White Board Use

Site Applicability

St. Paul's Hospital and Mount St. Joseph Hospital Acute Care Inpatient units, and Critical Care units; Holy Family Hospital – Rehab Inpatient units (areas with whiteboards).

Practice Level

Applicable to all Health Care Providers.

Basic skill:

- RN, RPN, LPN, physicians, Nurse Practitioners (NPs)
 - Employed Student Nurses (ESN) and Student Nurses (SN) in consultation with and support from most responsible nurse.
- Registered Dietitians, Occupational Therapists, Physiotherapists, Respiratory Therapists, Social Workers, Speech-Language Pathologists, Indigenous Health Team, Spiritual Health Practitioners
- Patient Care Aide (PCA) in consultation with and support from the patients, families and interdisciplinary team members.

Need to Know

- Updating the bedside <u>whiteboard</u> and reviewing the care priorities with patients and <u>family</u> aligns with Providence Health Care's Mission Forward foundational principle of <u>Person and</u> Family Centred Care.
- Bedside whiteboards offer the opportunity to ensure that patients and families have easy access to basic information about their care and healthcare team.
- The use of bedside whiteboards facilitates patient and family communication with their healthcare team, helps patients identify the members of their care team, promotes engagement with their health care, and enables better understanding of the hospital environment.
- The use of bedside whiteboards promotes safe patient care.
- Updating whiteboards is a shared responsibility of the interdisciplinary healthcare team members, including physicians and NPs and promotes collaborative practice.

Equipment

White board
Dry erase markers (one per staff member)
Disposable dry erase markers for patient and family use, if needed
White board eraser (if available)
Cleaning wipes (e.g. Cavi-wipes, Accel wipes)

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Guideline

- Following nursing handover, the receiving nurse is responsible for assessing the patient, adding and updating applicable information to the bedside whiteboard. At a minimum, whiteboards are reviewed and updated every shift and upon transfer of care or location.
- Explain to the patient (and family where appropriate) the purpose of the bedside whiteboard –
 it is a daily communication tool that is used by the patient, family, and interdisciplinary team,
 including physicians and NPs.
- Seek verbal consent from the patient/family prior to use of the bedside whiteboard E.g. "Can I write your next hemodialysis date on the whiteboard?"
- At the beginning of the shift, nurses introduce themselves to the patient and write the basic
 information such as date, time, nurses' name, and patient's preferred name, etc. on the white
 boards.
- Team members who are involved in a patient's care are responsible for updating the whiteboard with relevant information pertaining to the patient's care.
- Items to include on the bedside whiteboard: (Refer to <u>Appendix A</u> Suggested Example of a Complete Whiteboard)
 - Current date and the day of the week
 - Patient's preferred name
 - o The team member's names (each team member to update their own names).
 - Safety alerts mobility, falls, dietary restrictions, etc.
 - Estimated discharge date
 - Interdisciplinary care team priorities pending tests or procedures, appointments, etc.
 - Patient & family care priorities meetings, visits, personal care needs, care strategies,
 etc
 - Goals of care activity level, nutrition, etc.
- Ensure that the terms being noted on the whiteboard are in plain language
- Ensure ongoing conversations with the patient & family around privacy such as patient's information written on the whiteboard and whiteboard usage

Maintaining the White Board

- All Health care providers will use their own white board markers for the day. If unavailable, new markers are available at the nursing station with the unit coordinators.
- If the white board markers and erasers are shared amongst health care providers, it should be cleaned and disinfected after each use as per IPAC: Cleaning and Disinfection of Equipment/Devices/Surfaces protocol.
- Environmental Services (EVS) are not responsible for cleaning and disinfecting markers and erasers.
- When caring for patients who require infection control precautions (Refer to Related Documents) consider using disposable markers.

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^{**}Please note: Not all critical care areas have the whiteboard available. Consider using alternative communication tools available on the unit.

- Consider providing disposable markers to patients and families who are using the whiteboard.
- When cleaning the patient room upon discharge or transfer, EVS will perform a terminal clean of the whiteboard.
 - ** Please note the appearance of whiteboards may differ between units.

Related Documents

- B-00-07-10078 Nursing Handover
- <u>B-00-16-13004</u> Cleaning and Disinfection of Equipment/Devices/Surfaces Infection Control
- B-00-07-13030 Droplet Precautions
- B-00-07-13029 Contact Precautions Infection Control
- <u>B-00-07-13028</u> Airborne Precautions: Infection Control
- B-00-07-13074 Contact Plus Precautions
- <u>B-00-07-13079</u> Droplet and Contact Precautions Infection Control

References

Cholli, P., Meyer, E. C., David, M., Moonan, M., Mahoney, J., Hession-Labanad, E., Zurakowski, D., & Bell, S. K. (2016). Family perspectives on whiteboard use and recommendations for improved practices. *Hospital Pediatrics*, *6*(7), 426-430. doi:10.1542/hpeds.2015-0182

Goyal, A. A., Tur, K., Mann, J., Townsend, W., Flanders S. A., & Chopra, V. (2017). Do bedside visual tools improve patient and caregiver satisfaction? A systematic review of literature. *Journal of Hospital Medicine*, 12(1), 930-936. doi:10.12788/jhm.2871

Sehgal, N.L., Green, A., Vidyarthi, A.R., Blegen, M.A., & Wachter, R.M. (2010). Patient Whiteboards as a communication tool in the hospital setting: A survey of practices and recommendations. *Journal of Hospital Medicine*, *5*(4), 234-239. doi:10.1002/jhm.638

Singh, S., Fletcher., K. E., Pandly, G.J., Schapira, M. M., Nattinger, A.B., Biblo, L.A, & Whittle, J. (2011). It's the writing on the wall: Whiteboards improve inpatient satisfaction with provider communication. *American Journal of Medical Quality*, 26(2), 127-131. doi:10.1177/1062860610376088

Tan, M., Hooper Evans, K., Braddock, C.H., & Shieh, L. (2013). Patient whiteboards to improve patient-centred care in the hospital. *Postgraduate Medical Journal*, *89*(1056), 604-609. doi:10.1136/postgradmedj-2012-131296

Definitions

Family is defined by the patient. When the patient is unable to define family, the patient's substitute decision maker provides the definition. Family members are the people who provide the primary physical, psychological, or emotional support for the patient. Family is not necessarily blood relatives. Family members are encouraged to be involved and supportive of the patient/resident and are integral to the overall well-being of the patient.

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Person and Family Centred Care is an approach to the planning, delivery and evaluation of health care that is grounded in mutually beneficial partnerships among health care providers, the people we serve and their families.

Whiteboard is a tool placed near a patient's bedside to support communication between the healthcare team, the patient, and their family.

Persons and Groups Consulted:

PHC Professional Practice Committee
PHC Advanced Practice Nurses Group
PHC Clinical Nurse Educator Group
Clinical Nurse Specialist – Medicine/Ambulatory Program
Quality Improvement Specialist
Nurse Educator - Generalist
Clinical Nurse Educator – Inpatient Chemotherapy & Acute Medicine Program
Interim Professional Practice Lead, Clinical Nutrition
IPAC Team
Social Work, Site Lead SPH
District Manager – Crothall Healthcare

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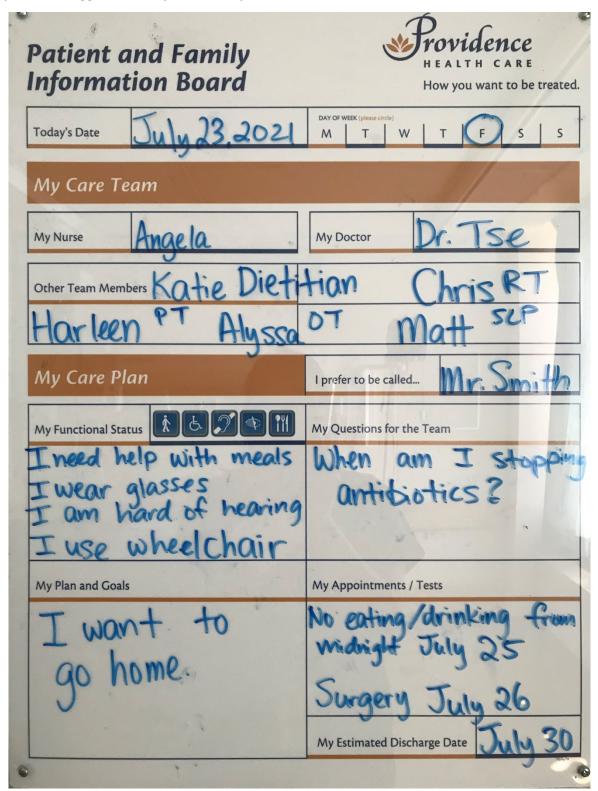
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Appendix A: Suggested Example of a Complete Whiteboard



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