Project Name/Focus:	Challenges in Communication during COVID-19 between Healthcare Worker's and Patient Family.	Start Date:	
Team Leader:	Ruth Mohan	End Date:	

WHAT ARE WE TRYING TO ACCOMPLISH?

1. Poor communication between hospital staff and patient family

PROBLEM/NEED

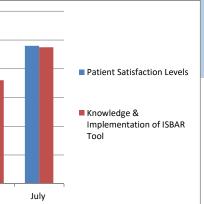


UDY	
Target	

on communication between the hospital staff and their families. For effective communication ISBAR Tool was used and gradually the knowledge on the use of tool improved for nurses and medical officers from 46% to 95% 2.96% of the patient family reported good communication understanding the care and treatments as well improved discussions during telephonic communication. 69% of the patient families reported that they sh the patient experience to all friends and families. S.Self confidence between healthcare workers and patient family increased from 21% to 96% post interver when comparing pre and post experiences .			Results	Eval	
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 Restriction of the family to visit the patient due to Strict isolation protocols Failure of Intimation of health condition of patient to the family 		 Ensure twice in a day a telephonic conversation was done between the Healthcare personnel and Patient Family Prepare a checklist for Wards which stating patient name ,contact number 			2.96% of the patient family reported good communimproved discussions during telephonic communithe patient experience to all friends and families. 3.Self confidence between healthcare workers and
4. Physicians spend limited time on the wards so they were unlikely to be available for a follow-up conversation with the family		,person who was communicated ,time and date.			when comparing pre and post experiences .
5. Nurses were not ready to discuss the aspects of care for critically ill patients		3. All patient family who were given a telephonic call were documented in the Checklist wiith all above details			120%
6. Development of Mental Complications due to loneliness	4.Patient Representative officer made calls to all discharge patients and took feedback and rated as per Rating scale on Feedback form				100%
	Workers	on the Feedback Analysis ,a training wa on communication skills			80%
AIM HOW WILL WE KNOW THAT A CHANGE IS IMPROVEMENT?		ment of translaters for each ward to co			
1.To Identify several ways healthcare worker's can engage in more effective communication with patients and families	Methods	e policy ,Initiate training & Monitoring on			60%
 2.To ensure basic communication skills healthcare worker's can use to enhance communication 3.Identify several follow-up responses to use with patients 	8.Facility to make STD Calls was given to all wards to make phone calls9.Designate one responsible person for communicating with the family				40%
4.To facilitate communication between the patient family, and HCWs to improve patient safety and the quality of care	10.Prepare ISBAR Tool ,train the Nurses and medical offficers on the use of this tool.			the use of	0%
5. Prepare HCWs to support the efforts of patient and family engagement related to communication					April May June
BRAIN STORMING WHAT CHANGE CAN WE MAKE THAT WILL RESULT IN IMPROVEMENT?					ACT
1.Incorporate effective communication as mandatory training program	DO				Future Action
2.Based on Training ,review and evaluate the training Program	Action		Who	When	Use of different forms of feedback.
3.Schedule regular departmental meetings & refine the process	1	Designate a person to communicate	Ward	10 am & 5pm	Send a Discharge Letter
4.Implement Inpatient satisfaction survey's	2	with patient family Prepare a communication checklist	Supervisor's Quality team	Daily 26.4.2020	Tablets for video conferencing
5.Utilize technology when appropriate	3	Document the No.of calls made to the patient family	Ward Supervisor's	10 am & 5pm Daily	Initiate Clinical communications and collabration solutions
6.Conduct a study using tools and incorporate key principles into practice	4	Initiate Feedback Survey & Analysis	PRO	WIE	More Studies will be done to continue better communication
7.Implement ISBAR Tool into practice for effective communication	5	Prepare a list of Staff who are fluent in local language and appoint them in each shift to help in communicating	Nursing Supt	26.4.2020	Regular trainings will be conducted on communication skills
ROOT CAUSES CURRENT PROCESS REVIEW - Isolate the root causes		with family			
Materials Process/Methods	6	Prepare flow process ,train and implement & Monitor	Quality team	26.4.2020	
No Checklists for ISBAR 🔨 Lack of Knowledge on ISBAR	7	ISBAR tool to prepare	Quality team	26.4.2020	
Tool Tool No Feedback Mechanism Problem Statement		Communication Che	cklist		
Language Barrier No Policy for Communication Challenges in	Date - 5.No Bed No	Metas Adventist Hospital , S Communication with Patient Relati to Diagnosis Time Relative Name	Contact No.	By Remarks	
Fail to recognise communication					REFLECTIONS/LESSONS LEARNED
barners during COVID-19					#1 Feedback survey for all discharge understand and improve comr
Confusion No telephones in patient Worker's and					and found that they were high
Insufficient Time No Mobile phones for demand patient Family.	-	Feedback Survey			& communication .
Frustation-Negative Attitude No SMS Package for Msgs					Re-inforcing trainings can brin Process improving Care & Pat
Staffing ratios not optimal Lack of Video Conference	Pro	FeedBack Survey blem solving Strongly agree Agree w satisfy were you with the call	Disagree Strong	ly disagree	
People Machines	2 How care 3 How treat	vived by the hospital values of the nursing			#3 We at METAS Adventist Hosp
	- Serv	v satisfy are you with dietary vices w was your overall experience]	HCWS encounter, focussed or
	Total Score	ing hospitalization			active partners in their care .w with communication.
	Overall Score Survey Done By	/: Date :	Time		
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			1	I	

PLAN



discharge patient familes & Use of ISBAR Tool to e communication between HCWs and Patient & Families e highly satisfied and more actively invloved in patient care

n bring a huge difference in the hospital systems & & Patient satisfaction levels

Hospital offers a formal structure to the patient and sed on making patients and their family informed and are .which helped increase understanding and compliance