Driving a Culture of Continuous Improvement

Linking Patient Satisfaction & Employee Engagement

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Format

- Presentation
- Q&A
Questions

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Presenter

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Improving Our Patients’ Experience

The Continuous Journey

- 1998 BWH/FH Affiliation “provide the right care in the right place for the right cost.”
- 2001 Faulkner began to see a trending decline in patient feedback using Press Ganey scores.
- Leadership strategic goal – to investigate the reasons for the decline.
- Felt patient scores didn’t reflect the high quality of work.
- Concerned that with growing volume, were losing reputation of being the “Friendly Faulkner.”
Growing Pains

*Increased patient volume and numbers of staff*

**FY 1998**
- ADC- 87 patients
- OP visits- 137,600
- Surgical volume- 5700
- ED volume- 19,921
- Staff- 850

**FY 2009**
- ADC- 102 patients
- OP visits- 209,486
- Surgical volume- 10,360
- ED volume- 25,673
- Staff- 1500
Press Ganey % Rank compared to all hospital national database
What did we do and what were the results?

- Investigated local/national “Best in Class” strategies; created list of “must haves.”
- Investigated improving systems (mechanic rounds in pt. rooms, IP room renovations, etc.) based on patient feedback.
- Developed C.A.R.E. Standards; added to annual performance reviews.
- Implemented First Touch™ Practice Model (‘06)
First Touch™ Practice Model

"First Touch™ focused on an organizational development approach called Appreciative Inquiry and was designed by a team of line staff and team taught to remind staff of behaviors to increase amount of time they spent with patients at the bedside.” Cori Loescher, AVP, IP Nursing

- This strategy was eventually rolled out to all direct caregivers and continues to be used to reinforce behaviors (i.e. C.A.R.E. Standards) indicative of the “Friendly Faulkner.”
Seeking Staff Feedback

- One “Must Have” – to develop a staff survey process to get feedback from all staff.
  
  “I was concerned that the staff would generate a list of needs that we wouldn’t be able to accommodate…we needed to change our mindset and think about the positives of doing a survey.”

David Trull, President
Seeking Staff Feedback (cont.)

- Instead of using a traditional employee survey, we selected a company- Leadership Research Inc. which focused us to think in terms of employee engagement or an individual’s involvement, commitment and enthusiasm for work.

- We selected an instrument that focused on leadership credibility*

  “The key to a successful survey effort is to understand the voice of those responding and link that voice to action.” Catherine Flavin-MacDonald, Principle, LRI

Importance of leadership credibility, see *Good to Great*, Jim Collins
An *engaged* culture is different than a *satisfied* culture

- **Engagement** - “A promise to be present; a state of being in gear”
- **Satisfaction** - “Fulfillment of a need or want; enjoyment or gratification”

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- Engagement is commonly measured by cognitive, emotional and behavioral changes that show the employee in an advocacy role**
- Satisfaction is most commonly in relation to benefits, working conditions etc.

**Importance of “engagement vs. satisfaction” see *It’s Your Ship*, Michael Abrashoff**
2005 Survey Results and Follow-up Actions
N=48% return rate

Three key areas for improvement

- More and Better Communication
- More Collaborative Problem Solving
- Ensure competitiveness of work environment

Select Action Steps

- Quarterly Town Meetings
- Enhanced internal communication vehicles
- Better access to managers
- Concerted effort to develop and recognize
- Involved staff in selection of new technology
- Increased Tuition Reimbursement (40% increase in use)
Some Progress

- Began seeing positive results in Press Ganey and HCAHPS scores
- Action steps resulting from staff and patient feedback included: *new amenities, TV enhancements, enhanced parking, expectation that staff use C.A.R.E. standards.*
- All happened at the same time; implementing an enormous amount of new technology, enhancing patient safety and smoothing staff workload.
Press Ganey % Rank compared to all hospital national database
Continuous Improvement isn’t Linear- it's Cumulative

- ‘07 - re-survey staff (*Count Me In campaign*); assess progress
- Leadership and middle management made a commitment to listening, owning and acting on patient and staff feedback

Key point– Leadership Development is imperative
Nursing and Direct Caregiver Examples

- **Faulkner Nurse Newsletter**
- Nursing Town Meetings
- New Technology with staff input (*required instruction*)
  - SmartPumps (2 hrs.), EMAR (2), Omnicell (2)
  - Bed Management, Acute Care Documentation (1)
  - Additional Telemetry Unit (16)T=2211 hrs.); Vocera
  - Developed patient education material for roll out of new initiatives (i.e. RRT)
- Bedside report handoff
  - Better communication
- Ideal Patient Experience and Wise Leadership

**Focus on Management and Staff Accountability**
2007 Employee Survey
N=51% return rate

• All items with history in this dimension are up a meaningful amount since 2005.

• All predictors of Satisfaction and Commitment have increased a meaningful amount since 2005.

“I feel I can grow and develop...”

“Faulkner Hospital is a well managed organization.”

“I would feel safe...”

“My work gives me a feeling of personal accomplishment.”

“Faulkner Hospital is committed to improving the service experience...”
Strategies to Engage Staff

Importance of staff feedback

- Focus on staff input for the design and selection of new technology
  - “Faulkner Hospital seeks and listens to input from staff when it comes to technology initiatives” (2005- 21% favorable; 2007- 45% favorable; 2009-52%)

- “Skill of Nurses”
  - (2007-89% average; 2009 PG average-91%)

- 2009 Survey- Willingness to Recommend- up 8 points or 82%! 
Impact of these steps: from staff

“Omniceill is great and it saves me time. My patients don’t have to wait and if there is an allergy- I know it...Things are so much better now (then 3 years ago)...my Manager is right here and she is a resource to all of us. She talks to the patients too...It is hard to think about the past...it was like being in another country, but now I work in a hospital I can recommend to my friends.” Lillian Go, RN, 6N
Impact of these steps: from staff (cont.)

“Smartpumps have made a real difference. We had input into the selection, set up and design of the library. Before it felt like the decision was made top down. The Pumps and other changes give me more time with my patients and that is a real satisfier...My new manager makes sure that we all perform at a high level...things get addressed right away. We take great care of patients and treat them like family. We are big enough to do big medicine and small enough to get a patient a cup of tea or sit with a family who’s grieving. We are big enough to have the resources and experience to do important patient teaching and small enough to have the time.” Jeannie Hutchins, RN, CL, 6S.
Press Ganey % Rank compared to all hospital national database
Response Rate = "827 or 56% all employees - removing non-scheduled per diems = 69.9% response rate"

- **Raw data review shows:**
  - Increase in employee commitment/engagement questions
    - would recommend
    - would feel safe being a patient
    - intend to stay
✓ Global Ranking
✓ Communication with RN
✓ Communication re: Discharge
Success was guided by four major steps in the right direction

- Better Communication ("Link and Label")
- Leadership and staff accountability (Poor Performance Not Tolerated increased by 10%)
- New technology with staff input
- Leadership and Management commitment to listening and acting
Leadership TIPS for Improving Engagement

Lessons Learned

✓ Be visible
✓ ASK for opinions
✓ Listen
✓ When asking for feedback- ask for solutions
✓ Take Action
✓ Follow through- Link and Label
✓ Create structure and forum with accountability
✓ Use/present real data
The Journey Will Continue

Next Steps

- Be ever mindful of patient/staff experience when rolling out any new initiatives
- Increase employee involvement (i.e. using *Toyota Production System- Lean training* to streamline workflow, reduce rework etc.)
- Involve more staff in the Patient/Family Advisory Council
- Continue to study the link of employee engagement and patient safety
The Voice of the Patient Continues
Recent patient feedback to the Rehab Department about the continuous progress of the journey

“My name is Brian Henderson*. I had a partial knee replacement on my right knee on April 7th 2008. The operation and recovery went very well... so much so that I was able to comfortably hike 3,500 foot Mount Chocorua in New Hampshire on August 13th just four months after the surgery. The hike and view at the top were beautiful and I had no pain afterwards, which is something I had suffered with for over 25 years before. It is with great joy that I can be active and do the things I like to do with my family and without pain. It has improved my quality of life and I wish to thank you all for that you did...your high quality care and concern and changing my life for the better. “

*Patient of Dr. Fitz
Questions?
Upcoming Webinars, Programs, Services

- **February**
  - PCOI: Uses and Access: 2/3
  - Health Literacy and Patient Education in PC: 2/17
- **March**
  - Understanding and Treating Obesity: 3/10
  - Pediatric Guidebook: 3/24

**Program and Course Information:**
[www.massgeneral.org/stoecklecenter/pec/course_catalog](http://www.massgeneral.org/stoecklecenter/pec/course_catalog)

**Consulting Services: Patient Experience of Care**

Paula Ricci, pjricci@partners.org
Wrap-Up

- Today’s session - available online.
- Evaluations

Thank you for your participation!