

**Research Participants for the Neuromedicine Advisory Panel**

Monthly Meetings

**Aim 1. Identifying Quality and Safety Opportunities**

**The first aim of the Neuromedicine Advisory Panel is to assist our clinicians and care team members on ways we can improve care and identify quality and safety opportunities. Think back to your experience with the Neuromedicine services at UF Health.**

1. What is a common mistake you saw during your hospital/clinic visit?
2. Describe a time when you were concerned about your/your family member’s safety (i.e. lack of handrails, too few nurses to assist as needed)?
3. Was there ever a time you were not given a certain medication or you were unaware of what medication you were given?
4. How would you describe the atmosphere and/or attitude of the hospital/clinical environment?
5. Tell us why or why not you felt safe being treated here as a patient.
6. What did the provider or hospital staff do well during your or your loved ones visit? What could have they done better?
7. Where were you in the hospital/facility when you experienced discomfort or complications?
8. Describe the environment of the hospital/clinic (cleanliness, hospitality, etc.).
9. Did the experience meet your expectations? Why or why not?
10. What are some ways your/your family member’s clinicians and care team can improve?

**Aim 2. Increasing Palliative Care Referrals**

**The second aim of the Neuromedicine Advisory Panel is to help us understand your views and experiences with Palliative Care so we can increase referrals for patients who are in need of this service. Palliative Care refers to comfort care measures and can include Hospice Care. Even if you have or haven’t had experience with Palliative Care, you can still help us identify ways to improve the service.**

1. What is your understanding of Palliative and Hospice Care?
2. What is your view or experience with bereavement (grief, sorrow) counselling?
3. How did the nurse or physician/how would you want the nurse or physician to speak to you/your family about palliative care measures?
4. Describe the attitude and tone the nurse or physician had/should have when speaking to you about palliative care.
5. When was/is the best time and setting for the nurse/physician/social worker to approach you/your family regarding palliative care?
6. How was/can the palliative care offered to you respectful to your/your family’s cultural or religious beliefs?
7. How was/could the staff (be) sensitive to the concerns of you/your family regarding palliative care?
8. What type of emotional support did/would you/your family need/expect?
9. If your nurse and/or physician approached you/your family regarding palliative care, does this term make you nervous/anxious?
10. Would you prefer the nurse and/or physician use a different term for this type of service (e.g. comfort care/measures, support services)?

**Aim 3. Improving Nurse and Physician Communication**

**The third aim of the Neuromedicine Advisory Panel is to assist in improving communication with clinicians. Think back to your experiences with the Neuromedicine services and how the physicians, nurses, and other clinical staff communicated with you/your family.**

1. Describe the nurses’ communication with you/your family.
2. How often did the doctor communicate with you about your condition as well as your family?
3. How would you describe the communication between the nurse and the physician?
4. How well did the nurse/physician explain your diagnosis/treatment?
5. What level of empathy or compassion did the physician display towards you?
6. What level of detail did the physician address your questions?
7. To what degree were both the physician and nurses actively involved in the development of your treatment plan?
8. How informed was your nurse about your situation when coming in for a new shift?
9. How did the staff make you feel included in the decision making process?
10. How well did the staff provide you with explanations that were easy to understand?