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*CENTERS FOR MEDICARE & MEDICAID SERVICES*

**SUPERIOR HEALTH**  
**Quality Alliance**

# Recognizing and Communicating Resident Change in Condition

Lisa Gall and Joshua Suire

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# Objectives

- Recognize the importance of knowing your patients well.
- Describe your role in observing and reporting patient changes.
- Identify common changes in a patient's condition that should be reported to a nurse or supervisor.
- Determine what to report about observed changes in a patient's condition.
- Describe when to report patient information about a potential change in condition.
- Utilize various tools to structure communication of a patient's change in condition.

# Your Role in Keeping Patients Well and Safe

- How the patient transfers and gets around.
- Their preferences and abilities for activities like eating, dressing, bathing and using the bathroom.
- How the patient usually communicates.
- Know the physical and non-physical norms for your patient.
- Recognize when something changes.
- Quickly report when a change is noted.

# Gather Information and Act

- Ask if you can do anything to help make the patient more comfortable before reporting to a nurse.
- Take the patient's vital signs.
- What change do you see?
- Organize information and report it to the nurse.

# Physical Changes

- Walking
- Level of weakness
- Falls
- Urination and bowel patterns
- Skin
- Vital signs



# Report Mobility Changes

- Walking or wheeling
- Balance
- Falls
- Weakness
- Increased need for help.



# Report Changes in Bowel Movements and/or Urination

- Any comments the patient makes about pain or discomfort.
- How they use the bathroom.
- Change in incontinence of bowel or bladder.
- Number of bowel movements or increased need to urinate.
- Diarrhea, blood and straining or pain with urinating or moving bowels.
- Bad or unusual smelling urine or bowel movement.

# Report Skin Changes

- New open areas.
- New redness.
- Complaints of pain or tenderness.
- Warm or cool to the touch.
- Skin feels damp, whether cool and clammy or hot and sweating.
- Changes in color - pale, bluish tints to nails or lips, redness.



# Non-Physical Changes to Watch For

- Mood
- Confusion, agitation or change in alertness.
- Appetite
- Sleeping
- Speech

# Report Changes in Mood

- Withdrawn
- Passive
- Not involved in activities.
- Talking more or less than usual.
- New or increased confusion.
- New or increased agitation or resisting cares.

# Report Changes in Appetite

- Loss of appetite.
- Increased hunger.
- Saying food tastes different or has no taste.
- Changes in food or drink preferences.
- Pain with eating or difficulty swallowing.

# Report Changes in Speech

- New garbled or slurred speech.
- Difficulty finding the right words.
- Calling something by the wrong name.
- Talking loudly.

# Report Changes in Sleep

- Saying they don't feel rested.
- Increased tiredness or sleeping more.
- Difficult to wake up.
- Difficult breathing.
- Unable to fall asleep.

# Pain or Discomfort

- Grimacing or making faces when moving or moved.
- Complaints of pain.
- New abdominal or chest pain.
- Headache





# What and When to Report?

- It is more important to report anything that might matter than to wait and see if the resident gets better or worse.
  - Report your own observations.
  - Report observations voiced to you by other members of the care team.
  - Report at shift change or sooner if the change of condition is drastic or urgent.



# Hand-Off of Patient Information

- The transfer and acceptance of patient care responsibility is achieved through effective communication.
- A real-time process of passing patient specific information from one caregiver to another to ensure the continuity and safety of the patient's care.
- Check back: Closed-loop communication to ensure that information conveyed by the sender is understood by the receiver as intended.
  - Sender initiates the message.
  - Receiver accepts the message and provides feedback.
  - Sender double checks to ensure that the message was received.

# Example of an Effective Hand-Off

- During the verbal report:
  - **CNA 1:** Mrs. Johnson seems a little different today. She didn't go down for Bingo as she usually does, she only ate half of her lunch and she was irritated during her daily cares.
  - **CNA 2:** Okay, Mrs. Johnson seems different than usual, participated less in activities, ate less and was agitated more than usual. Is that correct?
  - **CNA 1:** Yes, that is correct.
  - **CNA 2:** This could be a change in condition, I will continue to monitor her during my shift.

# Communicating First Signs of Change Early Warning Tool

- Use anytime a change in condition is identified while caring for or observing a patient.
  - [Early Warning Tool](#)

EARLY WARNING TOOL	
S	Seems different than usual.
T	Talks or communicates less.
O	Overall needs more help.
P	Pain-new or worsening; Participated less in activities.
a	Ate less.
n	No bowel movement in three days or diarrhea.
d	Drank less.
W	Weight change.
A	Agitated or nervous more than usual.
T	Tired, weak, confused or drowsy.
C	Change in skin color or condition.
H	Help with walking, transferring or toileting more than usual.

# Communicating First Signs of Change: SBAR

- **Situation** - a brief statement of the problem, including patient name.
- **Background** – give an overview of the current situation and changes that have taken place.
- **Assessment** – share what you think is going on. If you don't know, say that.
- **Recommendation** – clearly state what you are asking and a timeframe.

# SBAR Example

**S:** Mrs. George in Room 34 is acting differently today. She stumbled but didn't fall on the way to the bathroom. She wouldn't eat breakfast, but I got her to drink some juice. She requested to go back to bed after sitting up about 10 minutes and refused therapy.

**B:** Yesterday she was fine. She ate well and participated in therapy.

**A:** Something is going on with her.

**R:** Could you go check on her soon?



# Key Points

- The best way to detect a change in the patient is to get to know what is normal for them.
- You can learn to be observant and to make a habit of knowing your patients and noticing changes.
- Report any changes to the nurse or supervisor as this could be a sign of an illness or change in medical condition.
- Changes must be detected early and communicated promptly.
- Everyone is responsible for speaking up.
- Communication tools like SBAR and the Early Warning Tool can help us structure our communications.

# Resources for Teaching Frontline Staff

- [Front Line Forces webpage.](#)
  - [Recognizing Change in Condition module.](#)
- [Recognizing Resident Change in Condition poster.](#)

# Next Steps

- Please complete this short [evaluation](#) to help us to continue to meet your needs.

# References

- [Module 2: Communicating Change in a Resident's Condition](#), Agency for Healthcare Research and Quality
- [Early Warning Tool](#), Indiana State Government
- [SBAR and Early Warning tools](#), INTERACT®
- [CUS Tool](#), Agency for Healthcare Research and Quality (AHRQ)
- [Inadequate hand-off communication](#), The Joint Commission
- [Improving Patient Safety in Long-Term Care Facilities](#), AHQR
- [Acute Change of Condition Reporting Guide](#), Study Lib

# Continue the Conversation in Superior Health Connect



- Connect is a shared learning environment for Superior Health participants to come together to foster and promote an all-teach-all-learn climate that provides the framework to improve and sustain mutual health care quality improvement initiatives locally, regionally, and nationally.
  - <https://bit.ly/3BhfHc1>



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