



ASM24
Annual Spring Meeting

Welcome!

Professional Development
Workshop

April 19, 2024



Effectively Dealing with Disrespectful Patients & Staff

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Learning Together

- **Let's make a "learning deal"**
- **Devices**
- **Engagement courtesy**
- **Privacy/confidentiality**



What I Want to Learn Today...

Complete this sentence:

“What I want to leave with (or learn) today is...”

Share your answers with us



Assumptions

You have influence

Your actions have impact

Both patients and staff can be the “problem”

“Patients” include their parents or family members

Everyone needs to have successful hard conversations to address disrespectful behaviour, resolve disagreements, establish boundaries and develop professional relationships



What Will You Learn?

- **Define and identify disrespect in dentistry**
- **Explore the impacts of disrespect**
- **Tools for addressing disrespect**
- **Making your action plan to address disrespect**
- **Skills for having “hard conversations” with badly behaved patients and staff**



A Great Place to Start

I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.

-Maya Angelou

Everyday, when you walk into the office, you have the power to choose how you will make everyone feel (and remember you).



Part 1: SETTING THE STAGE

What is the most common or worst disrespectful behaviour you've experienced from patients or coworkers?

Courageously share with all of us your experiences

IT STARTS WITH A CHRISTMAS STORY





Minions:

Nameless, faceless servants who derive their importance from the person who orders them around.

DEFINING DISRESPECT

To *disrespect* someone is to act in an insulting way toward them by acting rude, insensitive, and offensive.

Synonyms: disdain, contempt, disregard, scorn

Slang abbreviation *dis* comes from *disrespect* and means the same thing.

Disrespect can begin anytime, anywhere and with anyone



DEFINING UNPROFESSIONALISM

“Not exhibiting a courteous, conscientious, or generally businesslike manner in the workplace.”

Examples: dishonesty, unfairness, intolerance, abrasive interactions, lateness, arrogance, being uncollaborative, abusiveness, impatience

Unprofessionalism can begin anytime, anywhere and with anyone

The Spectrum of Disrespect

Inappropriate Communication

- **Gossip**, social media comments, nasty remarks/emails, bad jokes, sexual remarks, insults, threats, shouting, humiliation, spreading rumours, **unjustified criticism**, lies, talking back

Bad Behaviour

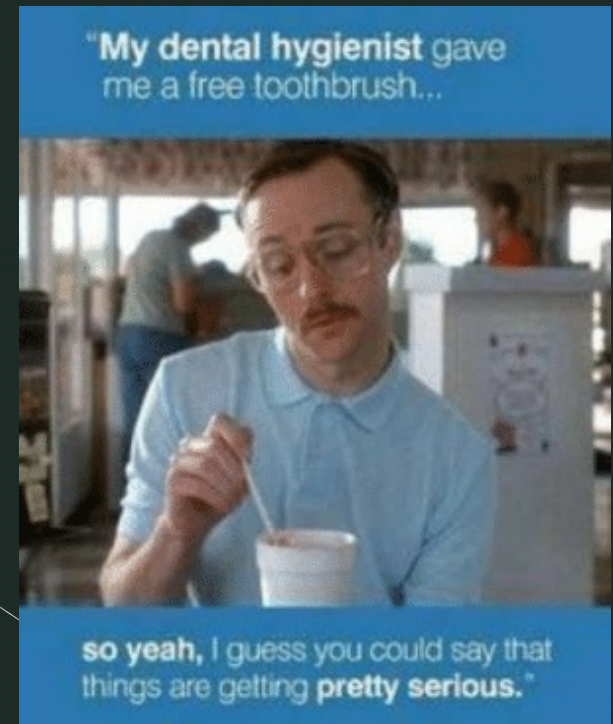
- Eye rolling, dirty looks, finger points, staring down, interrupting, door slamming, invasion of space, flirting, **discrimination**, harassment, bullying, **ignoring customs and culture**, **stereotyping**

Sabotaging work

- Withholding pertinent information, leaving out of communication, failing to give credit or stealing credit, removing/changing tasks, **unmanageable workloads**, impossible deadlines, preventing promotion/raises/training

What Causes Disrespect in Dentistry?

- Communication barriers
- Lack of awareness (i.e. cultural)
- **STRESS, anxiety and fear**
- Lack of boundaries
- Power imbalances
- Poor social skills
- Bad manners/rudeness
- Conflict/disagreement
- Mental illness/Addiction
- Intimidation/coercion
- Bullying, harassment & discrimination





**Dental
DISRESPECT**
*most often occurs
during:*



**1. Disagreements
about
bills/insurance**



**2. Bad news or
unexpected
change in
treatment**



**3. Communication
breakdowns**



**4. Staff
performance
management**



**5. Disagreements/
differences of
opinion**

What isn't Disrespectful?

Respectful expression of differences of opinions

Difficult discussions about procedures, billing, insurance, prognosis

Appropriate managerial or supervisory direction

Constructive criticism

Reasonable changes to assignments or duties

Correction of inappropriate behaviour

Single incidents of thoughtless, petty or foolish words or acts that cause fleeting harm

Provided there is no disrespectful behaviour involved.



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Why don't we speak up when people behave badly?



In groups of 3:

Discuss why you don't speak up or dislike conflicts

Write down your top answer

Share it with us



Roadblocks:

People don't speak up when patients or staff behave badly because:

- **Fear of: retribution, making it worse, causing offence, a complaint**
- **They don't know *how* to speak up**
- **We want to be perceived as “nice”**
- **Don't want to cause a scene**
- **There's too much risk**
- **It takes courage and is uncomfortable**
- **You may have to change**



Advantages of Speaking Up

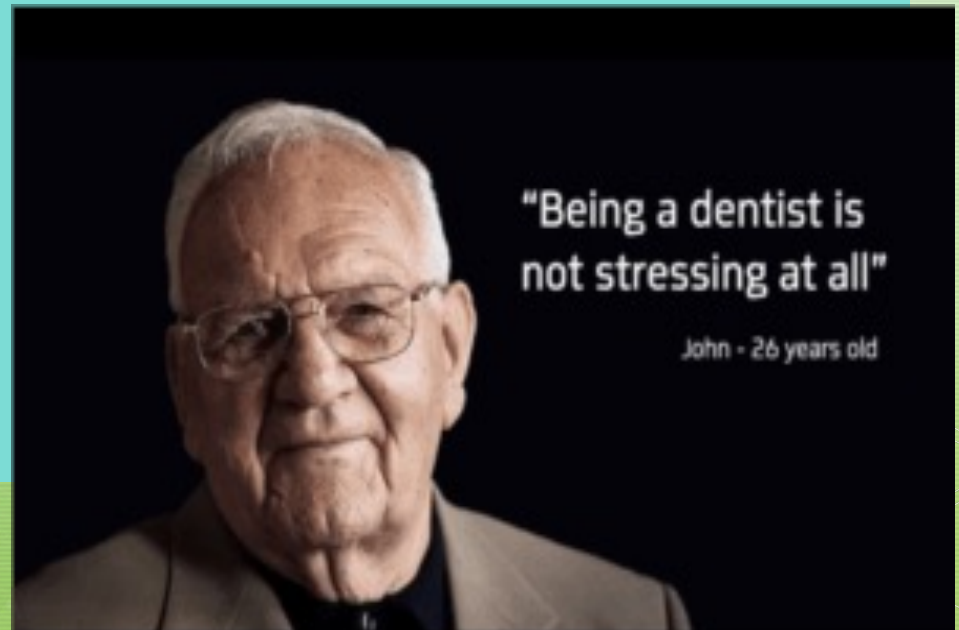
Disagreements and conflicts are **normal** and can improve your practice



- Expose different views
- Clarify expectations/set boundaries
- Protect /defend your colleagues
- Improve patient relationships & results
- Improve communication
- Encourage openness/honesty
- Leverage diversity/differences
- Workplace harmony

Unresolved Disrespect & Conflicts Create...

- **Low morale and workplace culture**
- **Frustration and anxiety for everyone**
- **Gossip/ reputational impacts**
- **Patients leave**
- **Health/stress**
- **Staff quit/sick leave**





**If we choose
silence, we are
accountable for
our role in
ignoring the
problem or
consenting to
the
disrespectful
behaviour**

Workplace Respect Starts with YOU

Become Workplace Respect Leaders

- **Manage yourself - model good behaviour**
- **Establish policies/notices**
- **Apply rules consistently**
- **Speak up**
- **Engage directly and respectfully**
- **Support/assist others**
- **Show gratitude, empathy, compassion**



Set Up for Success: Preventing and Addressing Dental Practice Disrespect

Zero Abuse

We operate a zero abuse policy, both physical and verbal towards any member of our team.

Any patient found in breach of this policy may have to find alternative dental care.

Please respect the team that looks after you.



Providing NHS Dentistry 

Do you have the following?

- A Patient Expectation Poster
- A Respectful Workplace Policy
- A Protocol for documenting events
- Training for your staff so they are equipped to deal with disrespect

Respectful Workplace Policy

77

“Central Health will promote a safe and respectful workplace for all its employees where disrespectful behavior, harassment and bullying are unacceptable anywhere in our workplace, at any level”.

This policy applies to all executive staff, managers, supervisors, physicians, staff, volunteers, students, contractors and all others working or carrying out duties on behalf of Central Health.

CG Hylton

Tips for Building Great Patient Relationships & Avoiding Conflicts

Use the 80/20 rule – that means speaking 20% of the time. Most of that 20% should be open-ended questions to help lead the patient to make their own informed decisions.

Use plain, easy to understand language with visuals. Remove the intimidation barriers. Kids want to learn to.

BEFORE you do anything, show them the “problem” and explain why they need treatment and what you’ll be doing. Also, if they don’t have insurance coverage, talk about the costs.

“Help me understand...” ”Do you have any questions or concerns...”

Keep notes about the patient’s preferences, background in their file so your team can treat them according to their needs

Put yourself in the patient’s shoes. What would you need to be comfortable, feel cared for, feel supported? Patients are part of your team!

“It’s not what you say, it’s how you say it.” You may say all the right words, but if you’re not listening or you’re using negative body language, the entire effect of your message can be misconstrued

Directly Confronting Disrespect & Unprofessionalism

If you're comfortable, the best way to communicate with a badly behaved patient or colleague is to be:

- In private (if possible)
- Brief
- Informative
- Fair
- FIRM
- Silent/allow a response
- Written follow up & thank you



Pre-conversation Homework

- **What's really going on?**
- **What is the most important point you wish to make? - what you really need to change**
- **What approach will be the most effective? – think about using visuals or other tools to help explain the issues**
- **If it's a patient, consider using words and language they will understand**
- **What has history shown you about the other person/s? What is important to them?**
- **What could go wrong and how can you plan for that?**
- **What result could you live with?**



Plan the Conversation: Set the Environment

Creating the environment for success:

- **Positive attitude**
- **Put yourself in the shoes of the other person**
- **Know the facts**
- **Define the issue/s**
- **Take an honest self-inventory**
- **Look for shared interests**
- **Deal with facts, not emotions**



Let's Practice!

Get into a team of 2 persons

Paul will set the scenarios where you have been disrespected

Have a conversation

There will be 2 examples

5 minutes + sharing for each example



**Practice
Makes
Perfect**

Scenario #1 – The rude/nasty patient



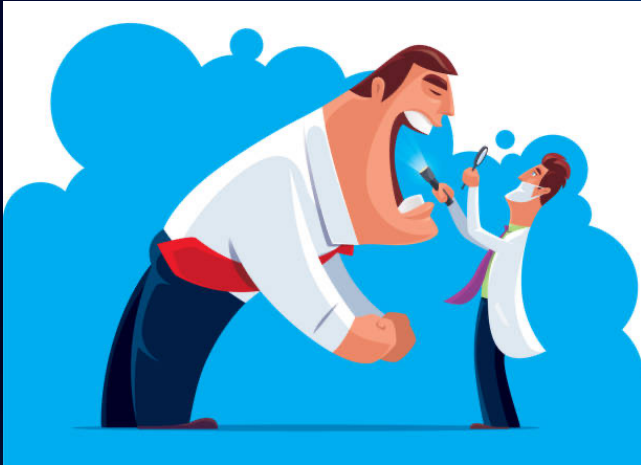
Background

The patient is unhappy that his “perfect” teeth have a cavity and has an argument over the proposed solution to fix the tooth.

He doesn't believe that he needs a filling, but is shown the x-ray and agrees to have it filled. That doesn't mean he is happy.

When the frustrated patient pays his bill, he tells the receptionist the dentist was just out to make money and that he didn't really need a filling.

Scenario #1 – The rude/nasty patient



Prepare for the conversation

Context – how long has he been a patient, past history, similar events, impacts

Remember - Brief,
Informative, Fair, Firm,
Silent

What are your ideas for
how the conversation could
be more successful?

Scenario #1 – The rude/nasty patient

The Patient's Response



**Patient response to hard conversation:
Sincere embarrassment when confronted.**

**“I’ve had a bad day and was very
stressed.”**

“I was mad at myself for getting a cavity.”

**“I’m sorry for saying that. I was out of
line.”**

Don't interrupt or try to correct – show patience

Encourage the sharing of their issues – “I want to understand what has upset you”

Place yourself in their shoes

Clarify the real issues – “Can you say more about that?”

Restate – “I can imagine that was upsetting”

Validate – “I really appreciate that we are trying to figure this out”

Appreciate - It's hard for them too.

Tips for Listening Actively

Hard Conversation Helpful Tips

During the conversation try to:

- Acknowledge each other's perspectives – agree to disagree
- Focus on the future - move away from past positions
- Set behavioural boundaries – stop the conversation if it becomes disrespectful
- Be specific about what you need
- Ask the other person to suggest a solution
- Be willing to compromise
- Own your part



If you're Disrespected – What shouldn't you do?

- **Assume the problem will go away**
- **Pretend nothing happened**
- **Not address the issue**
- **Respond too quickly and emotionally**
- **Respond disrespectfully**
- **Antagonize/ escalate**
- **Gossip/email/social media fight**





Some Phrases to Avoid

- **“You always” or “You never” – instead use “I’m noticing... and here’s why it’s bothering me”**
- **“Yes, but...” – instead use “what I’m hearing from you is...”**
- **“You should be more like...”**
- **“This never happens with my other patients /colleagues”**
- **“You’re overreacting” – instead use “Ok – I’m listening. Tell me more. Help me understand what’s going on for you.”**
- **“Calm down” or “You’re crazy” or “That’s crazy”. Instead take a break and cool down. Ask “What do you need right now?”**
- **“It’s not that big of a deal” – instead respectfully acknowledge that you have different perspectives**

Scenario #2 – The Dumb Idea Background

At a morning team meeting, there is discussion around how to handle a challenging child patient and their parent coming in. You are a dental assistant.

The team is sharing their ideas for how to calm down the frightened child and the unhelpful parent.

When you share your idea to have a dental assistant hold the child's hand, a co-worker hygienist interrupts and says your idea was "dumb".

Scenario #2 – The Dumb Idea

Prepare for the conversation

The hygienist has done this before to others. She has worked there a long time and you have only been there for 6 months. She thinks she “knows best”. She can be “bossy” and is set in her ways.

Remember - Brief, Informative, Fair, Firm, Silent

What are your ideas for how the conversation could be more successful?

You have had a very similar experience at another dental practice. Your idea worked well.

Scenario #2 – The Dumb Idea

The Hygienist's Response

Hygienist response to the hard conversation:
She becomes defensive. She believes she is right and gets irritated she is being challenged. She becomes emotional and rude.

“I have worked here 16 years. I know our patients better than you.”

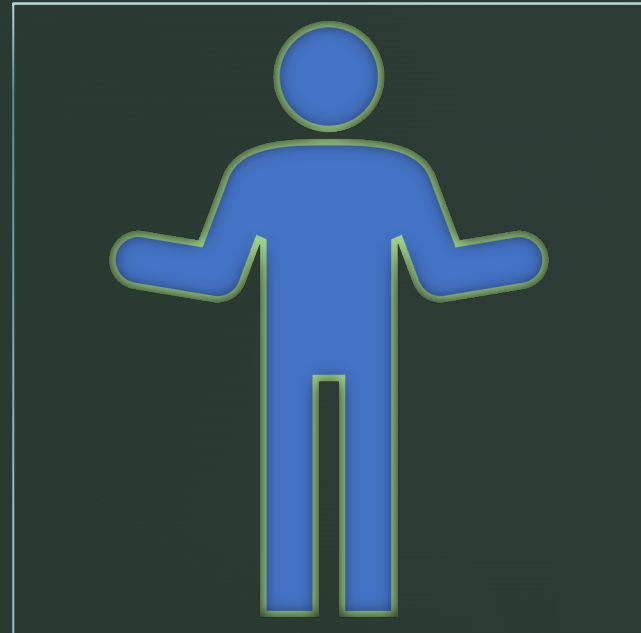
“You’re just a dental assistant and have only 3 years experience. You don’t even have kids!”

“I think most of your ideas are dumb.”

What if it goes badly?

A hard conversation can derail because of:

- **A failure to listen**
- **Disrespectful behaviour**
- **Unwillingness to cooperate**
- **Unwillingness to compromise**
- **Failure to reach consensus**
- **Seeking to WIN so the other person LOSES**
- **Unwillingness to own our part**



What if nothing changes?

Discuss with staff/colleagues

You may need another »intervention« or to considering “firing” the patient

Document everything!

For staff: apply policy, create performance plan, monitor behaviour, acknowledge improvement. If that isn't successful, consider termination



Firing a Patient



If you have a patient that refuses to treat you or the staff respectfully, even after they have been warned, it is perfectly ok to fire the patient. Things to ensure that you do if this happens:

Follow up

Follow up the event in writing so you have a complete record

Ensure

Ensure you have been reasonable - ask staff to contribute to corroborate the event history

Document

Document the history, events, previous hard conversations in writing

Prepare

Prepare for the possibility that the patient may respond badly (i.e. file a complaint)

Check in

Check in with the staff, support each other, lessons learned

Consider

Consider if you need help (call the dental association)

Principles to Remember

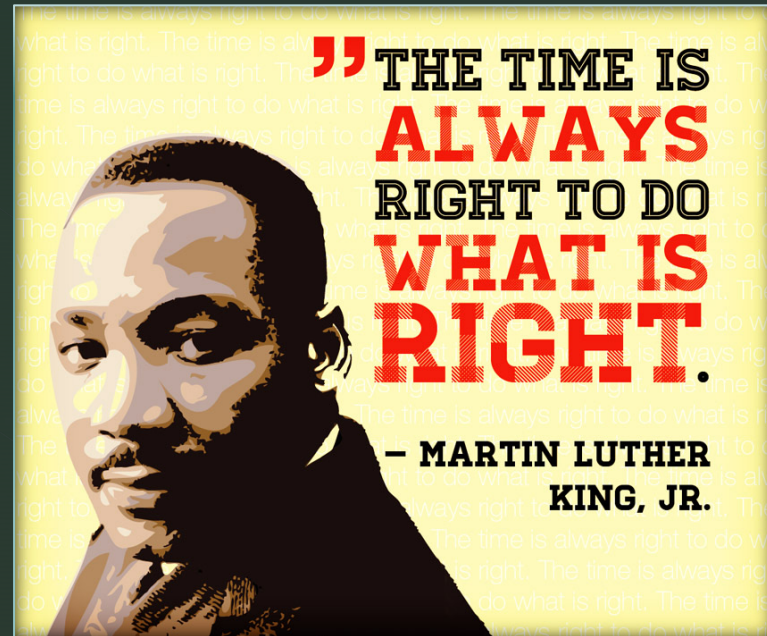
Maintain integrity and perspective

Control what you can

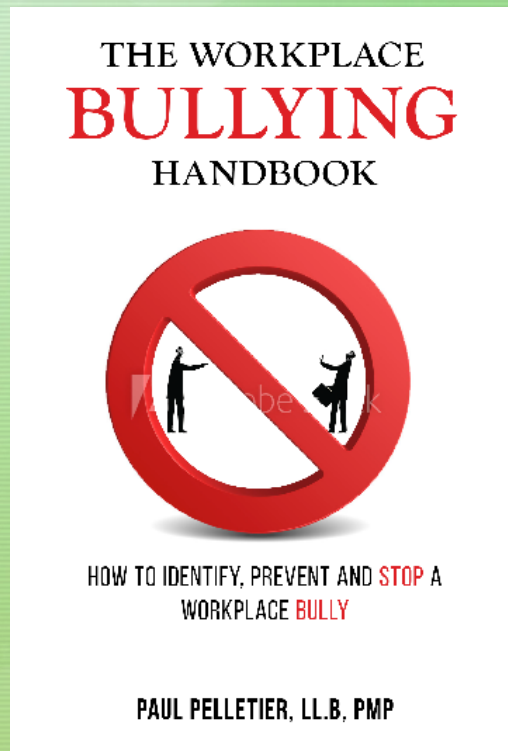
Lead with respect and patience ALWAYS

Be courageous

Accept being uncomfortable



My Contact Information – Reach Out Anytime!



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Linked in:

ca.linkedin.com/in/paulapelletier

Book: “*The Workplace Bullying Handbook*” (available on-line at Amazon)