

**TOPIC CALL NOTES**

March 26, 2020

***Addressing human experience and your most crucial efforts in the face of COVID-19***

Moderator: Jason A. Wolf, Ph.D., CPXP, President & CEO, The Beryl Institute

**Question: What lessons have you learned in facing this crisis and what key ideas do you believe could be of help to others?**

Susan Osborne: Take care of your staff first and foremost

Sandy Rush: Patient experience leaders need to step up and offer volunteer efforts to be on initial task forces and help with messaging and overall response – get people involved early to get ahead of the problem.

Linda Biondini: Stay current; change often; communicate a lot

Jen McClean: Don't overwhelm the staff and leaders - consolidate messaging, prioritize. Leverage daily huddles for core communication, people don't have time for email.

Toni Hightower: I think a Virtual PX handbook- how do to PX in crisis etc..

Sydney Peters: Overcommunication is key during this time! We are using as many channels as possible to reach patients and are constantly updating them. We've also seen our employees come together to move things forward at an incredibly fast pace

Jenna Livingston: The patient experience is a reflection of the health of our teams.

Susan Osborne: We have closed all surgical areas and have redeployed the staff and have made commitment to continue to keep them paid.

Anne Brown: Clear, intentional communication for staff, providers, and community. There is so much conflicting information on social media, etc.. need to keep everyone grounded in facts

Lisa Pierce: We have different departments doing many different things that are overlapping- we need to be in the process of making a central point to know what each are is working on and support each other!

Richard Satterwhite: making sure our staff and leadership are all on the same page.

Priscilla Marin: I work in a cancer center and I have learned that our patients are much more resilient than what we give them credit for! Right now, it's simply providing them with the support they need

Beth Ryther: Communicate, communicate, communicate.....you can't share the messages enough.

Karin DuBois: virtual meetings can often be as productive as in person meetings

Dawn Crawford: The rumor mill is rampant; fear is high so clear communication is critical

Jill Golde: Staff and Providers need an oppy to share what they are experiencing and give and receive support

Linda Biondini: Rounding is essential; small thanks mean a lot; show you really care.

Joy Zorsch: Elective surgery staff are checking temps at entrances

Allison Chrestensen: I think a focus on compassion is critical. There is so much criticism of people's actions (or inaction), and it drives us apart, during a time when we need cohesive & coordinated effort.

Thomas Herrera: I have become aware of how engaged, informed and passionate our healthcare workforce is. I have seen and learned how strong our community is.

Renee Rieder: Don't assume technology skills. Be prepared to teach how to incorporate in technology

Hilary: When we stood up our screening stations rapidly, our teams were scared still so our culture of compassion was overtaken with our own team's fear. We didn't welcome people like we usually do. This took some support to our teams to help them process their own emotions. We would have done this better if we prepped more in advance for the screening.

Lorena Rivera: Mindful practical tips

Ellen Harry: "We are all in this together", recognizing we may not have all the answers, validate feelings, plan and communicate

Adey A. Betre: check in on staff - provide support as needed

tracy martinez: be extremely patient, maintain communication.

Hilary: Make sure your teams see your leaders faces and that your leaders demonstrate compassion and to be raw.

Richard Satterwhite: We have twice daily virtual leadership huddles to share what worked and didn't' throughout the day.

Debbie Oliphant: remain fluid, information is changing daily, and you need to be able to change with it

Beth Ryther: Focus on the resiliency of staff

Ann Dunham: Yes - it takes continuous support to all staff. That is for non-clinical and clinical

Tracey Dwyer: It's time for informed and knowledgeable "soft skills" to come to the forefront.

Jen McClean: Focus on what is in our control, create avenues for outlets for coworkers to express grief/concern, recognize and celebrate anything you can, encourage and empower innovation by front line teams....lean on steroids

Sarah Gilstrap: People want to help - tell them how. Communities are outpouring support, give them ways to contribute.

Kerry: make sure families and care givers are kept in the loop of the patients' status. today a patient said her caretaker didn't know what was going on because she didn't know how to explain it to her. So the nurse was able to call and give her an update!

Angie Meridionale: I agree - be okay with change --- it is the only consistency in healthcare!

Rachel Norrick: I provide patient experience short videos to my group of advocates every two weeks and it seems to really pick them up. We role play as well based on previous negative or challenging experiences.

Leon RANSOME: Go the extra mile to keep every employee group informed and engaged. ie, Registration, housekeeping, food services, etc. Don't assume this population is in tuned to all that is happening.

Terri Ellis: We have had a Covid task force that has been working since January. It is now incident command. Every morning every dept meets @0900 for updates from each department. Continuous communication through emails and our employee intranet. Videos from our CEO.

Kimberly N: I have a colleague that has created a booklet with all of the positive patient comments along with a prayer wall on a white board that they have left in the hallway of the hospital.

Jen McClean: Visitor restrictions doesn't remove need for family caregivers to remain a respected member of the care team. Need to enable digital interaction at the bedside....don't forget 80%+ of patients have a device so focus on BYOD not just buying tablets and deploying new tech

Sarah Gilstrap: I love this Peter Drucker quote: "The greatest danger in times of turbulence is not the turbulence; it is to act with yesterday's logic."

Angie Meridionale: Additionally, while COVID 19 is probably the hardest thing we have faced; we have faced many difficult circumstances in healthcare - be okay with speaking up, with cultivating innovative ideas, looking at other facilities to see what are they creating, remove the boxes to do things different - this is so different than anything. Check on each other and be okay with not being okay.

Ann Dunham: Remind staff to decompress at the end of the day!

Debbie Oliphant: Once we went to no visitors, training staff how to communicate proactively with family/support person rather than waiting on them to come and ask.

Lauren Leach: While we are all wearing masks, I would love some tips on making up for that essential piece of nonverbal communication- our smile.

Jen McClean: Community collaboration and patients/families seeing competitors working side by side in partnership with public health resources is creating hope in an environment where our media is filled with messaging of lack of collaboration among agencies at the federal level

Angie Meridionale: and how it feels as a healthcare worker going home exposing things to their families!

Priscilla Marin: maybe drawing smiles on our surgical masks can help for expressions :) )

Sarah Gilstrap: Love that Jason - empower and enable your staff to support one another, to do what's right, to make decisions for the greater good

Susan Osborne: Put a smile on the Communication board and mention it we have a wonderful team caring for you.. I know you can't see our smiles. We love what we do..

Karen Byrnes: Lauren, I hear you about the smile....smile so big it shows in your eyes or draw the smile on the mask :) )

Josanna Kiggins: In person communication shouldn't be taken for granted. Having to email my teams who are now at home reminds me of how much I appreciate our time together in person. Less email messages and increased in-person conversations (when possible) builds connection.

Leon RANSOME: Lauren, I touched on eyes being the window to the soul, therefore when rounding, I'm looking for smiling eyes. It has been received well.

Angie Meridionale: I think then checking on support staff who feel they aren't useful right now

Laura Anning: We are in the process of compiling resources for our team members. I wish this had already been completed. For example, there are a lot of free services. including virtual yoga for healthcare workers, free meditation classes etc.

Sandy Rush: Leaders at employee entrances thanking them as they come and leave work

Bridget Stahl: Lauren, I'd pay even closer attention to tone of voice

Debbie Bonin: Eye contact, speak slowly, tone of voice, listening all important for communication

Jen McClean: Invitation for community manufacturers, suppliers, services to be a part of the solution. Many innovative ideas from outside the healthcare sector key example folks stopping to manufacture their product to a needed shortage product....masks, sanitizer, etc.

Grace I.: I've learned that at this time people are open and willing to share with anyone who is available to listen just to relief the stress of being physically distanced and the challenges that come with it. I created a group on LinkedIn - <https://www.linkedin.com/groups/12382133/> which is made up of a group of mostly health professionals committed to share love and encouragement one video/audio call/text per time despite all odds. This has been really beneficial to many, so many testimonials. The group is Virtual Neighbors, available to partner with anyone who needs us even for virtual visits with patients. Contact me - [itioweg@gmail.com](mailto:itioweg@gmail.com)

Toni Hightower: Sometimes what they dont say is much more important than what they actually say

Rachel Norrick: And don't forget us that are qualified CISM staffers are available to staff.

Julie Ellis: I'm overwhelmed with support from our community! Call was just interrupted with HUGE delivery of lunch by one of our local coffee roasters. yum

Michele Kennedy: Make it OK for staff to say I need to step away for a few minutes to decompress

Kathy Calvert: Have a phone line that employees can call in and ask questions. Then, respond with FAQs.

Hilary: We did the leader greeting and maintained the distance: air high fives, air hugs, and cheer moves :-)

Toni Hightower: Give staff a Back Stage Break when they need it!

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I N S T I T U T E

Tae Abate: The importance of communication. We cannot underestimate how vital it is to communicate better and more effectively and need to be aware of what our options are to connect virtually, regionally and locally. We are also understanding the power of being out on the floors and directly connecting with staff. It has served as a reminder to connect with the human element and understand what our frontline teams are experiencing professionally and personally.