



KEY POINT SUMMARY

OBJECTIVES

The objective of the study was to evaluate the impact of placing whiteboards in patient rooms on communication between caregivers, patients, and their families.

It's the Writing on the Wall: Whiteboards Improve Inpatient Satisfaction With Provider Communication

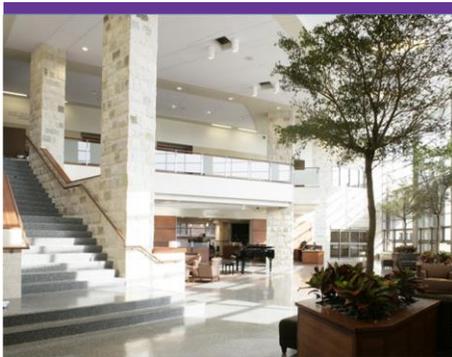
Singh, S., Fletcher, K. E., Pandl, G. J., Schapira, M. M., Nattinger, A. B., Biblo, L. A., Whittle, J., 2011 | *American Journal of Medical Quality*. Volume 26, Issue 2, Pages 127-131

Key Concepts/Context

Communication in hospitals between caregivers and patients is important for patient satisfaction. Inpatients frequently say they are not well informed and report their dissatisfaction. The authors of this study placed whiteboards in medical wards at a 430-bed Midwestern academic medical center to evaluate whether or not they improved communication. The results were compared with surgical wards at the same hospital with no whiteboards installed.

Methods

Whiteboards were installed on the walls facing the patients at four general medical wards. They were dry-erase boards, 3 x 2 ft. in size, with written prompts for physician names, scheduled testing, goals of care, and the patient's concerns or questions. Caregivers were asked to use the whiteboards to improve communication with the patients and their families without being given any specific guidelines. Nurses also encouraged the patients and their families to use the whiteboards. The study took place between January 2006 and June 2007 at the medical and surgical wards. To measure the outcome the Press Ganey Patient Satisfaction Survey responses were used. These surveys were randomly mailed to discharged patients while the whiteboards were still installed. The patient's response rate was 28% as measured by the authors. The patients' survey included three questions regarding communication with physicians, nurses, and their involvement in decisions about their own care. In addition, questions pertaining to the food quality and the room temperature were used as control items not affected by the whiteboards. The survey scores were compared before and after installation



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of the whiteboards. The results included the four medical wards and the seven surgical wards that did not have whiteboards. A statistical analysis of the data collected followed and was presented in graphical format. The authors obtained IRB approval for the evaluation procedures as required.

Findings

The placement of whiteboards at the general medical wards significantly improved the patient's satisfaction with communication as indicated by the survey results. There was no change in satisfaction in the surgical wards since no whiteboards were placed there. And there was no change in patient satisfaction with the food quality or the room temperature.

Limitations

The study measured the patient's satisfaction with communication without any actual monitoring of when or how the boards were used. There was no data collected on the patients' demographics or medical conditions. Furthermore, the survey response rate was comparatively low at 28%.

Design Implications

According to the study, the use of whiteboards in hospitals could improve communication with patients in their rooms. Medical facility designers need to examine the type and location of these boards to better utilize them in future designs.

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