# Improving Communication with Intubated Patients in Surgical Intensive Care Unit (SICU) in SGH



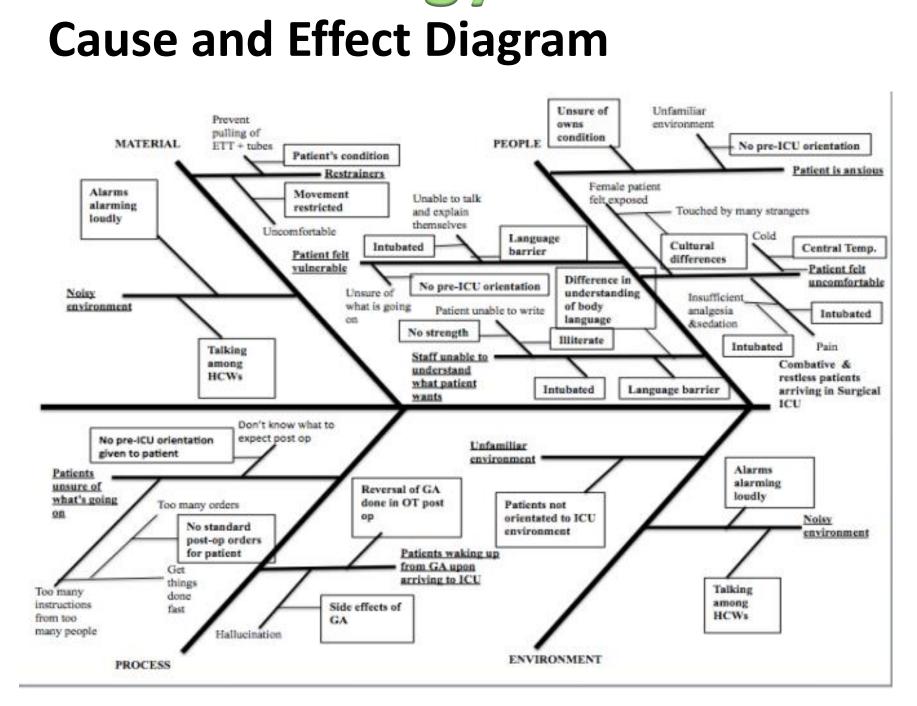
Chong Hui Ling Joanne, Singapore General Hospital Lau Yoke Yen, Singapore General Hospital Ng Gaik Heok, Singapore General Hospital Dr Lee Pang, Singapore General Hospital Chan Peck Wan, Singapore General Hospital Maslina Binte Masudi, Singapore General Hospital

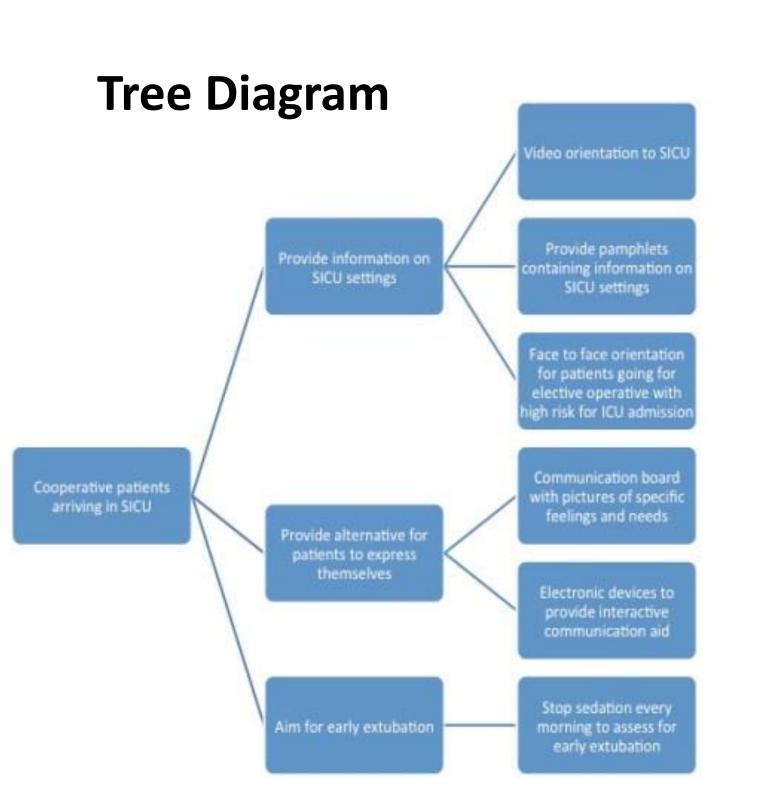


## Introduction

SICU in SGH is a 10-bedded unit providing continous intensive monitoring and treatment to patients. Patients in SICU are unable to talk due to the endotracheal tube in situ. Studies demonstrated that healthcare workers working in the critical care setting often faced difficulties with communication (Grossbach, et al., 2011). Our team hoped to improve effective communication so as to improve the patients' quality of care, experience and outcome.

## Methodology





## Implementation: Phase 1

**Before** 





Before: Time consuming to flip through pages to look for specific needs.

After

After: Display common needs in a A3 display board for easy visualization.

## Implementation: Phase 2

After

Before







Writes with finger

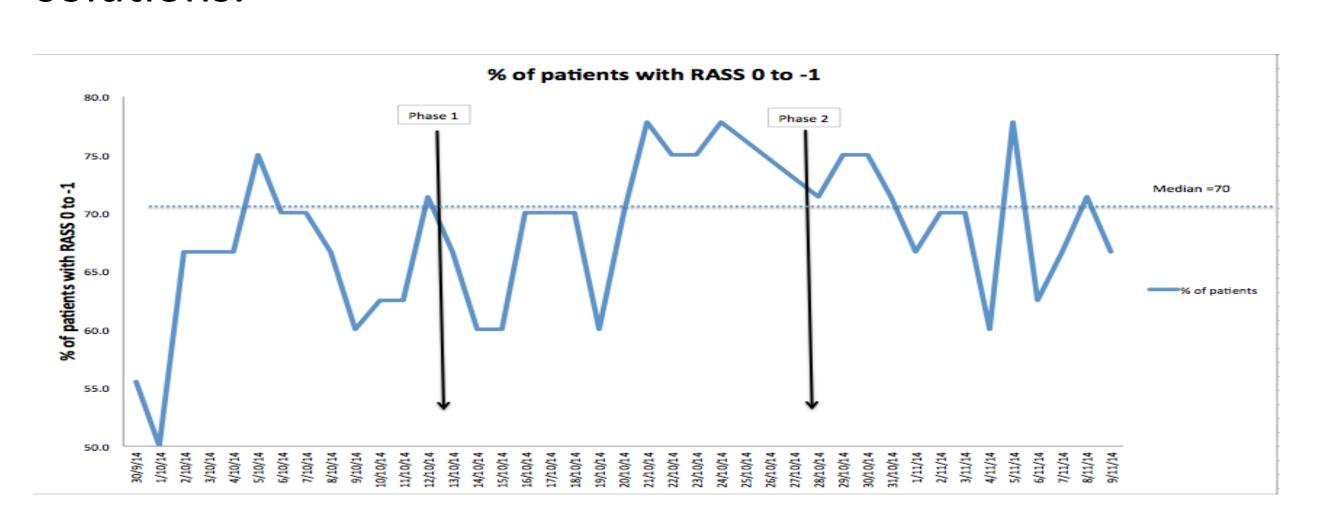
Typed using keyboard

**Before**: Illegibly handwriting due to lack of motility caused by their condition and the side effects of medications.

**After**: Using an iPad application such as virtual writing board is used for patients to type or write with their fingers.

#### Results

Below is the run chart that indicates the percentage of patients with RASS 0 (calm and alert) to -1 (Drowsy) based on the implementation of different phases of solutions.



**Phase 1**: shown an increased in the percentage of patients with RASS of 0 to -1

**Phase 2**: demonstrated a sustainable percentage of patients with a RASS of 0 to -1

**Post implementation survey**: 75% out of 40 staff indicated that the implemented solution were useful.

Tangible Results	Intangible Results
Reduces:	<ul> <li>Improved satisfactions.</li> </ul>
<ul><li>Need for sedation.</li></ul>	<ul> <li>Shorter length of stay due</li> </ul>
<ul> <li>Complications such as self</li> </ul>	to less complications.
extubation, pulling of	<ul> <li>Less cost incurred for</li> </ul>
drains.	organization.
•Man hours having to look	• Favourable feedbacks from
after restless patients.	staff and patients.

### Conclusion

We provide intubated patients with alternative ways to communicate their needs, reduce frustrations and complications arising from miscommunication. These therefore ensures patient's safety and comfort, to align with our organization quality commitment of providing "Best Outcome Best Experience".

We use innovative technology iPad to provide an interactive 2-way communication platform, to enhance effective communication between patients, next-of-kin and healthcare providers.

#### Reference

Grossbach, I., Stranberg, S., & Chlan, L. (2011) Promoting Effective Communication for Patients Receiving Mechanical Ventilation. *Critical Care Nurse.* 31, 46 – 60. Retrieved from <a href="http://ccn.aacnjournals.org/content/31/3/46.full.pdf">http://ccn.aacnjournals.org/content/31/3/46.full.pdf</a>