# The Nurse-Patient Relationship

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FROM the time man achieved civilisation, Mother has played a vital role. It is, therefore, small wonder that the sick, the disabled and helpless, in need of the protective tender loving care, which in effect, is Nursing have looked to mother figures. In the early times this care was given by the family, especially by the mother. The nurse of today stands as the symbol of mother and with her modern, social medical and scientific expertise serves as the idea attendant to the patient. Moreover, a nurse is the co-ordinator of all the services and persons concerned with patients care. She is the one who renders round the clock services to the patients, whereas others deal with the patients for short spells of time. It is, therefore, appropriate that, we should be discussing the nurse-patient relationship.

### (I) The Concept of Nurse-Patient Relationship or its Definition

One should be very clear about the concept of nurse-patient relationship.

**Nurse:** According to the Oxford Dictionary 'Nurse is a person trained to take care of sick'.

**Professional Nurse:** I.C.N. has defined Professional Nurse thus: "A professional Nurse is one who has completed a generalised Nursing preparation in an approved School of Nursing and is authorised to practise Nursing in her country. Such general preparation shall include instruction and supervised practice, in order to equip the nurse to care for people of all ages, in the promotion of health and in all forms of sickness, both physical and mental'.[1]

But a very simple meaning of Nursing is 'to do something for a patient what he/she can do to oneself in a normal condition'.

**PATIENT:** The word 'Patient' derived from the Latin 'Patiens' meaning 'suffering', i.e. someone who is in need of care.

**RELATIONSHIP:** Relationship is a state or mode of being related for which 'come in contact with' becomes the pre-requisite.

Nurse-Patient relationship establishes when a person (patient) who is in need of care or who needs skilful and intelligent help in doing the things, which he/she could have performed in normal condition, comes in contact with another person (nurse), who could extend professional help in such circumstances.

### (II) Establishment of Health Services

Its goals and perspectives are as:

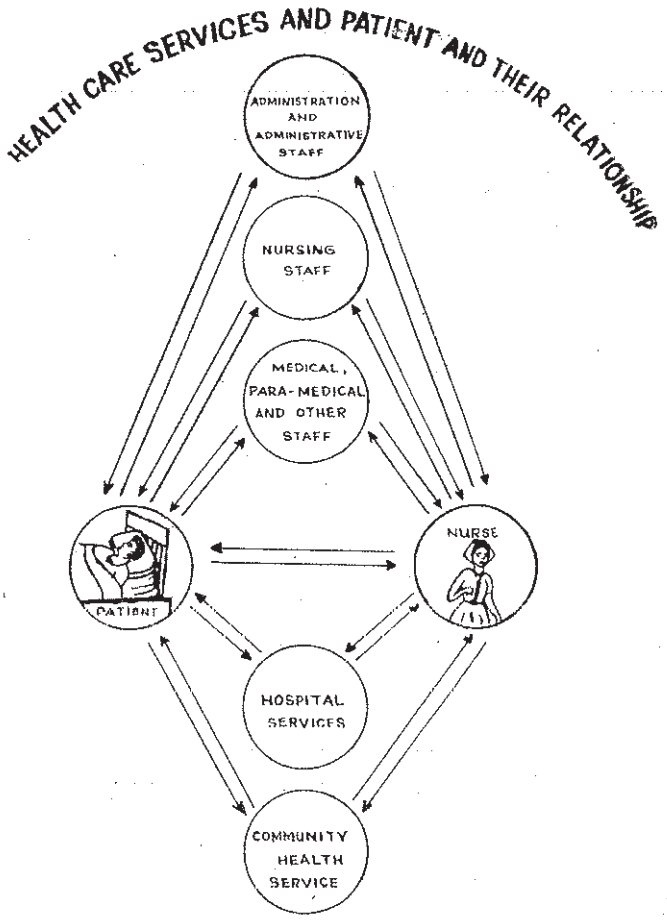
(1) **Curative:** To take care during illness.

(2) **Preventive and Promotive:** To prevent illness and to promote health.

(3) **Educative:** To educate various people, for prevention of diseases and promotion of health

(4) **Research:** To do research in providing better care through advancement in medical technology.

DIAGRAM 1

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There are many people and services within the institution and in the community which are involved or interrelated in dealing with a patient, but the nurse is the key person. The nurse, being a coordinator, executor of the policy laid down by the administrators and carrying out orders given by the doctors intelligently and skilfully, must have her goals and perspectives clear in her mind. Diagram 1 explains the relationship of all concerned with the patient's care.

In order to fulfil her goals, the nurse needs to play certain roles, which will help in establishing her professional relationship with the patients.

**(III) Roles Played by the Nurse**

The nurse has to play different roles according to the needs.

(1) **Hostess:** With the patient as her guests.

(2) **Parent:** With the patient who is sick being taken care of as a child.

(3) **Friend:** In whom the patient can confide and place trust.

(4) **Teacher:** Who prevents illness and promotes health, by educating the patient, his family her junior colleagues, the community and all those who are concerned with the patient.

(5) **Student:** Who continues learning throughout her professional course in order to better serve her patients.

(6) **Leader:** Leader of the team involved in patient care.

(7) **Co-ordinator and Interpreter:** Since many people are involved in patient care and each one is specialist in his/her field, taking care of only one aspect of the patient, someone is needed to co-ordinate all the activities to the greatest benefit of the patient.

**(IV) Expectations**

A patient expects her/his Nurse should be:

(1) Sympathetic, loving and kind. (2) Gentle. (3) Skilful in handling. (4) Good listener. (5) Knowledgeable. (6) Confident. (7) Benevolent temperament. (9) Carry out treatment prescribed by the doctor intelligently. (10) Punctual and accurate. (11) Reliable. (12) Understanding his/her needs. (13) Loyal and trustworthy. (14) Co-operative. (15) Reassuring. (16) Pleasing appearane and cheerful. (17) Healthy.

Probably by taking into account the expectations of the patients, the ancient Indian Surgeon has stated in **Shushrutasamhita** some of the qualities of a nurse which remain true today. 'That person alone is fit to nurse or to attend the bedside of patients who is cool-headed and pleasant, whose demeancur does not speak ill of any body, is strong and attentive to the requirements of the sick, and strictly and indefatigably follows the instructions of the physician.'[2]

**(V) Ways and Means of Fulfilling the Expectations of the Patient**

Normal epectations of the patients can be fulfilled by a nurse through: (1) Knowledge. (2) Skill. (3) Attitude.

As the art and science of Nursing is developing rapidly, the nurse should be abreast of the latest advances right from the beginning of the course. Opportunities should be created for her/his professional development. Importance to the following aspects should be given to build her career on a sound footing.

(a) Selecting promising individuals for training.

(b) Keeping the School of Nursing well equipped and well staffed.

(c) Staff and teachers must provide good examples and serve as ideals.

(d) Administrations, the manager of the hospital and School of Nursing should be able to provide necessary upgrading.

The nurse must attain a high degree of proficiency and skill during her training, imbibing the best of both the science and the art of her profession.

Nurse's training needs to be more practical and she should be able to apply the scientific principles learnt in the school/college in actual situations.

Knowledge of Sociology, Psychology and Economics will help her in understanding a patient as an individual. Her knowledge about facilities provided by social agencies and health centres in the community for prevention and promotion of health will enable her to do the best for her patient.

At all times, the emphasis must be on human nature, factors affecting behaviour of persons and needs of human beings. Important human needs are:

(1) **Physiological needs:** Air, hunger, rest, sex etc.

(2) **Social needs:** Protection, love and belonging, support spiritual needs, etc.

(3) **Self-esteem needs (Ego):** Recognition, status, prestige, etc.

(4) **Actualisation—Potentiality:** Sense of personal achievement, fulfilment of ambition, etc.

A nurse also has to understand and appreciate that the need of a person varies according to the background, age and sex, as her approach and success will depend on it.

Meeting spiritual needs is also important because often religious and spiritual masters have great effect on persons, his/her personality, behaviour, perception, etc. influence and affect the recovery of patients.

Complexity of equipment used in diagnosis, advances in medical and surgical procedures, particularly in cardiovascular surgery, intensive care of the severely ill, development of specialities in practically every field of medicine haemodialysis, organ transplantation, automation, etc. have made the task of a nurse complex, difficult, challenging and interesting. In the past, the nurse was expected to make the patient's bed, take temperature, feed, sponge, or bathe, attend to the physical needs, maintain cleanliness of the surrounding, etc. but now a nurse is expected to monitor equipment, detect emergencies and resuscitate the patient by making use of defibrillators etc., for which she needs special knowledge and developed skill, in addition to the skill for handling and dealing with patients from a behavioural point of view. She also needs to report correctly the patient's progress, effect of a particular treatment and note reactions, etc. At the same time she should also take care that patient does not become too dependent on her and she also should not get entangled emotionally, i.e., remain detached with the patient. Shri Krishna has advised Arjuna on the importance of maintaining emotional stability and not getting affected with happiness and sorrow.[3]

राग द्वेष वियुक्तैस्तु विषयानिन्द्रियैश्चरन ।
आत्मवश्यैर्विधेयात्मा प्रसादमधिगच्छति ।। अध्याय २/६४

In short, a nurse can develop good nurse-patient relationship by meeting with expectations of the patients through comprehensive or total patient care which can be defined as "that process which, based upon the recognition that each individual has needs that are peculiar to him, attempts to meet the nursing needs of the individual. This may include, physical, emotional, spiritual, socio-economic and rehabilitative needs. Nursing needs are ascertained through verbal and non-verbal communication with the physician, the patient and her/his family and with others who can acquaint the nurse with certain aspects necessary for the plan of care'.[4]

Nurse can also meet the expectations of the patient and maintain good or normal nurse-patient relationship by making use of her head, heart and hand, i.e., science of nursing, spirit of nursing and art of nursing. (See Diagram 2).

### Factors Acting as Barriers in Maintaining a Good Nurse-Patient Relationship

(1) **Over-crowding of the ward:**

(i) It affects the Nurse-Patient ratio, leads to over burden of work and detracts from her efficiency.

(ii) It affects interpersonal relations, between staff and patient.

(iii) It also affects the supply and equipment.

(iv) It affects the ability to maintain ideal spacing of the beds and permits spread of infection.

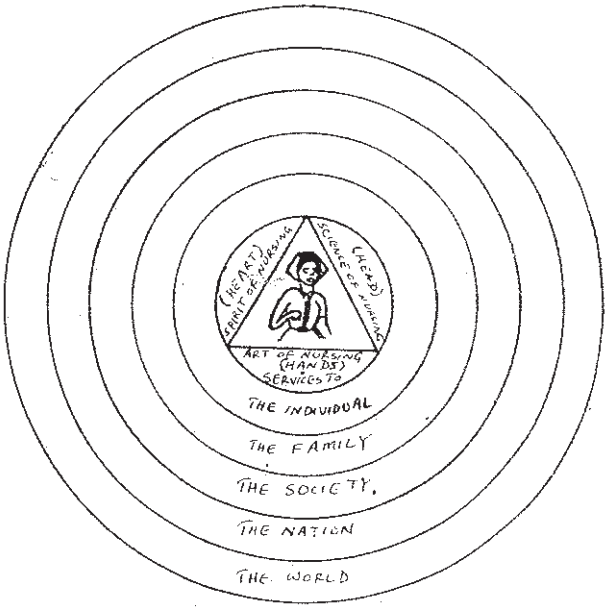
(v) It reduces privacy and non-disturbance to the patient.

(vi) It affects imparting proper training or providing good learning situation.

(vii) It affects ability to provide comprehensive Nursing care to the patient. This is actually a national loss because patients and relatives do not get proper health educations, which leads to ill health, extra expenditure to the government and to an individual (patient) causes an ill nation.

(viii) It affects finance which leads in turn to inadequate staff, equipments other services and facilities.

DIAGRAM 2: SPHERE OF NURSING




(2) **Advancement in medical technology and changed outlook towards life:** Automation or tremendous amount of technical development has rather created **'Dehumanisation'. 'Test Tube Baby'** has changed the outlook towards life. **'Heart-Organ Transplant'** has changed the concept of death, specialization in medical and Nursing field has unconsciously created tendency to take care only of a part of a person/patient, rather treating a patient as a whole. I believe that these changes must sound a warning to nurses so that conscious efforts are made to maintain nurse-patient relationship.

(3) **Transitional period of change in development of our country:** Transitional period of change in development of our country has left us in between, i.e., we are neither fully equipped nor ill equipped with skilled personnel, material and outlook, which affects our relationship with the patients.

(4) **Social stigma:** Partially changed social outlook towards nurse and Nursing, the inability by society to give a proper social status to a nurse, acts as a barrier.

Nursing students are deprived of students' status in the Schools of Nursing which creates hindrances in developing the right type of attitude towards Nursing and patients.

(5) **Other influences:** Pressure brought on nurses and doctors, from different corners of the society bring about hindrances against giving efficient or good Nursing care.

### (VIII) How to Overcome Barriers

Some of the ways and means to overcome the barriers affecting nurse-patient relationship are:

(1) Educate public through mass education media and make them health conscious. Let them be aware of preventive, promotive and curative measures to be taken for certain conditions and health facilities available in society, so that illnesses could be prevented and overcrowding of the hospitals could be avoided.

(2) Keep nurse abreast with modern advancement in medical and technical field.

(3) Make use of technological development to promote efficiency and save time.

(4) Teaching the nurses the art of communication, understanding the behaviour of people and development of liaison between the doctors on the one hand and the patient on the other, in order to avoid any harm to the patient.

(5) Teach the nurses to play the role of leader of a team taking care of the patient as she remains in constant touch with the patient.

(6) Provide student status to the student nurses and impart education in well developed, well euipped School or College of Nursing, having good clinical facilities with sufficient teaching staff who are interested in teaching and clinical supervision.

(7) Teach the nurses to maintain human respect without distinction of caste, creed, sex, age, religion, nationality, political or social status for living body and dead body.

(8) Help the nurses to make best use of administrative setup in providing facilities to the patients.

### Conclusion

Establishment of human relation is very complex and delicate. Behavioural scientists (Psychologists) are still finding out the reasons for unpredictable behaviour of human beings. Nurses are trained to a certain extent to understand and establish good nurse-patient relationship. Both nurses as well as patients should realise and remember the following four factors so as to minimise the conflicts to its maximum: (1) Individual differences; (2) Cause of behaviour; (3) Acceptance of people in their totality; (4) Human dignity;

As rightly pointed out by Alexander,, Gordan and others:

"The patient is the most important person in the hospital."

"The patient is not dependent upon us, we are dependent upon him."

"The patient is not an interruption of our work, he is the purpose of it."

"The patient is not an outsider to our business, he is our business."

"The patient is a person and not a statistic, he has feelings, emotions, biases and wants."

It is our business to satisfy him.[5]

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