

Taking STEPS to Improve the Patient Experience

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DEFINE

Problem Statement: In 2010, the overall patient perception of the nursing care and communication on 4East was inadequate as documented through patient complaints during rounds and discharge call backs as well as low patient satisfaction scores on the Press Ganey/HCAHPS Survey.

Project AIM: To improve the overall patient perception of the nursing care and communication on 4East as demonstrated in the Press Ganey survey scores by year end 2011. Acceptable goal targeted for the 35th percentile rank for each dimension.

DATA

	Jan 2011 %ile Rank
Nurses Kept you Informed	4
Staff Included you in Decisions/Treatments	1
Staff Worked Togethe r to Care for You	3
Communication with Nurses Overall (Top Box)	4
Communication about Medicines Overall (Top Box)	18

IMPROVEMENT PLAN

1 TEST OF CHANGE: Implement Admission/ Discharge Folders

<u>Plan:</u> Developed Folders for patients to facilitate communication and education throughout the stay for discharge preparation.

<u>**Do:**</u> All new patients to received a folder. The RN/LPN reviewed information and involved patient and family in discussions using folder as a tool.

<u>Study:</u> Not all patients were getting the folder. Unit Team Leaders identified logistical issues. Ex. Ordering supplies, putting folders together, float Unit Secretaries and placement of folders.

<u>Act:</u> Unit Secretaries owned process for ordering, putting together, placement and delivery to RN/LPN.

IMPROVEMENT PLAN

#2 TEST OF CHANGE: Implemented a bundle change: Hourly Rounding with a purpose for all staff, Unit Team Leader Rounds, RN/LPN 8am/8pm Vital Signs, Medication Education Leaflets and White Board Plan of Care incorporated into workflow with use of folders.

#3: TEST OF CHANGE: Implemented Patient Needs/Wants to the Plan of Care on the White Boards daily and Clinical Technician walking Report Rounds

RESULTS TO DATE

	Feb 2011 %ile Rank TOC #1	Mar 2011 %ile Rank TOC #2	Apr 2011 %ile Rank TOC #3	May 2011 %ile Rank	Jun 2011 %ile Rank
Informed	1	64	32	10	99
Included	3	5	11	1	99
Together	4	31	29	87	98
Nurses	1	91	1	99	99
Medicines	1	89	1	NA	99

OUTCOMES

- Achieved Excellence Goal of 99th %ile rank by June 2011 with monthly fluctuations.
- All TOCs have improved the patients' perceptions as noted during patient rounds as evidence by decreased complaints.
- Improvement Plan Challenges included: construction noise, unit closure and core staff medical leaves.
- Key differences noted in June: moved to a unit with all private rooms and maintaining optimal staffing.
- Communicated importance and linkages between monthly scores and TOCs during staff meetings.
- •Unit Based Shared Governance Council will review results monthly and continue TOCs.