Emergency Department Patient Liaison Project

The Problem

The reason for embarking on the Patient Liaison Project in the Emergency Department was to improve and increase both communication between the patient and the medical providers as well as improve overall patient satisfaction. This project helps clinicians with both efficiency and time by having a trained caring individual to assist and spend more time directly with visitors and patient.

Aim/Goal

- To enhance and improve communication between the patient and the medical providers to further create a more personal and nurturing environment
- Improve overall patient satisfaction.
- Help clinician efficiency and reduce time coordinating comfort measures requested by the patient.

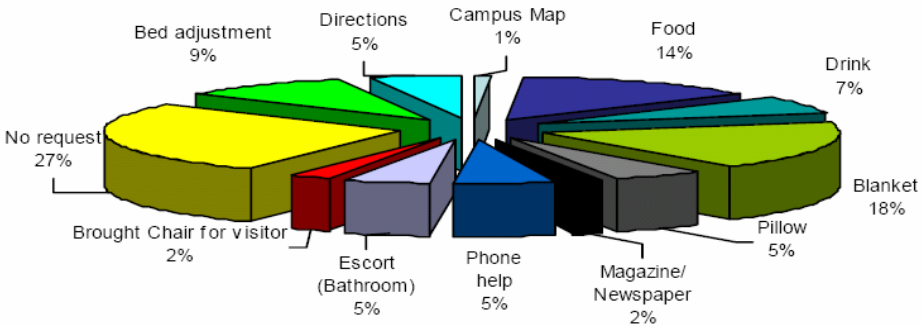
The Team

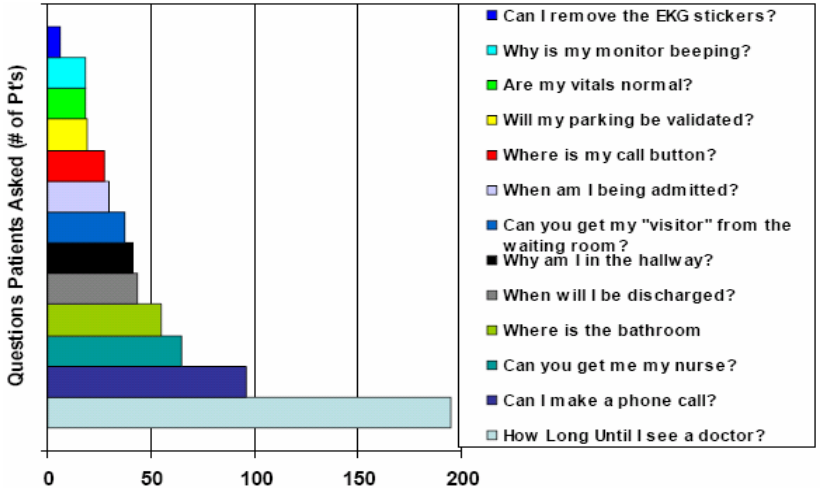
- Richard Wolfe MD
- Jayne Sheehan
- Sanchez Leon MD
- McGillicuddy Daniel MD
- Boyd Kirsten RN
- Lynn Brophy
- Brian Orsatti
- Garry Shillin
- Mitali Hariawala

The Interventions

- Job description created based on previous satisfaction survey and feedback
- Script of patient questions and phone call questions were created by team
- September 2008 a new hire into role of pt liaison
- Liaison in department Mon through Friday 12p -8pm
- Pt liaison rounds every hour room to room taking down any patient requests and helping to answer any questions
- Makes follow up phone calls to get feedback from discharged Emergency Department patients in regards to their visit
- At the end of each week, the Patient Liaison tallies all of the patients' requests and questions and creates a thorough report analyzing the results lead to specific items/requests to improve the ED experience
- In the event that the Patient Liaison is unable to answer a medical related question, he or she speaks directly to the On-Call Attending to answer the patient's question

The Results/Progress to Date





Lessons Learned

The Patient Liaison was not only an additional resource for patients, visitors, their families; they also turned out to be a large help to the medical staff. We were able to increase patient communication and get real time feedback. The consistency of the liaison with the patients made their stay as smooth and enjoyable as possible.

Next Steps/What Should Happen Next

We hope in the future the increased communication due to this project will encourage providers to proactively think of patient comfort needs and the type of things patients need communicated. We would also like to see this project evolve into a more full time position, 7 days a week.

Beth Israel Deaconess Medical Center | A teaching hospital of Harvard Medical School | The Silverman Institute For Healthcare Quality and Safety

For More Information Contact
Brian Borsatti
Borsatti@bidmc.harvard.edu