

Using Relationship Management strategies can feel counter-intuitive, uncomfortable or even uncaring at times. Consider that helpful behaviours don't always feel comfortable or rewarding but are intended to improve health care delivery and patient outcomes.

Actions that help...

- **Review this pamphlet** before each contact.
- **Treat the person as intelligent, responsible and in control.** Consider him or her an individual with unique circumstances, not as “that problem patient.”
- **Act only as a healthcare consultant.** Refrain from arguing the truth or rationality of statements. Directing care and giving advice is often not effective (in fact, it can make things worse). **Avoid getting tied to a particular course of action or outcome** (e.g., use of a walker, pain control), or even favouring one decision over another.
- **Discuss care options without a sense of urgency.** Slow your responses in order to plan what to say. Use fewer words. Allow for silences.
- **Consider making an explicit contract** outlining what you are willing and not willing to do. (Reciprocally, the patient can identify expectations of you.)
- **Debrief with a colleague after each visit.** Inform your team when you find a patient challenging. A consistent team approach to communication and care is beneficial – but not essential.
- **Practice compassion and forgiveness with yourself and your team.** The use of Relationship Management strategies will develop over time. Aim for consistency, not perfection.

Remember to act solely as a health care consultant, stay aware of the process and give options instead of advice.

This brochure is based on our experience at Victoria Hospice and research in the field.

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For Families:

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Relationship Management

When Encounters With Patients Challenge Us

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Between stimulus and response there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom.

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Victor Frankl

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There are times when providing effective care to patients and their families is difficult.

When all your usual helping strategies have failed, it may be useful to consider an approach called **Relationship Management**. This communication and interaction strategy is compassionate, respectful and professional and will likely increase the effectiveness and decrease the chaos of delivering care. It can be safely used with almost any client.

The key to recognizing when your usual caregiving strategies aren't working lies in noticing your own reactions to certain patient behaviours and interactions.

What you might notice about yourself or a colleague

- Finding it hard to keep visits limited to a reasonable length of time, or finding it difficult to get out the door.
- Feeling frustrated and angry towards the patient, alternating with feelings of sympathy and guilt.
- Flipping between complaining about a patient's behaviour and defending it.
- Making multiple referrals to other professionals in order to find a better way to fix things.
- Dwelling on the patient when away from work.
- Feeling drained and exhausted after each contact.
- Dreading the next contact!

Overall, a situation in which you find yourself giving more time and emotional involvement than you would otherwise find wise or sensible.

The stress of a serious or life-threatening illness may further challenge a person whose ability to adapt and function is already compromised.

Client behaviours you may find challenging

- Comments or actions that seem controlling, demanding or manipulative.
- Inflexible ways of thinking and behaving.
- Failure to follow through with agreed upon treatment options.
- Lack of insight into the connection between own actions and the consequences.
- Inconsistent, inappropriate, unpredictable or exaggerated displays of emotion.

What happens when your usual strategies don't work?

- Unintentional reinforcement of the patient's inappropriate or maladaptive behaviours.
- Continuation of the patient's emotional suffering.
- Ineffective healthcare delivery including poor symptom control and chaotic case management.
- Increased feelings of personal responsibility for the patient's situation.
- Heightened sense of professional inadequacy and decreased job satisfaction.
- Splitting of team members who either defend or blame the patient, or disagree on how to manage care.

This shift in approach requires awareness and intention. In order to improve care, we must be willing to reconsider our beliefs and strategies.

Instituting Relationship Management

Consider that...

- As a general rule, it's important to remember people are the way they are and not the way we think they "should be". They are likely doing the best they can with what they know.
- Underlying every dialogue is a process of negotiation for such things as control, competence and responsibility. The process may be played out with assignment of rigid roles such as victim to rescuer or expert to novice. Feeling caught on either side of these roles is often the source of our strong emotional reaction.
- Although a patient's choice may lead to what seems to us to be negative consequences, his or her autonomy is often more important than the desire to comply or be safe.
- Responsibility for **impacting the relationship** rests with the caregiver, and **decision making** rests with the patient/client.

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