Defusing an angry or upset patient

By Lindsay Yoo and Certina Ho

ealthcare providers, including physicians, nurses, pharmacists, and other allied healthcare professionals, encounter many different scenarios during a typical shift; this often involves the challenge of navigating unexpected situations, for instance, defusing an angry or frustrated patient.

Handling a difficult situation that involves an angry or upset patient is a reality that most, if not all, health-care providers will face or have faced at least once in their career. How individuals respond and resolve the issue is just as important as the issue itself, if not more so; the approach taken by the provider, and the way in which the situation is dealt with can make the difference between a satisfactory and resolved outcome versus the abrupt end of a compromised patient-provider relationship.

Despite attempts to de-escalate a hostile situation, emotions sometimes threaten to take over. Being prepared with an approach in mind, or at least being aware of how to deal with such scenarios, can be helpful to mitigate tensions that are inherent in these types of situations.

WHERE TO SPEAK WITH THE ANGRY PATIENT?

If a patient is noticeably irate and is causing a disruption to the provision of services to other patients, try asking the patient to see if they would accompany you to a more private setting such as the counselling room or an office. Doing so may help further calm the patient down, as this shows a sincere interest in speaking with the patient and that he or she will receive your full attention.

At the same time, however, be vigilant and judge the situation appropriately; never attempt to defuse an angry patient who could be dangerous (e.g. verbally or physically abusive) by yourself or place yourself in a situation where you would be alone with him/

her. Instead, ask a colleague to join the discussion. If you find that the patient is becoming progressively hostile or threatening as the discussion goes on, do not hesitate to contact security or the police when necessary. In anticipation of such a potential situation that may arise, it may be helpful for you and your staff to come up with a secret code or phrase that signals to other members of the team to call for help.

TAKE PROACTIVE STEPS TO PREVENT A RECURRENCE

Although not directly related to defusing an angry patient, taking steps

to prevent a similar occurrence in the future is an important consideration. If possible or if applicable, steps should be taken to address any underlying issues that may contribute to a patient's anger.

The below considerations can be included in staff training and orientation. A proactive approach can include taking measures such as meeting and discussing with staff to tackle the issue, making improvements to a process, or seeking clarification and documentation to prevent the same situation from happening again. As difficult and frustrating as this encounter may be to the provider and to

staff members, this is also a valuable learning opportunity to re-evaluate the system and make improvements to ensure that the service being provided to your patients is the best it can be.

De-escalating an intense situation with a patient is not an easy task; however, with a calm and considered approach, it can be less daunting. Consulting with fellow colleagues and coworkers on what they would do in such a situation, or what they have done in the past, can be helpful to glean different perspectives and ideas to better handle these challenging encounters.

KEY CONSIDERATIONS TO DEFUSE AN ANGRY OR UPSET PATIENT

Key Considerations	DO's	DON'T's
1. Stop, focus, and use your best listening skills	Stop whatever you are in the middle of doing	Multi-task (e.g. listen and do something else at the same time)
	Give the patient your full attention, and listen to him/her	Assume that you know all the facts about the situation without letting the patient finish his/her explanation, clarifying facts, and/or inquiring about certain points
	Summarize or paraphrase what you have heard/understood and ask questions to clarify	Interrupt the patient while he/she is speaking
	Express through your facial expression (e.g. keeping eye contact) and body posture (e.g. stand or sit up straight) that you are paying attention, receptive, and in control	Use any hostile or dismissive facial expressions or body language (e.g. clenching the jaw, frowning, smirking, rolling of the eyes)
Remain calm and commit to keeping your cool	Resist being drawn into the anger; detach from the situation and try to observe as a third-party person or bystander	Take the patient's remarks personally
3. Sympathize and acknowledge the anger	Resist the temptation to rationalize with the patient at the very beginning. This should be attempted after the issue is resolved and the patient has calmed down	Respond to the patient's anger with your anger
	Sympathize with what the patient has told you, and how he/she feels	Fault the patient for the situation or be overly defensive
	Address the patient by his/her name; use a soft, firm, and slow voice when speaking to the patient	Shout over the patient
4. Apologize	Offer a sincere and straightforward apology for the problem they are having (or perceive to be having) and/or the emotions that they are experiencing	Infer that you accept blame for something for which you are not responsible or have no control over
	Show empathy for the patient – acknowledge the emotions	
5. Look for a solution	Ask the patient what he/she believes should be done, or offer your own feasible resolution to the problem	Try to win or argue with an angry patient

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