

15 Patient Advocacy Strategies for a More Comfortable Hospital Stay for Yourself or Your Loved One

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Five years after the purchase of our 100+ year old, not-for-profit, Mission Health hospital system in Asheville, NC, this headline article appeared in the AVLWatchdog.org, an online newspaper, with an article written by Watchdog reporter, Andrew Jones, on February 2, 2024, which read:

“Mission Hospital has been officially informed by the U.S. Centers for Medicare & Medicaid Services that it is in “immediate jeopardy” related to deficiencies in care, according to an internal email obtained by Asheville Watchdog (<https://avlwatchdog.org/feds-cite-ashevilles-mission-hospital-for-immediate-jeopardy-hca-regional-president-tells-staff/>), Accessed April 20, 2024).

If the above article was not frightening enough, another article on this similar topic appeared on February 15, 2024, also written by Andrew Jones, in the AVLwatchdog.org with this headline,

‘The patient was subsequently found unresponsive in a hallway bed’: CMS report on Mission Hospital details deaths of patients, significant delays in care: Hospital’s plan of correction outlines procedural changes, staff education, increased oversight (<https://avlwatchdog.org/cms-immediate-jeopardy-report-on-mission-details-deaths-of-patients-significant-delays-in-care/>), Accessed April 20, 2024).

In this article was a 384-page report written by the Centers for Medicare and Medicaid that detailed

“why CMS placed the hospital in immediate jeopardy, the most serious sanction a hospital can face” and “spotlighted not only patient deaths and long delays in care but also a lack of available rooms, a lack of governing bodies, and multiple leadership failures” (<https://avlwatcdog.org/cms-immediate-jeopardy-report-on-mission-details-deaths-of-patients-significant-delays-in-care/>, Access April 20, 2024).

*This following article on the “**15 Patient Advocacy Strategies for a More Comfortable Hospital Stay for Yourself or Your Loved One**” was written to give patients and families some tangible strategies to utilize when supporting hospitalized patients, friends, neighbors, and families.*

The 15 Strategies

1) Before You Are Admitted to the Hospital.

Prepare and become an expert on yourself or your loved one before going into the hospital.

a. Learn about all your diseases or chronic conditions.

A free and comprehensive source of online medical information can be found at [mayoclinic.org](https://www.mayoclinic.org/) (<https://www.mayoclinic.org/>)

Examples:

Disease – Diabetes;

Lab – A1C and Blood Sugar;

Medications – Insulin (Short-Acting and Long-Acting)

Know your medications, including dosage, frequency, side effects, and route (such as pill, liquid, or inhaler).

Know your lab work details and vital signs: Blood Pressure (BP), Heart Rate (HR), Respiratory Rate (RR), and Temperature.

Obtain recent copies of your medical records, either on paper or via a patient portal. This should include any prior hospitalizations within the last year (physician progress notes and the discharge summary), primary care physician records, and specialist notes and recommendations.

2) Plan to bring the following with you to the hospital

COMMUNICATION TOOLS

- Pen
- Paper
- Diary or journal
- Dry-erase markers for whiteboards
- Laptops or tablets
- Smartphone (including long power cables or chargers)

PERSONAL HEALTH AND HYGIENE ITEMS

- Bleach wipes
- Hand sanitizer
- Soap/washcloths/towels
- Paper towels
- Lip balm
- Toothpaste, Toothbrush

FOOD AND DRINK ITEMS

- Snacks
- Eating utensils
- Preferred sweetener
- Creamer
- Salt and pepper

IMPORTANT MEDICAL DOCUMENTS

- List of current medications – check
- Your Home Meds with the Hospital Meds
- Original copy of a DNR (Do not Resuscitate) form (if applicable)

- Your Medical Orders for Scope of Treatment (MOST) form

CONTACT LISTS

- Emergency Contacts
- Key hospital department phone numbers (Unit Specific phone number for specific nursing unit on which you are located)
- Hospital Corporation of America Authorization for Release of Healthcare Information

[Release Form](#)

3) Plan to leave these things at home.

Do not store in the hospital room's bedside drawer)

- Cash
- Wallet
- Jewelry

Teeth – do not store in a tissue

Hearing Aids are frequently lost – bring a secure, familiar container in which to place them while you are in the hospital

4) If you're overwhelmed, consider identifying a Patient Advocate with healthcare experience.

This could be a spouse, a family member, or a friend.

They should have adequate healthcare literacy and familiarity with medical language.

Healthcare experience – preferably greater than 10 years and in your region

Healthcare Education/Employment – associate degree, BS degree in nursing, pharmacy, dietician, physical therapist, occupational therapist, other

When You Are Admitted to the Hospital

5) When You Are Admitted to the Hospital.

THINGS TO INCLUDE DURING YOUR ADMISSION DAY REGISTRATION PROCESS

Provide the Admission staff with the names and mobile numbers for key family members and/or friends, which will allow them to speak with your nurse directly when they call during your hospitalization.

Identify your designated Patient Advocate and provide Admissions with name, mobile number, and a completed Hospital Authorization for Release of Health Care Information form for this person.

Document this information on the Patient Room Greaseboard

6) Always ask any questions.

Both during Admission and throughout your stay, but don't be rude or unreasonably demanding.

You have a right to be informed, even if the hospital staff becomes annoyed with your questions.

Take notes and use a journal or whiteboard to jot down your questions and concerns as they occur to you.

Prepare daily agendas to discuss with your healthcare team: nursing staff, physicians, case managers, and others.

Don't be afraid to ask questions during Rounds.

Always be patient and kind to nurses, physicians, and hospital staff, all of whom are under tremendous pressure to provide quality patient care under difficult circumstances, including insufficient resources.

Remember that you can have your issue addressed if you're persistent and tenacious.

Never give up: never, never, never!

During Your Stay

7) Use your smartphone or computer to obtain additional healthcare information, and keep a daily diary of your care in the hospital, including taking pictures.

Use the WiFi available in the patient's room.

Research your disease, your medications, and any new findings encountered during your stay.

Use MayoClinic.org for free and comprehensive online medical information.

Call the hospital operator if you have specific concerns you can't resolve.

The daily diary you keep can be hand-written or electronic, whichever is easiest for you.

8) Learn the right person to call when you need help with questions.

There are no longer Unit Secretaries on several units in the Hospital. Nurses are busy taking care of patients in patient rooms helping patients.

Nurse to Patient Ratios may be low on your nursing unit

- Your primary nurse
- Unit Charge Nurse
- House Supervisor
- Unit Nursing Manager (someone is on-call 24 hours/day)
- Hospital Administrator
- The Rapid Response Team (available 24/7 for emergencies)
- Mission Hospital operator 828-213-1111 (ask to be connected to the Nursing Unit) Put this number in your phone!
- The direct phone number to the nursing unit in which you are staying

- Where are the Nursing Staff? They are in rooms taking care of patients. There are vacant Nursing Stations on a Nursing unit.

9) Learn about patient-care alarms.

10) Learn how to use the Hospital Bed Call Button or Pillow Speaker.

Don't be afraid to press the call button for any questions or patient-care issues that include:

- Pain
- Nausea/vomiting
- Position change
- Toileting issues
- Nutrition and fluids
- Infusion device alarms
- Other medical needs

If there is an Emergency, call the Hospital Operator by pressing "0" or call the Rapid Response team (available 24/7).

If you don't know how to call the Rapid Response team, ask someone to show you...before you have an emergency.

11) Patient Care Conferences via phone or in-person at the hospital.

PATIENT CARE CONFERENCE: Ask to speak with your primary RN or assigned case manager to set up a conference with your primary hospital physician, case manager, primary nurse, and RN Patient Advocate within 24 hours or sooner. Topics that can be discussed include your vital signs, plans for discharge after hospitalization, or any patient care issues (including medical staff unresponsiveness or if you're unsure about any medical diagnoses or treatment plans).

At Mission Hospital, call the operator at 828-213-1111 and ask to speak to the case manager who is responsible for your loved one and give the specific room number.

12) Patient Care Conferences via phone or in-person at the hospital and Daily Physician Progress Notes.

DAILY PHYSICIAN PROGRESS NOTES: Your primary RN can read you the notes for your case. You can also ask the primary RN to explain any daily lab work that is abnormal, the current list of medications and why they were ordered, and any high-risk diagnose that have been made. You have a right to request a paper copy of all this information.

You can use the whiteboard in your patient room to document questions you have.

After Discharge

13) Dissatisfaction

If you were dissatisfied with the care received, you can make a patient care complaint to Hospital Risk Management or the NC Division of Health Service Regulation.

14) Advocate for Hospitalized Patients

Always have the presence of someone else in the room.

The second person will be your eyes, ears, and intuition

Second person will ask many questions and should write down everything that is occurring like documenting in a journal:

Who and What: vital signs, or physical assessment, meals, cleaning, x-rays, Nursing visits, Certified Nursing Visits, MD visits (what kind of MDs: surgeons, orthopedic surgeons, hospitalists, Physician Assistants, Nurse Practitioners, Physical Therapy, Laboratory personnel, Wound Care Personnel, Case Managers, Others)

Medication Administration: What Drug, Purpose, How is it being administered (IV, By Mouth, Nasogastric Tube, Other)

Sick persons are too overwhelmed, sick, symptoms of illness, and exhausted to keep track of everything happening to them in the hospital.

15) You are entitled to a paper copy of your Hospital Medical Records after discharge.

Summary of Advocating for Hospitalized Patients:

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Medication Administration: What Drug, Purpose, How is it being administered (IV, By Mouth, Nasogastric Tube, Other)

Physician Visits – Who are they, what do they say

You can ask for a copy of the daily MD progress notes

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Asheville Watchdog is a nonprofit news team producing stories that matter to Asheville and Buncombe County. Andrew Jones is an investigative reporter at Asheville Watchdog where he focuses on issues at HCA Healthcare-owned Mission Hospital. Email aJones@avlwatchdog.org. To show your support for this vital public service go to avlwatchdog.org/donate.

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