Letters • Correspondance

Patient videos for the emergency department waiting room

To the editor: At the Hamilton Civic Hospitals (now part of Hamilton Health Sciences in Hamilton, Ont.), the emergency department (ED) pioneered a video for the waiting room in the late 1980s. We too performed a survey of patients and came to the same conclusion as the article by Papa and colleagues published in CJEM's July 2008 issue: that the video improved patient satisfaction.1 Our survey was small and not designed for publication. In hindsight, I ask myself whether we were posing the correct question. Although it is undoubtedly true that a video in the waiting room can improve patient satisfaction, what we did not ask (and also a question that was not posed by Papa and coauthors) was whether this improved the quality of patient care or patient safety. Neither of these is necessarily linked to patient satisfaction.

In designing our video, one of our first steps was to survey the ED staff to determine what questions patients consistently asked staff, what questions asked by staff were answered incorrectly by patients and what information patients forgot to provide staff even when asked. As a result of this survey, we found out that we often had to clarify to a patient what an allergic reaction was (as opposed to intolerance), we had to explain to patients that "puffers" and "birth control pills" and over-the-counter medications are medications nonetheless, and, obviously, we had to explain to them the concept of triage dictating the order in which patients are seen. These messages were integrated into our video.

In our assessment of this tool, what we should have done was a review of how often patients misreported medications or allergies or inquired with regard to waiting times before the video was introduced and again after the video was presented. This would have provided some hard data on whether the video was effective in getting any messages across to the audience.

The original video we designed is no longer in use, as it was specific to a hospital corporation that no longer exists. The potential benefits of such a video, however, are very real and I would recommend other institutions try to do the same. I would also recommend that authors assess the impact of these videos more rigidly. In the meantime, I commend Dr. Papa and colleagues for their very interesting paper.

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Reference

 Papa L, Seaberg D, Rees E, et al. Does a waiting room video about what to expect during an emergency department visit improve patient satisfaction? CJEM 2008:10:347-54.

[The authors respond]

Thank you for your interest in our research and for your insightful comments. Improving patient care and safety are very important goals in the emergency department (ED) and using a form of media, such as a waiting room video, may be an opportunity to do this. Intuitively, one may surmise that educating patients and their families about what happens during an ED visit is an indirect method of meeting these goals. However, our study was not designed or powered to answer these questions specifically and our primary outcome was patient satisfaction. Going to an ED is often an intimidating and confusing experience for patients and families because of their fear of the unexpected. Explaining what to expect seems to be just as, if not more, important to patients than information on actual conditions and helps to alleviate anxiety.¹⁻³

As you observed through your study and our current one,⁴ ED visits and waiting times really present a unique opportunity to provide educational and instructional material to patients. Although the goal of our study did not answer your specific question, I hope that in the future you and others will consider pursuing the very important questions you raised about patient care and safety improvement through a waiting room video.

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