Patient Responses to Variation and the Communication of Bad News in Healthcare

Posted on October 7, 2022

Variation is a subtle part of our lives; we may not actively notice it, but it is always there. It is a general observation that nothing is identical; there is always going to be some degree of variance in it. The biggest examples of variance are the snowflakes, and it is a common saying that “No two snowflakes are alike”. In healthcare facilities, variance can occur in service, and this can be a source of distress for the patient, which can impact their satisfaction. Their response to the variation can be an outcome of their current state of mind. Maybe they were already in a sour mood, and a subtle difference made them even more upset. Maybe they were in a good mood, and they did not mind the difference in service. The response to variance can be associated with the environment a patient lives. This is the reason that the satisfaction score of patients always has a random variance. This paper will analyze the behaviour as a response to variance and some of its types in detail.

Behaviour

Behaviour is the response or action to some kind of event. This event may be positive, leading to positive behaviour, or negative, leading to negative behaviour. It is influenced by external factors that occur in life and can influence the decisions of people or, in this case, patients, leading to variance in the way they might behave. When people do not understand the variation, they may adopt different behaviours as a response mechanism. The response to the variance can result in different behaviours based on the outcome. These behaviours include:

1. Denying the data (It clashes with their view of reality)
2. Distorting the process through which the data was produced
3. Seeing trends where there are no trends
4. Trying to explain natural variation as a special event
5. Blaming or giving credit to people for things over which they have little or no control
6. Finding it very hard to understand past performance, make predictions and/or make improvements

Three of these behaviours are discussed in detail below.

Denying The Data

Whenever humans are faced with an incident that goes beyond their capability of comprehension, denial of the incident is their first response to it. Denial is seen as a coping mechanism that allows

human brains enough time to process the information until it makes sense. This is, however, the most common reaction, as it occurs more frequently than the other responses. Every human being, regardless of status, can fall into a state of denial whenever the data presented does not match their view. This is because the person may not have yet developed the capability to deal with the data presented. Humans seldom take into account any setbacks that may occur in the path of their goals and achievements, so it is not a surprise that they are not ready for them. Their expectation of smooth sailing throws them off course when the storm hits.

Rejection of the data leads them to believe that the outcome must be a mistake or that their data may have been mixed up with another person's data. There may be an underlying cause to this reaction, which in most cases is fear. Seeing this explanation from the point of view of a patient can quickly make the reason for denial understandable. Patients may go into denial when they receive test results that confirm their fears of an illness. This can throw their lives off course as it was not the news they had prepared themselves for. In the case of a curable disease, the patient's distress is manageable, as explaining to them that they will make a full recovery if they follow the doctor's orders can make them hopeful. However, in the case of diseases like cancer, it can be very difficult to manage the stress of the patient. The caretakers need to take into account that the news that they will be delivering is going to cause extreme distress, so in case of delivering such news, they should utilize the following steps:

- Ensure that the patient has privacy before you give them the news.
- Loved ones are present with them to provide them with emotional support.
- Assess the patient's perceptions by asking them how much they know about their condition.
- Make sure they are ready for the news. This will be when the patient asks for full disclosure.
- Inform the patient that they are about to receive bad news. This lessens the shock of the bad news.
- After disclosing the bad news, provide emotional support.
- Inform the patient of the treatment plan. This will allow them to be stronger as they will have hope for the future (Baile et al., 2000).

Distorting The Process That Produced The Data

After the denial of the data, the person may become critical of the process and the people who were involved in the process. The person may challenge the process by questioning the procedure. Was it done correctly? What is the margin of error? Is there a possibility of a mix-up? The person may criticize the data collection, the procedure used and the people who performed the procedure. This may occur when patients receive their test results, and the results are not what they expected. They may inquire if there was an error, or they may consult another doctor for a second opinion. In such a case, the caretaker should assure them that the results are correct and may encourage a second opinion, giving the patients time to process the news.

Seeing Trends Where There Are None

In the age of the internet, people have many opinions, and some of these opinions may become so popular that they may confuse people about right and wrong. These opinions may get labelled as a trend and gain a following from people who do not know any better. These trends are not backed with facts but are just the beliefs of people who have not put any time into researching the facts. In the medical field, many of these trends pop up that cause patients to reject treatment and opt for a "holistic remedy" that they heard about from social media. The recent trends include the use of essential oils, crystals and home remedies. The unfortunate part of this is that there are no proven benefits of these in science. However, the promotion of these items on social media by a celebrity or an influencer leads people to believe that these products are legitimate as famous people are endorsing them.

In this case, a caretaker must educate the patients by telling them that this is pseudo-science and holds no scientific benefits. Moreover, the products are not FDA-approved, so it should tell them a lot more about the efficacy of these products. Make them aware that there are no documented cases of patients being cured through the use of these products. Patients respond differently to the news, and the caretakers should be aware of these variations in behaviours so that they are ready to tackle any situation. This will improve the patients' experience and build trust in the capabilities of the caretaker.

References

Baile, W. F., Buckman, R., Lenzi, R., Glober, G., Beale, E. A., & Kudelka, A. P. (2000). SPIKES—A Six-Step Protocol for Delivering Bad News: Application to the Patient with Cancer. *The Oncologist*, *5*(4), 302–311. https://doi.org/10.1634/theoncologist.5-4-302