning signs is vitally important.

Occasionally – hopefully not often – you may meet people who abuse or threaten you. Although this kind of behaviour is hard to deal with, what you learn from these interactions will help you prevent and handle difficult situations in the future. Staff that can handle difficult patients and challenging interactions confidently are an asset to any practice and a credit to themselves.

Being aware of factors that contribute to difficult patients and being prepared to address them will go a long way toward preventing these behaviours in the first place.

Dealing with agitated or difficult patients is something that you learn over time through your own patient interactions and by observing more experienced colleagues. Remember some types of behaviour are never acceptable. They include verbal abuse, threats and violence.

BEHAVIOUR TYPES OF DIFFICULT PATIENTS...

Most practices are committed to taking all reasonable precautions necessary to ensure the health, safety, welfare and well-being of its employees, patients and visitors, and to ensure that all employees are protected from physical and verbal abuse while they are working.

Types of difficult / angry patients may be

- Withdrawn, secretive
- The vague patient - limits information as a form of control
- The critical patient – everything is wrong, bad
- The intimidating patient – can be highly sarcastic, and make cutting remarks
- The negative patient – likes to dwell on all the misfortunes, and make others feel guilty

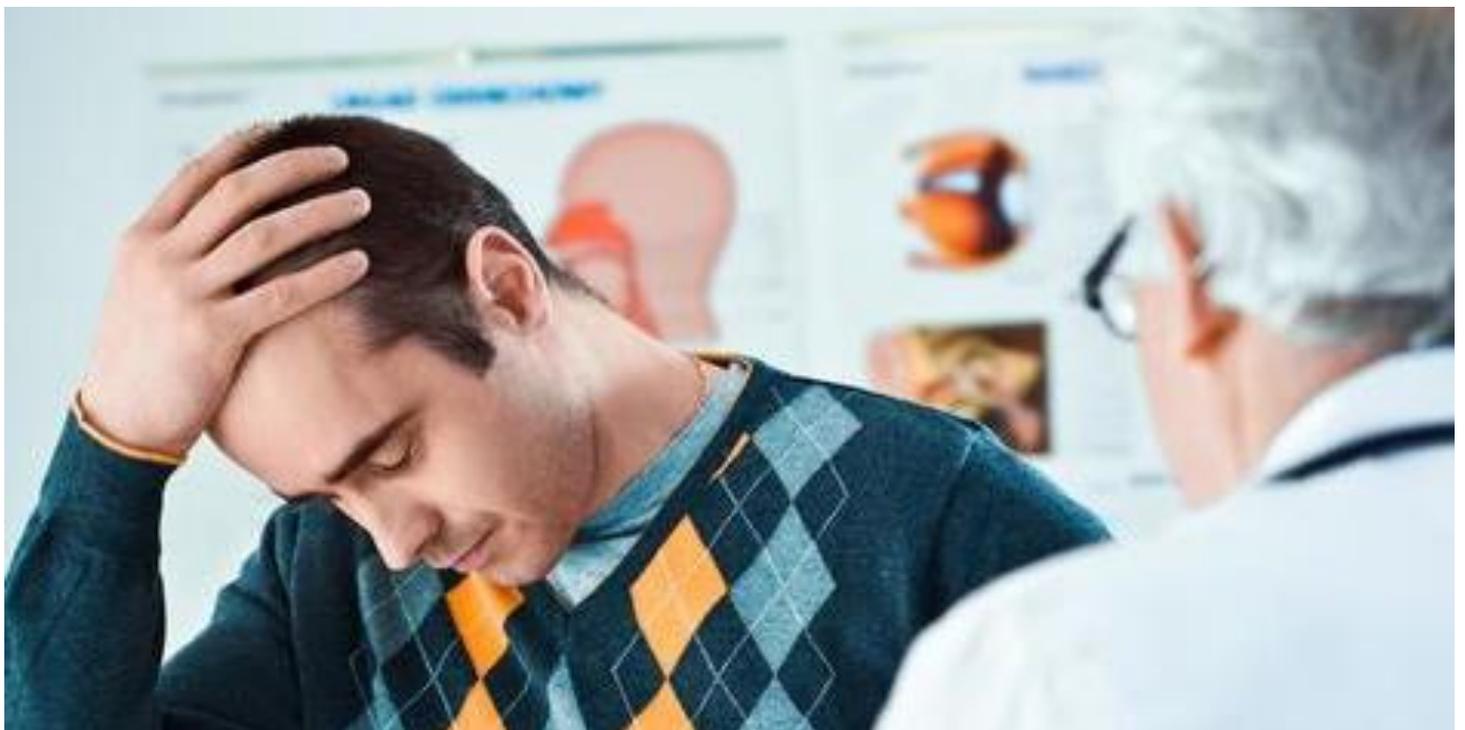
Here are some other difficult behaviours that you may encounter.

- Arguing with staff
- Confronting staff about their competency
- Requesting impossible time frames
- Not accepting the limitations and procedures in place in the practice
- Making culturally specific and inappropriate comments about staff or other patient
- Continually disregarding appointment times

So how do we handle difficult patients?

Unfortunately there is no one answer. Each patient and situation is different and will need to be dealt with in different ways. Dealing with difficult patients will always be a challenge. How you handle the situation can make all the difference! Your ability to defuse tense situations and confidently manage patient aggression will ensure you, other patients and your work colleagues are safe.





SIGNS THAT A PATIENT MIGHT BE CHALLENGING

There may be instances where violence and / or aggression forms part of a patient's illness. In these circumstances, the information should be recorded in the patient's medical record and flagged to ensure that staff are aware.

For some other patients it may simply be pain and fear that leads to increased anxiety and frustration, which can result in anger and even loss of control. Your best defence is knowing how to spot the signs that indicate a patient's emotional state is deteriorating and having strategies to defuse these situations.

Our advice is, don't make assumptions and try and consider how the patient feels. Remind yourself that it's not easy to be sick, in pain, very ill or frightened about what the doctor is going to tell them.

People may be challenging for many different reasons that you may not be aware of. Here are some examples of why a patient may present with challenging behaviours:

- They may be emotional from personal situations such as the death of a loved one
- They may be worried, anxious or scared about seeing the doctor
- The patient may be stressed by work issues or have simply had a long hard day
- They may be affected by alcohol or drugs
- They may be disabled or have a mental illness
- Some medical conditions can cause agitation such as: anxiety or mood disorders, depression, Alzheimer's or dementia.
- Even patients who are normally calm may quickly reach boiling point when they have to wait a long period to see the Doctor.

The signs that show a patient is *agitated*

Here are some signs that can show a patient may be becoming agitated or indicate a patient's emotional state is deteriorating.

Look for changes in body language as this can signal agitation. Examples include facial signals such as staring or frowning, body signals like fidgeting or pacing, clenched fists, crossed arms etc. and gestures including finger pointing

Other signs that the patient's temper is rising could be their voice becomes raised or shaky?

They demand excessive attention or sometimes a usually talkative person may suddenly become quiet. These are some of the many signals you may observe at the front desk that you need to act on.

Different types of challenging behaviour need a different level of response. You can deal with most challenging behaviour by using good communication and defusing strategies. Focusing on addressing the patient's needs can make the patient feel safer and that their concerns are being listened to and ultimately they become less

If you observe that a patient's temper is starting to fray while waiting to see the doctor, apologise that they are having to wait and if possible spend some time with them, maybe some small talk or just a friendly smile as you walk past.

If they indicate they have to go or are upsetting other patients speak to them about re-scheduling their appointment at a time that's less likely to involve a wait.

How do you deal with a difficult patient?

- Listen without interrupting
- Be empathetic
- Be aware of your tone and body language
- Stay calm and don't enter into an argument
- Don't promise something you cannot deliver
- Manage the stress

If a patient is angry enough to verbally abuse you, remain calm and professional. Keep some distance between you and the patient and maintain eye contact. It is best to listen without interrupting and respond calmly to the patient when they finish speaking. If appropriate, take a rude and angry patient into another area away from your other patients and don't get drawn into an argument.

Remain calm & professional

People who are upset sometimes do or say things that draw you into their emotional state. An angry person, for example, might try to provoke an argument by insulting you. It is important to remain neutral and in control. If you respond in a way that sounds defensive or argumentative, the situation is likely to escalate. The other person is then controlling the conversation and you have lost your chance to steer it towards the issues.

Try not to get personally upset by the rudeness of an offensive patient and don't fuel their abuse by making "value judgments" just stick to the facts. Try not to show what you think of the patient by being deliberately casual or coldly superior. Keep your professional detachment, stay polite and keep offering possible solutions you know you can deliver.

If the patient threatens you physically or you fear for your safety, don't hesitate to contact security or the police. For more immediate assistance, consider establishing a code phrase within your team that indicates when a staff member needs help. Knowing you can get help immediately gives the whole team a feeling that if necessary help is close at hand.

The workplace can be a stressful environment and involve many situations that may trigger strong negative feelings. By reflecting on types of behaviour you find challenging, you will be more confident to respond effectively.

Some people find it hard when people shout or get angry. Others find it difficult when they hear or see people in tears. Some might feel confronted when people question their competence by asking about their age or qualifications, or insist on speaking to a manager. Think about types of behaviour you have found particularly frustrating in the past, or

behaviour that left you upset long after the conversation ended.

Remember that your threshold for coping with behaviour changes over time. People who raise their voice might not upset you ordinarily but if you have had a series of people shouting at you over the course of a morning, you may find it difficult when the next person does the same thing. Or there may be other things happening in your life that make you less resilient than usual.

When dealing with trying patients, the best approach is to remain calm. Remember that the patient is not attacking you personally, but rather acting out on their feelings. Remaining calm will allow you to keep control and address the patient in a way that will defuse the situation.

Your reaction when confronted by an angry patient is likely to be emotional. You might feel your heart thumping, notice your thoughts racing or hear your voice change pitch or start to shake. You need to control your emotional response so you can think clearly and respond to the person, instead of just reacting to the situation. You learn how best to control your emotions through your life experience. Being aware of what triggers your emotional responses will help you understand what can sometimes make patients difficult.



Acknowledge & empathise

If someone is very emotional, you need to deal with that behaviour before you can talk about their issues. This involves allowing the person to speak, giving them a chance to let off steam and acknowledging how they feel.

When people have heightened negative emotions they often can't rationalise, problem solve or listen to what you are saying. It is important to wait for the emotion to recede before trying to respond. Determining the right time to speak is vital and waiting for silence is a good strategy.

One effective way to calm an angry or difficult patient is by being empathetic. Empathising with someone is not the same as agreeing with them. Acknowledging and empathising means reflecting what the person has told you, and showing you understand why they are upset.

However choose your words carefully. People may not react well if you try to tell them how they feel, or that you know how they feel. It is better to reflect what the person has told you. So instead of saying, 'I know how you feel' try saying 'So, what I'm hearing is...' this shows the patient that you are actually listening and care about what they are trying to say. When dealing with trying patients, your tone of voice and language are just as important as the words you use. While looking and sounding

Be aware of your tone of voice &
language

calm, confident and professional will set the tone for the conversation, you also need to stay respectful. This can be hard if the person is being disrespectful to you.

Using the patient's name while speaking slowly and softly will convey to the patient that you are taking their concern seriously and understand their frustration. Try and not talk down to the patient but use warmth and assurance in short sentences.

Give the patient choices, if applicable, provide them with alternatives e.g. 'What time would it be best to rebook your appointment?'

Avoid using negative language; instead try to begin your responses with "Let me explain," "May I suggest?" or "Your options are." Or, ask the patient if they have any ideas such as, "Can you tell me what you need?" or "Do you have suggestions on how we can solve this problem?"

Use words or phrases that show you want to help the patient, rather than control or argue with them. For example show you are open to considering other points of view e.g. 'we don't usually do X because ... Is there any reason we should do that here?' Replacing some statements with questions e.g. 'Were you aware that you needed to do X to qualify?' instead of 'You didn't do X so you don't qualify'.

Avoid words and phrases that seem like you are blaming the patient, for example 'You didn't complete the form properly' or appear you are not interested or that you are brushing off their concern.



Move the conversation *forward*

Sometimes people are so angry or upset that it is hard to get a word in and move the conversation forward. The following strategies may help in these situations:

- Silence. If you say nothing, the person may eventually stop to check you are still listening.
- Use the person's name to get their attention.
- Repeat a simple, helpful message until the person hears you e.g. 'OK, let me explain what we can do.'

Listen with your *body*

Sometimes the most important thing for a patient is to feel they are being listened to. Active listening involves concentrating on what someone is telling you and showing that you are listening.

To let the patient know you are 'actively listening' try using these techniques:

- verbal affirmations for example, saying 'uh huh' or 'yes'
- non-verbal affirmations such as eye contact and nodding
- paraphrasing what the person has been telling you in your own words e.g. ("So, what you're saying is...").
- checking your understanding e.g. 'I want to make sure I'm clear about this. Do you mean ...?'

Be careful not to unknowingly mirror the other person's body language. Keep a relaxed stance and a calm unresponsive face while maintaining good but nonthreatening eye contact. A nod to acknowledge you are giving the person your full attention will also go a long way to show the patient that you are 'actively listening'.

Through active listening, you can better understand what the other person is trying to say and you can respond appropriately.

Slightly furrow your eyebrows to show concentration

Tilt your head forward to show you are attentive and to the side to show curiosity

Nod slowly to encourage the person to share more

Look the other person in the eyes

Keep your feet still and point them toward the person who is talking





Don't *promise* something you can't deliver

“Be honest, even if you need to seek advice from another staff member. If necessary explain to the patient that you have a procedure to follow. “

The number one rule in managing difficult behaviour is NEVER promise something you can't deliver just to defuse the situation. This will almost always backfire and only make the initial problem worse. Rather, try to explain why and offer what you can do instead, providing choice and timeframes where possible.

For example: *Dr A is already fully booked but he could see you tomorrow afternoon. However I can get you in to see Dr B this morning. Which would you prefer?*”

Be honest, even if you need to seek advice from another staff member. If necessary explain to the patient that you have a procedure to follow.

Also try to be realistic with time frames. Being up front about what they can expect will be more beneficial in the long run. Be honest and don't say you will phone back today if it is unlikely that you will have time to do so.

Don't promise something you can't deliver

MANAGE STRESS AND SEEK HELP IF NEEDED

Wherever you work in the health sector, there should be people around you who can provide support and talk over challenging behaviour with you. They might be:

- your colleagues, if you work in a team
- a manager
- confidential counselling services, your workplace may provide one
- a trusted friend

Many people find it helpful to talk about how they feel after a challenging interaction. This is called debriefing. Debriefing is a structured, usually voluntary process and can help provide clarity about incidents and help people recover. It is usually carried out soon after the incident and explores what happened, your experience and reactions, and ways to manage your emotional responses. Some people debrief naturally after difficult incidents without realising it – it can be as simple as turning to the person sitting next to you and talking about what happened. Consider formal debriefing if this is offered in your workplace.

Difficult situations can be emotionally and mentally exhausting. Don't feel bad that you need a break to regain your energy and focus. It's normal to feel stressed and be upset or angry. Take a moment to let those feelings go. Feel good in the fact that you have the strength and skill to handle whatever difficulties come your way.

You might not feel like revisiting a difficult conversation straight after a phone call or meeting, but it is worth making this a regular practice. The more you learn from your experiences and the experiences of others the better you will become at handling difficult patients.

There are many things you can do to manage stress and boost your wellbeing in a healthy way.

They include:

- Taking time out from your telephone or desk after challenging conversations. Getting a glass of water or going for a walk can clear your head so you are ready to keep working.
- Using positive self-talk. Remind yourself the person is upset with the situation and not you personally, and that you can handle these situations.
- Practising relaxation. Some people use relaxation techniques like meditation and yoga, but you can choose any activity you find relaxing or uplifting.
- Spending time with people you love.
- Doing something you enjoy every day. This can be as simple as having coffee with friends, going for a walk, or reading a good book.



DEALING WITH DIFFICULT CALLERS

Responding to a rude and difficult person over the telephone is not that different to responding in person. Over the phone both parties have only words, volume and tone of voice to go by, where in face-to-face communication both parties also have the ability to observe the other person's body language. As difficult as it can be to deal with a rude person on the telephone, there are ways to manage that person's difficult behaviour.

Offensive behaviour doesn't have to be responded to. While the other person's anger can cause you to become angry, responding in the same manner will only escalate the situation. Make it a goal that the rude party will only hear gentleness and kindness from you. You need to set the tone of the conversation through words, tone of voice

and soft volume.

Ignore the rudeness, and focus on the reason for the call and supply the needed information.

- Listen
- Clarify
- Take the time to consider your reply
- Manage your emotional response
- Set the tone for listening and finding a solution
- Thank the caller
- Confirm agreement before hanging up

By remaining calm and professional you will usually end the conversation with a resolution.

THINGS YOU CAN DO TO PREVENT CHALLENGING BEHAVIOURS

The best advice in managing challenging behaviours, is to try and prevent them from occurring in the first place. Here are our top tips

- Use signage where appropriate to communicate frequently asked questions and important seasonal information.
- Be honest with waiting times when booking new patients or reinforce when making subsequent bookings
- Communicate with them if routine is changed (for example: the doctor is running late/ emergencies / equipment issues)
- Quote and write appointment costs on all appointment cards – explain / breakdown costs
- If a patient turns up early tell them they are early and explain doctor has a full schedule so they will have to wait for their appointment time, would they like to go and get a coffee and you will message them.
- Always explain to the patients the reason they are being kept waiting and offer alternatives.
- Explain to new patients when they book an appointment what the process is when they arrive at the practice for example please report to reception when you arrive.
- It may be reassuring to your patients to know you have policies and procedures you follow to ensure a quality service to

customers. E.g. a sign stating that it is the policy of this practice that full payment is expected at time of consultation.

The more you have to offer the patients the less they have to take issue with. Ensure you have sufficient seats to accommodate the number of patients usually waiting and that the atmosphere is calm and welcoming.

Another preventative measure in dealing with challenging behaviours is to offer distractions for your waiting patients.

These may include:

- Up to date reading materials
- Comfortable chairs
- Comfortable room temperature for the season
- Television with practice information or current news and sports
- Refreshment station – cold water dispenser
- Soft relaxing music
- Hand sanitisers and tissues
- Clear bathroom signage
- A Practice newsletter - Filled with interesting facts, health information, healthy recipes and any changes to the practice.

Remember most practices should have a policy for dealing with difficult patients this will be in the practice policy and procedure manual. Most information is written around legislation to ensure that we are all working within the law. If you are ever in doubt of the correct procedure for handling difficult patients or patient complaints, refer to the policy and procedure manual or clarify with your Practice Manager or Supervisor.



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