

Understanding Discharge Communication Behaviours in a Pediatric Emergency Care Context

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Introduction

One of the most important transitions in the continuum of care for children is discharge to home. However, optimal discharge communication between healthcare providers and parents who present to the emergency department (ED) with their children is not well understood. The objective of this mixed methods study was to characterize the process and structure of discharge communication in a pediatric ED context.

Methods

Real-time video observation methods were used in two academic pediatric EDs in Canada. Parents who presented with their child to the ED with one of the six illness presentations, a Canadian Triage Acuity Score of 3-5, and English speaking, were eligible to participate. All ED physicians, learners, and staff members were also eligible. Provider-parent communication was analyzed using the Roter Interaction Analysis System to code each utterance. Parental satisfaction with communication was assessed within 72 hours of discharge.

Results

A total of 107 ED visits were recorded with a total of 46,848 utterances coded across the six illness presentations. Physicians most commonly gave medical information (18.5%) or asked close-ended medical questions (10.5%). Nurses most commonly gave orientation instructions (24.2%). Learners were most likely to employ active listening techniques (e.g. back channels, 13.8%). Communication that provided post-discharge instructions for parents comprised 5.2% of all utterances. Overall, providers infrequently assessed parental understanding of information (1.5%). Parent satisfaction with the amount of information communicated was generally high (89.6% agreed or strongly agreed).

Conclusions

This is the first study of ED discharge communication to use video observation methods. Provider-parent communication was predominantly characterized by the exchange of medical information, with little time devoted to preparing parents and families to care for their child once home. Greater assessment of parental comprehension is necessary to ensure that parents understand important instructions and know when to seek further care.