

# Enhancing Patient Safety through Effective Communication

© Consultation On-Call, LLC 2012

## Enhancing Patient Safety through Effective Communication

## Communication in Healthcare Priority Concerns

- Institute of Medicine (IOM)
- Communication competency
- Sentinel Events
- Research
  - 2008 Study [Hospital Survey on Patient Safety Culture]
    - 41% "Things fall between the cracks"
    - 49% Important patient care information lost during shift change
    - 42% Problems with interdepartmental Hand-Off

## Joint Commission Communication Standards

- C.02.01.21: The hospital effectively communicates with patients when providing care, treatment, and services.
  - The hospital identifies the patient's oral and written communication needs.
  - The hospital communicates with the patient during the provision of care in a manner that meets the patient's oral and written communication needs.
- RC.02.01.01: The medical record contains information that reflects the patient's care, treatment, and services.

## Communication Errors: Sources

- Nurse-Patient Relationships
- Teamwork
- Misinterpretation of information
- Technology
- MD notification
- \*Hand-off Communication

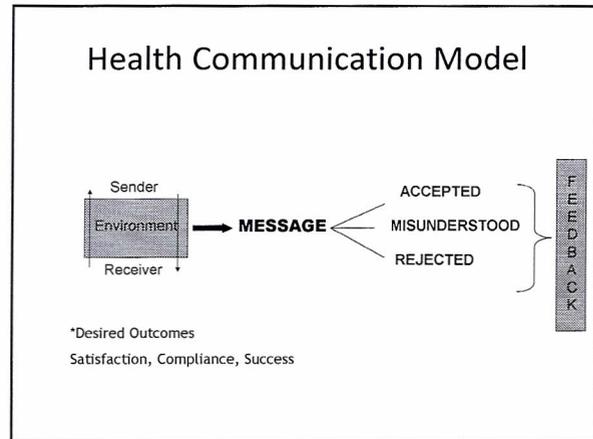
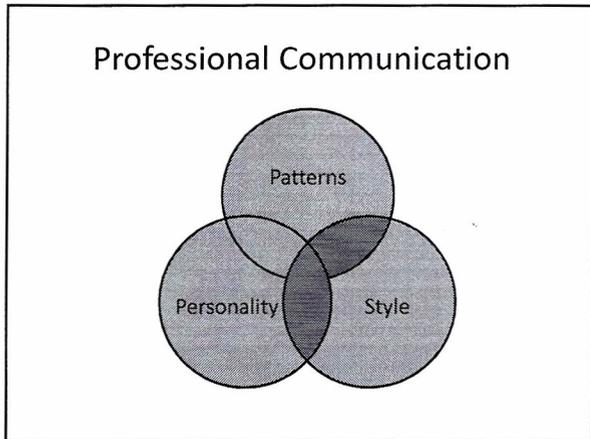
### Symptoms of Poor Communication

Patients	Staff	Organization
Low return rate Low survey scores	High turnover	Inconsistent processes
Complaints	Sub-standard performance	Leader turnover
Non-compliance	Low morale	Increased litigation
Fear/anxiety	Absenteeism Tardiness	Increased expenses

### Communication in Healthcare

Definitions:

- **Communication**  
*"To have an interchange, as of ideas or information"*  
*Webster's II, 1988*
- **Healthcare Communication**  
*"Any type of human communication whose content is concerned with health."* *Rogers, 1996*



### Sender/Receiver Variables

- Communication Skills
- Attitude
- Knowledge level
- Social position
- Culture
- Feedback
- How credible receiver views sender

The foundation Coalition  
www.foundationcoalition.org

### Threats to Communication

- Environmental
- Culture
- Patient
  - Health Situation
- Nurse

### Impact of Ineffective Communication

- Patient Safety
- Patient Mistrust
- Economic
- Negative Exposure

### Communication Patterns Among the Generations

Traditionalists (1922-1945)	Formal, Face to face, resistive to technology, respects authority "The Boss rules"
Baby Boomers (1946-1964)	Less formal, face to face or phone call, not afraid to question authority  "Explain please"
Generation X (1965-1976)	Informal communication, Bottom line thinkers "It is what it is"
Generation Y (1977-2002)	Want immediate and constant feedback, prefer communication through technology, "Let's bypass the drama and focus on where to go from here"

## Strategies for Developing Competency in Communication

### Barriers: Verbal

- Jargon
- Things to not say
  - I know how you feel*
  - This too shall pass*
  - Think about your family*
  - Be strong*
  - Why*

### Barriers: Non-verbal

- Inappropriate eye contact
- Hurriedness
- Emotions
- Tone/volume of voice
- Gestures
- Technology

### Competency Tool

Skill/Technique	Outcome Criteria	Validation Method
Listening	<ul style="list-style-type: none"> <li>• Nurse-Patient Rapport</li> <li>• Patient Compliance</li> <li>• MD orders implemented appropriately</li> <li>• Reduced delays in procedures/diagnostics</li> <li>• Patient/Staff satisfaction</li> </ul>	
Questioning		
Sensitivity		
Clear/Accurate		
Adapts		
Validation Code O = Observed      PF = Patient Feedback      PR = Peer Recognition		

**High Risk Areas for Miscommunication**

- Medication administration
- Procedures/surgery
- New diagnoses
- Patient education
  - \*Discharge Education

**High-Risk Areas for Miscommunication**

- Group
- Taped
- Written
- Verbal
  - Bedside
  - Non-Bedside

**Hand-off Communication**

**Contributing Factors to Ineffective Hand-Off Communication**

- No defined Process
- Lack of staff commitment
- Interruptions
- Inadequate preparation
- Inadequate staff education

### Preparation

- Know admitting diagnosis
- Verify that you are calling the right MD
- Gather necessary [relevant] data
  - Vital signs, relevant labs, I&O, medications, recent interventions and results
- Review/obtain previous assessment findings
- Appropriate time/location to make call

### SBAR

- **S** - Situation: What is happening at the present time?
- **B** - Background: What are the circumstances leading up to this situation?
- **A** - Assessment: What do I think the problem is?
- **R** - Recommendation: What should be done to correct the problem?

### [I]SBAR

- **Introduction**
  - Hello Dr. Jones, this is Pam Collins RN from 3E, I am calling about...
- **Situation**
  - Your patient is having severe abdominal pain that has been unrelieved by the pain medication. Her abdomen is distended and firm with decreased bowel sounds.
- **Background**
  - She is 3 days post-op and has not had a BM and is passing minimal flatus; her electrolytes are normal except her NA which is 130; her pulse is 110, BP 100/50 which is down from her baseline of 130/70...

### [I]SBAR

- **Assessment**
  - I am concerned that she may be developing an ileus or acute abdomen.
- **Recommendation**
  - I am thinking that we need to get an abdominal X-ray, maybe some fluids...

### Strategies for Hand-Off Communication

- Clear language
  - Avoid vagueness
  - Professional language
- Content
  - Relevance
  - Interactive questioning
  - Patient centered
- Standardized Reporting
  - SBAR

### When Should SBAR be Performed?

Should All SBAR Communications be  
Documented?

### Documentation and Patient Safety

- Document all pertinent communications
- Adhere to [facility] documentation method
- Document specifics
- Read documentation

[pcollins@consultationoncall.com](mailto:pcollins@consultationoncall.com)  
[www.consultationoncall.com](http://www.consultationoncall.com)  
Pam Collins, MSN, CMSRN, RN-BC

**Questions  
QUESTIONS**

## REFERENCES

1. Andersen, P.A. (2004). *The Complete Idiot's Guide to Body Language*. Indianapolis, IN: Alpha Books.
2. Awesome Talking Library (nd). Ten Myths That Prevent Collaboration Across Cultures. Retrieved September 1, 2005 from <http://www.awesomelibrary.org/multiculturaltoolkit-myths.html>.
3. Booker, D. (1994). *Communicate with Confidence*. USA: McGraw-Hill, Inc.
4. Chrysalis Performance Strategies (2004). Communication styles and conflict. Retrieved August 15, 2005 from [http://www.teamchrysalis.com/AC/V4?AC46\\_Communication\\_Styles.htm](http://www.teamchrysalis.com/AC/V4?AC46_Communication_Styles.htm)
5. Cichocki, M. (2005). A guide to better healthcare. Retrieved August 30, 2005 from [http://aids.about.com/cs/doctors/a/culture\\_p.htm](http://aids.about.com/cs/doctors/a/culture_p.htm).
6. Crews, A. (2000). *Professional Roofing*. Understanding cultural differences. Retrieved August 30, 2005 from <http://www.professionalroofing.net/past/apr00/international.asp>.
7. The Joint Commission (2011).
8. The Joint Commission (2007). Communication During Patient Hand-Over: Patient Safety Solutions [Vol. 1, solution 3].
9. Mikanowicz, C. (2003). Strategies for Developing Communication Between Nurses and Physicians. National Center of Continuing Education. Retrieved April 25, 2005 from <http://www.nursece.com/onlinecourses/97.html>.
10. Northouse, L.L., Northouse, P.G. (1998). *Health Communication, Strategies for Health Professionals*, 3<sup>rd</sup> Ed. Stamford, Connecticut: Prentice Hall.
11. Purtilo, R., Haddad, A. (2002). *Health Professional and Patient Interaction*, 6<sup>th</sup> Ed. Philadelphia, Pennsylvania: W.B. Saunders Company.
12. Women's Business Center (2005). Understanding Your Communication Style. Retrieved August 15, 2005 from [http://www.onlinewb.gov/docs/manage/comm\\_style.html](http://www.onlinewb.gov/docs/manage/comm_style.html).
13. Your Personal Space (2003). Retrieved August 30, 2005 from <http://www.worsleyschool.net/socialarts/personal/space.html>
14. Scalise, D. (2006). *Clinical Communication and Patient Safety*.
15. Schuster, P., Nykolyn, L.(2010). *Communication for Nurses: How to Prevent Harmful Events and Promote Patient Safety*. F.A. Davis: Philadelphia.

## REFERENCES

16. Zagury, C. (2004). Effective Communication Skills: Four Steps to Success. *Nursing Spectrum*. Retrieved April 25, 2005 from <http://nswb.nursingspectrum.com/cforms/GuestLecture/commskills.cfm>.

## REFERENCES

1. Andersen, P.A. (2004). *The Complete Idiot's Guide to Body Language*. Indianapolis, IN: Alpha Books.
2. Awesome Talking Library (nd). Ten Myths That Prevent Collaboration Across Cultures. Retrieved September 1, 2005 from <http://www.awesomelibrary.org/multiculturaltoolkit-myths.html>.
3. Booker, D. (1994). *Communicate with Confidence*. USA: McGraw-Hill, Inc.
4. Chrysalis Performance Strategies (2004). Communication styles and conflict. Retrieved August 15, 2005 from [http://www.teamchrysalis.com/AC/V4?AC46\\_Communication\\_Styles.htm](http://www.teamchrysalis.com/AC/V4?AC46_Communication_Styles.htm)
5. Cichocki, M. (2005). A guide to better healthcare. Retrieved August 30, 2005 from [http://aids.about.com/cs/doctors/a/culture\\_p.htm](http://aids.about.com/cs/doctors/a/culture_p.htm).
6. Crews, A. (2000). *Professional Roofing*. Understanding cultural differences. Retrieved August 30, 2005 from <http://www.professionalroofing.net/past/apr00/international.asp>.
7. The Joint Commission (2011).
8. The Joint Commission (2007). Communication During Patient Hand-Overs: Patient Safety Solutions [Vol. 1, solution 3].
9. Mikanowicz, C. (2003). Strategies for Developing Communication Between Nurses and Physicians. National Center of Continuing Education. Retrieved April 25, 2005 from <http://www.nursece.com/onlinecourses/97.html>.
10. Northouse, L.L., Northouse, P.G. (1998). *Health Communication, Strategies for Health Professionals*, 3<sup>rd</sup> Ed. Stamford, Connecticut: Prentice Hall.
11. Purtilo, R., Haddad, A. (2002). *Health Professional and Patient Interaction*, 6<sup>th</sup> Ed. Philadelphia, Pennsylvania: W.B. Saunders Company.
12. Women's Business Center (2005). Understanding Your Communication Style. Retrieved August 15, 2005 from [http://www.onlinewb.gov/docs/manage/comm\\_style.html](http://www.onlinewb.gov/docs/manage/comm_style.html).
13. Your Personal Space (2003). Retrieved August 30, 2005 from <http://www.worsleyschool.net/socialarts/personal/space.html>
14. Scalise, D. (2006). *Clinical Communication and Patient Safety*.
15. Schuster, P., Nykolyn, L.(2010). *Communication for Nurses: How to Prevent Harmful Events and Promote Patient Safety*. F.A. Davis: Philadelphia.

## REFERENCES

16. Zagury, C. (2004). Effective Communication Skills: Four Steps to Success. *Nursing Spectrum*. Retrieved April 25, 2005 from <http://nswb.nursingspectrum.com/cforms/GuestLecture/commskills.cfm>.