



THERAPEUTIC NURSE- PATIENT RELATIONSHIP

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CONCEPT...

- A relationship is defined as a state of being related or a state of affinity between two individuals.
- The nurse & client interact with each other in the health care system with the goal of assisting the client to use personal resources to meet his or her unique needs.

TYPES OF RELATIONSHIPS

1. Social Relationships
2. Intimate Relationships
3. Therapeutic Relationships

1. Social Relationships

- A social relationship can be defined as a relationship that is primarily initiated with the purpose of friendship, socialization, enjoyment or accomplishing a task.
- Mutual needs are met during social interaction.
- For example, participants share ideas, feelings & experiences.

2. Intimate Relationships

- An intimate relationship occurs between two individuals who have an emotional commitment to each other.
- Those in an intimate relationship usually react naturally with each other.
- Often the relationship is a partnership wherein each member cares about the other's need for growth & satisfaction.

3. Therapeutic Relationships

- The therapeutic relationship between nurse & the patient differs from both a social & an intimate relationship in that the nurse maximizes inner communication skills, understanding of human behavior & personal strengths, in order to enhance the patient's growth.
- The focus of the relationship is on the patient's ideas, experiences & feelings.

GOALS OF THERAPEUTIC RELATIONSHIP

- Facilitating communication of distressing thoughts & feelings.
- Assisting the client with problem solving
- Helping the client examine self-defeating behaviors & test-alternatives.
- Promoting self-care & independence.

COMPONENTS OF THERAPEUTIC RELATIONSHIP

1. Rapport
2. Empathy
3. Warmth
4. Genuineness

1. *Rapport:*

- Rapport is a relationship or communication especially when useful & harmonious.
- It is a willingness to become involved another person.

2. *Empathy:*

- Empathy is an ability to feel with the patient while retaining the ability to critically analyze the situation.
- In empathy process the nurse receives information from the patient with an open, non-judgmental acceptance, & communicates this understanding of the experience & feelings so that the patient feels understood. This serves as a basis for the relationship.

3. Warmth:

- Warmth is the ability to help the client feel cared for & comfortable.
- It shows acceptance of the client as a unique individual.

4. Genuineness:

- Genuineness involve being one's own self.
- This is implies that the nurse is aware of her thoughts, feelings, values & their relevance in the immediate interaction with the client.

CHARACTERISTICS OF THERAPEUTIC NURSE-PATIENT RELATIONSHIP...

- The therapeutic relationship is the cornerstone of psychiatric-mental health nursing, where observation & understanding of behavior & communication are of great importance. It is a mutual learning experience & a corrective emotional experience for the patient.
- The nature of the therapeutic relationship is characterized by the mutual growth of individuals who “dare” to become related to discover love, growth & freedom.

Count...

- The therapeutic relationship is based on the belief that the patient has potential & as a result of the relationship, “will grow to his fullest potential”.
- In a therapeutic relationship the nurse & patient work together towards the goal or assisting the patient to regain the inner resources in order to meet life challenges & facilitate growth. The interaction is purposefully established, maintained & carried out with the anticipated outcome of helping the patient to gain new coping &

ETHICS AND RESPONSIBILITIES...

- Ethics has been defined as a branch of philosophy that refers to the study of values that conform to the moral standards of a profession.
- The American Nurses Association has identified four primary *principles* to guide ethical decisions.
- ✓ Governing the relationship between the nurse & the patients, these principles include the patient's right to autonomy (making decisions for oneself)
- ✓ The patient's right to beneficence (doing good by the nurse)
- ✓ The patient's right to justice or fair treatment, and
- ✓ The patient's right to veracity (honest) & truth by the nurse, regarding the patient's condition & treatment.

Count...

- Nurses' respect for the patient's dignity, autonomy, cultural beliefs, & privacy is of particular concern in psychiatric-mental health nursing practice.
- The nurse serves as an advocate for the patient & is obliged to demonstrate non-judgmental & non-discriminatory attitudes & behaviors that are sensitive to patient diversity.
- An essential aspect of the patient's response is the right to exercise personal choice about participation in proposed treatments.
- The responsible use of the nurse's authority respects the patient's freedom to choose among existing alternatives & facilitates awareness of resources available to assist with decision making.

- Nurses working with psychiatric-mental health patients are prepared to recognize the special nature of the provider-patient relationship & take steps to assure therapeutic relationships are conducted in a manner that adheres to the mandates stipulated in the ANA Code for Nurses (ANA 1985).
- Unethical behavior (for example, omission of informed consent, breach of confidentiality, undue coercion, boundary infringement) & illegal acts can increase the patient's vulnerability & demand special vigilance on

PHASES OF THERAPEUTIC RELATIONSHIP

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1. Pre-interaction phase
2. Introductory or Orientation phase
3. Working phase
4. Termination phase

1. PRE-INTERACTION PHASE

- This phase begins when the nurse is assigned to initiate a therapeutic relationship & included all that the nurse thinks, feels or does immediately prior to the first interaction with the patient.

Count...

Nurse's tasks in the pre-interaction phase:

- Explore own feelings, fantasies & fears
- Analyze own professional strengths & limitations.
- Gather data about patient whenever possible.
- www.driyeshpatidar.blogspot.com Plan for first meeting with patient.

Count...

PROBLEMS ENCOUNTERED

- Difficulty in self analysis & self acceptance.
- Anxiety
- Boredom
- Anger
- Indifference
- Depression

WAYS TO OVERCOME

- Help from peers and supervisor in self analysis & facing reality.
- Analyze herself & recognize her asset & limitation.

2. INTRODUCTORY OR ORIENTATION PHASE

- It is during the introductory phase that the nurse & patient meet for the first time.
- One of the nurse's primary concerns is to find out why the patient sought help.

Count...

Nurse's tasks in the Orientation phase:

- Establish rapport, trust & acceptance
- Establish communication
- Gather data, including the client's feelings, strengths & weaknesses
- Define client's problems; set priorities for nursing intervention
- Mutually set goals

Count...

PROBLEMS ENCOUNTERED

- Perception of each other as unique individual may not take place.
- Problems related to establishing an agreement or pact between the & patient.

WAYS TO OVERCOME

- Nurse must be willing to relate honestly to her feeling & share it with supervisor.
- Nurse must feel free to reveal self without fear of criticism.
- Difficulty may be faced in assisting a nurse with countertransference since most of this behavior is unconsciously determined.
- A alert supervisor can detect this & guide the nurse appropriately.

3. WORKING PHASE

- Most of the therapeutic work is carried out during the working phase.
- The nurse & the patient explore relevant stressors & promote the development of insight in the patient.

Count...

Nurse's tasks in the working phase:

- Gather further data; explore relevant stressors
- Promote patient's development of insight & use of constructive coping mechanism.
- Facilitate behavioral change; encourage him to evaluate the results of his behavior
- Provide him with opportunities for independent functioning.
- Evaluate problems & goals & redefine as

necessary

Count...

PROBLEMS ENCOUNTERED

- Testing of nurse by the patient.
- Unrealistic assumption about progress of patient.
- The nurse's fear of closeness.
- Life stressors of nurse.
- Resistance behavior.
- Transference
- Countertransference

Count...

Ways to Overcome:

- Conferences with the supervisors & group discussions with other members of the staff .
- There will be times when the nurse believes she is making little or no progress.
- Handling resistances.

4. TERMINATION PHASE

- This is the most difficult, but most important phase of the therapeutic nurse-patient relationship.
- The goal of this phase is to bring a therapeutic end to the relationship.

Count...

Nurse's tasks in the Termination Phase:

- Establish reality of separation
- Mutually explore feelings of rejection, loss, sadness, anger & related behavior.
- Review progress of therapy & attainment of goals
- Formulate plans for meeting future therapy needs.

Count...

PROBLEMS ENCOUNTERED

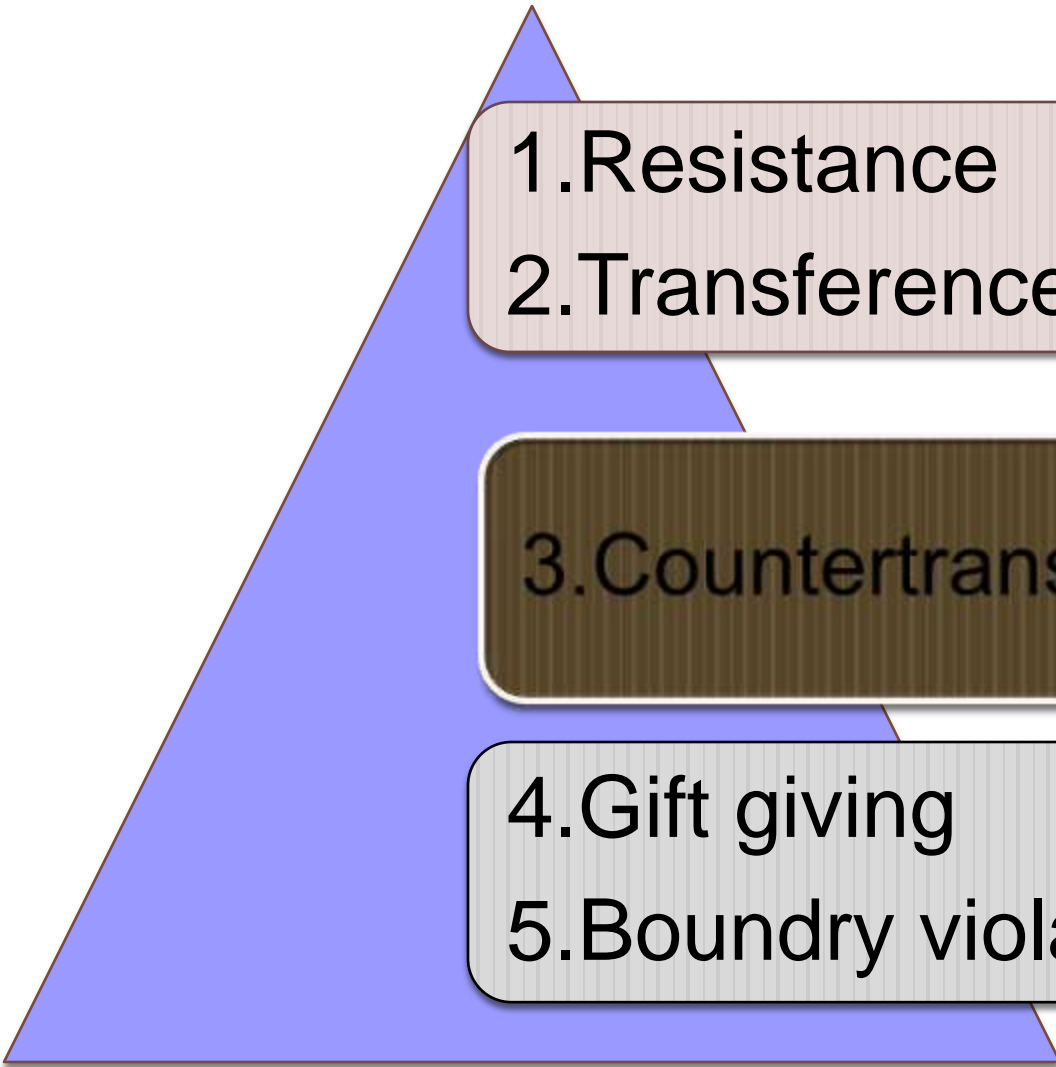
- Anger
- Punitive behavior
- Depression or assuming non caring attitude
- Flight to health
- Flight to illness.
- Nurse's inability or unwillingness to make specific plans & implement them.

WAYS TO OVERCOME

- Nurse should be aware of patients feeling & be able to deal with them appropriately.
- Assist the patient by openly eliciting his thoughts & feelings about termination.
- Supervisor can assist the nurse in preparing patient for discharge.

THERAPEUTIC IMPASSES & ITS MANAGEMENT

TYPES



1. Resistance
2. Transference

3. Countertransference

4. Gift giving
5. Boundry violation

1.RESISTANCE

- Resistance is the patient's attempt to remain unaware of anxiety producing aspects within himself.
- It's a natural learned reluctance to avoidance of verbalizing or even experiencing troubled aspects of self.



MANAGEMENT

- Active listening
- Clarification – Give for focused idea of what is happening.
- Reflexion – Helps the patient to become aware of what has been going in his mind.
- Explore behavior to find possible reason.
- Maintain open communication with supervisor

2. TRANSFERENCE

- It is an unconscious response of the patient in which he experiences feeling & attitudes towards the nurse that were originally associated with significant figures in his early life.
- Such response utilize the defense mechanism of displacement.
- Transference reactions are harmful to the therapeutic process only if they remain ignored & unexamined.

MANAGEMENT

- No need to terminate relationship unless poses a serious barrier to therapy or safety.
- Nurse should work with patient in sorting out past from the present
- Assist patient in identifying the transference & reassign a new & more appropriate meaning to the current nurse patient relationship.
- The goal is to guide the patient to independence by teaching them assume responsibility for their own behaviors, feeling & thoughts & to assign the correct meaning to the relationship based on the present circumstances instead of past.

3.COUNTERTRANSFERENCE

- It's a therapeutic impasse created by the nurse.
- It refers to nurse's specific emotional response generated by the qualities of the patient.
- In this case the nurse identifies the patient with individuals from her past & personal needs will interfere with therapeutic effectiveness.
- The nurse's unresolved conflicts about authority, sex, assertiveness & independence ten to create problems rather than solve them.



MANAGEMENT

- Need not terminate relationship.
- Support the nurse.
- Assist her identifying countertransference.
- Discuss with superiors.
- Self examination.
- Pursue to find out source of problem.
- Exercise control countertransference.
- Peer consultation & professional meetings.

4. GIFT GIVING

- Receiving a gift from patient make the nurse to inhibit independent decision making & create a feeling of anxiety or guilt.
- Gift is something of value is voluntarily offered to another person, usually to convey a gratitude.

GIFT AS AN IMPASSE

- The timing of a particular situation, the intent of giving & the contextual meaning of giving of the gift.

5. BOUNDARY VIOLATION

- It occurs when nurse goes outside the boundaries of therapeutic relationship & establishes a social, economic or personal relationship with the patient.

nurse should consider possibility of a boundary violation if she encounters the following:-

- Receives feedback that her behavior is intrusive with patient or their families.
- Has difficulty in setting limit with patient.
- Relates the patient to a friend or family member.
- Has sexual feeling towards a patient.
- Feels that she is the only one who understands the patient.
- Receives feedback that she is too involved with a patient or family.
- Feels that other staffs are too critical or jealous of her relationship with the patient.



THANK YOU