PATIENT CENTERED CARE

OBJECTIVES

1. Describe impact of Pat Sat surveys (HCAHPS) on reimbursement
2. Describe evidence-based methods designed to improve the patient’s experience
3. Using the AIDET model, demonstrate the five fundamentals of patient communication, and other experience-enhancing tools.
4. List negative and positive behaviors that impact the patient’s perception of the medical care they receive.

WHY ARE WE HERE?

- Primary 2013 SCHS Quality initiative
- HCAHPS tie patient satisfaction to payment
- Less liability and fewer complaints
- To ensure all patients to receive excellent medical care
- Improve the patient and family experience
In every interaction

Who judges Medical Care?

Patient or Provider

- When patients feel they are getting high quality medical service, they believe they are getting high quality care
- Better experience = Better Medical Care to patients
  - The patient
    - is 100% right in their own mind 100% of the time
    - The patients perception is their reality!
PATIENT EXPERIENCE

THE MISCONCEPTION...

GOOD MEDICAL CARE = GOOD EXPERIENCE

Patients assume they will get good medical care

Patient Perception

- Quality of medical care is based on patient experience
- How well did we meet/exceed their expectations?
- Basis of Patient expectations:
  - Past healthcare encounters (self, family & acquaintances)
  - Family and friend's opinion
  - Media exposure (Internet, TV, movies, books, print articles)
  - Real-time information provided by healthcare personnel; physicians, nurses, ancillary caregivers, etc.
- What can we control?
  - Your perception of quality care is different

Great Nurse

"But...she has excellent clinical skills..."

GREAT DOCTOR?
Excellent DOCTOR!

The Best doctor!

CLASSIC DOCTORS

PATIENT SATISFACTION vs. CUSTOMER SATISFACTION

WHAT'S THE SAME
WHAT'S DIFFERENT
WHAT CAN WE LEARN
The StuderGroup has developed a scripting tool which bolsters customer satisfaction awareness of their healthcare providers.

The acronym is **A I D E T**

**AIDET**:
- Acknowledge
- Introduce
- Duration
- Explanation
- Thank You

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**In a nutshell....**

**AIDET’S all about**

- Make a great first impression...
- Explain what’s going to happen...
- Leave them with a great last impression

**CONSISTENTLY AND EFFICIENTLY**

**ACKNOWLEDGE**

First and most critical step

What is the GOAL?
10/5 rule

**Acknowledge**
- How can you show a positive attitude and put people at ease?
  - Smile or demonstrate concern as you enter the room
  - Make eye contact
  - Sit down. The perception will be you are interested and taking the time to listen.
  - Move to eye level
  - ....why is this important?....

**Introduce**
- Tell your name & Title
  - Consider handing out a card
- Sanitize hands in front of patient
- Shake hands with the patient and the family
- Manage yourself up (it's no ego, its info)
  - Give your job title or your level of certification, years of experience, etc.
- Introduce & manage up the other care providers, nurses, departments, etc.
  - “you are lucky today to have Frances as your Rad Tech, she’s one of our best”

**Introduce**
- Don’t forget the family
  - Introduce yourself to everyone in the room
  - A percentage of the time the family member wants to control the visit. You need to let them have their say. That validates their concern. The family needs to be redirected or recruited to be supportive.
  - Ignore the family at your own risk.
**Duration**

- Communicate how long the experience will take.
  - "They'll be here in just a minute"
- Use the Disney approach:
  - Overestimate the time to completion
  - When things finish early, the patient will be happy things were done faster!
    - Imagine patients being happy they waited!!
- Check in with patients/families and explain delays
  - Rounding
  - Apologize for delays*
    - Blameless apologies

**Explanation**

- Ensure the patient understands their treatment, 
  ......engage the patient!
  - LAY TERMS: Use easily understood words when providing information; avoid medical jargon
  - Team: Share who will be involved in providing their care
  - Communicate: if the process will cause pain or discomfort, or if any post procedure instructions are necessary
    - COMMUNICATE TO BOTH PATIENT AND FAMILY!!!
- Do you have any questions?
- Is everything I explained clear?
  - *Playback technique

**Thank You**

- Validate the Patient
  - Choose a reason to thank the patient and family
    - "It's a good thing you came in today"
    - "I'm glad I could help you today"
    - ...OR....
  - be appreciative of the person
    - Most people are likeable, "It's a pleasure to meet you!"
    - "Your mom is lucky to have a son that cares about her when she is sick. I'm glad you're here with her, Thank You.
      More than half of my complaints came from family. Find a way to validate family members.
  - Always Ask....
    - "Is everything I've said clear?"
    - "Do you have any questions?"
    - "Have we met or exceeded your expectations?"
      - ...be careful asking if there is anything else you can do...

**IMPROVED PATIENT EXPERIENCE OUTCOMES**

EVIDENCE BASED METHODS
DESIGNED TO IMPROVE THE PATIENT EXPERIENCE

- RESULTS:
  - Better HCAHPS scores
  - Better patient outcomes and compliance
  - Fewer complaints, less liability
  - More efficient care delivery
  - Staff has a better experience, I have a better experience
Behavior

......What we do when we forget people are watching us....

See handout

CHANGING CULTURE

To change behavior as a person or as a group

- You have to feel the change is meaningful
- You have to believe you can achieve the goal
  - You have to **PRACTICE**

......You **Must** be supported......

What If.....

- We all made a promise to do the 10/5 rule right now
  - Asked each other to hold us to it
  - Allowed others to hold us to it

Would the patient/family experience be different?
Would this be a culture change

HARDWIRING BEHAVIOR

ROUNDING
HARDWIRING BEHAVIOR

ACCOUNTABILITY

A Culture of 100% hand washing compliance
What would it take?

Thank You

Has everything I explained clear?
Did this meet or exceed your expectations?

QUESTIONS?