

Introducing Patient Involvement In Patient Safety Rounds to Clinical Staff – Talking Points

Before patient interviews begin, the clinical staff on a unit must be informed about the interview process and should understand its role within the context of the Patient Safety Rounds program. We have found that taking time to speak with clinical staff and to discuss any questions they might have helps assure staff support for the patient interview component of the Patient Safety Rounds program.

The following list of “talking points” highlights some of the issues that should be addressed during conversations with staff:

1. Explain your organization’s history related to patient safety and to involving patients in all aspects of care.
2. Explain the reason(s) for beginning the patient interview program.
3. Describe how patient interviews will affect the unit/floor.
4. Describe the written explanation that will be distributed to patients.
5. Describe the Patient Safety Education Day that the Patient/Family Safety Liaisons (Liaisons) attended (if you held one), including its goals and content.
6. Describe what the Patient/Family Safety Liaisons will be doing on the unit. In particular, note the following:
 - a. The nurse manager and/or charge nurse will be told when the Liaisons are coming. The Liaisons will have to check-in with the charge nurse before beginning interviews.
 - b. The Liaisons will be on the floor for between two and four hours each visit.
 - c. The Patient Safety Rounds team will do everything they can to ensure that a Liaison is not on the unit at the same time as other volunteers for other projects.
 - d. The patients are not obligated to be interviewed and may opt out at any time.
 - e. If any urgent issue is identified through an interview, the Liaison will immediately inform the nurse manager.
 - f. After each session the Liaison will debrief with members of the Patient Safety Rounds team.
7. Encourage everyone to ask any question(s) they have about patient involvement in Patient Safety Rounds. Let them know that questions can also be directed to members of the Patient Safety Rounds team, unit leaders, and members of executive management.