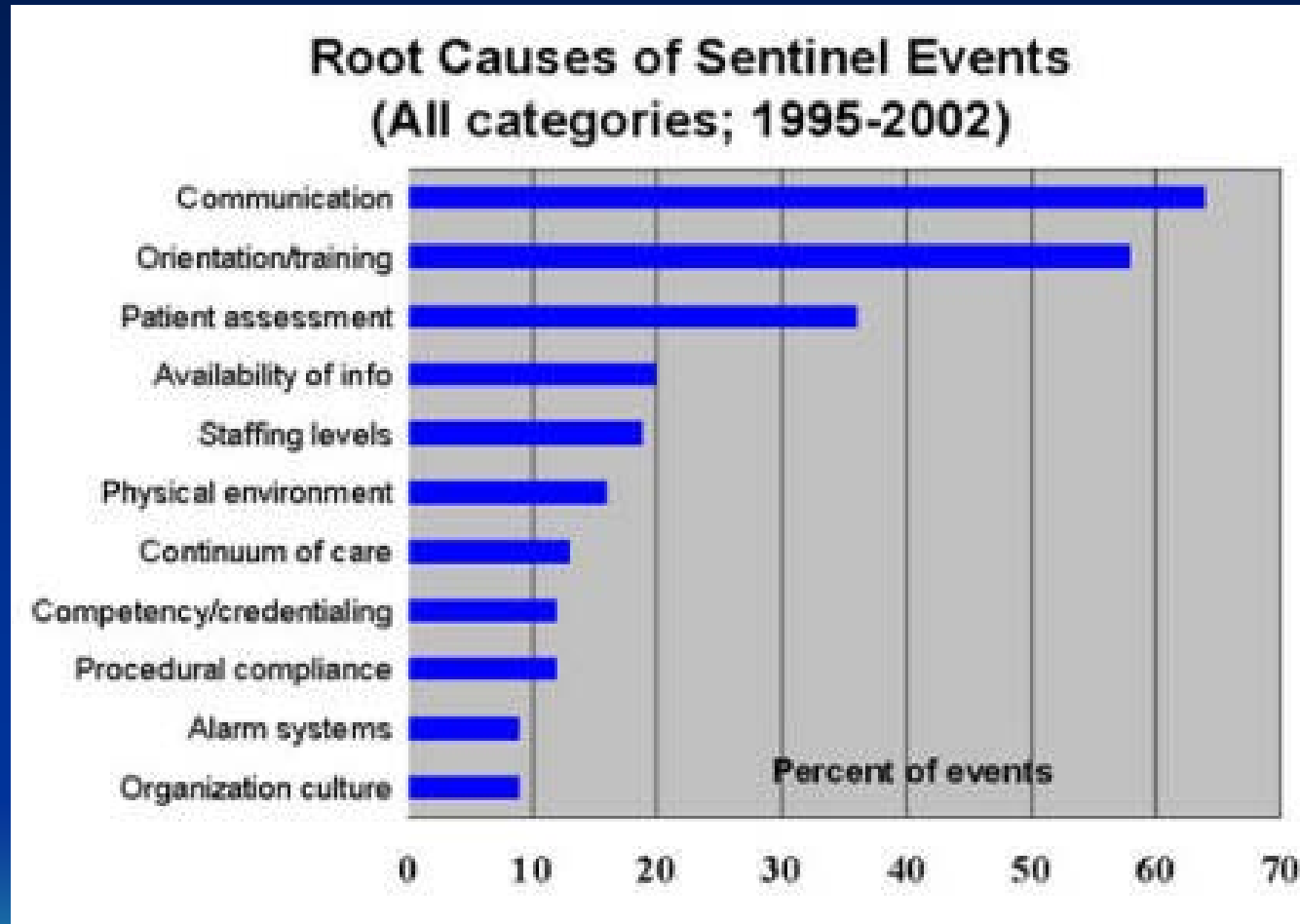


Improving Communication Effectiveness in Health Care Settings



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How significant is communication?



Poor communication is common cause of errors; communication critical, says JCAHO official - Joint Commission on Accreditation of Healthcare Organizations - Brief Article

[HealthCare Benchmarks and Quality Improvement, August, 2002](#)

Boulder Community Hospital

Nature of Pt's Communication in the Health Care Setting

- Trauma or decrease in health (decreased communication)
- Unfamiliar environment
- Rapid communication, not necessarily in their 1^o language
- Critical decisions are being made
- Some degree of pain or discomfort
- Hearing aides, dentures and glasses are often not used
- Medications and/or trauma alter their 'state'
- Not in optimal position for communication



What Leads to Communication Vulnerability?

Communicating with suboptimal:

- **Skill Level** (Speech/ Language/ Hearing/ Vision/...)
- **Tools** (No hearing aides, glasses, dentures, etc.)
- **Environment** (noisy, unfamiliar, position, lighting...)
- **Different Language/ Culture**
- **Partners** (unfamiliar, rapid rate, “white coats”...)

The term “Communication Vulnerable” was first described by Patak, Wilson-Stenks, Costello, Klinpell Person, Hennerman & Happ

Patient's Communication Needs

As long as a patient is **alert**, has the **intent to communicate**, & has the potential for some **basic understanding of yes vs. no**, there must be tools, techniques and strategies we can offer to help them communicate most efficiently...

....after all they are not only our patients
they are our customers...

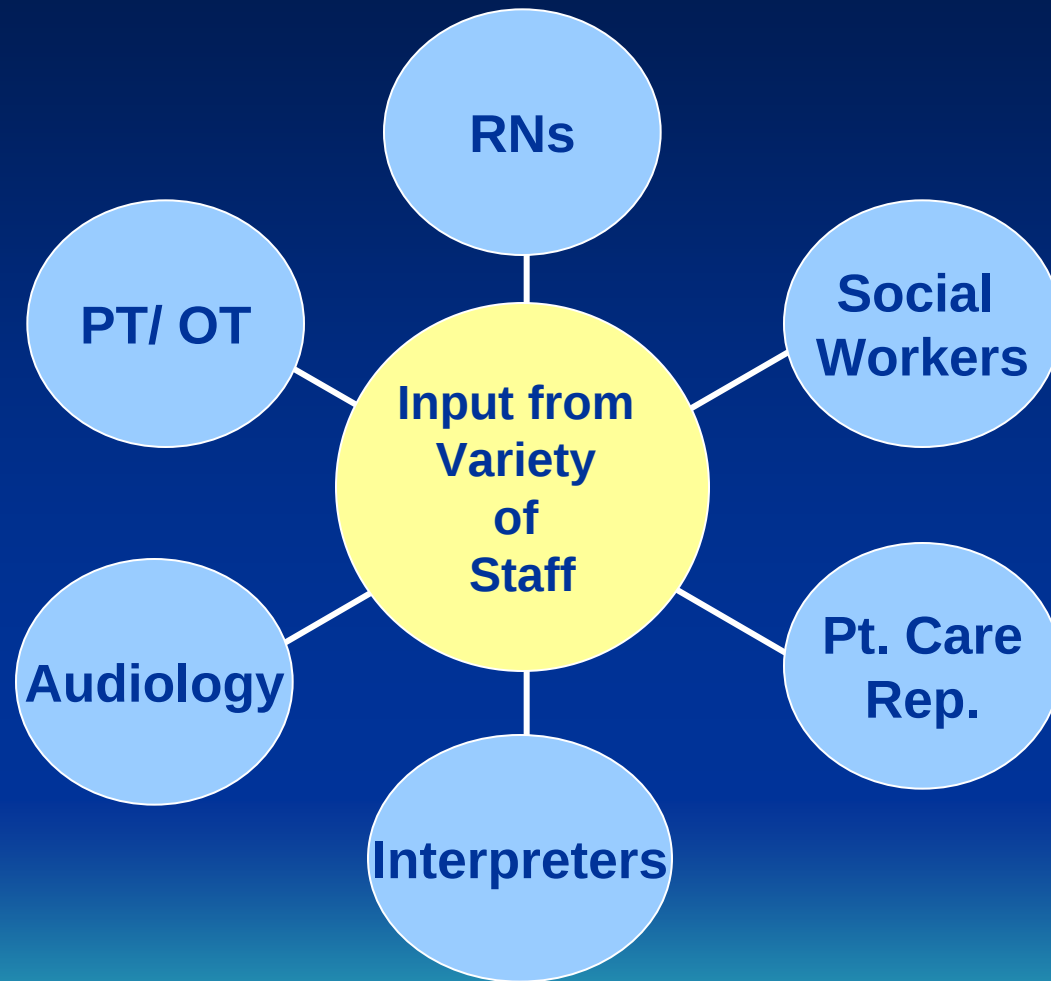


Why we developed our program and kits...



- JCAHO (health care accreditation agency)
 - Standard of Care RI.2.100
 - “Patient has a right & need for effective communication”
 - 2007 Nat’l Patient Safety goals- Goal 13:
 - “Encourage pts’ active involvement in their own care”
- Patient feedback (pt’s who’d been intubated without communication options, voiced dissatisfaction)
- Excellence in service delivery (we want to to be meeting **ALL** pts needs-not solely the ones who can easily communicate)

Needs Assessment



Types of questions we asked...

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graph TD; A[Types of questions we asked...] --> B[communication needs<br/>-when?<br/>-how often?<br/>-types of patients?<br/>-duration?<br/>-current remedies?]; A --> C[patient population?]; A --> D[what would be most helpful for staff and patients?];
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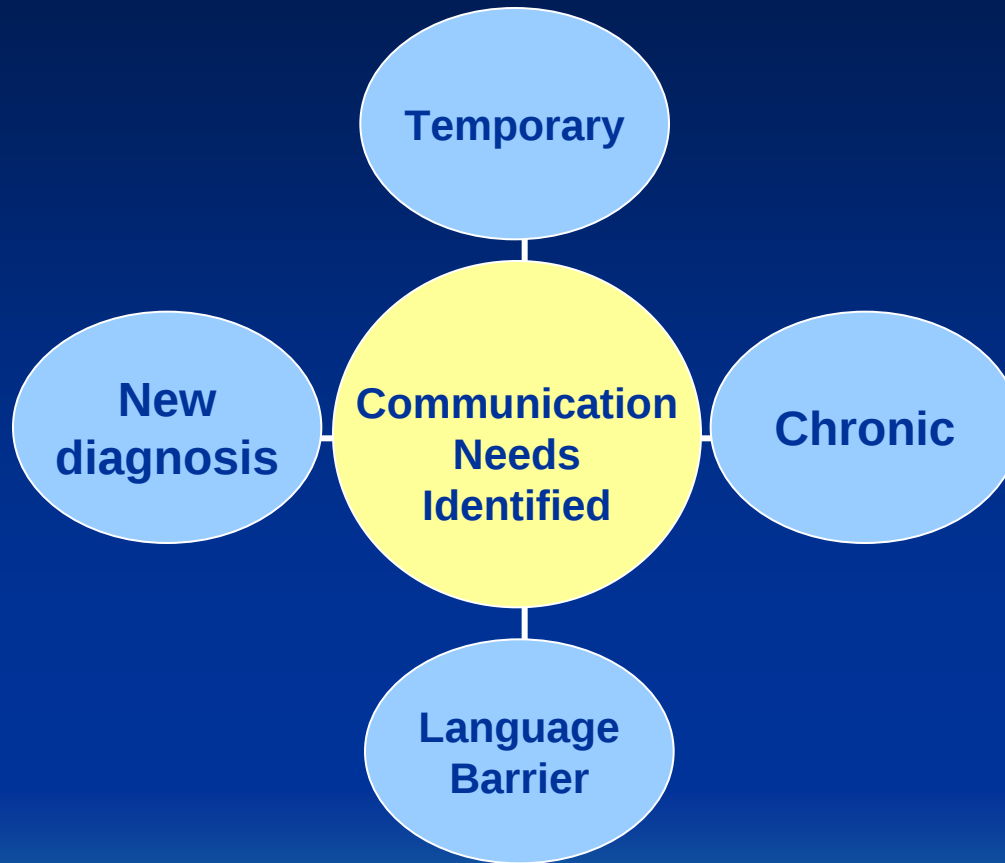
communication needs

- when?
- how often?
- types of patients?
- duration?
- current remedies?

**patient
population?**

**what would be
most helpful
for staff and
patients?**

Needs Assessment Summary



When communication needs are not met, nurses admitted to increased use of sedation, and pt's being less involved in their care

Research in the field shows...

- Pts with access to communication :
 - Receive less sedation
 - Are transitioned quicker
 - Have increased satisfaction with health care
 - Feel more in control
 - ...and generally do better...
- Happ MB. (2004) Communicating with mechanically ventilated patients: state of the science. [Wes J Nurs Res](#), Feb 26 (1); 85-103.
- Patak L, Gawlinski A, Fung NI, Doering L, Berg J. (2006). Communication boards in critical care: A patient's view. [Applied Nursing Research](#), 19(4), 182-90.
- Patak L, Gawlinski A, Fung NI, Doering L, Berg J. (2004). Patient's reports of health care practitioner interventions related to communication during mechanical ventilation. [Heart & Lung - The of Acute and Critical Care](#), 33(5), 308-320.



Getting Communication Tools to Patients

- Immediate Basic Needs

(for any patient in the hospital)



+ Trainings

- Complex Communication Needs

(Individuals with a diagnosis that impairs communication
(e.g. TBI, ALS, CVA, etc.)

Resource Book & Assessment Tools



What else ensures effective communication...

Staff training & education to allow all staff to provide optimal:

- Communication Tools
- Communication Environment
- Methods of communication (ourselves as Communication Partners)



- •On-line training
- •In-services
- •Competencies

Hospital-Wide “Buy-in” and success for Communication Tools

At Boulder Community Hospital our program has been successful because...

- Hospital Objectives are met
 - JCAHO requirements
 - ENCORE values and patient satisfaction
- Distribution cost/ responsibility among each Nursing Unit (affordability & accountability)
- Re-ordering system thru Purchasing Dept (allows restocking of equipment)
- Using hospital ‘grants’ helped fund pt. tools



More information...



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