Family Phone Calls

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GJNH Values

- Value dignity and respect.
- A “can do” attitude.
- Leading commitment and quality.
- Understanding our responsibilities.
- Effectively working together.
- Safe, person-centred and effective care.
Background/Situation

• Nurse-led quality improvement workshop.
• Approx. 1,300 families per year.
• High number of repeat calls.
• Increase in anxiety.
• Decrease in continuity.
Aim

- To telephone our families when their relative had arrived in ICU.
- To reduce the anxiety experienced by families.
- To improve continuity with communication.
- To deliver a more person-centred service.
Method

- Construct a trial to test the idea.
- Consult with pre-op wards.
- Ensure nurses understand their role.
- Patients and families were asked to delegate a family member who was best-placed to receive a phone call on the day of the patient’s surgery.
Method

• The nurse who was caring for the patient telephoned the designated family member personally.
• Followed up the families after discharge.
Results

• 23 families took part in the trial
• All families recommended that the scheme should become standard practice.
• Prevented clock-watching.
• Prevented the pressure and worrying of when to phone.
Results

• Prevented telephoning the wrong departments.
• Prevented the need for families to make repeat phone calls.
• Reduction in number of calls released more time to care for patients.
• Families preferred speaking to their relative’s own nurse.
Conclusion

- Decrease in level of anxiety experienced by families.
- Ensured the call is made by patient’s own nurse.
- Allowed for better continuity for families at a stressful time.
- Provided a more personal and person-centred service.