

## Key Words at Key Times - Examples

### **EVERY NURSE LEADER:**

- Every Nurse Leader, every day, must round on all new patients and patients who are Service Recovery patients.
- *"Good morning, I am \_\_\_\_\_. I am the nurse leader on your unit. I want to assure you that we will do everything possible to exceed your expectations. But, I need your help. This is my phone number (she writes on the patient communication board.) Please call me the moment you see or find something that we can do better. Our goal is to provide you with VERY GOOD care."*

### **EVERY NURSE . . . EVERY CHANGE OF SHIFT:**

- Every change of shift, the oncoming nurse writes her name on the communication board.
- *"I am \_\_\_\_\_. I will be your nurse until \_\_\_\_\_(time). Please let me know the moment we can do something for you or do something better. My goal is to exceed your expectations and provide to you VERY GOOD care."*

### **PRIVACY:**

- Every time a nurse, tech, etc., pulls a curtain around a bed or cubicle or closes a door.
- *"I am closing this door or pulling this curtain because I am concerned about your privacy."*

### **EVERY PERSON WHO IS LEAVING THE ROOM:**

- Anyone who leaves a patient's room always should ask this before they leave.
- *"Is there anything else that I may do for you? I have time to help you."*

### **WORRIED PATIENTS:**

- Patients who are worried about being away from home.
- *"I realize that being away from home is inconvenient. Is there something I can do to help, such as making a call for you or getting you a phone book, paper and pen?"*

### **EMOTIONAL AND SPIRITUAL NEEDS:**

- Patients and families who are needing emotional and spiritual support.
- *"Being in the hospital can be tough emotionally and spiritually. We have chaplains in the hospital around the clock to talk with you about these issues. Would you like me to contact a chaplain for you?"*

### **INTERRUPTIONS:**

- If your patients say, "I'm sorry to bother you," it may be because you've been treating them like an interruption. Stop immediately and listen.
- Preface your next statement with, *"Of course you're not a bother . . ."*

### **JUST ONE MORE THING:**

- Be receptive when a patient says, *"Oh, just one more thing . . ."* -- It is often the most important issue raised.
- Take your hand off the door and step toward the patient and listen attentively.

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### **COLD FOOD:**

- Many times patients are asleep or away having a procedure done when meals are served.
- *"If your meal is cold, I'll be happy to reheat it."*

### **DISCHARGE PLANNING:**

- If a patient asks you what's going to happen to me once I get out?
- *"Has your doctor given you instructions?"* If not say, *"Let me have your social worker drop by to see you."* And follow up.

### **LOST ITEMS:**

- Patients who have lost items while in your hospital .
- *"I'm sorry you've lost your . . . Let me try to find it."*
- If you can't find it, contact a supervisor if available and call Service Recovery.
- Follow Service Recovery procedures.

### **SHIFT CHANGE:**

- Before the nurse leaves her shift.
- *"My shift will end in a few minutes. The nurse for the next 8 hours will be \_\_\_\_\_.*  
*\_\_\_\_\_ will be in shortly to introduce her/himself. Is there anything else I can do for you?"*

### **EVERY UNIT COORDINATOR ANSWERING THE CALL LIGHT:**

*"How may your nurse help?"*

### **THE ADMITTING NURSE:**

- *"Could you tell me of any personal needs that I might add to your care plan?"*

### **PARKING:**

- Admitting staff should say to the patient.
- *"We will be asking you throughout your stay how we can do things better . . . and let me remind you that we do have free valet parking for you or your visitors' convenience."*

### **ADMITTING STAFF - EXPLANATION OF PATIENT SURVEY:**

- *"This is a copy of the survey you will receive on discharge. Please know that we are absolutely focused on providing the very best care. We would appreciate you returning our survey, it's a tool for us to reward our staff."*

### **INCONVENIENCE:**

- In some cases hospitalization is unexpected and the patient didn't have time to take care of things while away from home.
- *"I realize that being admitted today was not something you expected to happen. Is there something we can do to help to make things go smoother at home? Do you need a phone, pen, paper?"*

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### ▪ **PRIVACY AT REGISTRATION:**

- *"Are you comfortable filling out this registration here? If not, "As soon as I am able, I'll take you to a private area to discuss it."*

### **GREETING:**

- Any employee in any area upon seeing a visitor.
- *" May I take you to where you are going?"*

### **ELEVATOR ETIQUETTE:**

- Engage the visitor.
- *"Do you have someone in the hospital? We want to provide very good care. Can we do anything for you?"*
- Step aside. Don't speak about confidential matters.
- Let them exit and enter first.
- Don't sound exasperated and make comments about your job such as, "I'm so glad this day is over."

### **NURSE DISCUSSES LAB DRAW PRIOR DAY:**

- *"Your physician cares about you very much, so he has asked that we get a blood sample very early so the results can be posted on the chart by the time he makes rounds in the morning."*

### **PARKING:**

- *"We have free parking assistance. If you pull your car into the covered entrance, we'll park your car for you."*

### **PATIENT AND FAMILY KNOWLEDGE:**

- Support patients when they ask a question by saying things like, *"I'm glad you asked that."* The more they ask, the more knowledgeable they will be. When patients know the reason behind a process, they will more likely cooperate.

### **BODY LANGUAGE:**

- If possible, sit down when you speak with a patient. Be on their level - literally and figuratively. It makes for much better listening.

### **COMFORT OF VISITORS:**

- *"Do you know where the restrooms, cafeteria, gift shop, chapel, etc. are?"*
- *"Is the temperature alright?"*
- *"Can I get you a blanket?"*

### **PATIENT DISSATISFACTION WITH PHYSICIAN:**

- If a patient complains about physician's manner, schedule or skill.
- *"I'm sorry."* Listen patiently to their concerns and ask, *"Is there anything I can do to help?"*

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### **OFFENSIVE REMARK BY CO-WORKER:**

- In private and very politely, confirm what you heard was correct.
- *"Did you just say . . ."* If it was an offensive remark, say, *"What you just said made me uncomfortable. I would appreciate it if you wouldn't say it again. Thank you."*

### **HIGH NOISE LEVEL:**

- To person or people making noise
- *"Our patients are resting. Can you please help us to keep it quiet? Thank you."*

### **ANGRY PATIENT:**

- Patient comes to registration window visibly upset about waiting so long.
- *"I'm sorry your wait is long. Is there anything I can do to make you more comfortable? I appreciate you bringing the wait to my attention."*
- When a person continues to be belligerent or combative, for instance yelling, contact your supervisor immediately, and if unavailable, call security.

### **COMFORT:**

*"For your comfort I am giving you this warm blanket. Would you like some ice chips, juice or soda? You will be more comfortable if you sip slowly."* State to family, *"We want to make (Mr/Mrs patient) as comfortable as possible. Please let us know if you observe that he/she is not."*