I am entrenched in the Family Nurse Practitioner track, and have chosen to explore “effective communication” as evidence-based practices for all practicing FNPs.

This millennium encounters a new generation of healthcare, where words and phrases, such as Transparency, Accountability, Integrity, Excellence, Evidence-based Practices, and Patient Satisfaction are the key components that every healthcare providers and system strive to meet. It is through effective and patient-focused communications that the above factors can be met. Benefits of effective communication:

Fewer errors and more lives saved

• Higher patient activation and follow-through in response to patient instructions and outreach letters

• Improved staff and patient satisfaction

• Less waste in the form of phone calls, e-mails, and visits that resulted from unclear communication

• Potential for cost savings from increased adherence to treatment plans, resulting in a decreased need for hospitalization

Findings from an extensive body of research support that EBP improves the quality and safety of healthcare, enhances health outcomes, decreases geographic variation in care, and reduces costs (McGinty & Anderson, 2008; Melnyk & Fineout-Overholt, 2015). In the United States, EBP has been recognized as a key factor in meeting the Triple Aim in healthcare, defined as (Berwick, Nolan, & Whittington, 2008):

· Improving the patient experience of care (including quality and satisfaction)

· Improving the health of populations

· Reducing the per capita cost of healthcare

The above written aims are parallel with the core expectations of the role and responsibilities of the FNP. Patient compliance and expected outcomes and patient preferences as well as economics and reward for utilization are an integral part of EBP implementation; and may be achievable through effective and focused communications with the healthcare teams and the patients (reflectiononnursingleadership, 2016).

Reference

Long, J. D., Gannaway, P., Ford, C., Doumit, R., Zeeni, N., Sukkarieh-Haraty, O., & ... Song, H. (2016). Effectiveness of a Technology-Based Intervention to Teach Evidence-Based Practice: The EBR Tool. Worldviews On Evidence-Based Nursing, 13(1), 59-65. doi:10.1111/wvn.12132

Melnyk, B. M. (2015). Building cultures and environments that facilitate clinician behavior change to evidence-based practice: What works? Worldviews on Evidence-Based Nursing, 11(2), 79–80.

Bodenheimer, T., & Sinsky, C. (2014). From Triple to Quadruple Aim: Care of the patient requires care of the provider. Annals of Family Medicine, 12, 573– 576.

http://www.reflectionsonnursingleadership.org/Pages/Vol42\_3\_EBP\_Competencies. aspx 10/17/2016. Improving healthcare quality, patient outcomes, and costs with evidence-based practice page 3 of 8.

Riva, J. J., Malik, K. M., Burnie, S. J., Endicott, A. R., & Busse, J. W. (2012). What is your research question? An introduction to the PICOT format for clinicians. *Journal of The Canadian Chiropractic Association*, 56(3), 167-171.