



# Improving Communication in the Perioperative Waiting Area

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## Abstract

**Problem:** lack of communication given to families or loved ones in the waiting area as evidenced by the OAS CAHPS scores.

**Background:** The operating room and PACU are not providing sufficient updates to the families due to lack of time and they often ask the receptionist for updates, who are not able to provide them. This leads to stress and anxiety for the family and ultimately a low satisfaction score.

**Plan:** A literature search was done for peer-reviewed, evidence based research to improve communication in the way of updates, and the technology of secure text messaging programs was found. The plan was derived for the implementation of PatientTrak:

- cloud-based system, texts can be sent from any computer to any text-ready mobile phone
- There is no software to install
- The messages are pre-determined canned texts
- HIPPA compliant
- Provides freedom to the family members waiting in the lobby-able to step away to go to the cafeteria or Starbucks without missing an update
- The message can be sent in three simple “clicks”

The implementation plan was created to be over a five week period. An interprofessional team decided on the canned texts and the OR was expected to send an update at the beginning of the surgery and every hour thereafter, whereas the PACU was expected to send an update within 15 minutes of arrival to the PACU and every hour thereafter. These messages will increase communication, alleviate anxiety, and increase satisfaction. Research has shown that families are less stressed when updates are provided throughout the stay. All OR and PACU nurses were educated on the process, expectations, and were provided hands-on training. The interprofessional team included:

- A Physician Champion
- OR Champion
- PACU Champion
- Perioperative Educator
- OR Manager
- Director of Perioperative Services (who is the writer’s preceptor)
- Pre-Admit Testing/Pre-op/PACU Manager (writer)

Others involved in project included:

- A member of the Legal Department
- Marketing team
- CEO of PatientTrak.
- Chief Executive Officer

**Future Actions:** The interprofessional team will continue to meet to discuss any concerns and determine if patient satisfaction scores continue to improve due to the implementation.



## Identification of Risk Factors



Before

Risk Factors for Poor Communication in the Perioperative Setting	
Patient Barriers	Nursing/Staff Barriers
Crowded waiting areas	Workflow
Impersonal approach to communication	Difficulty locating/contacting families
Tracking boards do not update	Time
Need for technology (smartphone or charger)	Cost
	Confidentiality/safety

These barriers were identified according to research of similar electronic messaging systems

## Implementation

Implementation Barriers	Overcoming Barriers	Samples of Frequently Sent Text Messages After Implementation
Time for education	Multiple classes offered, different times and days	WB OR: The doctor is still working, please standby for further updates.
Go-live day-staff forgot passwords, & organization ID	“Cheat sheet” created with info, password requirements (ex. Special character)	WB OR: Your loved one is sleeping and the doctor has started the procedure. Please standby for further updates.
Buy-in from surgeons	Physician Champion-discussed at OR Committee-asked for input on canned texts	WB OR: Your loved one remains in surgery and everything is proceeding as expected.
		WB OR: Your loved one remains in surgery. We anticipate the procedure to take 1 to 2 more hours.
		WB OR: Your loved one remains in surgery. We anticipate the procedure to take 2 to 3 more hours.
		WB OR: Your loved one remains in surgery. We anticipate the procedure to take another 30-60 minutes.
		WB PACU: Pre-procedure is complete. Patient visitation is allowed at this time. Please have the receptionist escort you to PACU.
		WB PACU: Your loved one has arrived to the recovery room, and is sleeping. Please standby for further updates.
		WB PACU: Your loved one has met the criteria to return back to their room, and will be transported within 10 to 15 minutes.
		WB PACU: Your loved one is in recovery and sleeping at this time.
		WB PACU: Your loved one is in recovery and we are waiting for their room to be readied.



Nurses were asked to send messages at certain phases and time frames depending on the department (OR or PACU). These messages are HIPPA compliant and can also be received when the person is not on the premises because they are sent directly to their personal phone.

## Results



After

## Best Practices

- Standardized text messages
- One-way messaging
- Updates every hour
- Updates when there is a change in the phase of care (moving from OR to PACU) (Wiek et al., 2017).
- HIPPA Compliance-the patient chooses only those he/she wants information disclosed to
- Enhances privacy of clients and family members (Gordon et al., 2015).

## References

- Day, M. D., Anthony, C. A., Bedard, N. A., Glass, N. A., Charles, R. C., Callaghan, J. J., & Noiseux, N. O. (2017). Increasing perioperative communication with automated mobile phone messaging in total joint arthroplasty. *The Journal of Arthroplasty*, 33, 19-24. Doi: 10.1016/j.arth.2017.08.046.
- Gordon, C. R., Rezzadeh, K. S., Li, A., Vardanian, A., Zelken, J., Shores, J. T., Sacks, J. M., Segovia, A. L., & Jarrahy, R. (2015). Digital mobile technology facilitates HIPAA-sensitive perioperative messaging, improves physician-patient communication, and streamlines patient care. *Patient Safety in Surgery*, 9(21), 1-7. Doi: 10.1186/s13037-015-0070-9.
- Wiek, M. M., Blake, B., Sellick, C., Kenron, D., DeVries, D., Terry, S., Krishnaswami, S. (2017). Utilizing technology to improve intraoperative family communication. *The American Journal of Surgery*, 213, 895-900. Doi: 10.1016/j.amjsurg.2017.03.014.