



NATIONAL
RURAL HEALTH
RESOURCE CENTER

Improving Patient and Family Experience: New Ideas for Engaging Patients and Motivating Staff

Rhonda Barcus, MS, LPC

Program Specialist II

February 7, 2018

The Center's Purpose

The National Rural Health Resource Center (The Center) is a nonprofit organization dedicated to sustaining and improving health care in rural communities. As the nation's leading technical assistance and knowledge center in rural health, The Center focuses on five core areas:

- Transition to Value and Population Health
- Collaboration and Partnership
- Performance Improvement
- Health Information Technology
- Workforce



Improve Patient Experience / Motivate Staff

Webinar Agenda

- HCAHPS Introduction
- Intention/Connection/Action
- Using “5 Ps” proactively
- Moments of Kindness
- Staff Accountability:
A Coaching Model
- Effective Leadership Rounds
- Questions



‘How-to’ podcasts for your frontline staff to compliment these topics are available

HCAHPS: Hospital Consumer Assessment of Healthcare Providers and Systems

A standardized survey tool to measure the patient's perception of quality care by physicians and staff during the hospital stay



The Cause and Effect Flow to HCAHPS

Why?

- **Consumers:** Provides information helpful in choosing a hospital
- **Hospitals:** Offers incentives for to improve quality of care

How?

- **Consumers:** A way to compare hospitals
- **Hospital:** Provides meaningful data for improvement efforts



Survey Evolution

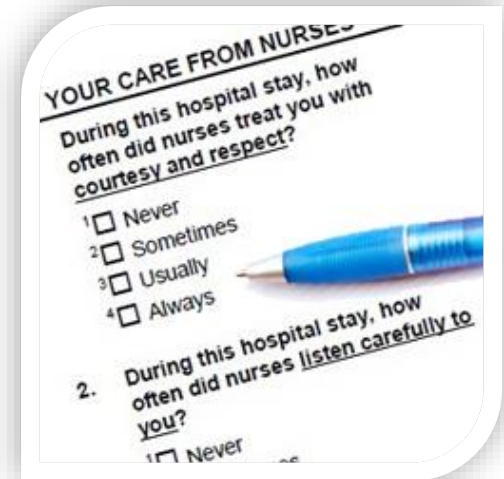
- 2002: CMS and AHRQ develop and begin testing survey items
- October 2006: CMS implements HCAHPS
- March 2008: First results publicly reported
- 2013: CMS adds 5 questions-3 concerning transition to post-hospital care, 1 about admission through the emergency room and 1 about mental/emotional health
- January 2018: 3 pain management questions replaced by 3 questions to focus on pain **communication**

[Source: HCAHPS Fact Sheet](#)



“Top Box” Scores Become Competitive

- Similar facilities’ patient responses are compared, resulting in a percentile ranking
- “Rate the Hospital” only a score of 9 or 10 counts
 - What would move a 7 or 8 to a higher rating?
- Only “Always” responses count
 - How can we impact “usually” responses?
- As you make improvements, so do other hospitals, therefore you must be considering ways to fine tune your patient experience



Improving Patient Experience: What Works?

- Frontline staff need to be involved with creating the experience (refer to podcasts)
- Focus on 2-3 “interventions” that are done with *excellence and consistency*
- The focus MUST be on creating a healing experience *for* the patient, not *to* the patient
- Create a process for continuous accountability and staff recognition



Refocus on the People, Not the Scores

- Change happens when we do the right things for the wrong reasons

- ["The Perfectionist" video clip](#)

The Process: *"Ignore the scoreboard... Just focus on doing your job at the highest level every single play and the wins will follow."*

- **Excellence and Consistency**



Intention-Connection-Action



Intention First! ([podcast](#))

What is my intention going into the patient room?



Connect Second! ([podcast](#))

Build a relationship with the patient before doing anything to them



Action Last! ([podcast](#))

After I'm clear about my intention and I've connected with the patient, only then do I carry out any tasks of the job such as checking vitals, medications or even talking about their diagnosis and treatment



Use 5Ps to Anticipate Needs

1. **P**ain
2. **P**otty
3. **P**ositioning
4. **P**ersonal needs
5. **P**atient **P**riority



- Decrease falls and call lights
- Use language that *suggests* what they might need, rather than just asking if they have a need
- Use the [12 min. podcast](#) to teach staff the model



Making 5Ps Even More Proactive

- Typical question: *"Do you need to use the restroom?"*
- Proactive language:
 - *"I'm about to give you pain medication which might make you sleepy. How about I help you to the restroom first so that you won't have to get back up?"*
 - *"I know you are used to getting up on your own but since you are connected to the IV, let me go ahead and help you to the bathroom while I am here so that I can make sure you are safe."*

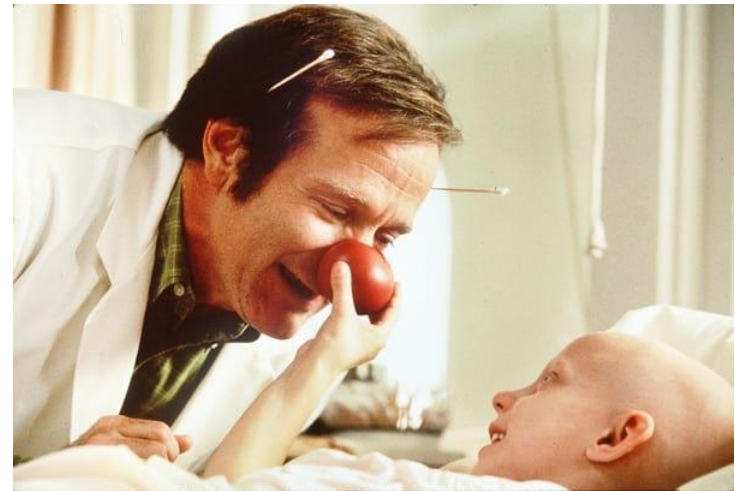


Moments of Kindness

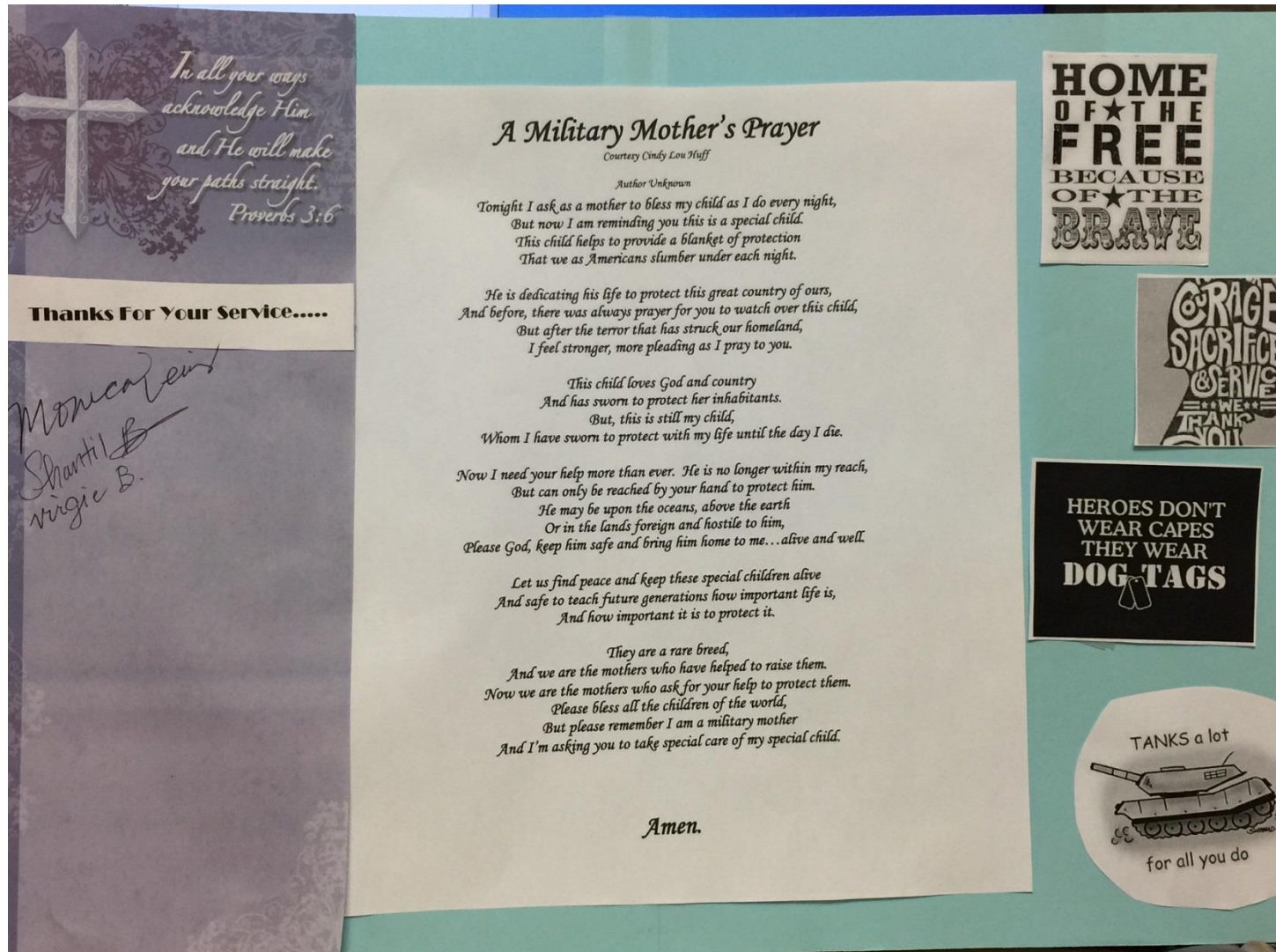
- Individual kindnesses shown to a patient or their family that shows we care and we see them as an individual
- They are usually small gestures that lead to someone saying, “Wow, that was so nice.”

They are not:

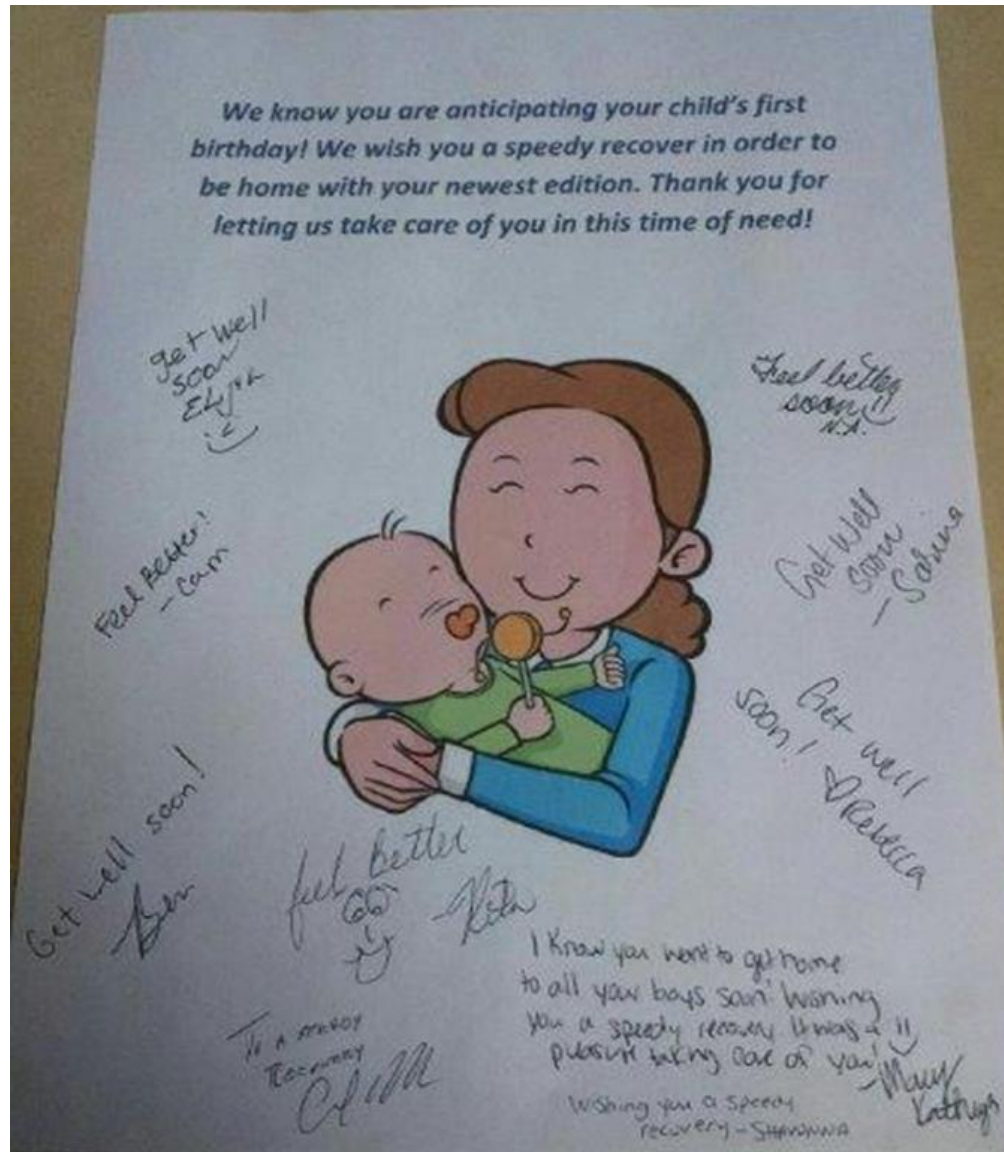
- Service recovery
- Normal activities that any patient would expect



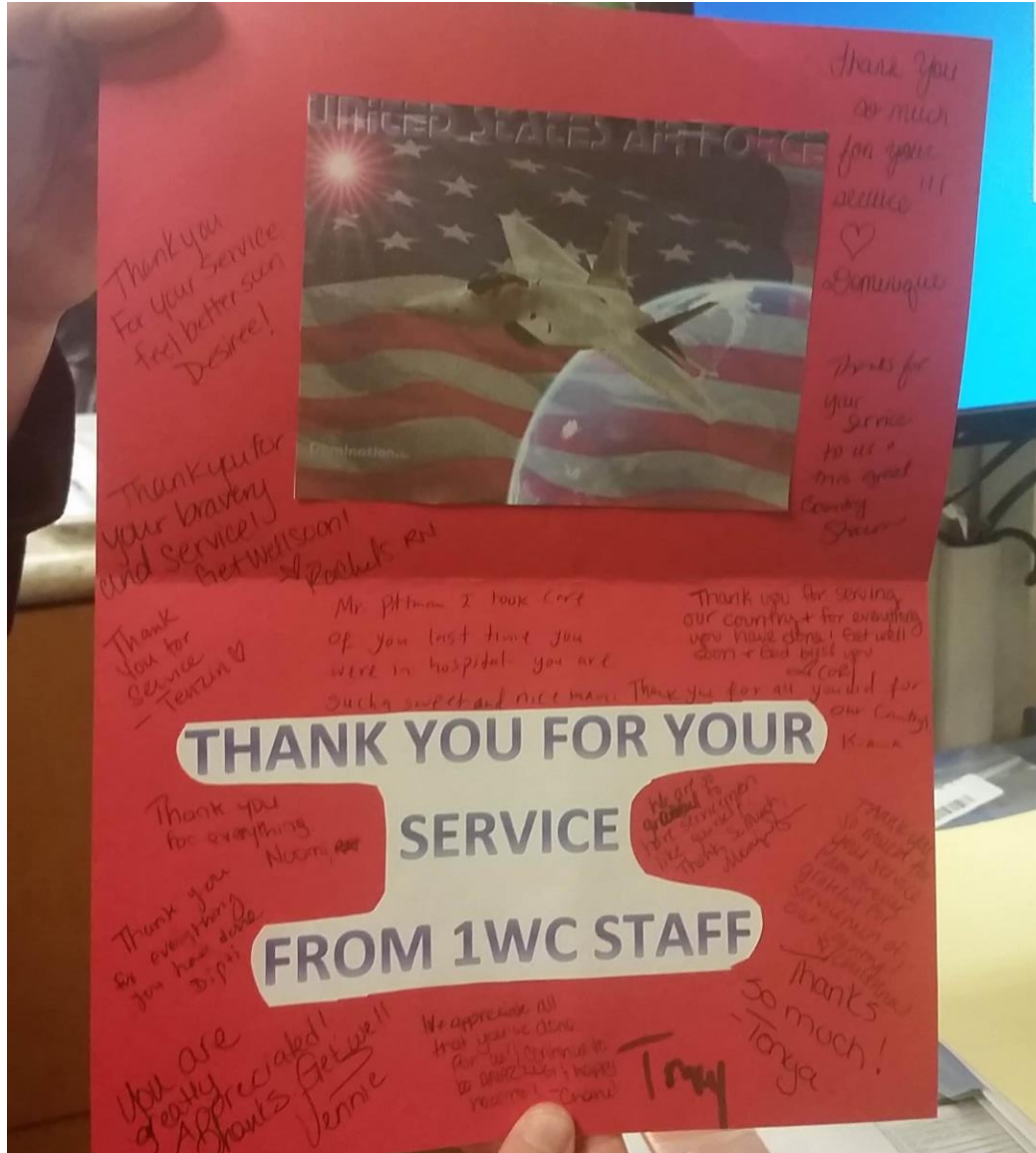
Kindness Example 1



Kindness Example 2



Kindness Example 3



All-About-Me Board

IT'S ALL ABOUT ME!

I PREFER TO BE CALLED

I AM FROM

I FEEL CALM AND RELAXED

MY FAVORITE SHOW/MOVIE/MUSIC IS

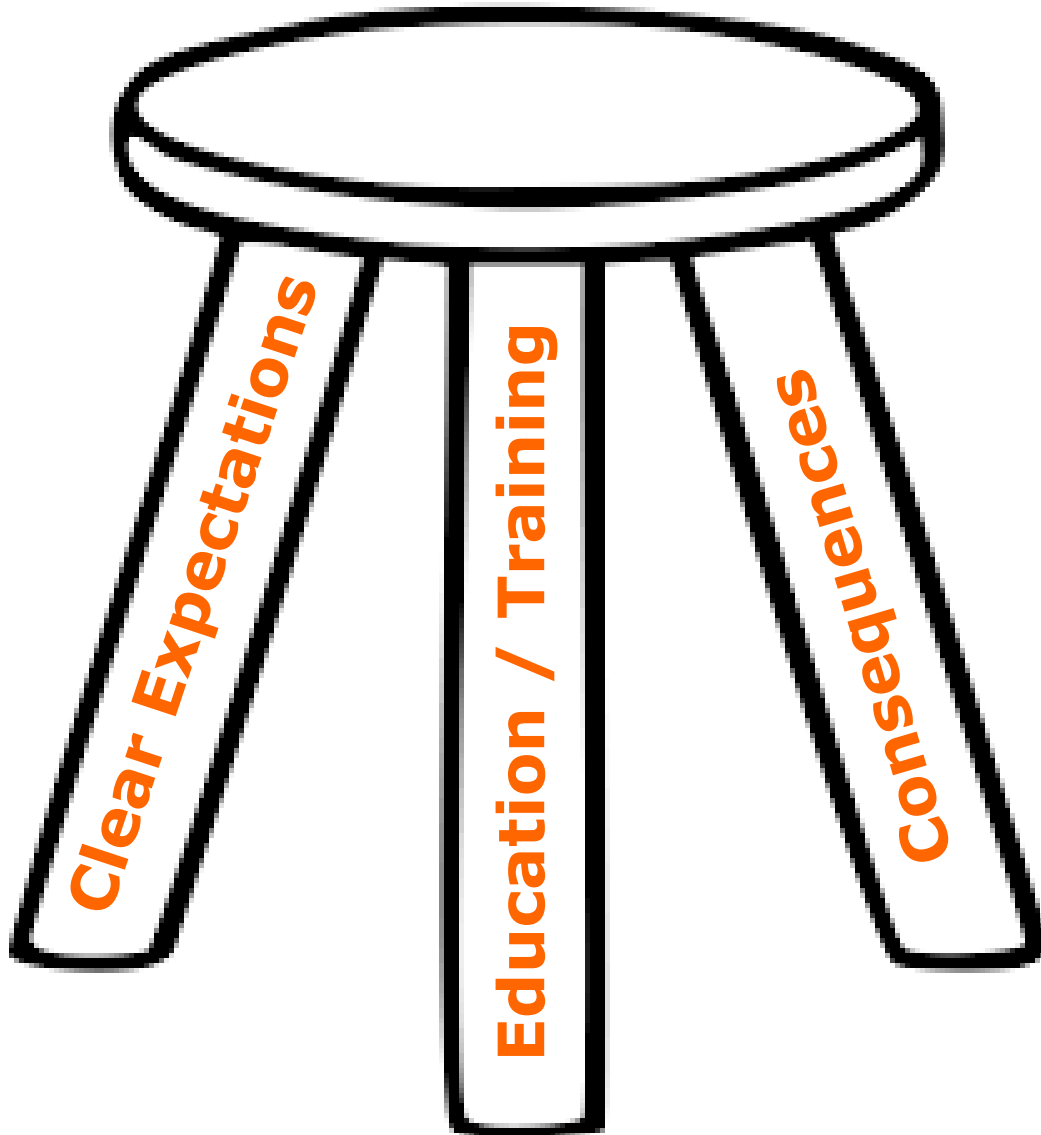
I ENJOY

I AM HEARING/VISION/SPEECH IMPAIRED

I USE A CANE/WALKER/WHEEL CHAIR



Closing the Loop: Accountability



Use the [14 minute podcast](#) to learn a simple but effective coaching model for leaders to improve staff performance.



Coaching Model: Question 1

"What went well just now when you were caring for Mr. Smith?"

- **Focus on staff talking about what they feel proud about.** Leader then adds their observations about the positives
- Do not move on to the next question until this has been discussed. Staff need to hear from you that you recognize the positives. **Focus on parts that really impact patient experience such as how they connected with the patient, a kind tone of voice and NOT on the task** of the job such as giving medication



Coaching Model: Question 2

- ***"Is there anything you would do differently?" (and why?)***
 - This specific language is very important and changing just one word can change how it's received by a staff member
 - If there is an obvious concern but the staff member doesn't identify it, you need to address it but use coaching wording such as ***"Tell me how you could have made a personal connection with that patient while you were in the room?"***

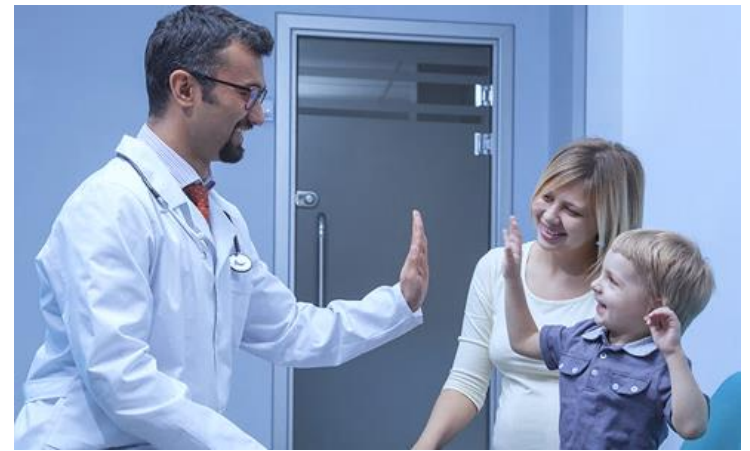


Coaching Model: Question 3

- ***"How can I help you with...?"***
 - This question refers to your offer to help the staff member to improve in the way they provided service to the patient
 - If you coached them on their tone of voice, then you are asking them what they need from you to continue to work on this
 - This question is not meant to be an offer to do a task for the staff member; it's about coaching

Effective Leadership Rounds: Create a Healing Moment

- Remember Intention-Connection-Action
- Connect with the patient
- Consider sitting by the bedside. Do not stand in the door with a clipboard.

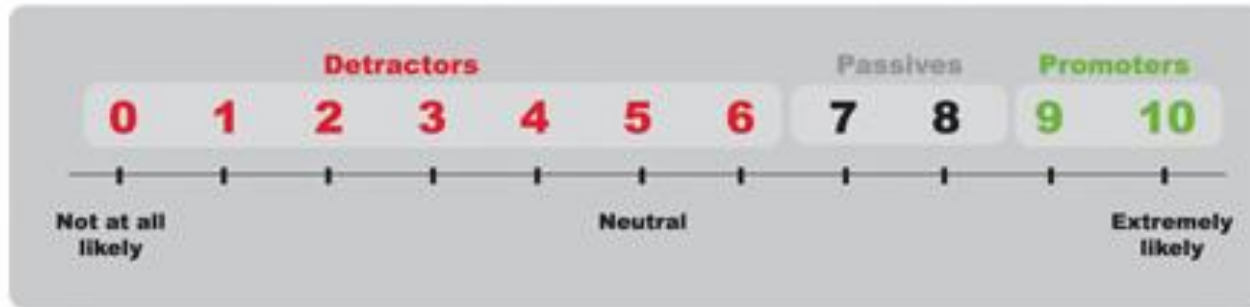


"Is it okay if I visit with you a few minutes?"

"I'd like to hear how your stay with us has been."



But They Said Everything Was “Fine”!



- “Fine” is an 8 and “great” might be too
- Dig deeper. ***“Good. Can you tell me what has made your visit with us great?”***
- If patient looks hesitant to “tell” on staff, pull up a chair if you haven’t already and let them know you really would like to hear their thoughts about what would have made the stay better
- You might be able to do service recovery before they leave



Leave a Lasting Impression

After a very busy shift, a veteran patient called me to his bedside and gave me a pin that read "120%." His sergeant had given them the pins in basic training to encourage them to go above and beyond at all times. He said he'd watched me during his time in the ED, and I had truly earned the pin that day. It brought tears to my eyes. I still have the pin, and am honored to wear it at my current job.

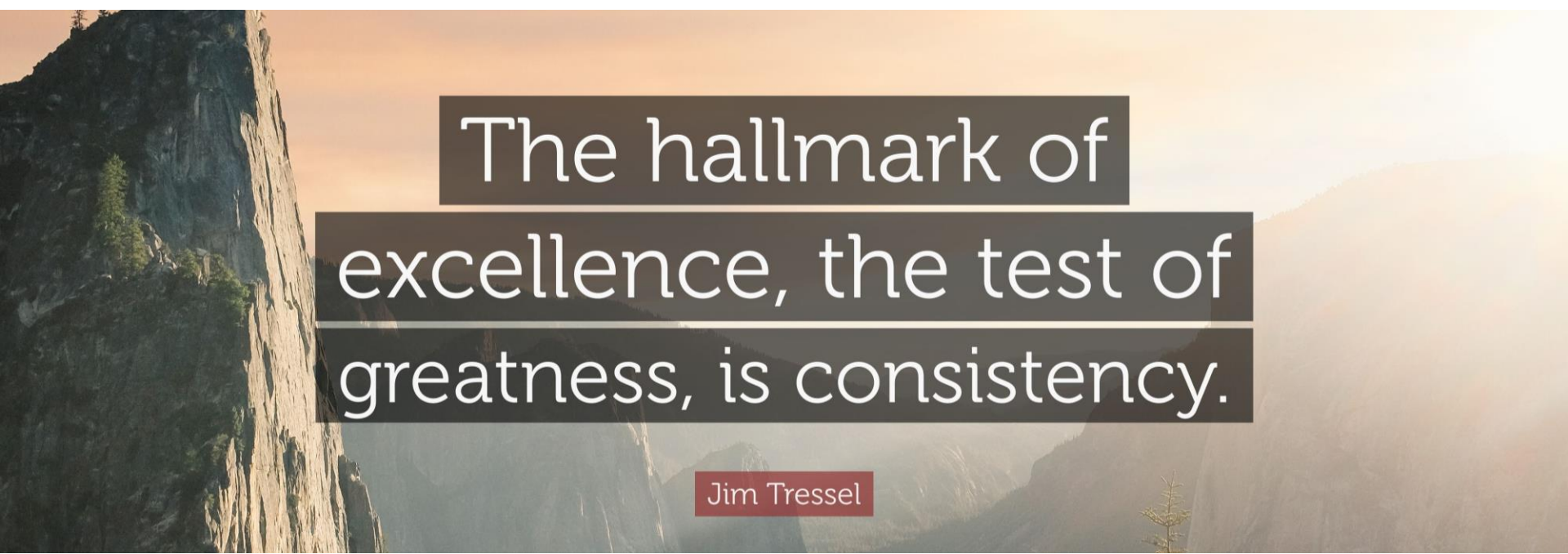
Maureen Sullivan-Tevault, RN,MPH,BSN,CEN, Pinellas Park, FL

- Thank the patient for their honesty
- Let the patient know that staff love to see their names in the surveys
- Provide a way for the patient to reach you with further thoughts and comments
- Provide recognition to staff members who excelled and have a follow up conversation if needed with staff or departments when there are concerns



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Important Take-Aways



The hallmark of
excellence, the test of
greatness, is consistency.

Jim Tressel

- Focus on 2-3 interventions
 - Hardwire them and revisit when/if scores drop
- Create a healing experience



Podcasts to Aid Implementation

- Use the first two podcasts to help educate frontline staff in meetings and trainings. The third podcast is a coaching model that leadership can use to close the loop of accountability.
 - [Podcast 1](#): Intention-Connection-Action
(13 minutes)
 - [Podcast 2](#): The Five 'P's to Anticipate Needs
(12 minutes)
 - [Podcast 3](#): Coaching Model to Close the Loop of Accountability (14 minutes)





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Contact Information

Rhonda Barcus, MS, LPC

Program Specialist II

904-321-7607

rbarcus@ruralcenter.org

Get to know us better:

<http://www.ruralcenter.org>

