

## Retaliation Team Activity:

### *Understanding Retaliation from the Patient's Perspective*

**Activity Leader:** Ideally the Social Worker

**Topic:** Do patients think differently than staff do about the issue of retaliation?

#### STEP ONE:

The following questions were posed to Network 17's Patient Advisory Committee (PAC). The PAC is comprised of members representing all modalities and widely-varying lengths of time with a diagnosis of end stage renal disease (ESRD); some for 20 years, others for one.

Please review the patient feedback provided below with your staff. Give all staff a copy. Please call on individual staff to read each quote aloud to the group.

#### 1. Does retaliation exist in dialysis facilities?

*In some facilities, it is always a fear and a possibility.*

*I'm not sure, but in my mind, it does.*

Most patients merely replied: *Yes.*

#### 2. What can dialysis facility managers and staff do to address the fear of retaliation that holds many patients back from voicing concerns about their care? Have you ever complained about a staff person? How did that go? What would make you feel comfortable doing that?

*Not sure, because they usually know who made the complaint and don't tend to like it.*

*I have received comments from a manager and nurse that feel like a threat, such as, 'if you're not happy here, you can always transfer to another facility.' Or, I've been 'encouraged' (in reality it felt like being pushed) to do a modality change. I don't want to change facilities or modalities. I want things to work well here. Don't they want the same thing?*

*Misinformation, rumors spreading around labeling a patient and/or patients as trouble-makers-the worst scenario. Patients seen as more like objects than humans. Crude policies with crude wordings. there can be more but most patients are very scared and don't want to participate in any kind of social group...so they think it's best to say nada. How can patients feel like a team member when you're not allowed to have a say or opinion, and there's no dialog? Perhaps the wrong type of people hired? Perhaps lack of training? Perhaps bad policy? The dialysis industry is a very complex tree and us patients may not know the real other side as to how things are, so it cannot just be affecting us patients but the whole staff as well.*

### ESRD Network 17

*There are times when we inform our technicians, charge nurses about the issues (complaints) we have about our safety, pain, and discomfort. Most of the time our complaints are ignored or forgotten about.*

*Get it out in the open and make people like me comfortable with the word “Grievance.*

*Staff could ask say once a month is there are any questions about their care or concerns that they could help with. When I had dialysis they held monthly care meetings that I always attended. The staff could make sure the patients not only know of these but are made to feel welcome to come and voice whatever they want. Patients need to feel they are the center of their care.*

*Solicit input on a regular basis, and assure the patients that their candid, honest responses are desired and respected.*

- 1. Smile. greet the patients making them feel welcomed. Show interest not just in their health but also social life. Never be critical or judging out of personal preferences. Patients come in many cultures, backgrounds, and beliefs... and each one must feel welcomed, accepted as part of the renal team. "Mi Casa es tu Casa."*
- 2. Confirmation and guarantee officially by clinic, company that they will not discharge you or shun you or ignore your needs if feedback is given over any aspect of the company's performance.*
- 3. Complaints of unfair policies... bad needle stickers...handling of complaints in front of other patients to belittle, embarrass the patient? All matters must be done in private. Most people do not like to be told what to do, or/and don't accept criticism so it's natural that staff members react the same way. However, the lead/head nurse must be aware and practice to the upmost professionalism to lead the rest of the staff in the right direction, otherwise it will just fall all apart.*

## STEP TWO:

After reading the patient quotes aloud with your staff:

- Divide the staff into small groups (ex: about four staff per group).
- Ask each group to identify three things that can be done to help patients trust there will be no retaliation if they speak up about a problem or file a grievance at the facility, Network, or with the State Survey Agency.
  - Allow 5-10 minutes for this and then reconvene as a whole group.
- Write all suggestions on a dry erase board or a large piece of paper everyone can see.
- Discuss the suggestions as a group.

**Thank you!**