

# Health Care Team Agreements (Behavioral Contracts)



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ESRD Network 9/10

June 2008

# When to Use When Not to Use

## When to Use:

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## When Not to Use:

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# When to Choose a Health Care Team Agreement...

- Does the problem behavior happen frequently?
- Is the person mentally competent to understand & participate in an agreement?
- Is the problem behavior related to a specific incidence?
- Is there enough time to make the agreement effective?

# Health Care Team Agreements Work Best When

- Specific
- Observable and measurable
- Occur frequently
- Consistent
- Understandable



# What an Agreement Is Not:

- Not a means for termination
- Not forever
- Not written without patient input
- Not a restatement of patient responsibilities
- Not everything you wish the patient would do differently

# What An Agreement Should Include...

- List the people making the agreement
- Involve both patient and staff if possible in making the agreement.
- Define/specify the behavior that is of concern: Observable and Measurable.
- Keep a record of the behavior.
- Have a start and end date.
- State the expected behavior in positive terms whenever possible.
- State reasonable expectations of each of those involved in the agreement.
- State reasonable consequences of the agreement.
- Have consistency in carrying out the agreement.
- Have periodic follow-up to reinforce agreement or make changes.

# Health Care Team Agreements

Involve  
all parties



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# Health Care Team Agreements

Specify  
behavior(s)  
of concern

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# Behavioral Terms

## Definition

### *behavior*

- 1 a:** The manner of conducting oneself **b:** Anything that an organism does involving action and response to stimulation  
**c:** The response of an individual, group, or species to its environment
- 2** The way in which someone behaves: an instance of such behavior
- 3** The way in which something functions or operates

### *behave*

- 1 a:** To conduct oneself in a specified way **b:** To conduct oneself in a proper way
- 2** To act, react, function, or perform in a particular way

## Be Specific

Identify what specifically the patient is doing

Behavior is described as an action verb

Everyone sees or hears the same behavior

The number of times the specific behavior happens can be counted

# Behavioral Terms (cont'd)

## Examples:

1. General: **disruptive behavior**

Specific:

**cursing** ( GDI, shit, MF)

**calling staff names** (stupid, idiot, dumb)

**hitting** staff

**throwing** things

**calling** to staff to come over every 15 minutes

2. General: **nonadherent**

Specific:

**gets off** machine before end of treatment time

**arrives late** for treatment

**refuses to answer** questions about medications taken

**refuses to have blood pressure checked** after treatment.

# Behavioral Terms (cont'd)

**Practice:** Check if the words are specific or general. Change general to specific if it is.

<b>Behavior</b>	<b>Specific</b>	<b>General</b>	<b>Change</b>
<i>Cry</i>			
<i>Cranky</i>			
<i>Mean</i>			
<i>Hostile</i>			
<i>Pulls out needle</i>			
<i>Late to treatment</i>			

# Health Care Team Agreements

**Observe  
And  
Record**



# Observe and Record

- What is person doing?
- Where is it happening?
- How often does it happen?
- How long does it happen?
- When does it happen?
- Who does it happen with?
- How strong is the behavior?
- What happens after the behavior?
- For whom is it a problem?
- Reasons or clues as to why it is happening?

# Behavior Tracking

Patient \_\_\_\_\_

Identify Behavior: (e.g. missing dialysis treatments) \_\_\_\_\_

Occurrences: (e.g. at least once every two weeks) \_\_\_\_\_

\_\_\_\_\_

Date	Time	What Happened	Who was Involved	Response by Staff

# Health Care Team Agreements

**Realistic  
expectations**

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# Health Care Team Agreements

## Consequences



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# Health Care Team Agreements

## July 2008

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
					Contract – takes effect.	
3	4	5	6	7	8	9
10	11	12	13	14	15	16
					Contract – review 1 <sup>st</sup> phase	
17	18	19	20	21	22	23
24 / 31	25	26	27	28	29	30
					Contract – end of 1 <sup>st</sup> phase	

Start date and End date

# Health Care Team Agreements

Evaluate and  
make changes  
as needed



# Evaluate Agreement

- Individualized?
- Specific behaviors?
- Measurable?
- Observable?
- Patient involved in process?
- Achievable outcomes/expectations?
- Positive and non-threatening tone?
- Time-limited?
- Consequences of failure to keep agreement are clear and reasonable?

# When An Agreement Does Not Work...

- The behavior is not specific enough
- The behavior is not really the issue
- There is not enough motivation to change
- The rewards are not strong enough
- Both parties did not have input
- There is not consistency
- There is not enough time for the changes
- There are other issues more important
- There is no trust
- There is too much anger

# Which are appropriate for Health Care Team Agreements?

- Patient comes late to treatment 4-5 times a month.
- Patient gossips about staff in the waiting room at least once a week.
- Patient yells that he wants to be taken off early four times a month.
- Patient curses if she is not put on the machine within 5 minutes of her start time and it has happened 2 times in the past 6 months.
- Patient calls the staff derogatory names almost every treatment.
- The spouse threatens to sue the staff at least once a week and tells whoever will listen – the staff, patients, and other families.
- Patient always seems cranky and in a bad mood.
- Patient threatens to tell his son he is receiving poor care.
- Patient moans loudly during treatment.
- Patient is not alert to time and place and tries to take her needles out.

# What do you do when...

- The doctor says (s)he wants a behavioral agreement on a patient for whom it is inappropriate?
- A staff member says (s)he will quit if a certain patient who has behaved inappropriately doesn't get discharged?
- A patient is rude to a staff member?
- Other:

# Alternative Approaches

- DPC Toolbox
- Professionalism In-service
- Sensitivity Training
- Cultural Diversity Training
- If....Then
- Other