

PRC BEST PRACTICES

Communication

Our community of clients is committed to sharing leading improvement practices. PRC Best Practices was created and is always evolving based on the ideas, recommendations, and resources submitted by clients. If you have an idea at work, please share it with us at info@prccustomresearch.com.

SURVEY QUESTIONS

Communication: How would you rate the nurses' communication with you?

Communication: How would you rate the nurses' instructions or explanations of treatment or tests?

Communication: How would you rate the doctors on: Discussing any anxiety or fears you may have had about your medical condition and treatment?

Communication: How would you rate the clinic on: Informing you of any waiting or delays while at the clinic?

Communication: How would you rate the staff on keeping you informed about any waiting or delays?

Response options are: Excellent Very Good Good Fair Poor

Communication: How often did nurses explain things in a way you could understand?

Communication: How often did doctors explain things in a way you could understand?

Response options are: Always Usually Sometimes Never

IDEAS:

- In the infusion setting, inform patients at the beginning of their visit of the length of time it may take to start the infusion treatment based on duration information relative to pharmacy availability for the medications needed and infusion staff status.
- Focusing on the HCAHPS dimension of Physician Communication: develop a protocol to assist physicians with communication with the patients. Consider Physician shadowing which allows for the physicians to be observed by a patient experience officer. Physicians are recorded (with permission from the patient) in order to observe:
 - The physician's introduction
 - Using the patient's name
 - Gestures of respect
 - Body language
 - Behaviors of active listening
 - Allowing the patient/family to tell their story without interruption



- Empathy
- Touch outside of exam,
- Plan of care
- Addressing questions and concerns.

Additional observations are made on access of the physician, managing up others, use of medical jargon, and length of visits. Physicians receive a laminated pocket card to remind them of the behaviors expected of each physician. A comprehensive report is created for each physician that displays how often key behaviors are being performed.

- Focusing on communication regarding medications: hang laminated signs that read “New Drugs? Ask Me About Side Effects” to encourage patients to ask questions.
- Display in “M” on the patient’s whiteboard if new medication has been given in order to ensure that education is provided to the patient regarding side effects. During shift report, the M reminds staff to revisit education on the new medication.
- Conduct shift reporting at the bedside allowing patients and families to share in the plan of care, provide input, and ask questions. Bedside shift reporting creates an opportune time to review new medication information.
- Hourly rounding provides increased interactions between patients and staff and gives additional opportunities for education.
- Institute post-discharge phone calls in order to confirm that the patient understood their discharge instructions, their medications, were able to get their meds, and were planning to go to their follow up appointments.
- Use white boards to display information to aid the physician and staff so information can be obtained at a glance during rounding. Information such as last time pain medication was administered, last time breathing treatments was given, or lab results is helpful for staff but also for the family.
- IPASS (Illness, Patient summary, Action list for the receiver, Situation awareness, Synthesis/read back) handoff communication is a useful hand-off tool that creates consistent communication and teamwork between departments and staff. Miscommunication or omission of important information is less likely to happen when using this initiative.
- Initiate patient admission bags that contain a welcome letter, a pamphlet about hand washing, notebook, pen and hand sanitizer. Communicate to the patient to utilize the notebook for any question they may think of so that they have a list of questions for when they see doctor. The welcome letter can include information about the unit, mealtimes, discharge process, and any other information that may alleviate fear from the unknown.
- In the surgical services setting, create a consultation room that doctors go to immediately after a case is finished and make an initial appearance with the waiting parties to assure them all is well. Additional information is then given regarding when the doctor will return with findings, and next steps.
- In the Special Care Nursery setting, recruit other fathers to create a video with their recommendations on how dads can navigate the Special Care Nursery journey.
- Initiate an Ambassador Service Program to support patients and family members. Ambassador volunteers visit newly admitted patients and continue follow-up on selected patients as directed by nursing staff. Ambassadors:
 - Provide liaison and communicate to the patient and his/her family the hospital’s concern in meeting their needs
 - Provide the patient with a specific channel through which he/she can communicate concerns, problems and needs
 - Refer patient comments and information for action to unit managers
 - Provide friendly visits to assist patient with comfort and orientation to patient room and equipment such as how to use the television, call lights and telephone
 - Provide out-of-town family members and visitor with information regarding the community
- In the NICU setting, provide a notebook to each family to use during their child’s stay to record daily updates, journal, communicate with staff, and for staff to write notes about the baby to parents while they are gone from the unit.



- Create scripting for nurses/staff to use with patients to help patients feel positive when hearing about an unavoidable change such as moving to a different room.
- Ask patients/families what questions they have. Create a simple survey and place the answers in the chart to be used as a communication tool for their patient-specific concerns to be addressed throughout their stay.
- In the Same Day Surgery setting, a nurse or clinical coordinator making rounds every 30 minutes on the patients and families who are waiting for procedures keeps the patient and family informed regarding their surgery status.

TO TRACK YOUR PATIENT PERCEPTION SCORES ON THIS QUESTION:

Visit www.prceasyview.com for data updates.

PRC's "EasyView to You" feature can email your desired reporting view of the scores to you on a schedule of your preference.

For assistance contact PRC's PRCEasyView® Support Team at 1-800-547-9584.

THANK YOU FOR PARTNERING WITH PRC!

