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Collaborative Nurse-Patient/Family Relationships

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Much of what has been written about physician-patient relationships is also applicable to other professional-patient relationships. This is especially true of the nurse-patient relationship because nurses play a critical role in the implementation of health care. How effective nurses are in this regard depends, to a large extent, on their ability to establish therapeutic relationships with their patients. Because patients' families often influence the experience of diseases and of treatments for those diseases, nurse-patient relationships often include families of those patients as well.

Much has been written of the potentially therapeutic benefit of nurse-patient-family interactions.⁴⁻⁷ That such interactions might be therapeutic in-and-of-themselves (as opposed to simply providing the context within which specific interventions serve the therapeutic function) is supported by one study conducted by the Family Nursing Unit (FNU) of the University of Calgary, Faculty of Nursing.⁸ The education and research oriented FNU, where the unit of care is the family system, provides assistance to both the ill family member and family.

In this study, families (of patients with chronic illnesses) were seen for two to four therapeutic sessions by a FNU nurse. Findings revealed that, from the families' perspectives, the relationships they had established with their nurse had a "...powerful influence on the *effectiveness* of care". When asked how the nurse helped them address their physical and emotional needs, they surprised investigators by saying nothing about activities the nurses thought of as interventions. Instead, they pointed to relationship activities including: active listening (carefully listening and asking good questions); compassion (the nurse cried with them in one case) combined with professional objectivity; and nonjudgmental collaboration (where nurses were seen as helping the families help themselves). ¹⁰

- Ann C. Burgess and Janet Burns, "Partners in Care" AJN (June 1990): 73-75.
- ² Ihid
- ³ Carole A. Robinson, "Health Care Relationships Revisited," *Journal of Family Nursing* 2(2): 152-173 (May 1996).
- Judith A. Erlen, "Treatment Decisionmaking: Who Should Decide," *Orthopedic Nursing* 17(4):60+ (July-August 1998).
- Donna M. Dixon, "Unifying Concepts in Parents' Experiences with Health Care Providers," *Journal of Family Nursing* 2(2): 111-132 (May 1996).
- Kathleen Heery, "Straight Talk About the Patient Interview," *Nursing* 30(6): 66+ (June 2000).
- ⁷ Ruth Medved, "Strategies for Handling Angry Patients and Their Families," *Nursing* (April 1990): 66-7.
- 8 See note 3
- See note 3 p. 167 (emphasis in the original)
- See note 3

Judith A. Greenfield is contributing editor of the *Healthcare Communication Review* and President of the Healthcare Communication Project, Inc.

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