

“COMMUNICATION IS KEY” role-play

The Situation:

Nurse Solo is a manager in the ICU. He/she has been somewhat resistant to the idea of partnering with patients and families in the past stating, “Patients and families don’t understand the complexity of healthcare so asking for their feedback is not very useful.”

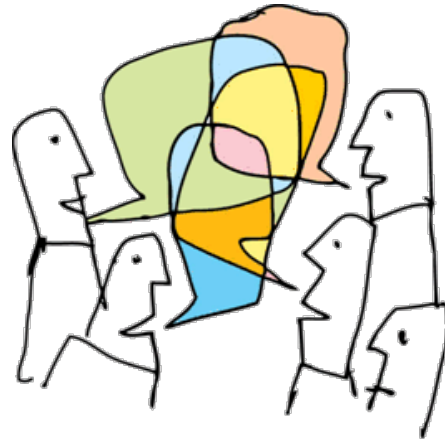
Nurse Solo’s boss has requested that he/she come to your PFAC meeting to discuss a proposed change to the visitation policy for the ICU. The new policy would allow open visitation during the day. However, after 10PM, only one visitor would be allowed at a time.

1. Small group discussion questions:

- What do you imagine Nurse Solo might be thinking and feeling going into this scenario?
- How would you expect someone with this viewpoint to behave in a PFAC setting?

2. Assign roles to your group members:

- “Nurse Solo” (1 person)
- Staff members serving on the PFAC (half of your group)
- Volunteer patient/family advisors (PFAs) serving on the PFAC (the other half of your group)



3. Acting out the roles you were assigned, take 10 minutes to role-play a PFAC meeting where Nurse Solo is seeking feedback on the new ICU visitation policy.

Small group discussion questions:

- What was Nurse Solo’s response to feedback from the PFAC?
- What did you notice about the way the group responded to Nurse Solo?
- Which phrases that Nurse Solo or other PFAC members used were productive/helpful (contributed to the spirit of partnership and helped the process)?
- Which phrases that Nurse Solo or other PFAC members used were unproductive/un helpful (did not contribute to the spirit of partnership or help the process)?
- If this scenario happened in your PFAC, what would you do?