

GE Healthcare

TiP-TV™ Training in Partnership Program Supplement and Test for Imaging Professionals

Leadership Education

Understanding the Patient Psyche

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1.0 ASRT-approved Category A CE Credit



imagination at work

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Program Summary

This page provides an overview of the program content and learning objectives. Please refer to the Table of Contents for a detailed list of the topics covered. We encourage you to file a copy of this Program Summary and the Table of Contents with your continuing education certificate. We also recommend that you provide a copy of this information to your manager as a record of your educational achievement.

Program Description

The term psyche refers to “mind.” Your staff works with patients each day, taking care of them technically, but are they taking care of them in a psychologically caring and understanding way? This program discusses the psychology of disease, fear, anxiety, and the general manifestations of uncertainty patients are experiencing. You’ll see how you can help your employees make a positive impact on the patient’s diagnostic/treatment/follow-up pathway and provide the best care possible.

Program Objectives

By the end of this program, the viewer should be able to:

1. Categorize psychological manifestations that affect patients afflicted with traumatic, acute, and chronic injury or disease.
2. Assess personal work techniques as they apply to relationships with patients.
3. Recognize primary psychological alterations that take place during the human life cycle – to include death and dying.
4. Identify communication techniques to be used with pediatric, adult, and geriatric populations.

Target Audience

Course objectives for this program specifically target radiology administrators, managers, and supervisory personnel. Other managers, supervisors, and medical personnel may also benefit from viewing this program.

NOTE: While not limited to this audience group, the technical content is most effective when applied to people with this training. Regardless of your imaging specialty, you may apply for continuing education credit. Refer to the Continuing Education Credit page for additional information.

Continuing Education Credit

1.0 ASRT-approved Category A CE Credit

Continuing Education Credit and Video File Download

Online Process for CE Credit (hls.gehealthcare.com)

In order to receive continuing education credit, you must log into the GE Healthcare Learning System (HLS) and complete all of the required steps. Please refer to the online TiP-Ed OnlineSM Quick Start User Guide (click the User Guides link on the HLS Welcome page) for additional information on how to use the GE HLS as needed.

1. **View the entire program video** online or download the video file for later viewing (refer to the process below). This supplement is *not* intended to replace watching the video.
2. Go to the GE HLS web site at hls.gehealthcare.com and complete the **feedback form**.
 - ◆ NOTE: The Feedback Form link is not activated until the View Video Now module has been completed.
 - ◆ This provides valuable information regarding your thoughts on the program's quality and effectiveness.
3. Complete the **program post-test** without aids or assistance of any kind; this is an *individual effort*.
 - ◆ You have up to three attempts to successfully complete the test with a minimum passing score of 75% (ASRT and CBRN approved programs) or 80% (SNM-approved programs).
 - ◆ The post-test measures knowledge gained and/or provides a self-assessment on a specific topic.
4. Upon successful completion of the online CE information, you can instantly print a **certificate**.

Video Download Process

For programs with an original start date of September 1, 2008 or later, the GE HLS includes an option to download the TiP-Ed OnlineSM program video file. You can then watch the program on your personal computer or transfer the video file to your portable video player for viewing.

NOTE: Please refer to the **TiP-Ed Online Video Download Quick Start Guide** for complete details (click the User Guides link on the GE HLS Welcome page).

1. With the desired program in your GE HLS Learning Plan, launch the program content to view the Online Content Structure. In the Video Download (Optional) area, click the Download Video to View Later link.
2. Save the video file on your personal computer, using your existing video download software.
3. View the program on your personal computer or transfer it to your portable video player for later viewing.
4. After viewing the entire program, log into the HLS and complete the CE activities as noted above.

A GE Healthcare TiP-Ed OnlineSM course may be available in several different formats, such as an online web course or CD/DVD. You may be able to receive CE credit only once for a particular course, regardless of the format in which it was viewed. If you have already received credit for a course, you are encouraged to contact your CE certification organization (ARRT, NMTCB, ARDMS, CBRN, etc.) to determine if you can repeat this course for CE credit.

Thank you for choosing GE Healthcare as your continuing education partner. We hope you will join us for other TiP-Ed OnlineSM programs in the future. For more details and program schedule information, please visit our education web site (www.gehealthcare.com/education).

Please forward any questions or comments to: geeducation@ge.com

Introduction

This leadership topic is designed to round out the very distinct existence, and at times, contradiction, between business goals and patient goals.

Healthcare contains virtually every element of business acumen imaginable, yet very few businesses require the level of attention healthcare personnel of all types must routinely give to the humanitarian component of society. Nor are mainstream businesses fraught with such enormous personal discomfort, suffering, and anxiety on the part of customers as is seen in healthcare.

It is those concepts that led to this program, which is intended as a training tool for leaders to use for their employees in order to reinforce the importance of proper personal interaction with patients, and to ensure complete satisfaction and delight, on the part of those patients, with your service.

We discuss the psychology of disease, fear, anxiety, and the general manifestations of uncertainty that patients experience. We provide ideas on how you can help your employees make a positive impact on the patient's diagnostic pathway and provide quality patient care.

It is incumbent upon leaders of departments and organizations to be certain each employee has the tools necessary to fulfill the job, and without fail, delight the customer each time there is a customer event. Training your people to understand the nature of the patient psyche can go a long way in ensuring that customers really remember their healthcare encounter as a positive experience. In doing so, you can help your organization potentially gain a reputation as a place where the word "care" is not just a word, it's the way you work.

IMPORTANT NOTE

The interview sections in the video presentation for "The Patient Psyche" contain references to "technicians." Please note that the widely accepted professional title is "technologist."

The Business of Healthcare

Primary ideas:

- In the late 1970s, the era of cost containment began.
- Is the business of healthcare too predominant? Does it push aside traditional values?
- The leadership challenge is to create a work and care environment that at once promotes a sense of well being in customers and employees.
- Healthcare occupations are among the most stressful in the job hierarchy.
- What's going on with patients? Are they stressed? Are they ill? Are they happy?
- It's important to understand customers and employees by knowing what they need, how they replenish themselves, what satisfies them, and what turns them off.

Notes:

Illness – General Psychological Components

Primary ideas:

- Is there a gap between the perception of humanistic qualities of caregivers and the expectations of patients?
- There is a need to use all scientific tools to meet and beat disease; there is also a need to offer a human touch to the patient.
- How do you go about getting the right people?
- Detached concern vs. empathy.
- Humanistic approaches to patient care DO make a difference in clinical outcomes.
- Regression is a psychological state where people become withdrawn, irritable, and demanding.
- The job of the caregiver is to always promote hope.
- The "why me" syndrome.
- Elizabeth Kubler-Ross – five stages associated with terminal disease.
- Communication.

Notes:

Illness – Children

- Young children are particularly stressed by the experience of hospitalization, because they cannot fully comprehend the reason for being there.
- Young children, especially those four and under, have the highest incidence of severe and prolonged emotional reaction to hospitalization.
- Medical personnel should learn to view the whole family as one social unit under stress.
- The best chance of cognitive success, in a general sense, seems to be in children four to six years of age, and beyond.
- Role play is an important element in preparing children for medical procedures.

Notes:

Illness – the Elderly

- Cognitive dysfunction (CD) affects about 6% of persons at age 65, and increases to about 20% at age 85.
- Senility is an umbrella term for CD, which is no longer widely used in common terminology. This is because many causes of CD can be treated and lead to complete or partial reversibility.
- The symptoms of cognitive dysfunction are divided into two groups: primary and secondary.
- Memory loss often follows a predictable pattern.
- There are many forms of loss encountered by older patients, demonstrating the enormous turmoil that can become a part of life.
- If opportunities for the patient to succeed are created, and they see positive results for their efforts, they'll become partners in the patient/caregiver relationship.
- It is probably equally important that the medical staff hear and comprehend what the patient is saying as it is for the patient to hear and comprehend what medical staff members are saying. It should be, at minimum, an even trade-off.

Notes:

The Other Side of the Fence

Primary ideas:

- Some of the patient's stress and emotion invariably rubs off on employees.
- There is substantial evidence that work stress contributes to the development of a wide range of physical and mental disorders.
- Burnout is a state of physical, mental, and emotional exhaustion.
- One of the most common elements in work stress is change.
- The most important factor in a patient's general satisfaction with his/her care is a perception of the adequacy of the provider's conduct. In turn, the provider's conduct will be sensitive to the problems encountered in his/her work environment.
- If the social environment inside and outside of the organization is very supportive, burnout does not tend to occur, even if the work is extremely stressful!
- Sharing and teamwork help to reduce many work stresses.
- Variety enhances interest and challenge and is a key factor in employee satisfaction, performance, and attendance.
- Relationships between supervisors and individuals are an important part of the social dimension in a work environment.
- Supervisors that show consideration and support for their employees have a high correlation with job satisfaction.

- Much responsibility for reducing burnout rests with the organization and its leaders, who can take such measures as:
 - Improving job design.
 - Offering workers opportunities to participate in the decision-making process.
 - Providing appropriate training and supervision.
 - Giving workers emotional support and recognition.
- Leadership, by definition, should contain a supportive element.

Patient-Provider Communication

Primary ideas:

- Hospitalization can mean many things to many people. Much of it is dependent upon individuals on both sides of the care equation.
- Positive perceptions can flow more readily if patients are treated as people and every effort is made to convey respect and reassurance.
- Patient-provider communication ideas are presented in the program video.
- It is important to remember that information transfer to patients in a hospital setting is often ineffective, even when legitimate efforts are being made.
- One of the most important functions healthcare workers can perform, is to let patients have the opportunity to talk.
- Listening is an art that can be time-consuming, emotionally wearing, and tedious, but can be extremely gratifying and effective in guaranteeing patient satisfaction.
- Caregivers should aim to communicate in a manner that imparts permission, acceptance, and safety – so that the patient does not feel the need to suppress emotion, feel ashamed, or feel as though they are a nuisance.
- The development of employees that are very satisfied with their work environment is the leader's foremost job.
- Emotional comfort can be set up for patients by considering elements provided in the program video.
- Communication can make a very positive contribution to patient recovery. All healthcare providers have a role in the patient's outcome, and employees will find themselves gaining more satisfaction from what they do if they consider the impact they've had on another human being. Employees should never underestimate their role as caregivers and you, their leader, should do everything you can to help them in that role.

Appendix A: Presenters

Roger Beck, M.S., R.T. (R)(CT)

CT/Leadership TiP-TV Program Manager
GE Healthcare

Ross Carter, Ph.D

Clinical Psychologist
Milwaukee, Wisconsin

Darlene Salvatore

Child Specialist
Boston Children's Hospital
Boston, Massachusetts

Appendix B: Resources

Electronic Resources

American Psychological Association: <http://www.apa.org/>

American Society on Aging (ASA): <http://www.asaging.org>

Center for Healthy Aging: <http://www.centerforhealthyaging.org>

NOTE: The Internet is an ever-evolving environment and links are subject to change without notice.

Appendix C: Post-Test

LMS Course Number: 3256

To be eligible for CE credit, you MUST view the video presentation first. Then complete the post-test on the GE Healthcare Learning System (hls.gehealthcare.com) by the due date listed online.

1. Healthcare personnel are often taught to minimize empathy for patients by demonstrating _____.
 - a. interest in the person
 - b. detached concern
 - c. avoidance behavior
 - d. procedural protocols
2. Humanistic approaches do make a difference in clinical outcomes.
 - a. True
 - b. False
3. The psychological state where a very ill patient becomes withdrawn, irritable, and demanding is called _____.
 - a. digression
 - b. concession
 - c. regression
 - d. procession
4. Regardless of the psychological state of the patient, it is always the job of the caregiver to promote _____.
 - a. acceptance
 - b. diagnostic imaging
 - c. the healthcare organization
 - d. hope
5. The five psychological stages associated with terminal illness, as established by Elizabeth Kubler-Ross and her colleagues, are: ____, ____, ____, ____, and _____.
 - a. denial; anger; bargaining; depression; acceptance
 - b. denial; anger; frustration; depression; acceptance
 - c. denial; anger; bargaining; neurosis; acceptance
 - d. denial; anger; bargaining; diversion; acceptance
6. In the acceptance stage of terminal illness, the _____ will often need more help than the patient.
 - a. healthcare staff
 - b. patient's family
 - c. patient's physician
 - d. insurance carrier
7. Children, especially those _____ and under, have the highest incidence of prolonged emotional reaction to hospitalization.
 - a. four
 - b. five
 - c. six
 - d. seven

8. Cognitive dysfunction affects about ____% of persons at age 65 and about ____% at age 85.
 - a. 30; 60
 - b. 20; 30
 - c. 6; 20
 - d. 2; 15
9. The inability to recognize people or items in the environment is called _____.
 - a. aphasia
 - b. apraxia
 - c. angina
 - d. agnosia
10. The most common form of irreversible brain failure is _____.
 - a. dementia
 - b. Alzheimer's disease
 - c. senility
 - d. delirium
11. It is equally important that the medical staff hears and comprehends what the patient is saying as it is for the patient to hear what the medical staff is saying.
 - a. True
 - b. False
12. The state of physical, mental, and emotional exhaustion as experienced by healthcare workers is called _____.
 - a. fatigue
 - b. hitting the wall
 - c. depletion
 - d. burnout
13. According to this presentation, one of today's most common elements in work stress is _____.
 - a. long hours
 - b. working weekends
 - c. change
 - d. frustration
14. The most important factor in the patient's general satisfaction with his/her care, is the perception of the adequacy of the _____.
 - a. patient room
 - b. diagnostic imaging department
 - c. cafeteria staff
 - d. provider's conduct
15. _____ enhances interest and challenge in the workplace and is a key factor in employee satisfaction.
 - a. Variety
 - b. A 12-hour workday
 - c. Taking a break
 - d. Reassurance
16. Lack of _____ from supervisors/leaders is a particularly damaging organizational stressor.
 - a. compliance
 - b. constructive feedback
 - c. monetary reward
 - d. control

17. In addition to customary duties, leadership by design should contain a _____ element.
- financial
 - humorous
 - responsibility
 - supportive
18. From the standpoint of the patient's psychological well being, two important factors needed are patient information and _____.
- a comfortable room
 - medical access
 - emotional expression
 - a quiet atmosphere
19. It is important to remember that information transfer to patients in a hospital setting is often _____.
- ignored
 - ineffective
 - incorrect
 - lost
20. _____ is an art that can be time-consuming, emotionally wearing, and tedious, but can be extremely gratifying and effective in guaranteeing patient satisfaction.
- Consulting
 - Imaging
 - Listening
 - Promptness