

PEACE: introduce with Purpose, Eye level, Ask (for permission/if change patient has questions), Courtesy, Explain to understand.

A. Basic Courtesies

Knock before entering. **Introduce** yourself and your team **with purpose- explain your role & how you fit in with the healthcare team**.

Write your name on the **white board** and hand the patient your **business card**.

Ensure privacy by **Pulling curtain or closing the door**.

Squat next to bed or sit down to be at the patient's **eye level**. (ask permission before sitting on patient's bed)

Address patient by **preferred name at every encounter**. Acknowledge family/ caregivers in room.

"Good Morning, patient's preferred name. I am Dr. ___ and these are my residents and students. Here is my card. You have been admitted to my service at the Hospital. We are your Primary team and will be responsible for coordinating your care in the hospital."

B. Format of bedside discussions

Review the chart prior to entering the room and **reference the chart** while in the room. *"I took over for Dr. _____. He/ she told me all about your hospital course/the reason you came into the ER. I have reviewed your records."*

Consider establishing a **rapport** with the patient by trying to **connect** with something non-medical. Weather, basketball, game, family, hobbies, etc. "what do you enjoy doing outside of the hospital?"

History: Look directly at patient, ask **open ended questions**. *"How are you doing today?"* Take small notes. Interrupt only when necessary or to clarify. **Listen** carefully to the patient, allow the patient to express their concerns fully **without interruption**.

Exam: Ask **permission** prior to examining the patient. **Explain** what you are doing and **report relevant physical exam findings to the patient in simple language**. *"The swelling in your legs appears to be getting better."* If allowing a student to examine the patient, **ask the patient for permission** first.

C. Summarize findings and treatment Plan

Summarize findings, primary diagnosis and treatment plan in plain, non-medical language (**4th grade level vocabulary**)

Duration. Explain planned tests/procedures/consults for the day. Explain expected **duration** of tests/procedures/hospitalization to set realistic expectations. (Timings for scheduled tests can be found on chart review after unchecking the convenience filter or in section All Areas). Give patient realistic expected discharge time daily.

Use diagrams or visual aids. Show X-rays or CT scan images (using snip it tool). Consider diagramming on their white board or on an index card.

Explain to understand. Use **teach back method** to ensure your patient understands their medical condition and plan. The **teach back method**, also called the "show-me" method, is a communication confirmation approach used by healthcare providers to confirm whether a patient (or care takers) understand what is being explained to them. Ask the patient to restate your explanation in their own words. **"I just want to make sure I was able to explain things to you. Would you be able to tell me the plan for today?"**

When possible, involve patient in decision making and acknowledge their input.

During the day, **keep patients informed** about test results, new consults requested, or any further tests planned.

**For patients with dementia, delirium, developmental delays or mental illness call the surrogate decision maker/HCP on a daily or as requested basis*

D. Before Leaving, ask patient

1. "Do you have **questions** I can help answer for you?"
2. "Is there a **family member** you would like me to call and update?"
3. "We will be **available** on the floor for most of the day. If you have any questions, just let your nurse know and she will be able to get a hold of us. We will be happy to come by and help address them"
4. "Can we **help you with anything else** before we leave?"

E. Gratitude

Treat with **courtesy and respect- treat each patient as a human being and how you would like your family member to be treated**

End each interaction with a positive note. Maybe a word of encouragement or simply *"It was nice to meet you- or- I'm glad you're feeling better."*

End hospitalization with teach back. Utilize the teach back method to make sure you were able to communicate well enough for the patient to understand the plan.

"It's been my privilege to care for you at Upstate. You may get a survey asking about your hospitalization in the next few days. We are always looking for ways to improve so we would love to hear your feedback. Please contact me if you have any questions after discharge- you have my card with my number on it."

P.E.A.C.E. for Patients

Purpose Knock and introduce with purpose - explaining your role and how you fit in with the health care team.

Eye Level Squat down or sit to be at a patient's eye level.

Ask Ask permission before examining and ask if patient has any questions.

Courtesy Treat each patient like you would a family member.

Explain Use simple words and utilize teach back to ensure patient's understanding.



Purpose: Knock on the door when entering and introduce yourself; explain your role and how you fit in with the healthcare team.

Eye Level: Squat next to the patient, use a chair or ask permission to sit on the patient's bed; Keep the discussion at eye level as much as possible.

Ask: Ask permission before examining the patient; ask if they have any questions.

Courtesy: and RESPECT - treat the patient if they were your own family; listen to them carefully; involve them in care plan; respect their time by letting them know about test times, duration, and how long discharge might be.

Explain: to UNDERSTAND - speak in simple language and summarize patient information with clear, plain language (think 4th grade level) using the teach back method >>> ask the patient to repeat back to you in their own words what you have explained to them.

[From the Office of Patient Experience]