

The Disruptive Patient

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Defining & Recognizing Disruptive Behavior

INPATIENT EXAMPLES:

Patient with chronic illness requiring large amounts of narcotics for pain control. Frequent lengthy hospitalizations. Yells at nursing staff if pain medication is not provided exactly on time or if care does not meet patient's expectations. Patient is angry and takes it out on the nursing staff.

INPATIENT EXAMPLES:

Patient hospitalized for brief surgery. Patient witnesses a nurse almost make an error (not serious). Patient told the nurse, "I'll hurt you if you ever try to do that again."

Patient with chronic illness requiring infusions on a short stay basis. Hx IDDM. Routinely arrives late for infusions, refuses blood sugar monitoring, orders enormous amounts of food, rude and demanding behavior.

Defining & Recognizing Disruptive Behavior

FAMILY MEMBER EXAMPLE

Mr. D was admitted w/ a recently dx'd long term disability leaving him completely dependant on others for his needs. His mother was the main family member involved in his care.

The mother's attitude toward the nursing staff was often hostile. Sarcastic & condescending remarks implying that the nurses were incompetent. Included derogatory remarks about the nurse's background and race implying that the nurses were prejudiced.

The patient was demanding and rude to staff, however, his behavior was worse when his mother was present.

Defining & Recognizing Disruptive Behavior

OUTPATIENT EXAMPLES:

Patient convinced that his symptoms are related to prior treatment despite extensive workup to the contrary. Distraught, numerous calls to various caregiver clinics. Threatens to commit suicide in the clinic with a gun.

Patient threatens harm to clinic staff if narcotic prescription is not refilled.

Defining & Recognizing Disruptive Behavior

Verbal Abuse:

- Angry tone
- Yelling or shouting in a hostile manner
- Derogatory comments
- Sarcastic remarks
- Swearing, profanity

Defining & Recognizing Disruptive Behavior

Other Behaviors:

- Hypercritical
- Physical aggression (intimidation, threats of physical harm, acting out physically)
- Sexually inappropriate comments or actions
- Splitting of nursing staff
- Refusal of care
- Refusal to follow procedure/policy/care plan
- Unreasonable demands

Why are these behaviors considered "disruptive"?

- Interferes with ability to provide optimal patient care
- Interferes with providing a supportive & safe working environment for our staff

Obstacles to Addressing Disruptive Behavior

- "Normalcy of deviancy"
- Failure to recognize disruptive behavior
- Lack of communication skills
- Unfamiliar with standards of conduct for patients and visitors
- Unfamiliar with available resources
- Fear of reprisal
- Inconsistency by staff/providers

Confronting Disruptive Behavior

Informal:

"Your request for pain medication was made in an angry and impatient manner. I apologize for the delay. However, I am asking you to speak to me in a courteous manner and a normal tone of voice."

"I felt put down by your sarcastic comment about...I treat you in a respectful manner and I need you to do the same in your interactions with me."

Confronting Disruptive Behavior

Informal:

"The comment you just made was inappropriate. I need to ask you to discontinue making comments like that."

"Your swearing/use of profanity is unacceptable. I am asking you to stop."

"I feel threatened when you (describe the action)...so I am asking you stop that behavior because it is not appropriate."

Confronting Disruptive Behavior

Formal Notice (letter)

- Describe the unacceptable behavior
- Refer to applicable policies re: patient/visitor conduct
- Explain the expectations & consequences
- Signed by the appropriate manager/director

Policies

- Patient and visitor conduct
- Workplace violence
- Termination of relationship with the patient
- Patient rights and responsibilities

Documentation

- Be objective
- Use quotes as appropriate
- Alerts other staff/providers
- Supports taking further action if needed
- Complete an incident report

Care Plan

- Address disruptive behavior in patient care plan
- Post the care plan to ensure consistency
- Care conferences
 - When developing a plan
 - After the plan has been implemented
- Alert other staff during hand-offs

Resources

- Nursing Administration
- Social Services
- Risk Management
- Patient Relations
- Medical Staff Leadership
- Public Safety (Security)

Questions/Comments?