

One evening at the Emergency department -
through the eyes of a patient's family and an
insider's view through the eyes of a doctor



Margareta Strindhall,
Relative (Daughter)



Pär Höglund,
Junior doctor



March 3-4
2010
Jönköping

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Margareta Strindhall, RN, Project leader



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One evening at the Emergency department



Stig, father, grandfather and
patient



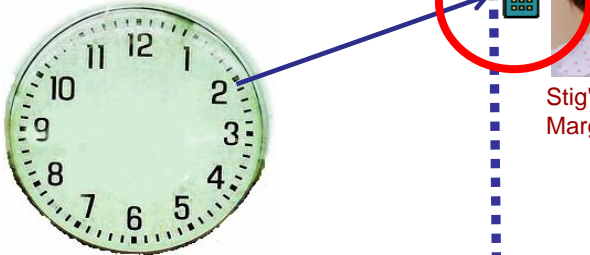

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Stig's daughter
Margareta

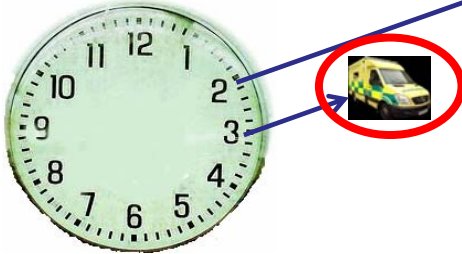



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Part II



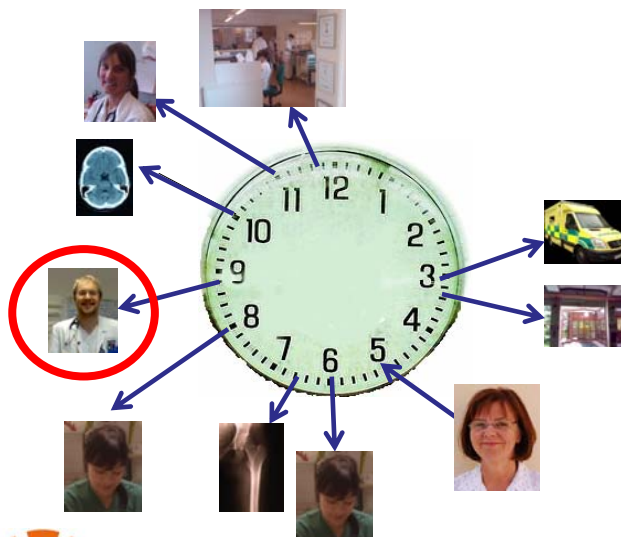
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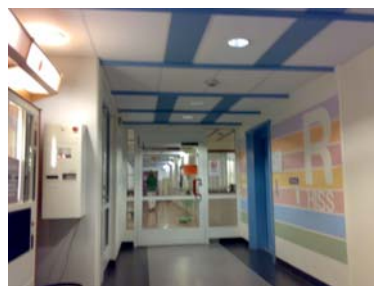
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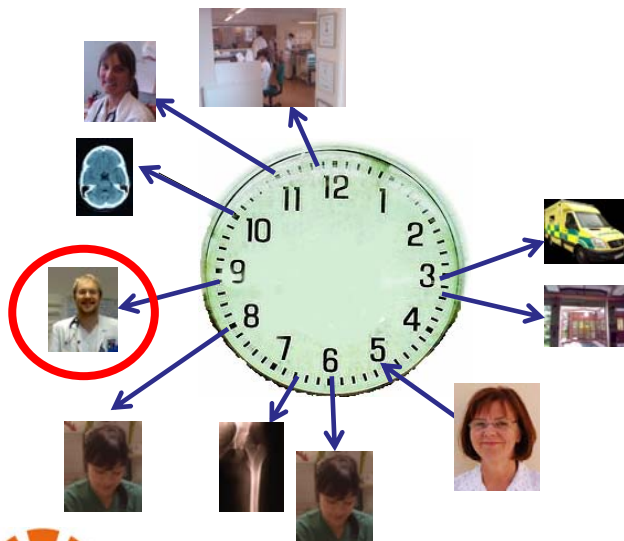
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I am the newest employee and I'm responsible for the life or death of a patient, in a chaotic environment

"I should know this (why don't I know what to do)"

"This seems strange, but I don't want to disturb the person on call when he/she is sleeping, he/she thinks I should be able to handle this"

"Oh my god, why didn't the nurse tell me about this patient, this seems quite serious"

Afraid of losing face in front of the patient and in front of the colleagues.

"Why does this nurse seem so upset, am I doing something wrong?"



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Part III



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A daughter's reflections about
the patient's needs and wishes

Basic needs:

- A proper bed
- Warm blanket
- Something to eat and drink when the patient and the relative are hungry
- Not being left alone
- Continuous information

- **Pain relief**



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A daughter's reflections about the patient's needs and wishes

Emotions:

- Do they have enough competence and knowledge to make right decisions?
- Individualized dignity level
- Why is nobody helping, and all people gathered at the ward office?
- Feeling safe and secure



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A daughter's reflections about the patient's needs and wishes

Logistics:

- Continuous information - what is happening now and what's next?
- Short waiting times
- Taking advantage of the relative's competencies / Being involved
- See the same nurse and doctor and not having to repeat my story



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During this evening Stig was meeting..

- 15 nurses / assistant nurse
- 3 doctors
- 3 transporter

..and he was admitted to a internal medicine ward after 8 hours



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What other needs and wishes do you have as a patient or a relative?



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Is it possible to meet all patient's needs and wishes?

Basic needs

Emotions

Logistics



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Thoughts about improvement

Basic needs

- Nurse/nurse assistant constantly asking the patients/relatives about hunger/pain and comfort – checklists at first?
- Information delivery – technology and personal
- Closer teamwork around the patient
- Accompany the patient (avoid loneliness)



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Thoughts about improvement Emotions

- Assurance of clinical competence (there has to be enough competence)
- Correct information from all staff – (Better introduction, interprofessional consensus, less need to avoid "losing face")
- Not being locked in and bored in the room – window, TV, playstation, wireless internet



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Thoughts about improvement

Logistics

Understanding the flow -3D

- Listen and learn from the patient flow – by letting staff and manager following patients (scheduled).
- Learning how the situation is at other related department, i.e. radiology, wards.
- Learning from the other profession's daily work.



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Thoughts about improvement

Logistics

Improving the flow

- Triage by a specialist
- Make waiting times visible for all staff and patients– display in and outside the patient room
- Redesigning internal routines
- Co-operation in between professionals and with other units
- Schedule staff and doctors considering to the demand



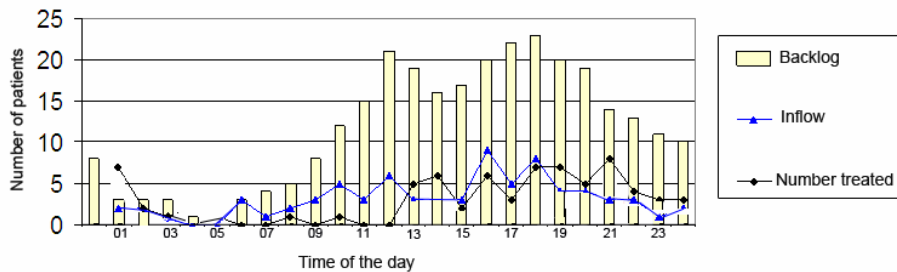
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Balance of patient flow



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Thoughts about improvement

Logistics

Monitoring the flow

- Knowledge about the balance between demands and capacity – measure and follow up



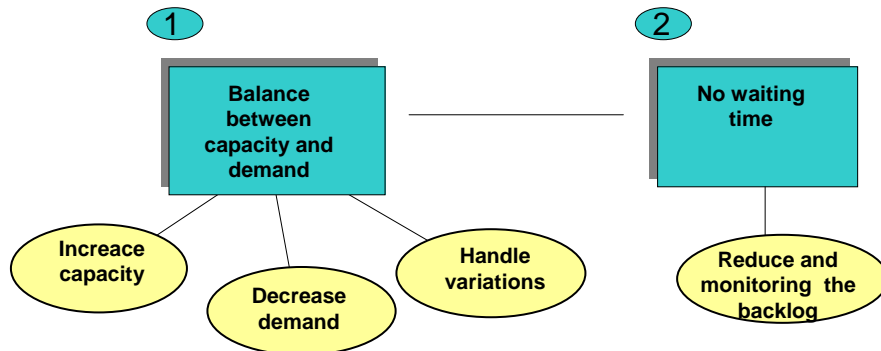
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Approaches to improve access



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