


<p>Name of Policy: <u>iCare standards</u></p> <p>Policy Number: 3364-100-35-06</p> <p>Approving Officer: Chief Executive Officer - UTMC</p> <p>Responsible Agent: Director, Service Excellence</p> <p>Scope: The University of Toledo Medical Center and its Healthcare Components</p>	 <p>Effective Date: 06/01/2021</p> <p>Initial Effective Date: July 14, 2009</p>
<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy

(A) Purpose of policy

The practice of medicine is a true call to service. Patient-centered care reflects the noble tradition of commitment to individual patients, the patient’s caregivers, and the community. The University of Toledo healthcare provider’s and staff’s covenant is a promise to fully demonstrate to patients in their time of need to “be there” to provide relief whenever possible and to always offer comfort and compassion.

Meeting the patients’ basic requirements is expected; going beyond what is expected makes the patients’ experience memorable, differentiates providers, and builds patient loyalty. This means that any patient or guest that needs assistance, any noticeable area that needs cleaned or made more comfortable, any issue that needs to be addressed with regard to a patient will either be done personally on the spot or directed immediately to the appropriate person for handling. Patient centeredness is everyone’s job!

The patient is the center of our clinical work and, consequently, the center of our learning and research. Patient-centered care requires a relationship in which patients feel that their concerns have been acknowledged and that the university healthcare providers and staff understand the patient’s needs from that patient’s own unique perspective. Patients and healthcare providers must work together to find common ground regarding management – reaching a mutual understanding of their problems, goals of treatment communicating effectively and clearly defining the respective roles of patient and practitioner.*

(B) Policy

It is the policy of the university that patients, patients’ caregivers, families and guests are treated with extreme patient-centeredness care. “icare” stands for: a distinctive pattern of caring in which each and every healthcare provider, including every physician and every staff member, commits to communicate clearly, augment access, revere, respect, and embrace excellence. The

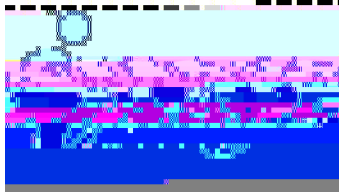
* The University of Western Ontario

- f* Support noise reduction initiatives, such as, careful use of ice machines, limit social chatter, use of headsets for communication, quietly closing doors.
- f* Accurately and completely inform patients of what pain levels to expect.
- f* Respond to patient's complaints of pain; do not doubt patient's feelings.
- f* Discuss and offer alternatives to pain medication as appropriate.
- f* Address any cultural issues associated with pain, encourage questions, address concerns including addiction.
- f* Check on patients at least every two hours or more frequently depending on patient needs and acuity level. Ask if there's anything else you can do before you leave.
- f* Refer patient to pain management or palliative care as needed.

(3) **Continuity of service/discharge criteria** - Healthcare providers and staff must focus on all aspects of transition of care into and out from the hospital, through the ambulatory care system, and when discharged home. Healthcare providers must do the following:

- f* Discharge instructions should include: activity level, diet, medication purpose, possible side effects, follow-up appointments, and weight monitoring. Have sible side effects, follow-lk9f.ot noi-1.15.001(s v1 Tw(and when discharged home.)Tj11.665

- f* Decrease appointment wait times, both from a scheduling perspective and when patients arrive.
 - f* Minimize disruption to the patient at all times.
 - f* Always offer follow-up care and deliver that promise.
- (5) **Coordinated care** – Healthcare providers and staff need to consider all sources of the patient’s care, not just the healthcare provided at UTMC. Healthcare providers and staff must be knowledgeable regarding the availability and quality of specialty services and community resources. Healthcare providers and staff must:
- f* Promptly distribute specialist consultation reports to primary care physicians and patients and effectuate communication among other non-UTMC patient healthcare providers.
 - f* Support patients as they move through different care settings. For example, use hand-off communication tools, bedside report every shift and team rounds as appropriate. Employ effective health records optimally.
 - f* Ensure the patient and patient’s caregivers understand who is in charge of their primary care, where to contact them and under what circumstances.
- (6) **Appropriate emotional support** - Healthcare providers and staff are to provide patients and patient’s caregivers with empathetic emotional support and be considerate of their feelings. Healthcare providers and staff must:
- f* Develop a therapeutic and ethically sound relationship of trust with patient and patient’s caregivers by doing what you say you are going to do.
 - f* Take time to discuss concerns with an emotional patient, do not leave an upset patient.
 - f* Remember the power of non-verbal communication; actions and tone can convey concern or disinterest.
 - f* Suggest pastoral care if appropriate. Acknowledge religious and cultural practices.
- (7) **Distinctive excellence** - The attitudes and behaviors that recognize that we are all on the journey of excellence. This approach needs to permeate all of the interactions with patients, families, and colleagues. Healthcare providers and staff should do the following:
- f* Demonstrate respect, compassion, integrity, competence, confidence, knowledge, skill, and responsiveness to the needs of patients and society, and a commitment to excellence that supersedes self-interest.
 - f* Demonstrate a commitment to compliant and ethical principles pertaining to the provision or the withholding of clinical care, confidentiality of patient information, informed consent, and business practices.
 - f* Demonstrate sensitivity and responsiveness to patients’ culture, age, gender, modesty, and disabilities.
 - f* Strive to increase the overall quality of care provided and experience by seeking out and suggesting process improvements that support the iCare initiative.



iCare Standard of Excellence Attestation of Commitment 2021

I, _____ (print name), have read and fully understand the iCare Standards Policy (UT 3364-100-35-06). I understand that I am bound by the provisions in this policy and will, to the best of my ability, provide patients, families, and colleagues with the highest standards in quality of care, respect, and exemplary patient-centered service.

I understand that extreme patient-centered care reflects the highest standards possible for communication, access, respect, and excellence that I would expect or provide to my own family. Further, I understand that any breach of this or other applicable policies and procedures may result in disciplinary action up to and including termination.

By signing below, I attest that iCare!

Signature

Date

Please check all that apply:

Medical Student

Nursing Student

Resident/ Fellow

Other Student

Faculty Member

Staff Member

Medical Staff Member

Hospital Administration