

**PREVENTING AND  
RESOLVING CONFLICT IN  
THE DIALYSIS UNIT**

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ESRD Network 13  
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**Zebra Exercise**

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**The Power of Perception**

- ☐ Perception
  - The psychic impressions made by the 5 senses (sight, sounds, smell, taste, touch) and the way these impression are interpreted cognitively and emotionally, based on one's life experience (Barker)
- ☐ Stereotypes
  - Personal theories of personality applied to others
  - Consists of collected beliefs and perceptions about classes of individuals, groups, objects. (Vacs et al)
- ☐ Prejudice
  - Learned beliefs and values that lead an individual or group of individuals to be biased for or against members of particular groups prior to actual experience with those groups. (Cashmore)

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### Perception Studies

- ▣ The case of Betty
- ▣ Snyder, Tanke, Berscheid Study (Cashmore)

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### A Case of Groupthink

- ▣ type of thought exhibited by group members who try to minimize conflict and reach consensus without critically testing, analyzing, and evaluating ideas.
  - Janis Irving, 1972

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### Impact on Healthcare:

- ▣ Physicians frequently underestimate the following:
  - Patients' levels of psychosocial functioning
  - Quality of life
  - Level of depression
  - Severity of important symptoms (*McLachlan*)

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**Changing the Paradigm**

- ☐ Strength Based Practice
- ☐ Assessing and Mobilizing Coping Skills

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**Conflict Contributors**

- ☐ Increase in front line staff without training in crisis issues
- ☐ Psychiatric conditions
- ☐ Depression- Most common psychiatric problem, affecting 20-25% patients (Kimmel)
- ☐ Substance abuse
- ☐ Financial problems
- ☐ Impaired mobility
- ☐ Language/ethnic barriers
- ☐ Medical problems
- ☐ Transportation
- ☐ Patient decisions
- ☐ Life tasks

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**Case Scenerio Questions**

- ☐ What are the presenting issues?
- ☐ How could this situation have been handled differently by dialysis staff?
- ☐ What are the Ethical Dilemmas?
- ☐ What kind of problems could arise out of this situation?
- ☐ How could additional training be helpful?

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### Communication Skills 1: Sympathy vs. Empathy

<p><b>SYMPATHY</b></p> <ul style="list-style-type: none"><li>▫ The act or power of sharing the feelings of another. A feeling or an expression of pity or sorrow for the distress of another; compassion or commiseration</li> <li>▪ NASW</li><li>▪ <a href="http://www.socialworkers.org/practice/behavioral_health/0605snapshot.asp">http://www.socialworkers.org/practice/behavioral_health/0605snapshot.asp</a></li></ul>	<p><b>EMPATHY</b></p> <ul style="list-style-type: none"><li>▫ The action of understanding, being aware of, being sensitive to, and vicariously experiencing the feelings, thoughts, and experience of another of either the past or present without having the feelings, thoughts, and experience fully communicated in an objectively explicit manner.</li></ul>
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### Communication Skill 2: Empower

<p>▫ Empower</p> 	<p>▫ Create Dependency</p> 
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### Communication Skill 3: Open Ended Questions

<p><b>CLOSED</b></p> <ul style="list-style-type: none"><li>▫ <i>"Why are you always late? You need to come to treatment on time or we won't be able to dialyze you."</i></li></ul>	<p><b>OPEN</b></p> <ul style="list-style-type: none"><li>▫ <i>"I've noticed that you have been getting to dialysis later. What has been happening?"</i></li></ul>
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**Communication Skill 5:  
Conveying respect and dignity**

- ☐ Hearing Vs. Listening
- ☐ Privacy
- ☐ Non-verbal communication

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**Communication Skill 6: Self  
Awareness**

- ☐ Take an inventory of yourself
  - What pushes your buttons? Don't let someone find out for you.
- ☐ What is your tolerance level? Anticipate and have a plan
  - Positive outlets and coping skills

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**Communication Skill 7:  
Boundaries**

- ☐ Airing out dirty laundry
- ☐ Helping relationships are not reciprocal
- ☐ We are PAID professional
- ☐ Questions to ask:
  - What is your purpose, as a healthcare professional, here?
  - What is the goal?
  - Whose needs are supposed to be met?
- ☐ Self care

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**Communication Skill 8: It's not personal!**

- ▣ Health care professionals often wear their hearts on their sleeves, which is often makes them good at what they do....but it also can cause hurt feelings.
- ▣ Patients come to dialysis with problems that existed long before they met the staff...it's not personal!

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**Communication Skill 9: Objectivity**

- ▣ Take an Outside Approach -Imagine yourself in the balcony looking down at yourself in the situation.

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**Cultural Competence**

*The process by which individuals and systems respond respectfully and effectively to people of all cultures, languages, classes, races, ethnic backgrounds, religions, and other diversity factors in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each.*

NASW: Guide to Cultural Competence

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## Cultural Awareness

- ☐ Ethics and Values
  - Individualistic vs. Family and Community
  - Silence vs. Spoken Word
  - Role of elders and children vs. income producing
- ☐ Self Awareness
  - How our culture affects our interactions
- ☐ Cross Cultural Knowledge
- ☐ Cross Cultural Skills

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## Professionalism

- ☐ Professionalism is the basis of medicine's contract with society. It demands placing the interests of patients above those of the physician, setting and maintaining standards of competence and integrity, and providing expert advise to society on matters of health. (Mlettinen)
  - European Federation of Internal Medicine and American Society of Internal Medicine

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## Control Freak?!?!? Not ME!!

- ☐ People who have chosen helping professions want very badly to help fix people.
- ☐ Sometimes the best way for adults to learn, is to be allowed to make bad decisions, that professionally trained helpers KNOW is going to be hurtful.
- ☐ Helpers struggle with this and it can impact professionalism.

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**Dealing with Toxic Environments**



- ☐ Don't light a fire!
- ☐ Maintain no-blame culture
  - approach situations as learning opportunities, not fault in character
- ☐ Use personal experience as a teacher
- ☐ Express willingness to work on issues together
- ☐ Take the high road
  - continue to do the right thing when no one else does
- ☐ At the end of the day, remember it's all about the patient.

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**How to Promote Professionalism in the Dialysis Unit**

- ☐ Be a leader- take the initiative to change professionalism with those around you.
- ☐ Be a role model! It's contagious!
- ☐ Be aware- if you deny power you are at risk for misusing it.
- ☐ Be nostalgic--- remember your roots. Why did you in into healthcare to begin with? (Thompson)
- ☐ Be proactive- do at least 3 patient centered things that are not mandatory. (Thompson)
- ☐ Be an educator- in service over and over again.

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**Must be willing to invest to get return**

- ☐ Facilities that are proactive and educate their staff on dealing with difficult situations spend less time working on difficult situations.
- ☐ Staff need to be trained in PREVENTION of conflict as well as how to react when situations occur.

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SUMMARY: Old Way Vs.  
New Way

- ▣ *Biomedical model*
  - **Biopsychosocial model**
- ▣ *Patriarchal*
  - **Recognize patients' ideas**
- ▣ *Physician is authority*
  - **Physician and patient are partners**

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- ▣ *Focus on signs and symptoms only*
  - **Take patients' emotional and social environments into account**
- ▣ *Direct and closed-ended questions*
  - **Open-ended questions that allow for elaboration**
- ▣ *Give patients directives*
  - **Mutual participation**

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- ▣ *When failure occurs it is the patient's fault*
  - **Patient and practitioner have joint responsibility**
- ▣ *Patient non-compliance is seen as bad*
  - **Non-compliance can give us valuable information; WHY is the patient non-compliant?**

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**Resources**

- ▣ Barker, Robert L. (1999). *The Social Work Dictionary*. 4<sup>th</sup> Edition. Washington DC. NASW Press.
- ▣ Cashmore, Ellis (1996). *Dictionary of Race and Ethnic Relations*. 4<sup>th</sup> Edition. London and New York. Routledge.
- ▣ Kimmel, Paul & Peterson, Rolf. "Depression in Patients with End Stage Renal Disease Treated with Dialysis: Has the Time to Treat Arrived?" Clinical Journal American Soc. Nephrology. 1 (2006): 349-352.
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**Resources Continued**

- ▣ NASW Practice Snapshot: Mincing Words: Empathy And Sympathy. [http://www.socialworkers.org/practice/behavioral\\_health/0605snapshot.asp](http://www.socialworkers.org/practice/behavioral_health/0605snapshot.asp). Accessed September 18, 2009
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