



# Not on the Same Page

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## LEARNING POINTS

- Pagers alone cannot meet the communication needs of large academic hospital centers.
- HIPAA-compliant group messaging systems are a new form of communication which serve a specific role in communication and thus require clear guidelines for use

### STATEMENT OF PROBLEM

- Efficient communication among interdisciplinary care team providers is critical for high quality care.
- Pagers are outdated and inefficient for communication; they disrupt workflow, interfere with resident learning, and require extra steps.
- Previous studies have suggested that HIPAA-compliant group messaging (HCGM) systems like Secure Chat increase communication volume and efficiency<sup>1</sup> and improve provider perception of hospital communication<sup>2</sup>.
- As a new method of communication, it is necessary to identify the appropriate settings in which to use Secure Chat and to create a set of clear universal guidelines for its use.

Most common hospital communication satisfaction score before and after implementation of Secure Chat:



### AIMS

- To improve the communication experience of the healthcare team using Secure Chat
- To develop clear and universal guidelines for the appropriate use of Secure Chat among health care providers.

### INTERVENTION

- We surveyed 102 interprofessional members of inpatient healthcare teams at a large academic medical center regarding their perception of appropriate use of HCGM for common clinical questions and concerns that arise in the hospital.
- We asked, “Which of the following would you feel is *APPROPRIATE* to communicating about through Secure Chat -- the instant messaging service in Epic and on Haiku/Rover?” regarding the following items:

- |   |  |
|---|--|
| <input type="checkbox"/> Non-Urgent Lab Value Update          | <input type="checkbox"/> Urgent Clinical Status Update                 |
| <input type="checkbox"/> Critical Lab Values                  | <input type="checkbox"/> Non-Urgent Clinical Status Update             |
| <input type="checkbox"/> Non-Urgent Order or Clarification    | <input type="checkbox"/> Family at Bedside                             |
| <input type="checkbox"/> Medication Questions                 | <input type="checkbox"/> Other Provider at Bedside                     |
| <input type="checkbox"/> Nutrition Recommendations            | <input type="checkbox"/> New Admission                                 |
| <input type="checkbox"/> Discharge Status Update              | <input type="checkbox"/> Non-Urgent Provider-to-Provider Communication |
| <input type="checkbox"/> Non-Urgent Procedure Schedule/Update | <input type="checkbox"/> Social Conversations                          |

### DISCUSSION

- Our survey was administered as Secure Chat was being introduced to the University of Colorado Hospital. As its use becomes more consistent, it may be necessary to reassess our current guideline recommendations.
- Future studies should be done in the outpatient setting and in smaller or non-academic hospitals to determine best practices in those settings.

### RESULTS

- The majority of survey participants deemed Secure Chat as appropriate for communication of a wide variety of non-urgent matters.
- Survey participants agreed that pagers should remain in health care communication but that they should be reserved for high priority communication only.
- Our guidelines are based on items that 75% or more of respondents agreed upon as appropriate or not:

#### Appropriate Use:

- **Non-urgent** order or clarification
- **Non-urgent** procedure schedule/update
- **Non-urgent** lab value update
- **Non-urgent** provider-to-provider communication
- Nutrition recommendations
- Discharge status update
- **Non-urgent** clinical status update

#### Inappropriate Use:

- **Critical** lab values
- **Urgent** clinical status update
- Social conversations

### LESSONS LEARNED

- Despite clear weaknesses to the paging system, it is strongly integrated into the healthcare system, meaning integration of a new communication system requires a patient transition.
- Secure Chat is used by a huge variety of healthcare providers, so their preferences must be considered.

### REFERENCES

1. Patel, S. P. *et al.* Resident Workload, Pager Communications, and Quality of Care. *World J Surg* 34, 2524–2529 (2010).
2. Katz, M. H. & Schroeder, S. A. The Sounds of the Hospital. *New England Journal of Medicine* 319, 1585–1589 (1988).