

Improving Nursing Communication Outcomes Through the Tell-Us Card



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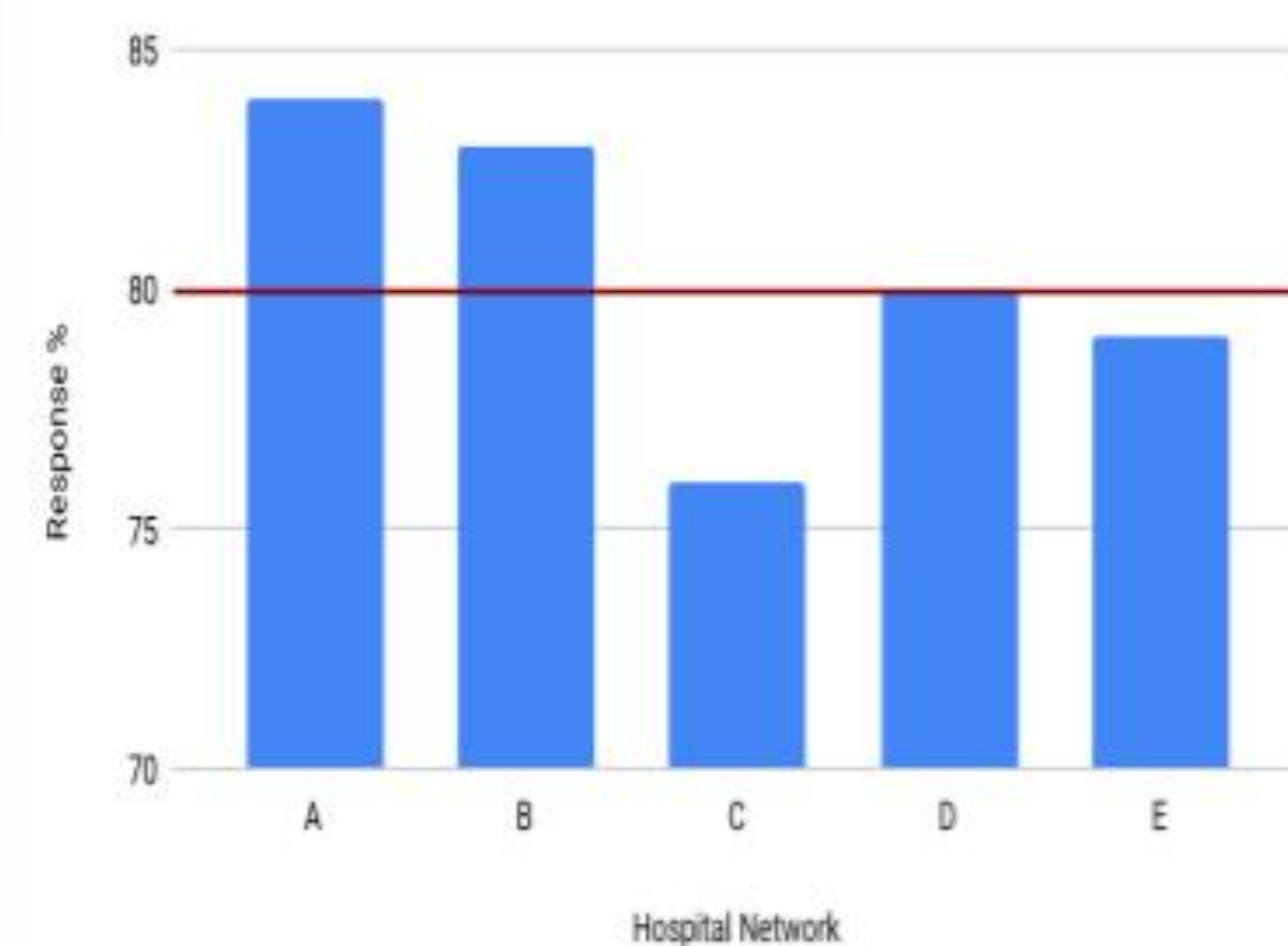
INTRODUCTION

Communication is defined as the act of conveying information through an exchange between two parties. The process is cycled until the speaker's messages have been successfully expressed and understood by the receiver. In the context of patient care, communication is defined as a pattern of exchanging information and ideas with others that is sufficient for meeting one's needs and life's goals. However, statistics have shown that failures in communication exist in more than 20% of hospital settings. Furthermore, miscommunication is one of the most common causes of medical errors.

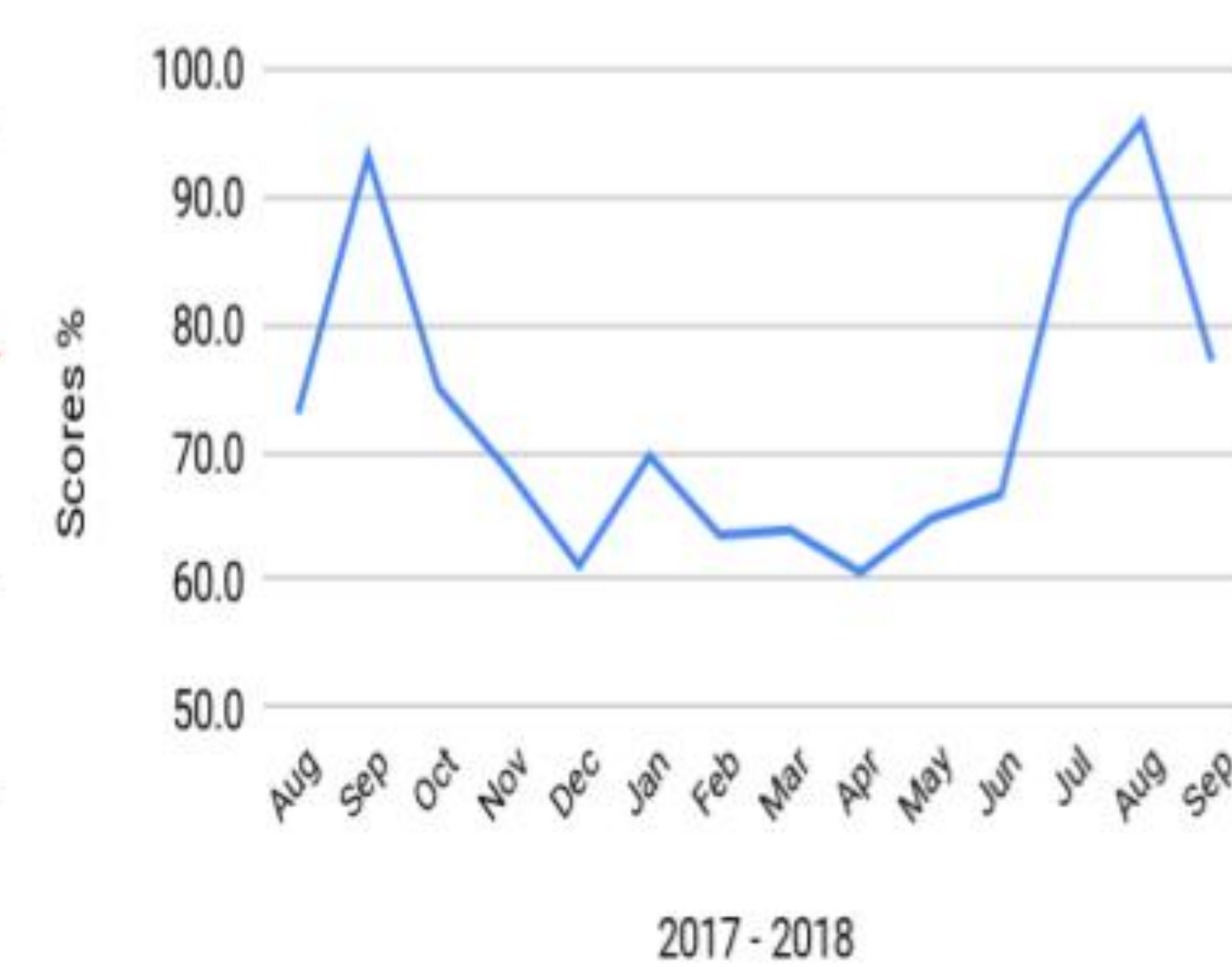
Nursing communication plays a pivotal role in patient-centered care as it support patients and their family members. It is a primary factor that maintains the quality of nursing care and patient safety. Communication allows nurses to respect, empathize, and recognize the patient as an individual as well as a partner in the healthcare team; and, it invites patients to participate in their care, which is a prerequisite for patient-centered care.

STATEMENT OF THE PROBLEM

Patients who reported that their nurses "Always" communicated well 10/1/16-9/30/17



Microsystem's HCAHPS Nursing Communication Scores



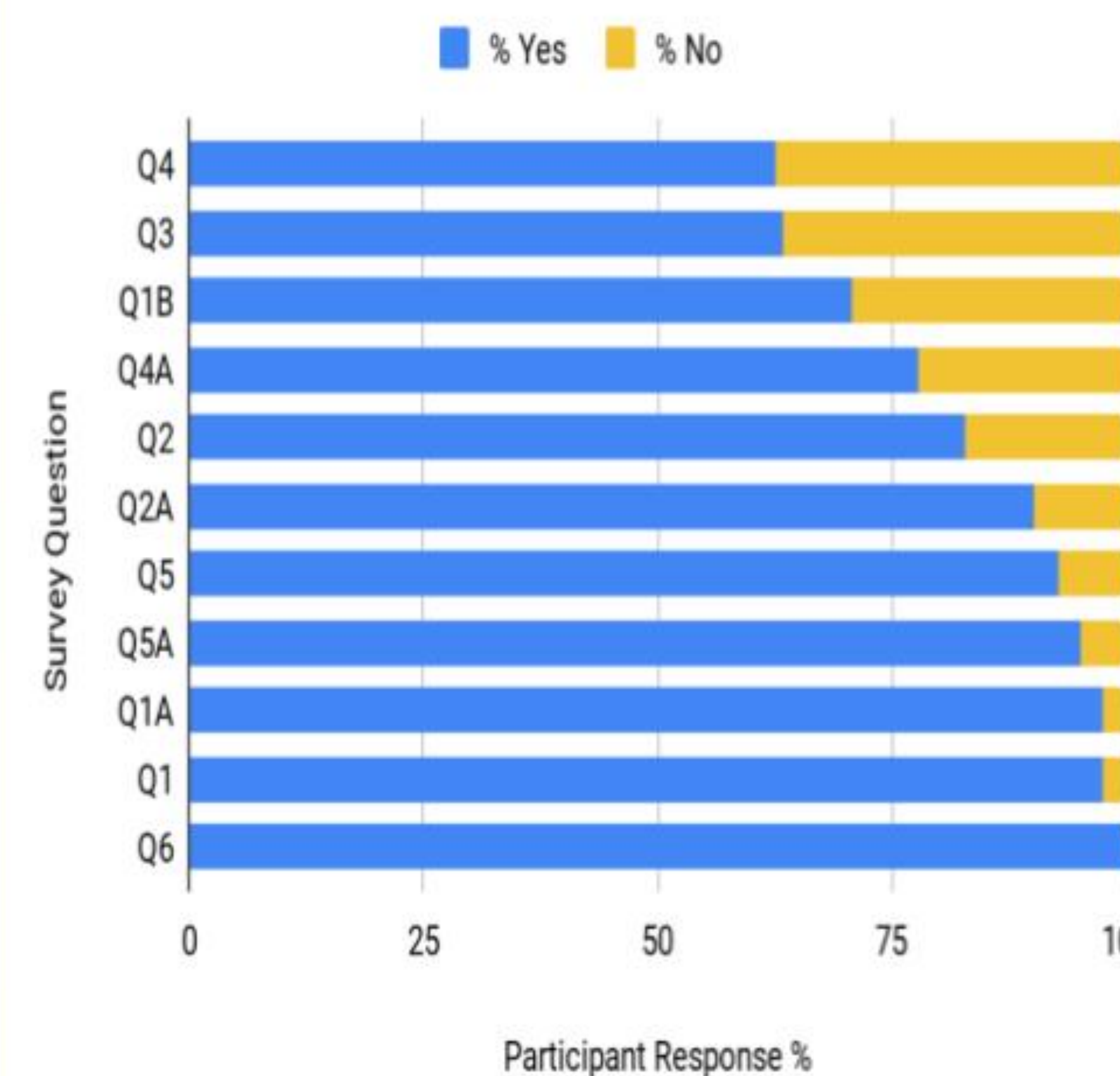
Patient satisfaction (HCAHPS) survey reports revealed that the microsystem was underperforming below the national average of 80% for nursing communication. In fact, data from months prior identified a decreasing trend that caused concern. In April 2018, nursing communication scores were at 60.6%, which was the lowest it's ever been. Prior to implementation of the intervention, satisfaction scores for October 2018 had decreased to 69%, demonstrating the need for a communication tool that will enhance patient participation and sustain positive nursing communication scores over time.

The objective is to implement an innovative method that will increase communication in a Telemetry / Medical-Surgical Unit at an acute care hospital to improve HCAHPS survey scores on nursing communication. This intervention will be known as the Tell-Us Card. The goal is to improve and sustain nursing communication goals at or above the national average six months after implementation.

ASSESSMENT

A root cause analysis was performed to identify the driving issues that led to poor communication on this unit. In order to gain a focused understanding of the existing communication barriers from the perspective of the patient, surveys were conducted face-to-face with patients over a one week period. In addition, a cost analysis was performed. The cost of implementing the Tell-Us Card is \$571 and the average costs per medical error is \$13,000. This means that the unit will save \$21.77 for every \$1 invested in implementing the Tell-Us Card program.

Nursing Communication - Patient Survey Results



Patient survey results demonstrated:

Question #4: Has the nurse explained your care for the day?
 62.5% yes | 37.5% no

Question #3: Did the nurses exchange your care information next to the bed?
 63.4% yes | 36.6% no

Question #1B: Is it important to you to be woken up in the mornings for nurse introductions?
 70.7% yes | 29.3% no

SYNTHESIS OF EVIDENCE

- Studies showed that through patient participation, communication can be improved through the inexpensive and simple tool referred to as the Tell-Us Card.
- Previous studies featuring the Tell-Us card had been used in the Triad for Optimal Patient Safety (TOPS) project in the United States and the study performed by Heinen, van Belle, and Zwakhalen.
- These studies demonstrated that the Tell-Us Card was useful in understanding what was important to the patient regarding their care.
- Studies demonstrated improvement in patients' ability to participate in decisions about their nursing and medical care.
- 80% of the patients utilized the cards throughout their hospital stay.
- 34% of patients wrote questions or concerns on the cards that they would not have raised without the opportunity of writing them down.
- There were significant differences in perceived quality of care.
- Limitations included language barriers and age-restrictions.

ACTION PLAN

Implementation of the Tell-Us Card in the microsystem will follow a defined protocol:

1. Tell-Us Cards will be distributed during morning nurse leadership rounds.
2. Patients will complete the cards.
3. Nurses will collect the completed cards in the afternoon.
4. Nurses will communicate with patients about the card.
5. Needs will incorporate responses in the plan of care.
6. Nurses will evaluate if patient needs have been met.

WE WANT TO HEAR FROM YOU!

What is important to you during your hospital stay?



This is important to me today:

This is important to me before discharge:

EVALUATION

HCAHPS Survey

You may notice a number on the survey. This number is used to let us know if you returned your survey so we don't have to send you reminders. Please note: Questions 1-25 in this survey are part of a national initiative to measure the quality of care in hospitals. OMB #0320-0041

YOUR CARE FROM NURSES

1. During this hospital stay, how often did nurses treat you with **courtesy and respect**?
 - Never
 - Sometimes
 - Usually
 - Always
2. During this hospital stay, how often did nurses **listen carefully to you**?
 - Never
 - Sometimes
 - Usually
 - Always
3. During this hospital stay, how often did nurses **explain things** in a way you could understand?
 - Never
 - Sometimes
 - Usually
 - Always
4. During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?
 - Never
 - Sometimes
 - Usually
 - Always
 - I never pressed the call button

- The efficacy of the intervention will be evaluated by patient satisfaction scores through HCAHPS surveys.
- This evaluation process will take place 6-months post-implementation of the Tell-Us Card intervention.
- The reassessment will include a post implementation survey for the nurses in order to identify how improvements can be made to the intervention.
- Future directions for the intervention include establishment of tools that will support nurse to patient communication.

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