

Patient Audit Tool: Staff Member Communication Observations

Date: _____	Dialysis Start time: ____ a.m. / p.m.	Day: M W F Tu Th Sa (Circle one)	Shift: 1st 2nd 3rd 4th (Circle one)
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Check “Yes” or “No” to indicate whether the communication opportunities listed below occurred. Include the type of staff member involved (**P** = physician, **N** = nurse, **T** = technician, **S** = student, **D** = dietician, **W** = social worker, **O** = other), and then briefly describe what the encounter was like for you. For example, what was said, or not said? How did it make you feel? What went well or did not go well?

Staff Opportunities for Communication	Yes	No	Staff Type	Please describe your experience
Were you greeted by a staff member when you arrived for treatment today?				
Did a nurse ask you if there were any changes in your health or any concerns that you wanted to share?			N	
When a staff member came to check on you during treatment, did he/she talk to you? (Opportunity 1)				
When a staff member came to check on you during treatment, did he/she talk to you? (Opportunity 2)				
When a staff member came to check on you during treatment, did he/she talk to you? (Opportunity 3)				
When a staff member came to check on you during treatment, did he/she talk to you? (Opportunity 4)				
Did a staff member(s) talk to you in a respectful way, including body language and tone?				
When treatment was over, did a staff member ask you how your treatment went today?				

Please note, this information will be used to help improve the patient experience and care, and will not be used against you in any way. Please give this completed audit to _____ before leaving the facility.

Guide to Communication Opportunities in Hemodialysis

Communication Opportunity Category	Specific Examples
Were you greeted by a staff member when you arrived for treatment today?	<ul style="list-style-type: none"> • Was there a staff member at the front desk in the lobby welcoming patients as they arrived? • Did anyone check in with you while you waited to be called in for treatment? • Were you greeted by a staff member when you entered the treatment floor?
Did the nurse ask you if there were any changes in your health or any concerns that you wanted to share?	<ul style="list-style-type: none"> • Did the nurse ask if there were any changes since your last treatment, such as medication changes, hospitalizations, changes in sleep, changes in appetite, fever, nausea, etc.? • Were you given an opportunity to provide any updates on your current status?
Did a staff member talk to you when he or she came to check on you during treatment?	<ul style="list-style-type: none"> • Staff members are required to check in with patients, at minimum, every 30 minutes during treatment. They check your blood pressure and review various aspects of your treatment. Staff members are also required to see how you are doing/feeling and document that in your record. Did the staff member speak to you during this 30-minute check? • Were you provided with an opportunity to share any concerns?
When treatment was over, did a staff member ask you how your treatment went today?	<ul style="list-style-type: none"> • If you did not have a good treatment, did you get to share your concerns with a staff member? This information is very important to ensure any issues are addressed and to try and make your next treatment better.