It Takes a Team

...engaging frontline physicians to improve the journey across the continuum of care.

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Vice Chair of Clinical Affairs, Department of Surgery

Theresa Varughese BSN, RN, CPXP
Patient Experience Officer
Our Team

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Kyle Lancaster
MHA
Strategic Project Coordinator
Greenville Memorial Medical Campus
Objectives

1. Describe methods to build a service line strategy for improvement across the continuum of care.

2. List 4 approaches to engage and activate physicians in patient experience work.

3. Learn approaches to implement Nurse/Physician rounding as a behavior to improve the communication domains on HCAHPS.
Challenges to Health Status in South Carolina

1. In the past 5 years, *children in poverty increased 28%*
2. South Carolina ranks *47th for low birthweight* (10%, compared to the national average of 8%)
3. South Carolina ranks *43rd for diabetes* (12%, compared to the national average of 10%)
4. South Carolina also ranks *43rd for smoking* (21%, compared to the national average of 18%)
5. South Carolina ranks *47th for high cholesterol* (42%, compared to the national average of 38%)
Who We Are

Greenville Health System and Palmetto Health became Prisma Health in January 2019.
USC School of Medicine Greenville
Health Sciences Center Campus
Prisma Health—Upstate: Regions We Serve

• 16,000 employees in the Upstate (30,000+ across SC)
  • Largest employer in Greenville County
  • 1 in 19 jobs in Greenville and 1 in 36 jobs in the Upstate

• 8 Campuses

• 1,756 beds

• 12 Specialty Hospitals

• 746 bed Tertiary Care Center

• More than 150 Practice Sites
Surgical Strategy Across the Continuum

Background

How did this start?

Why did we do it?
Initial Meeting

- Patient Experience Champion for each division
- Discuss “Across the Continuum”
- Define Champions Roles
- Provide guidelines, structure and support
How Do We Measure?

SURVEY INSTRUCTIONS: You should only fill out this survey if you were the patient during the hospital stay named in the cover letter. Do not fill out this survey if you were not the patient. Answer all the questions by completely filling in the circle to the left of your answer. You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

☐ Yes
☒ No ← If No, Go to Question 1

Please answer the questions in this survey about your stay at Greenville Memorial Hospital. Do not include any other hospital stays in your answers.

YOUR CASE FROM NURSES
1. During this hospital stay, how often did nurses treat you with courtesy and respect?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

2. During this hospital stay, how often did nurses listen carefully to you?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

3. During this hospital stay, how often did nurses explain things in a way you could understand?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

4. During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

☐ I never pressed the call button

YOUR CASE FROM DOCTORS
5. During this hospital stay, how often did doctors treat you with courtesy and respect?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

6. During this hospital stay, how often did doctors listen carefully to you?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

7. During this hospital stay, how often did doctors explain things in a way you could understand?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

THE HOSPITAL ENVIRONMENT
8. During this hospital stay, how often were your room and bathroom kept clean?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

9. During this hospital stay, how often was the area around your room quiet at night?
   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

YOUR EXPERIENCES IN THIS HOSPITAL
10. During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom or in using a bedpan?
    ○ Yes
    ○ No ← If No, Go to Question 12

11. How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?
    ○ Never
    ○ Sometimes
    ○ Usually
Physician Champion Qualities/Attributes

- Genuine and trusted leader among peers
- Role model
- Clinical Outcomes - strong clinical background and positive quality outcomes
- Ability to work well with others (e.g., surgical outcomes require a team effort)
- Devoted to pursuing quality and excellence
- Multidisciplinary approach
- Strong interpersonal communication history
- Able to share compelling ideas, deliver difficult feedback and communicate to influence
- Enthusiastic
- Demonstrates flexibility, relatability and a general good disposition
Physician Champion Roles/Responsibilities

• Serve as resource
• Knowledgeable in understanding quality data from CAHPS Core
• Shares quarterly data with division
• Creates, implements and evaluates action plan
• Collaborates to provides orientation to new Providers on Patient Experience data and best practices for CGCAHPS
• Collaborates with Office of Patient Experience
• Attends and presents at Patient Experience steering committee quarterly
## General Surgery

### Interventions/Behaviors

- TBD in collaboration with Patient Experience Department

### Location/Setting Composite

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<th>Trending of Rating 9-10</th>
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**Color Coding**
- Meets or Exceeds Target
- Less than 5% Below Target
- More than 5% Below Target
## General Surgery

### CG CAHPS

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<th>Provider explain in way you understand</th>
<th>Give easy to understand</th>
<th>Know important info medical history</th>
<th>Show respect for what you say</th>
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## Neurosurgery

### June YTD

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### Interventions/Behaviors

- TBD in collaboration with Patient Experience Department
### Neurosurgery

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<th>CG CAHPS</th>
<th>Overall Doctor Rating 9-10</th>
<th>PHYSICIAN COMM QUALITY</th>
<th>Provider explain in way you understand</th>
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**Key**
- 0-24th %ile
- 25th-49th %ile
- 50th-74th %ile
- 75th-89th %ile
- 90th-100 %ile
The Work

- Physician Champion meet with PXO/Analyst
- Update Surgical Steering Committee
- Build accountability
- Presentation to Surgical Steering Committee
- Build Relationship
- Review data, identify priorities and make a plan
FY19
Surgery Department
PX Plan

Primary Outcome
(Measure)

CGCAHPS Rate
Provider 0-10
• Target 1% improvement

OAS CAHPS Rate
Facility 0-10
• Target 2% improvement

HCAHPS Rate Hospital
0-10
• Target 3% improvement

Communication
• Show respect for what you had to say
• Treat with courtesy and respect
• Provider listen careful
• Provider spent enough time
• Easy to understand instructions
• Clerks/receptionist helpful

Primary Driver

Communication
• Staff treat with courtesy/respect
• Staff ensure you were comfortable

Teamwork
• Degree staff worked together to care for you

Primary Driver

Changes to Test

• Foundational behaviors:
  • AIDET
  • Transparency Journey
  • Triple S – Sit, SOFTEN, Silence
  • Champion meeting quarterly

• Huddle with staff
• Setting expectations for comfort measures
• Champion meeting quarterly

• MD Nurse/Rounding
• Resident Strategy
• Data/Comment Sharing
• AIDET
• Teach-back
• Champions meeting quarterly

Primary Driver

Teamwork
• Degree to which staff worked together to care for you
The Ask: Inpatient

- Nurse MD Rounding
- Engage Residents
- Surgical Units Data Review
- MDOT (Multi-Disciplinary Operations Team) * added Nurse/MD rounding to agenda monthly
MD/Nurse Rounding Why?

- A singular message regarding the plan and goal
- Improves quality, safety and experience
- Address questions with nursing at bedside who can then reinforce the discussed plan with family
- Decreases confusion, decreases phone calls, improves communication and compliance
Role of MD

- **Contact** the unit before arrival or when arrived
  - Vocera
  - Telemedic
  - Stop at desk
  - Push call light

- **Introduce** team to nurse before entering room

- **Introduce** team to patient

- **Utilize** PATIENT format elicit Nurse Feedback and clarify questions
MD/Nurse Rounding Format

Nurse/Physician Rounding Format

P = Plan of care discussed
A = Anticipated discharge/transfer reviewed
T = Tests and diagnostics results discussed
I = Issues/concerns identified by patient
E = Explanation of medications/diagnosis
N = Nurse feedback
T = Thank patient
Role of Nurse/Charge Nurse

- **Respond** to notification
  *if unable to round charge nurse will round*

- **Join** physicians on round

- **Lead** round using PATIENT format

- **Advocate** for patient/family

- **Update** communication board with plan of care, DC date and care team
Role of Unit Secretary

- **Receive** notification from physicians upon arrival  
  *Vocera* nursing team

- **Recognize** physicians on unit  
  *Vocera* nursing team
Measuring Progress Nurse/MD Rounding

• Monthly round table
  ➢ Unit level data drill down
  ➢ Strategies and barriers discussed
  ➢ Senior Leader Available to remove barriers

• Agenda item – MDOT

• New question on IROUND
  ➢ February 2019
The Ask: Medical Practice

- Review data and comments monthly
- Develop a PX key driver improvement plan
- Sit
- Transparency Journey
- Pilot-MDOT for the Medical Practice
Medical Practice Engaging Physicians

MD Approach

1. Reach out and make physical contact
2. Set clear expectations of roles and asks of time
3. Be the example
4. Be an ear for frustration
Medical Practice Engaging Physicians
PXO Approach

1. Go to them

2. Engage their medical group-home/base

3. Experience mapping
The Ask: Ambulatory

- Educate
- Set Expectations
- Help with Anesthesia question
- Communicate around delays
Measure of Success

“Measure of Success”

“I won’t round without the nurse”

“I get less calls”

“it’s a best practice”

“allows the patient and care team to collaborate”

“improves communication with patient”

“patient more aware of dc plan”

“my days are better and more efficient”

“patient comments—feel more safe knowing they are all on same page”

“Improved nurses satisfaction”

“Better team work”
Quantitative Results
Pre and Post Implementation

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Metrics Used
- Physician Practice: ‘Rate Provider 0-10’ Question
- Ambulatory Surgery: ‘Rate Facility 0-10’ Question
- Inpatient: ‘Rate Hospital 0-10’ Question
## Success Stories
### Pre and Post Implementation

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### Urology

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## Success Stories
### Pre and Post Implementation

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Looking ahead...to next steps

• Reenlist champions

• Share Wins

• Further work on connection to quality, safety and experience

• More Robust Resident Strategy

• Senior Leadership Support
Questions
PRISMA HEALTH™