

Team Care: Communicating with Patients

Policies & Procedures

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Policy:

Our practice will work as a team taking care of our patients efficiently and effectively.

Purpose:

Communication with patients is central to a patient-centered practice and good clinical care.

Procedure:

- 1) Patient/family/caregiver and other messages:
 - a. Support staff and clinicians document all messages and interactions with patients/families/caregivers in the medical record.
 - b. Urgent phone calls are directly transferred to the appropriate team member if s/he is available and are also recorded in the patient's record.
 - c. All messages contain sufficient information in a standardized format to facilitate appropriate follow-up.
 - d. For all calls:
 - i. Ask for, and record, the number the caller prefers to be called back on and the best time to do so.
 - ii. Document question/concern in as much detail as possible.
 - e. For requests about medication refills:
 - i. Document medication name (with accurate spelling), pharmacy name and phone number, prescription number (if printed on medication), dosage, and frequency.
 - ii. Route request for refill to appropriate clinical team.
 - f. For requests about laboratory or other procedure orders (i.e, imaging studies):
 - i. Confirm that the laboratory order/test/procedure request is consistent with the medical record.
 - ii. Document the question/concern including any details about issues experienced with scheduling the requested procedure/test.
- 2) For email communications:
 - a. See separate policy regarding secure email communication.
 - b. In general, the documentation requirements and follow-up parallel procedures above.
- 3) Team communication:
 - a. Huddles are small team meetings held daily to discuss patients scheduled in the upcoming session (or day).



- i. Huddles focus on patient care and will minimally cover:
 - 1. Preventive care and vaccination needs
 - 2. Any outstanding lab and imaging orders are identified
 - 3. Necessary adjustments to session schedule (such as double-booking two historic no-shows)
- 4) Practice Meetings are scheduled to discuss larger issues such as workflow, implementation of new policies & procedures, use of patient portal, web page, quality improvement projects, etc.
 - a. Practice meetings will occur at least monthly.
- 5) Quality Improvement activities:
 - a. All team members participate in the evaluation of practice performance and in practice audits.
 - b. Staff ideas on how to improve process and workflow are critical to performing as a high functioning team.
 - c. New ideas can be tested using rapid cycle test model (PDSA). Each staff person can be involved and should have an opportunity to discuss and/or present data about quality improvement programs and audit data.
 - d. Practice data on performance and quality metrics are reviewed as a team. New goals are determined based on data obtained from surveys and performance outcome measures.

