



C43 Clinical- Effective Communication among Caregivers: Critical Lab Results, Medication and Treatment Orders.

Purpose

To improve communication among Yakutat Community Health Center caregivers in a variety of situations, including

- Giving and receiving medication and treatment orders
- Receiving critical test results
- With all “hand off” communications.

Good communication will reduce communication breakdowns as a cause for medical errors, leading to poor/negative outcomes.

Policy

Medication and Treatment Orders:

Verbal orders should only be used in an emergent or urgent situation. Telephone orders are to be used when the provider is not available and when patient care may adversely be affected by a delay. All non-urgent orders need to be written in the chart/progress note by the provider and be carried out after correctly identifying the patient. (See Accuracy of Patient Identification policy and procedure.) Yakutat Community Health Center CLI - Verbal and telephone orders may be taken only by a Midlevel Provider or Community Health Aide.

Critical Lab Results:

The provider should be contacted directly for any reporting of critical test results.

“Hand off” communications:

Examples of “hand off” communications at Yakutat Community Health Center include: shift changes and providers signing out patients when going off call or when going on vacation. The primary objective of “hand off” communication is to provide accurate information about a patient’s care, treatment and services needed, along with any recent or anticipated changes. Whenever “hand off” communications are needed, Yakutat Community Health Center staff will use the following guidelines.

- Preferentially use interactive communications - allowing the opportunity for questioning between giver and receiver. Verification of received information is important, including read-back or repeat-back as appropriate.
- Include up-to-date information, and any recent or anticipated changes.



- Minimize interruptions during the “hand off” to minimize the possibility that information would fail to be conveyed or forgotten.
- In the case where real-time, interactive communication is not possible, the information always needs to be verifiable through easily available historical data, e.g. in the medical record or lab information system, or by contacting /calling the person doing the “hand off”.

Procedure for Verbal Orders

- When giving a verbal or telephone order, the provider needs to clearly enunciate or even spell unfamiliar drug names, tests, or treatments.
- When giving a dosage for drugs, pronounce each numerical digit separately. For example, instead of saying “eighteen” say “one eight” to avoid confusion with the number eighty.
- The person taking the verbal order needs to do the following:
 - Repeat the order back to the provider.
 - Write down the order in the medical record, the date, and the name of the provider giving the order.
 - Have the prescriber verify that the information is correct in the written record
 - The written record also needs to identify the person taking the order and the person who implemented the order.
- All verbal orders must be signed by the provider on the same day before the chart is returned to medical records. Telephone orders should be signed in a timely manner as well.