Professionalism in the Dialysis Setting
Objectives

- Identify the characteristics and boundaries of proper professionalism
- Develop an understanding of how professionalism impacts conflict
- Review case scenarios of breaches in professionalism
What is professionalism?

- *Mirriam-Webster*-exhibiting a courteous, conscientious, and generally businesslike manner in the workplace
- Practitioners are expected to demonstrate behaviors that reflect a commitment to continuous professional development, ethical practice, an understanding of and sensitivity to diversity, and a responsible attitude toward their patients, their profession, and society.*

Professionalism

- Describes a certain type of behavior in the workplace
- Based on our values and understanding of our professional roles
- Evidenced in our behavior
Professional is judged through:

- Our Image
- Our Communication
- Our Competence
- Our Demeanor
Who would you prefer caring for you...?
From the Patient’s Perspective

• A professional is...
  – Trustworthy
  – Competent
  – Empathetic
  – Respectful
  – Caring
Why care about professionalism?

• Patient grievances often center around professionalism
• It builds confidence and promotes mutual respect among employees
• It encourages a patient perception of safety which leads to satisfaction with care
Professional Boundaries

Challenging situations are often the delayed result of professional boundary violations.
Becoming Personally Involved

- Sharing that shifts FOCUS from pt to professional
- Disclosing personal problems/employee concerns
- Lose ability to respond objectively
- React emotionally
Case Scenario 1

• Patient calls the Network and files a grievance. Among many things, he states that he refuses to have a certain technician cannulate him because the technician had been talking about the horrible divorce she was going through, and she was angry. He was afraid that she wouldn’t concentrate on his arm and would hurt him.
Gifts

- Unit policy usually exists against giving/receiving of gifts
- Protects patients from feeling that they need to pay extra for quality
- Protects staff from feeling they need to give extra attention
Case Scenario 2

- A grievance was filed by a patient who stated she had been giving a nurse $20 per treatment to provide her with the best care possible. Subsequently, the nurse did provide great care, but became overwhelmed with the amount of work it took to keep the patient happy.
Showing Favoritism

- Showing that you favor one patient over another, or facilitate a patient favoring you over other staff
- Bending the rules
- Creates expectation that it will be done again
- Expectation that other staff will do the same
Case Scenario 3

- Patient called the Network and stated that last Friday the head nurse put him on late, letting others go before him. It was determined that the patient had been coming earlier than his appointment and the regular tech usually had the place ready in the mornings 20 minutes ahead of schedule. Because the patient was a nice quiet fellow, the tech started putting him on early.
Dual Relationships

- Exchange of goods or services
- Sexual partner
Case Scenario 4

• Patient files a grievance stating that the tech purposely infiltrated his arm. The patient had been doing work on her car to save herself money and to help him earn some cash. The car broke down and she blamed him. The two had a confrontation on the floor before the patient was put on and she was the assigned caregiver.
Other Pitfalls

- Flirtation
- Inappropriate dress/language
- Ordering/parenting
- Having the last word
- Threatening termination
Case Scenario 5

• A dialysis facility dietitian has been trying to explain the importance of monitoring potassium. The patient begins yelling at the dietitian that she did watch her potassium and she was sick and tired of being harassed. The patient continues to get louder and tells the dietitian, “What do you know? You are too fat yourself!” The dietitian says to the patient, “If you don’t shut up you can never come back here!”
Proper Professional Behavior

• Encouraging patient self-determination
• Providing informed consent
• Competence
• Not taking unfair advantage of any relationship
• Avoiding dual relationships
• Respecting privacy/confidentiality
• Empowering patients rather than creating dependency
• Not taking things personally
How do we not take things personally?

• Know yourself
  – What pushes your buttons?
• Recognize your limits
  – What is your tolerance level?
• Anticipate and have a plan
  – Positive outlets and coping skills
• Our response can either escalate or de-escalate the situation
What if I am not sure whether I am being professional?

• Ask yourself these questions:
  – Would this be allowed in another medical setting?
  – How does this activity assist the patient in care of his or her ESRD?
  – Can this be documented in the medical record?
  – Are you willing to do this for all patients?
Healthcare workers are often nurturing and sensitive, thus susceptible to the formation of intense personal relationships.
For additional information, please visit the 5-Diamond Patient Safety Program website at http://www.5diamondpatientsafety.org.

The 5-Diamond Patient Safety Program is endorsed by the Renal Physicians Association (RPA), National Renal Administrators Association (NRAA), and American Nephrology Nurses’ Association (ANNA).