



During the vulnerable time of being hospitalized for cancer treatment, patients may long to be seen as an individual who exists apart from the disease process. The implementation of All About Me interactive white boards provides a mechanism to allow the patient's most unique needs to be met and to promote a more meaningful connection between the nurse and patient. This study provides information on the benefit of acknowledging patients' personalized characteristics, as well as the impact of promoting the connection between the nurse and patient through the boards.

AT A GLANCE

- When patients are admitted to the hospital, they hope to be seen as more than their diagnosis.
- It is not unusual for patients who are admitted to the hospital to feel that their most important personalized needs and values are overlooked.
- The addition of the All About Me interactive white boards in the oncology setting allows the overall aim and focus to be shifted back to the patient to provide comprehensive patient-centered care and enhance nurse–patient relationships.

KEYWORDS

interactive white board;
patient-centered care;
personalization

DIGITAL OBJECT IDENTIFIER

10.1188/20.CJON.703-706

Personalization in Cancer Care

Implementation of an interactive white board to improve nurse–patient communication

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Being treated with respect and dignity, given clear communication, and provided with care that takes a patient's personalized needs into account were noted as important aspects of patient-centered care (Fitch et al., 2020). Patients who are hospitalized during cancer treatment may long to be seen as an individual who exists apart from the disease process. Individualized care can greatly contribute to a positive patient experience while admitted (Fitch et al., 2020). The implementation of interactive All About Me white boards at the author's institution provides a mechanism to allow the patient's most unique needs to be met and to promote a more meaningful connection between nurses and patients.

Background

Patients with cancer may, at times, be longing for a deeper connection with the nurses caring for them. However, while providing care for patients, nurses may be task and safety conscious, and the patient can be left feeling depersonalized. An analysis of the patient's viewpoint about the nurse–patient relationship can help develop strategies that could improve the patient's experience (Cherven et al., 2020). Engaging with patients and allowing for the patient and nurse to share life experiences fosters more complete patient-centered care. This, in turn, may lead to greater nurse satisfaction, decreased rates of burnout, and improved resilience (Cherven et al., 2020).

Developing a therapeutic relationship with patients often begins by creating a safe environment in which patients can be comfortable sharing the different aspects that make them an individual. On admission, patients expect to be treated as a person by nursing staff, not as a diagnosis (Schmidt, 2003). In health care, it is not unusual for patients' most important characteristics and values to be overlooked and even lost (Schmidt, 2003). A poor therapeutic relationship can negatively affect the patient experience by compromising the ability of healthcare providers to address a patient's intrinsic needs.

A review of the literature found that patients in intensive care units and patients with Alzheimer disease or dementia often communicate with white boards. This communication and attention to detail enhanced patient recovery by increasing patient responsiveness (Dawson, 2017; Greenhouse, 2015). Interactive white boards share details about the patient, rather than the disease they have (Fick et al., 2013). The purpose of this study is to analyze the implementation of the interactive All About Me white boards at the author's institution and to measure their impact on patient satisfaction and the overall patient experience on an inpatient oncology unit.

Methods

Quantitative and qualitative survey methods were used to evaluate the impact of the All About Me white boards on patient satisfaction, and were deemed exempt by the State University of New York (SUNY)