

Patient Complaints 2008-09: Addressing Respect and Dignity and Access to Care

The Patient Services Department completed an analysis of patient complaints for 2008-09 and found that *respect and dignity* and *patient access to care* were the two primary areas of concern to patients in both years. This article will provide you with details about patients' concerns and what you can do about them.

Examples of respect and dignity issues for patients include complaints about staff who:

- don't listen
- act more concerned about themselves than the patient
- minimize or ignore concerns voiced by the patient
- argue with the patient

Within the dialysis setting, appropriate professional boundaries, interpersonal communication and conflict resolution skills are critical to effective provider/patient relationships. They are learned skills that take time and practice to develop. Staff training should include opportunities for practice (role play) and should be provided at least annually in order to develop proficiency in these areas. These skills can enhance staff relationships with all patients who bring to the dialysis setting their own interpersonal challenges due to a multitude of underlying causes like cultural differences, family dynamics, educational level, socioeconomic status, mental illness, and substance abuse.

There are resources available to facilities to assist with staff training. The Patient Services Department recently emailed to all facility administrators and social workers a training tool on staff professionalism. Each facility should have a copy of The *Decreasing Dialysis Patient/Provider Conflict* (DPC) Toolkit. The toolkit and other resources are available on the Provider page of the Network #15 web site at www.esrdnet15.org.

Patient complaints about access to care include:

- feeling pressured to stay in a facility when a request to transfer has been made
- feeling pressured to transfer when the doctor or key staff have moved to a competing provider

Actions by staff or physicians to influence patient decisions about their choice of provider can be perceived as pressure and interference with individual choice, especially when it is unsolicited by the patient. Patients have the right to choose their dialysis provider and should be encouraged to freely make that choice. There are resources, like *Dialysis Facility Compare*, that provide objective information to assist patients with deciding on their choice of provider. What may seem like the "wrong" decision to doctor or staff may be the right one for the patient for reasons that may not be evident. Action by facilities that interferes with a patient's transfer process, like withholding the transfer of medical records is a violation of the Conditions for Coverage.

- patient denied admission to facility due to lack of permanent vascular access

Patients must be informed and educated about the benefits, risks, and hazards of each type of vascular access. The social worker should be involved and determine whether psychosocial considerations, such as body image, needle fear or anxiety need to be addressed. Ultimately, each patient has the right to make an informed choice about their hemodialysis access.

- facility not following through with modality training as specified in patient's plan of care

Patients have the right to receive the necessary services outlined in the patient plan of care. Patients have the right to receive individualized care as determined by the facility interdisciplinary team and to be included on that team. The care specified in the plan of care should be delivered to the patient or the plan of care should be revised.