

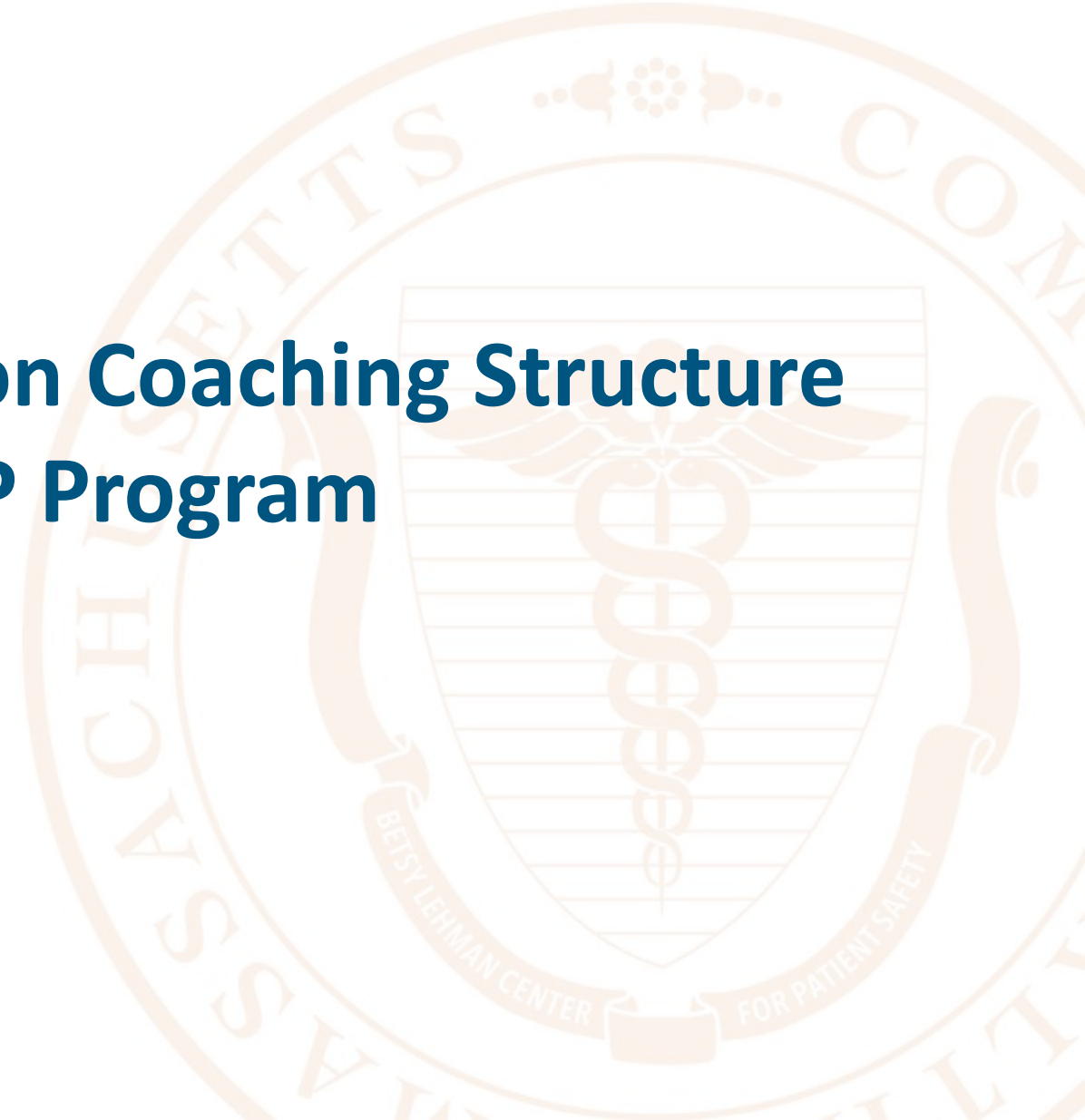


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# Creating a Communication Coaching Structure and Support for your CRP Program

September 15, 2022  
CAI Monthly Webinar



# Objectives



- Describe the benefits of communication coaching in CRP programs
- Summarize the structures necessary to support successful communications after adverse events occur

# Communication is Key

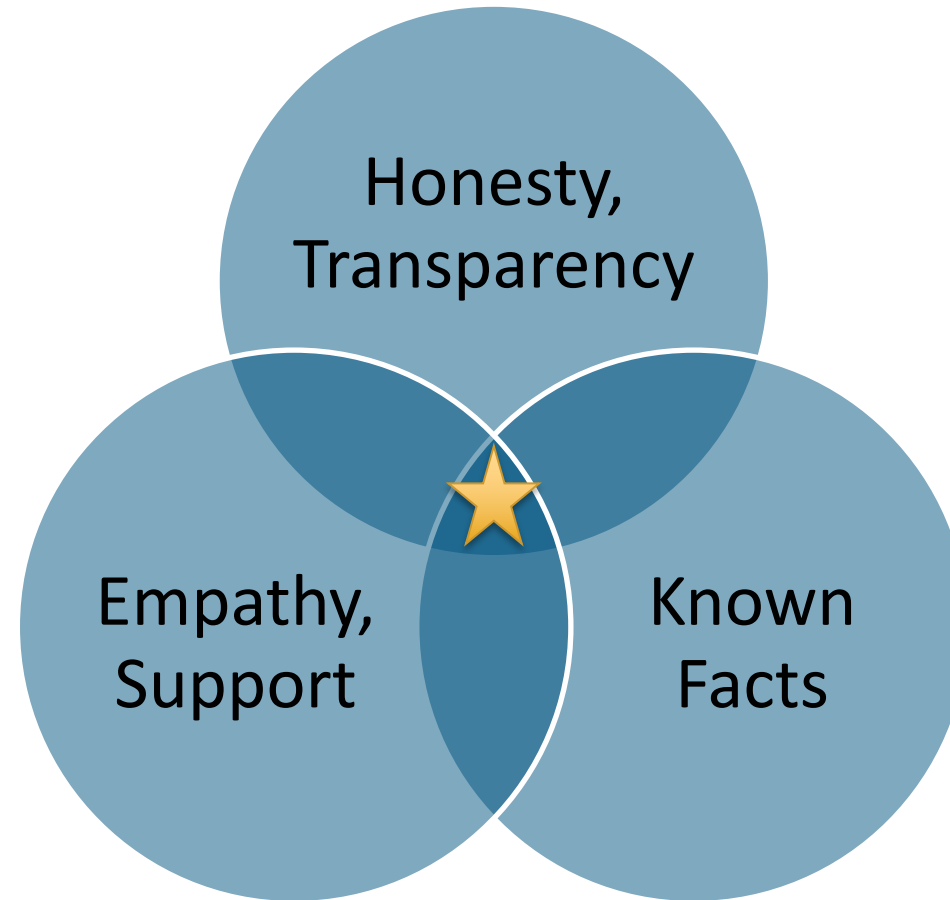


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- Patients always want to be heard and informed about their healthcare, but this is especially true when something unexpected happens
- CRPs are 80% *good* communication
- Good communication should happen *from the start*

# What is *good* communication?





# Good communication is hard

- CRP events are both **rare** and **high-stakes**
- Just-in-time coaching for providers is essential
- Broad education is also important



# Good communication is necessary

- To build trust
  - Being truthful and supportive includes acknowledging what you don't know
- To demonstrate you are taking the event seriously
  - Understanding the root causes is a pre-requisite for prevention
- Because it is hard to get the toothpaste back in the tube



# Communication Training

- Should include basic components of “disclosure” communication
  - Empathy
  - Facts as they are known at the time
  - A promise to look into what happened and follow up with more information on the results of that process
  - Offer of support with internal resources (and external if possible)
  - Documentation of the conversation
- Should involve role-playing and practice



# Communication Coaching Core Team

- Risk/Safety Department
  - extensively trained with simulation, have attended and participated in many disclosure communications, coaching is part of their job description
  - Just-in-time coaches
  
- Clinicians
  - Nurse Managers/Chiefs/other selected individuals can also be trained as just-in-time coaches
  - Should at a minimum understand where to get coaching and how to offer basic assistance after an adverse event
  
- Patient Relations/Social Work
  - Work with patients daily who have experienced challenges; will be point person for patients and families in many conversations



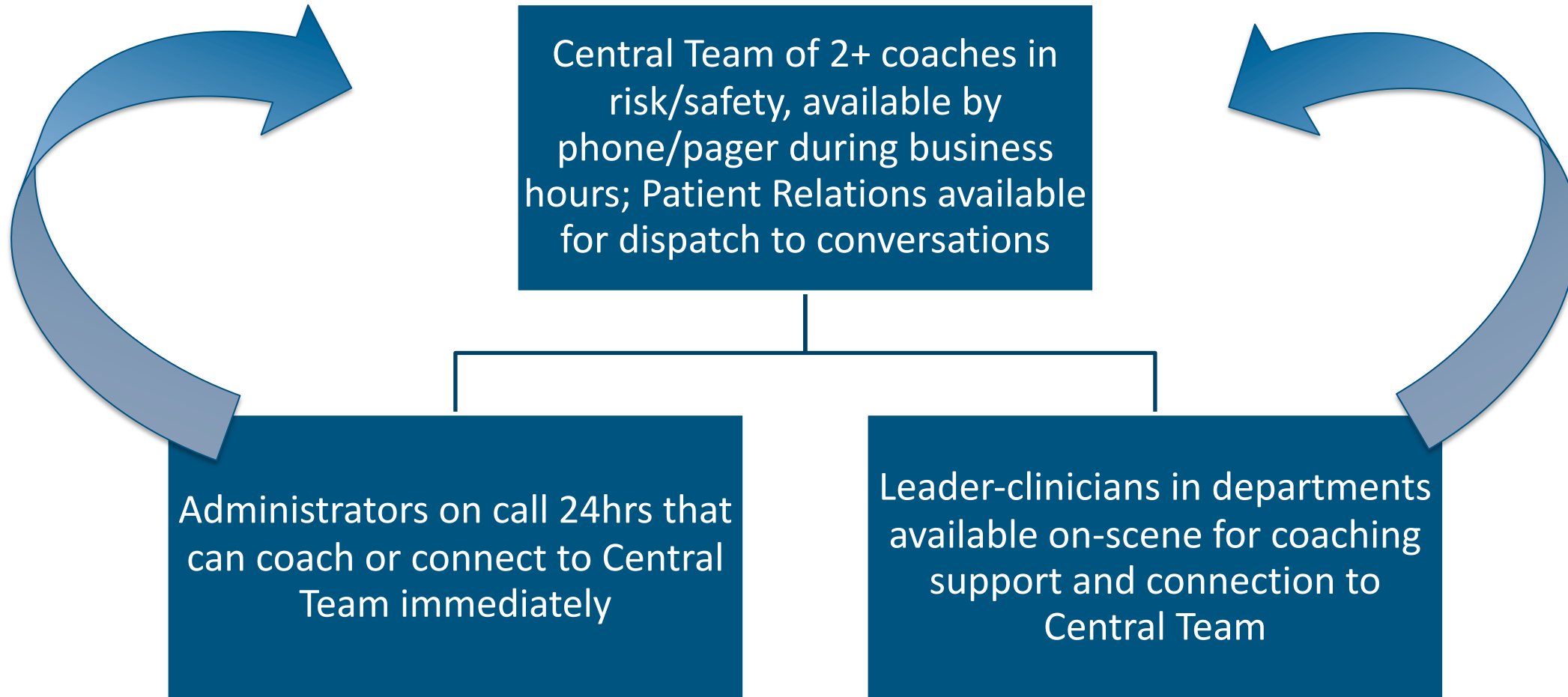


# Structural Considerations

- Volume
  - Number of beds
  - Number of events reported annually
  - Number of FTEs available
- Medium
  - Phone, in-person, zoom
- Hours needed



# Suggested Structure of Core Team





# Post-coaching considerations

Initial Coaching

Patient Relations/Social Work Activation

Peer Support Connection ★

Patient Safety Report



# Good communication is hard

- CRP events are both **rare** and **high-stakes**
- Just-in-time coaching for providers is essential
- **Broad education is also important**

# Education of providers



- Who are the communication coaches?
- How do I access them quickly?
- What are some basics I should know?



# Steps Following an Adverse Event

- **Step 1:** Report the event and get help with communication (Pager system/Reporting System/Call)
- **Step 2:** Communicate with the patient/family about the event; be empathetic and use statements of regret (“I am so sorry this happened to you...”); discuss facts known at this time and do not speculate or blame others.

A note on Apology:

- 1. Statements of Regret – **Always!**
- 2. Apology of Fault – **Once facts are known** (if applicable)



# Steps Following an Adverse Event

- **Step 3:** Document the communication with the patient/family in the record; the facts of what happened to the patient, the clinical results, who was present, and results of conversation.
- **Step 4:** Check back in with the patient/family to see how they are doing and if they have connected with resources or if they need anything.
  - Later you may discuss with them the findings and any systemic improvements to be made once all facts are known and root causes have been determined.

# Educational Options



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- Grand Rounds
- Departmental Presentations (literally make a spreadsheet)
  - Recurring
- Nurse Manager/Floor Meetings
- Resident/New Hire training





# Resources for Clinicians

- Badge cards
- Posters
- Intranet
- Note in PSR System

[www.macrmi.info](http://www.macrmi.info)

## ADVERSE EVENT COMMUNICATION

Before communicating an adverse event to a patient:

### CALL PATIENT SAFETY

WEEKDAY HOURS (M-F, 8-5) › PAGE

Patient Safety.....#3-HELP (34357)

OFF HOURS › PAGE

Administrative Clinical

Supervisor.....#92465

Expert coaching and other resources are available to you at all times.

*Communicating an adverse event to a patient is not easy for anyone, but we are here to help!*

## ADVERSE EVENT PROCEDURE

### ADVERSE EVENT

An injury that was caused by medical management rather than the patient's underlying condition. Not all adverse events are the result of an error.

- After an adverse event, immediately notify patient's attending and your supervisor.
- Then call Patient Safety for communication coaching (**see reverse side of card**).
- Adverse events **must be communicated** to patients/families when:
  - › You would want to know about the event if it had happened to you or a relative
  - › The event may result in a change in treatment, either now or in the future
- Communicate "near misses" to supervisors to prevent future injuries.

# Questions?



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## Contact info:

Melinda B. Van Niel, MBA, CPHRM

Program Director

Communication and Resolution Programs – Betsy Lehman Center for Patient Safety

[www.macrmi.info](http://www.macrmi.info)

Email: [Mvanniel@bidmc.harvard.edu](mailto:Mvanniel@bidmc.harvard.edu) or [Melinda.VanNiel@betsylehmancenterma.gov](mailto:Melinda.VanNiel@betsylehmancenterma.gov)