

UCONN JOHN DEMPSEY HOSPITAL

SECTION: PATIENT CARE NUMBER: 08-039

SUBJECT: EDUCATION OF PATIENTS AND PAGE: 1 OF 2

FAMILIES

POLICY:

- I. Licensed clinical staff will assist the patient/family/significant other(s) and designated caregiver in gaining the knowledge and skills needed to meet the patient's ongoing health care needs.
- 2. All patients admitted to John Dempsey Hospital will be asked on admission whether or not they have a designated caregiver. The name, relationship to patient, address and phone number of the designated caregiver will be recorded in the discharge plan.
 - a. Patients may decline a designated caregiver.
 - b. Patients who are discharged to settings other than their home are not required to have a designated caregiver.
- 3. Assessment of patient's learning needs, abilities, preferences, and readiness to learn will be documented in the medical record. Education will be related to the patient's relevant health care needs/diagnosis, and specific topics will be addressed with each teaching opportunity. The education will be provided in a timely, efficient, caring and respectful manner in ways understandable to the patient/family significant other(s)/ and designated caregiver. Teach back is our preferred methodology for patient education validation.
- 4. Education shall be addressed as part of the multidisciplinary plan of care. UConn Health supports the philosophy that patient education is provided by the direct caregivers and other members of the multidisciplinary team.
- 5. Patients with significant potential for drug-food interaction will be identified and counseled of such possible interactions. Nursing staff, pharmacists, and dietitians will collaborate with one another to provide appropriate education for patients who have the potential to develop significant drug-food interactions.



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DEFINITIONS:

- a. "Caregiver" means any individual who a patient designates as a caregiver to provide post-discharge assistance to the patient in the patient's home in the community. The term caregiver includes, but is not limited to, a relative, spouse, partner, friend, or neighbor who has a significant relationship with the patient. For the purposes of this act, the term caregiver shall not include any individual who receives compensation for providing post-discharge assistance to the patient.
- b. 2. "Home" means a dwelling that the patient considers to be the patient's home in the community. It does not apply to a discharge to any rehabilitation facility, hospital, nursing home, assisted living facility, group home or any other setting that was not the patient's home in the community immediately preceding the patient's inpatient admission.
- 6. The response to education will be documented in the medical record as a means to assure needed reinforcement or to identify patient/family/significant other(s)/designated caregiver's lack of receptiveness to education.
- 7. Information about any discharge instructions given to the patient/family/ significant other(s)/designated caregiver will be provided to the individual or organization responsible for the continuing care of the patient. This is conveyed via the Discharge Instructions/CPOE (Computerized Prescriber Order Entry) Discharge Instructions which may faxed to the PCP and sent to the next provider of care.
- 8. The patient/family/significant other(s)/designated caregiver are encouraged to contact the patient's regular care provider(s) to update him/her on their health status and recent hospital stay/treatment.

REFERENCE: Connecticut State Public Act 15-32 An Act Concerning Patient-

Designated Garegivers (approved June 5, 2015)

Andrew Agwunobi, MD, MBA

Chief Executive Officer

Richard H. Simon, M

Chief of Medical Staff

Date Issued: 12/94

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