Addressing Patient Bias in Clinical Settings

AACN Diversity Leadership Institute-Capstone Project



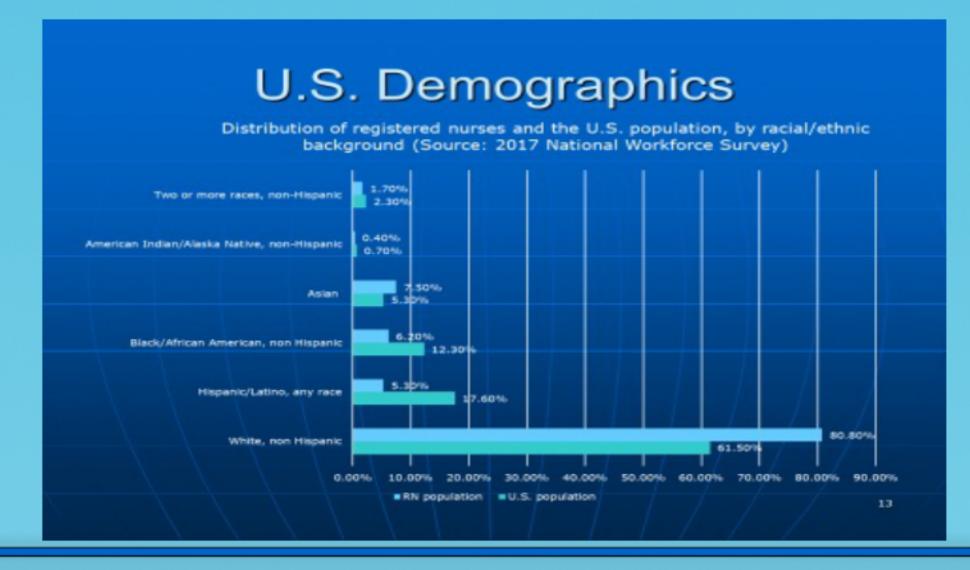
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The Issue

Patient bias toward health-care professionals in a variety of clinical settings is a noted problem, and this issue may become more prevalent as the workforce becomes more diverse. Nurses from underrepresented groups currently make up about 19% of the U.S. RN nursing workforce, and this percentage may well gradually increase over time.



The Issue - Continued

A 2017 survey, *Patient Prejudice: When Credentials Aren't Enough,* showed that greater than 10% of nurses and nurse practitioners had experienced patient bias due to their age, gender, race, weight, or political views (https://www.webmd.com/a-to-z-guides/news/20171018/survey-patient-bias-toward-doctors-nurses).

Demonstration of patient bias can act as triggers, which may activate various emotional responses for clinical faculty/providers/students, such as feelings of being diminished, attacked, or offended (Adams, M., Bell, L. A., & Griffin, P. (2007). Teaching for diversity and social justice. New York: Routledge, Paul-Emile, Smith, Lo, & Fernandez, 2016).

While all health-care professionals are trained to provide appropriate care regardless of their patients' race, gender, sexual orientation, etc., they typically receive much less training regarding situations where they or their co-workers are the subject of bias from the patient.

Giving health-care professionals the tools to more effectively address these types of situations may lead to a more positive and fulfilling work place environment for all.

Actions

Provide more detailed training, during both student clinical orientation and faculty/staff employee on-boarding, to allow health-care professionals to increase their sense of competency when confronted with bias directed either toward them or their colleagues.



Using role-play training scenarios to address multiple potential situations which may be encountered in various clinical settings, thus giving them tools to respond more decisively in situations that may be highly charged and at risk for escalation if not addressed quickly and appropriately.

Example Scenarios

- Scenario 1 (bias directed at a co-worker): Jane Stevens, RN says to Ms.

 Smith, the hospitalized patient, "My shift will be ending in 15 minutes and this is

 Samantha Johns who will be taking over for me."
- The patient looks somewhat upset and says to her nurse, "Jane, I need to talk to you privately RIGHT NOW."
- After Samantha leaves the room, the patient states, "I want a different nurse, one who looks like us."
 - Potential Responses for scenario 1: Let's talk about what Jane's possible responses could be by role playing this scenario.
 - Scenario 2 (bias directed toward the healthcare provider): It is the beginning of the day shift at Regency Hospital, and David Grant, RN has been assigned to care for Mr. Robb. While David enters the patient's room and says hello, Mr. Robb flinches and looks at David and says "You do not look like you are from around here, don't sound like you are from around here. You can't be as educated or as skilled as my last nurse. I only need a nurse from around here."
 - Potential Responses for scenario 2: Let's talk about what David's possible responses could be by role playing this scenario.

The Impact of Addressing Patient Bias

- Health-care professionals may feel more capable and prepared on day 1, reducing job stress and eventually leading to more job satisfaction and greater retention.
 - All members of the health-care team will feel equally respected, supported, and valued.
 - Leads to the active engagement of all health-care teams.
 - Aligns with The Essentials: Core competencies for professional nursing education and its stance on antiracism, diversity, equity, and inclusion (American Association of Colleges of Nursing, 2021).
- Aligns with academic and practice partnerships in terms of supporting practice, academics, retaining nurses, and building inclusive environments.
 (The Essentials: Core competencies for professional nursing education.

https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf)

 Strengthens our institutional capacity for diversity, equity, and inclusion, and helps to promote an diverse, equitable environment where all can thrive and excel in keeping with OHSU's Strategic Plan 2025.

Evaluation

Pre-Survey and Post-Survey questions

- Pre-Survey question example: How well equipped are you in responding to potential patient bias situations?
- Post-Survey question example: After participating in the bias training scenarios, how well equipped are you in responding to potential bias situations?

Continuous Quality Improvement

- Plan and implement ongoing proactive improvements in clinical settings using assessment questions
- Assessment question examples: Did you receive the training scenarios?,
 Were you able to respond effectively during the situation based on the training scenarios?

Six Month Booster Training

 Updated role playing scenarios based on clinicians' experiences over prior 6 months (anonymous, to protect patient confidentiality)

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DIVERSITY LEADERSHIP INSTITUTE



For academic nursing leadership committed to diversity, equity, and inclusion

Biography

Dr. Reifenstein received her undergraduate degree from Hampton University and a master's degree in pediatrics and nursing administration from Wagner College. A former pediatric nurse and director of nursing for a home health agency, Dr. Reifenstein obtained her Ph.D. in nursing research from the University of Rochester. She later completed a postdoctoral fellowship at Oregon Health and Science University in Portland, Oregon, focusing on Research in Individual and Family Symptom Management. Dr. Reifenstein currently serves as the Senior Associate Dean for Student Affairs and Diversity at Oregon Health and Science University, School of Nursing.



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