Staff Guidance on Difficult Conversations

The following suggestions are for staff who interact with patients using chronic opioid therapy. It is common for patients to feel anxiety or fear about potential changes to their pain management plan, which can show up in patient-staff interactions. Though these encounters may be difficult, there are strategies you can use to reduce the risk of escalation and encourage more positive outcomes. Here, we suggest a framework for conversation, example scripts for how this framework can be put into action, and tips and strategies for talking with aggressive patients.

5 A's for Dealing With Difficult Patients

1. **Acknowledge** the problem
2. **Allow** the patient to vent uninterrupted in a private space (unless they are being abusive)
3. **Agree** on what the problem is
4. **Affirm** what can be done
5. **Assure** follow-through

Courtesy of Laura Heesacker, LCSW

Conversation Suggestions

Demanding Traps

Patient approaches the front desk demanding to pick up a refill early.

Acknowledge	"I'm really sorry to hear about your situation. It sounds like you've <been having a lot of pain> <had a rough time lately> (Reflect back what the patient has just expressed)."
Allow	Pause for patient to vent uninterrupted
Agree	"I understand that you don't feel that you can wait until your next refill date for this medication."
Affirm	"As you know, your patient agreement for use of this medication states that we cannot provide early refills. Let me take a look at Dr. X's schedule and see if there is an earlier appointment available so that you can discuss your current prescription with your doctor as soon as possible."
Assure	"Good news! I've been able to get you an earlier appointment with Dr. X." "I don't see an earlier appointment on Dr. X's schedule right now, but I will make sure to talk with Dr. X's assistant today and get back to you by phone by the end of the day with next steps."

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Desperate and Threatening Traps

Patient uses desperate or threatening language (e.g., "I'm getting a lawyer!")

Acknowledge	"It is understandable that you are upset about ____."
Allow	Pause for patient to vent uninterrupted
Agree	"If you think contacting a lawyer is right for you, of course you may do that. I am also trying to do what is right for you."
Affirm	"You are free to go anytime, but I will call you in the next couple of days to check on you and invite you to come back in to talk to about next steps."
Assure	"I want to make sure I can reach you in the next couple of days. Is <PHONE NUMBER IN CHART> the best number to reach you at?" Within 48 hours, call the patient, ask how they are doing, and if they would like to schedule another appointment or discuss next steps.

Addiction Labeling Traps

When sending a patient for a UDT, the patient responds, "Are you accusing me of being a junkie?"

Acknowledge	"I can see why you might see it that way; however, I assure you, I am not interested in labels."
Allow	Pause for patient to vent uninterrupted
Agree	"I know you are here today for a medical problem, and I want to help our medical team take care of your medical concerns."
Affirm	"Our policy requires anyone who is taking a long-term pain medication to regularly provide a urine sample. This helps us to better care for your medical concern."
Assure	"Your doctor will review your urine test result with you to discuss how it is a part of caring for your medical concern."

Tips and Strategies for Talking With an Aggressive Patient

1. Demonstrate calmness to the patient; never become upset or raise your voice.
2. Show empathy and respect. Offer reflection, validation and support.
3. Practice active listening, and show the patient you hear and understand their situation. This does not mean that you have to agree with them.
4. Set limits and know when you need to be firm and when you can be flexible. Don't make promises you cannot keep.
5. Avoid referring to or asking the patient about their pain.
6. Keep a positive tone and use positive words like "yes" and "definitely" and avoid negative words like "no" and "can't".
7. You are not expected to tolerate harmful language. If a patient makes a serious or dangerous threat (e.g., "I am going to find out who you love most in the world, kill them and then kill myself"), stop engaging the patient in conversation and call 911, showing as little emotion as possible.

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