

MOMENTUM 2022 Annual Conference and Trade Show - August 30 - September 1, 2022 

**Clear, Concise Communication
to Improve Health Care
Outcomes**

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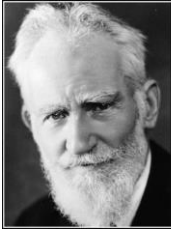
Objectives:

- Define ways in which poor communication affects all levels of facility performance
- Define common pitfalls and barriers that could lead to poor patient, family, and facility outcomes
- Describe at least 3 effective programs and strategies that work to promote concise communication and outcomes

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What is Effective, Clear, Concise Communication?



The single biggest problem in communication is the illusion that it has taken place.


— George Bernard Shaw —

AZ QUOTES

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Albert's Story



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Effective Communication



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Effective, clear, concise communication occurs when teamwork and communication training:

- Decrease medical errors
- Improve outcomes
- Improve satisfaction (resident, family, and staff) contributing to increased resident safety

Source: AHRQ Safety Program for Long-Term Care: HAI/CAUTI Long-Term Care Safety Modules, <https://www.ahrq.gov/oi/quality/tools/cauti/ltc/modules.html>

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Effective, clear, concise communication is:

- A process by which needed information is exchanged between individuals, departments, or organizations
- When information needed to keep residents safe is received and understood as intended

Source: AHRQ Safety Program for Long-Term Care: HAI/CAUTI Long-Term Care Safety Modules, <https://www.ahrq.gov/oi/quality/tools/cauti/ltc/modules.html>

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Effective, clear, concise communication...

- Contributes to resident safety, which depends on information being relayed to the whole team at the right time
- Improves staff satisfaction and morale, potentially lessening staff turnover, which leads to better outcomes

Source: AHRQ Safety Program for Long-Term Care: HAI/CAUTI Long-Term Care Safety Modules, <https://www.ahrq.gov/oi/quality/tools/cauti/ltc/modules.html>

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Effective vs. Ineffective Communication

<p>Effective and Clear</p> <ul style="list-style-type: none"> • Shared Goals/Model • Adaptability • Team Orientation • Community Trust • Performance/Outcomes • Resident Safety 	<p>Ineffective and Unclear</p> <ul style="list-style-type: none"> • Negative Resident/Survey Outcomes • Wastes Time/Resources • Breeds Resentment and Distrust • Causes Complacency/Conflict • Lack of Coordination/Follow up
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Survey Assessment of Effective Communication Systems

- Does your current approach support your organizational strategy/ structure? Does it work? Has EHR helped or hindered?
- Do your policies/procedures include communication protocols?
- Have you set and measured progress in your communication efforts? Area of QAPI Process? **TOOL SUGGESTION: QAPI Communication Plan Worksheet**
- Does your staff consider current systems as just paperwork and valueless?

Source: Gebelin et al. Successful Manager's Handbook, Develop Yourself Coach Others, 7th edition, Eprelix, 2007
Source: QAPI Communication Plan Worksheet - <https://www.cms.gov/Medicaid-Transition-and-Certification/QAPI/Downloads/CommPlan.pdf?mickid=2c17d4d015051cc84fa6756d85d4>

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Functional Communication

- Encourages open exchange of information and viewpoints
- Provides others with access to information
- Uses communication methods appropriate to the situation
- Shares timely, updated information with relevant parties
- Communicates the message that every idea is worthy of consideration

Source: Gebelin et al. Successful Manager's Handbook, Develop Yourself Coach Others, 7th edition, Eprelix, 2007

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Fostering Open Communication

- Are contrary opinions expressed in a positive, constructive manner?
- How do others feel about your willingness to hear other viewpoints?
- Are facility leaders expressing reactions and opinions without intimidating others unintentionally?
 - Self assess
 - Seek others' opinions

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Delivering the Message

- Provide clear direction and priorities
- Clarify roles and expectations among staff
- Set measurable goals, hold people accountable
- Ensure meetings are productive, conduct process checks and redirect when necessary for best use of time

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Listening

Defined: The act of hearing a message and communicating understanding

- Shows that you understand what people mean, not just what they say.
- If you listen only to the words, you are not going to get the whole message.
- A majority of the message is conveyed nonverbally.

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Evaluation of Listening Skills

Typically, do you or someone in your community:

- Interrupt the speaker?
- Show impatience or disinterest through verbal and nonverbal actions?
- Suggest solutions before the problem is fully explained?
- Spend more time talking than listening?
- Let your mind wander and miss what is said?
- Begin formulating a response instead of listening to the speaker?

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Listening Effectively

- Be a role model for effective listening
- Help people understand that listening to a problem doesn't mean they are obligated to solve it
- Ask questions to clarify others' points of view
- Paraphrase to show that you are listening and to help you understand what is being said
- Seek out individuals who are shy or reluctant and encourage them to share their thoughts

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External and Internal Factors That Contribute to Communication Breakdown

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Complications that Impact Communication: Stress

Points to remember about people who are stressed:

- They typically have difficulty hearing, understanding, and remembering information.
- They want to know that you care before they care what you know.
 - Caring is 50% of the basis for determining trust.
 - Caring is judged in the first 30 seconds; once assessed, people are highly resistant to change.
 - 75% of information about trust is communicated non-verbally.

Source: Communications in High Stress Environments, <https://www.forbes.com/sites/nemmakovsky/2013/10/03/1159/7b-42e4a467270>

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Complications that Impact Communication: Stress

- People typically will not give you the benefit of the doubt regarding the meaning of non-verbal cues in high stress situations.
- When people are stressed, they tend to remember most what they hear first and last.
- Stress and mental noise can reduce the ability to process information by up to 80%.
- The gap between perceptions and reality often widens.

Source: Communications in High Stress Environments, <https://www.forbes.com/sites/nemmakovsky/2013/10/03/1159/7b-42e4a467270>

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Complications that Impact Communication: Stress

- People under stress typically understand information at four grade levels below their educational level.
- They actively look for visual/graphic information to support verbal messages: the visual part of the brain becomes an active player in processing high stress information.
- Balance each negative with three to four positives.
- Avoid absolutes ("never say 'never,' never say 'always,' never use an absolute").

Source: Communications in High Stress Environments, <https://www.forbes.com/sites/nemmakovsky/2013/10/03/1159/7b-42e4a467270>

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Complications That Impact Communication: Health Conditions

- Aphasia
- Dementia
- Motor Speech Disorders
- Hearing Loss
- Psychological Issues
- Low Vision
- Neuro Developmental Disorders
- English – Second Language or Native Language Only
- Dialectical and Cultural Differences
- Family Denial/Bias

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Complications That Impact Communication: Assessment

Residents who have cognitive, communicative deficits will require Comprehensive Assessments/POC Development with ongoing assessment for POC for effectiveness.

Includes:

- Resident/Caregiver Training
- Whole House Focus Training
- Family Education


What's that look like in your facility? Does it satisfy the Communication Problems Critical Element Pathway?

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Assessment Resources

- Social Work
- Nursing Including CNAs
- Activities
- PT/OT/SLP
- Physician
- Audiology
- Clergy
- Family



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Barrier to Functional Communication affects

Complicating Factors Apply to:

- Residents
- Family
- Staff

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Speech Language Pathology Musts

- Dementia focused speech communication/cognitive linguistic assessment and POC development that focuses on identifying and effectively using most preserved abilities, even including non-verbal communication
- Treatment times should focus on resident/family/caregiver education with return demonstration
- **What are some ideas for monitoring effectiveness of POC?**

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Speech Language Pathology Musts

- Essential to provide whole house/community education on dementia/brain injury
- Staff should be competencied – makes sure to include in new hire orientation
- **What type of education sessions or materials are provided to families on dementia or other progressive neurological disorders?**
 - Develops relationships, opens up communication, family knows what to expect from disease course

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Communication Strategies for Use with Family and Residents

Why?

- Positively affect outcomes, perceptions of quality, and resident safety
- Residents are more likely to experience higher levels of satisfaction and follow care plans
- Leads to better clinical outcomes

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What is Effective Communication Between Staff, Residents, and Family?

- Complete, clear, brief, and timely
- No Jargon: use language the residents/families can understand
 - Interpreters, as needed based upon needs
- Make sure they truly understand what is being said

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Engaging Resident and Family in Person Centered Care

- Communication leads to an environment in which every team member, including resident family, can work together as partners to improve health care outcomes
- Establishes residents and family as a valuable member of the health care team
- Leads to improved satisfaction, better clinical outcomes, and higher staff satisfaction
- Should include an individualized "Get to Know Your Health Care Team Tool"

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Resident/Family Communication Team

- Establish positive relationships with residents and family
- Focus on individual needs, encourage decisions
- Communicate that their care is a priority at all levels

https://files.offcampus.lbw.com/ufw/aw/Dircc/http326/8273/www/ufwu/000/024/broch%20for%20families%20viewing%20professionals%20systems%20of%20facilities%20of%20families%20strategy%20tips%20tool%20comTipBroch_308.doc&wdOrigin=BR00W5611W

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Communication and the Care Plan Meeting

- Encourage residents and family to participate in all aspects of care
- Listen and ask questions, use as an opportunity to educate
- Setting of meeting should be welcoming to facilitate questions and comments from resident and family
 - Often helps if family members are encouraged to bring a friend or family members to improve ratio of participants

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Other Communication Challenges

- Family Members not available
 - Logistical challenges
 - Frequency of visitation
 - Language barriers
- Family Member Hesitancy
 - Embarrassment
 - Fear of speaking out due to being wrong; feeling stupid,
- Family Member Value
 - What I have to say isn't important or isn't of value

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Areas of Communication Weakness

Adverse events

- Can be difficult for facility/staff to take ownership and communicate with resident and family

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Adverse Events *(cont'd)*

- Prompt, compassionate, and honest communication with resident and family afterward is essential
 - Speak slowly
 - Give advanced alert: "I'm afraid I have some news to share with you"
 - Give the news in a few brief sentences
 - Quietly wait for the reaction
 - Watch and listen for response signals
- Continue communication with family throughout the response/investigative process

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Positive Outcomes

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Key to Improving Quality Through Communication

- Goal is to facilitate communication between resident, family, and staff to improve patient safety and quality
- Key areas of concern
 - Hand-off (transitions)
 - Preventing Re-hospitalization
 - Work Culture

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Hand-offs – Transitions of Care

Communication breakdowns stem from differing expectations among the parties involved in the transition, a lack of standardized procedures, and inadequate time provided for a successful hand-off. These emphasize the importance of effective communication between healthcare workers.

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Hand-offs – Transitions of Care

Joint Commission...“Patients or family/friend caregivers sometimes receive conflicting recommendations, confusing medication regimens, and unclear instructions about follow-up care. Patients and caregivers are sometimes excluded from the planning related to the transition process. Patients may lack a sufficient understanding of the medical condition or the plan of care. As a result, they do not buy into the importance of following the care plan or lack the knowledge or skills to do so.”

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Poor Communication During Transitions of Care

This produces high readmission rates, which cause a frustrating patient experience and, for SNFs and hospitals, a financial penalty.

Key: Develop a structured transition of care program that facilitates learning and promotes questions about care

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Structured Transition of Care Programming



create and examine existing practices and update

- Early knowledge of Discharge Plans
- Early family meetings and planning
- Medication reconciliation and training prior to D/C
- Home assessments by Therapy/virtual visits
- Written follow up and upcoming appointments
- Key contact information given
- Avoid Friday discharges
- Discharge Checklist to make sure all addressed
- Virtual visit to check in
- Check Satisfaction Scores (patient and family) consistently

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IDT Discharge Planning Checklist

Patient Name: _____

Anticipated Discharge Setting/Date: _____

Assist with Care Available: Yes No

Patient will be handling own medication regimen. Yes No

If yes, patient has demonstrated ability to do so with competence. Yes No

Date of Home Assessment: _____ (available at least one week before anticipated discharge)

What medical equipment/services will be required at discharge?

Patient/caregiver has been trained to use medical equipment appropriately

Items/substitution/costs given in writing to caregivers


Patient/caregiver has demonstrated good ability to complete or assist with:

to and down stairs

home/community ambulation

medication management

Discharge Planning Checklist



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Combatting Re-hospitalizations/Improving Quality

Policies and Procedures must be in place which:

- Identify "at risk patients"
- Promote continuous monitoring
- Utilize the entire community to monitor and communicate potential changes in condition i.e., Walking Rounds
- Contain a structured transitional of care program

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Time for Your Group Exercise



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Conclusion

The moment a new resident and his/her family step into your facility, communication forms every part of their experience with you. The signs directing them where to go, the initial interaction with a receptionist, the conversations with nurses and doctors, and the information they receive detailing their plan of care — it's all driven by communication.

Finding out where your breakdowns in communication are will give you insight into where you need to invest in improving communication.

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