Enhancing the Patient Experience through “Spotlighting”
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INTRODUCTION

In 2001, St. Joseph Hospital Orange (SJO) embarked on a journey to change the way patients are not simply cared for, but more importantly cared about. St. Joseph Hospital is a 523 bed community hospital, the flagship entity in a large, faith based, health system with hospitals throughout California and Texas. Two facilities in the system; St. Joseph Hospital (Orange) Outpatient Pavilion, an urban ambulatory care facility, and Redwood Memorial Hospital, a rural inpatient facility, were selected to pilot a new way of impacting the patient experience. This pilot became known as the Holistic Patient Family Centered Care Journey. It is based on the belief that caring for the person as a whole: mind, body and spirit is the only way to restore health.

It became clear throughout this process, that in order to create an environment to support this philosophy: fully engaged employees, each of them dedicated to modeling caring behaviors and taking time to be fully present to others; to listen, encourage, reward and recognize the unique contributions of the individual, were key to the success.

What began as a design of a small group of visionaries has become an integral part of the St. Joseph culture. Key learning from this initial endeavor has led to a recipe of sorts for the other ministries within the St. Joseph Health System. In 2006, this philosophy of caring inspired the organization to identify and commit to a system wide strategic goal of creating, “Sacred Encounters,” for all staff and patients. There are profound encounters, and there are mundane encounters, but they all have the potential to be sacred encounters. A “Sacred Encounter” was difficult to define in words but was easily felt or experienced; as one walked away from an encounter with another person feeling whole, respected, and cared for. The success in living this goal has created a community of caring and enhanced the quality of life of the community that we serve.

In 2010, St. Joseph Hospital began an innovative approach to bring Sacred Encounters to life in the everyday clinical environment. The design firm IDEO (www.ideo.com) was contracted to develop a process of scene design and employee engagement to enhance the patient experience at critical moments during the patient experience. This approach, known as “Spotlighting”, provides a unique opportunity to utilize key moments in the health care delivery process to make a lasting impression. Spotlighting allows the organization to design and create scenes that aid in discovering the experience of a Sacred Encounter.

In a sense, Spotlighting has provided reminders of the heritage of, our founding congregation, the Sisters of St. Joseph. In 1650, Father Jean Pierre Medaille instructed six women, who composed the first Sisters of the St. Joseph congregation, to divide the city of Le Puy, France. They were commissioned to go into the various districts to discern the needs of the people and serve them. He called the people of Le Puy “the dear neighbor.” Similarly, we consider the people who come to us for health care to be our “dear neighbors.” Spotlighting supports the focus on the “dear neighbor” concept and allows us to more deeply understand the patient experience, elevating good service to sacred encounters.

Building on the historical foundation and commitment to serve, this paper examines the process and experiential components created to bring Sacred Encounters to life within the hospital setting. These concepts may serve as examples to be replicated to improve the patient experience in a variety of care settings.
KEY CONCEPTS

Spotlighting
Spotlighting is a proactive approach to healing beyond science. It seizes a moment in time during the patient experience to create an optimal situation for sacred encounters to occur. It gives caregivers new tools to show their compassion, honor patient dignity and foster an environment in which patients feel safe and nurtured. The result – “Sacred Encounters” – is not just good customer service; it’s an expression of the organization’s mission and values in its service to the whole person, body, mind and spirit.

Sacred Encounters: We believe in the dignity of each individual and desire to serve each person. We will first seek to understand, then deliver a combination of compassion, respect and competency to each individual we serve.

Strategic Goal
Every interaction will be experienced as a Sacred Encounter. Sacred Encounters are encounters that often include the following four characteristics:

- **Care** - Close attention, watchful oversight, attentive assistance or human response to those in need “I feel like the one and only patient”
- **Dignity** - Respect for each person as an inherently valuable member of the human community and as a unique expression of life “I have the information that I need”
- **Compassion** - Deep sympathy and sorrow for another accompanied by a strong desire to alleviate suffering “I have an advocate”
- **Connection** - A bond between people that touches the heart “My caregiver and I have something in common”

REASON FOR ACTION

1. To change the way patients are not just cared for... but more importantly cared about.

2. To create an environment that supports, encourages and enhances caregiver engagement in patient care.

3. To foster an environment where sacred encounters can occur more consistently.

4. To impact the patient experience before, during and after care.
SPOTLIGHTING METHODOLOGY

Scene Creation

Scene creation is the central element to spotlighting. This begins with a moment in the patient journey and the design of a scene that responds to the patients’ emotional state at that time. Frontline caregivers representing a variety of roles within a department are selected to assemble, as a team, to design the scene. This team identifies a timeline within the patient journey to focus the scene, such as the admission to the unit (Warm Welcome). They look closely at every aspect of the current patient experience, focusing not on the process of how we are caring for them, but on, “how we make them feel.” The goal is to overlay the existing operational process that is working well, with a focus on impacting the emotional experience, recognizing that how the personal interactions between caregivers and patients, impacts how we make the patient feel. During the design process, the facilitator takes the team through a series of experiences and shares patient feedback with them to help establish empathy for our patients and how they currently feel during their experience. This allows the team members to be better in touch with how they personally impact the tone of the scene. This one word then sets the “tone” for the team to explore what caregivers can do and say that foster a sacred encounter. Baseline outcome data is selected for review to establish the current patient perception and help the team identify areas of opportunity to enhance the experience for patients and families. The following steps are the essential components to design the scene. The use of these steps and tools creates consistency through deliberate action to provide an opportunity to foster a sacred encounter. The idea is to create, engage, and reflect, using tools that allow the caregiver to reach out and connect with patients, demonstrate dignity and compassion, while caring for their patient.

Each scene has an “anatomy” that enables the design of enhanced personal and emotional connections, enabling the possibility of staff training in specific words, gestures and elements that can provide consistent and deep patient experiences in a shared way.

Scenes have the following elements:

- **Select a Theme**: A unifying idea to inspire scene design. Generated from within, themes enable staff ownership and highlight the unique qualities of the ministry.
  - Our Theme: Dear Neighbor, this theme ties us back to our history and heritage of the first Sisters of St. Joseph, and is consistent in all scenes throughout the St. Joseph Health System.

- **Create a Scene**: It capitalize on an opportunity or solves a problem within the patient experience. They are not location specific; rather they represent a moment in the patient journey. Any moment may be selected and provides an opportunity to impact the patient’s personal experience. Anytime we come in contact with someone a lasting impression can be formed.
  - Our Scene: Warm welcome: Makes the patient feel welcome when they arrive at the hospital. (Also an opportunity for a “Warm Welcome” in each new interaction or handoff)

- **Promote a Tone**: The desired mood of a scene, or how it should feel. The tone responds to the human emotions present in a scene, by focusing on how we make them feel and creating a memory or lasting impression. “People don’t remember what you say or do, they remember how you make them feel”
• **Our Tone:**
  
  - Labor & Delivery: Embraced – To foster an experience that makes the patient feel embraced by the staff as they are first admitted to the department.
  
  - Mother-Baby Unit: Nurtured – To create a nurturing environment, where staff are better able to care for and connect with patients and families, as they transition into the post partum unit.

• **Select a Setting:** The physical location(s) where the moment takes place. This could be the patient room, main lobby, hallway, etc.
  
  - Our Setting: Patient Rooms

• **Design a Structure:** Every scene should have a defined beginning, middle and end. Defining these steps allows you to get specific about gestures and props and how the scene is delivered with each and every patient. This allows for consistency in our delivery of care.

• **Adopt a Gesture:** A verbal offering made to the patient at each step of a scene. Gestures can stand alone or correspond to a prop. Small gestures are just as impactful as large ones (e.g., words, hug or hand on shoulder).
  
  - Assemble Props: A physical offering made to the patient. Props serve as cues and help anchor a moment.
  
  - Our Props: Welcome cards, comfort items, white boards, bookmarks.

• **Scene Prototyping:** The simulation is a chance to get some fresh eyes on your scene before taking it to real patients. The team member’s role out the new scene with patients and refine props and gestures as necessary. Starting small allows you to quickly learn and evolve the scene. Gain feedback and discuss what you have learned from delivering the scene.

There are 5 steps in Scene Prototyping and Roll-Out:

1. **In-Context Simulation:** an exercise with design team to roll-play scene specifics to test flow and feel of the scene.

2. **Prototype Preparation:** specify roles and steps that will be prototyped with a few patients initially.

3. **Small-Scale Prototyping:** initial test with a few patients to see how patients respond to the structure, gestures and props of a scene

4. **Medium-Scale Prototyping:** extending the scene to additional patients and continuing to learn how to refine and sustain the scene at full scale.

5. **Scene at Scale:** Once the scene has been prototyped and all refinements been made, all staff in the department are trained how to deliver the scene in order to embed the scene into the culture.

• **Evaluate learning:** The team reviews feedback from the simulations and make any adjustments to the scene that may be necessary.

The St. Joseph Hospital service line selected to pilot this methodology and its impact on bringing “Sacred Encounters” to life was the Maternity Services clinical areas. St. Joseph Hospital serves a population base of more than 600,000 women of reproductive age (15-44 years) with approximately 5,000 deliveries annually. This area experiences the highest volume of visitors to the hospital, providing a large sample size. Designated as the first Baby Friendly Hospital in Orange County, the tradition of service and family centered care is well established. This area appeared to be a fertile learning laboratory for this innovative process to improve the patient experience and create a sacred encounter for families.
LABOR AND DELIVERY WARM WELCOME SCENE

Scene Structure:

**Step 1:** Patient presents to OB Admitting and is warmly welcomed. Information is obtained on the stork form and patient registration is complete. A call is placed to the Charge Nurse in Labor & Delivery (L&D) to communicate patient information and determine where to take the patient. OB Admitting staff takes patient to the designated location. If instructed to go directly to a L&D room, the RN or Charge nurse will meet them in the room.

*Gestures:* Warm welcome and smooth hand off from OB admitting staff to L & D nurse. Privacy, safety and assistance ensured.

*Props:* Stork form for optimal communication between OB Admitting and L & D Charge Nurse. (Improves communication and reduces need for patient to repeat information to multiple staff.)

**Step 2:** Care giving nurse warmly welcomes the patient in the L&D room. She instructs them about what to expect and orients them to the room. Provides them with a gown to change into, helps them into the bed and connects them to the monitors. She gives them the welcome card and reviews the information inside regarding her L & D care team, items available to make her and her family more comfortable and key information about the stay in L&D.

*Gestures:* Nurse introduces herself and welcomes them to SJH. Assesses the patient, helps them get settled and provides education/orientation about the room and what to expect. Questions answered. Patient made comfortable.

*Props:* Baby powder scent is sprayed in the room, patient bed lowed and gown snapped at the shoulders by the OB tech to prepare for the patients arrival.

*Patient Welcome Card:* Ensures consistency of information provided to the patient at the time of arrival in their room.

**Step 3:** Care giving nurse returns after the patient is settled, with any items requested by the patient to help make them feel more welcome and comfortable.

*Gestures:* Nurse offers patient warm booties, lavender aromatherapy or the warm neck wrap to help make her more comfortable and relaxed. She offers the family bottles water or graham crackers for their comfort.

*Props:* Warm Welcome items: Items made available to patient/family to make them more comfortable and feel welcomed and embraced.
MOTHER BABY UNIT (MBU) WARM WELCOME SCENE

Mother and baby are transferred from L&D to the MBU by the L & D nurse 1-2 hours post delivery. They are greeted in the MBU patient room by their nurse. The nurse provides information to the family about what to expect during their stay, an assessment of the mom and baby, and information on personal care, caring for her baby during their stay and plan of care.

Scene Structure:

Step 1: L&D nurse transfers patient to MBU. Lullaby is sounded by the patient on their way to MBU which alerts MBU nurse that the patient is on their way.

MBU nurse greets patient in the MBU patient room with a warm welcome, introduces herself to the patient and any family/visitors. Nurse performs a mini assessment of Mom and baby and orients her to the room.

Gestures: Staff in nurses station offer congratulations to family as they pass by. Care giving nurse warmly welcomes the family and introduces herself and congratulates the new family.

Props: Brahms Lullaby sounds overhead throughout the hospital when Mom pushes a button while transferring from L&D to MBU.

White board with welcome sign personalized with parent’s and baby’s names in the patient’s room.

Step 2: Charge Nurse enters the patient room and welcomes the family to St. Joseph Hospital MBU.

Gestures: Clinical Coordinators “Welcome script” when visiting patients. “Welcome to the Mother Baby Unit. I am the charge nurse and I want to thank you for choosing St. Joseph’s to share this special memory with you. Throughout your stay if there is anything you need there is a charge nurse here 24 hours a day that you can call. (give number) This is your celebration package and we would suggest that you order the special dinner on your first night here if you are a vaginal delivery or your second night if you had a cesarean delivery. The instructions of how to order the dinner are on the card and make sure to call before 7:00 p.m. Congratulations and good luck with your baby and please let us know if we can help you in anyway.”

Props: Celebration of Life Package: A special dinner for two and a gift from the hospital which includes a bottle of sparkling cider and a CD of music that is soothing to baby. (and parents)

Step 3: Care giving nurse returns to the patient’s room and explains what to expect during her stay on the MBU and educates her about what will happen between now and discharge. The nurse also offers the new mother a special bookmark as a welcome gift.

Gestures: Education provided to parents to help them understand what to expect during their stay in MBU.

Bookmark with poem given to mom to say thank you for choosing St Joseph hospital.

Props: White board to assist patient with information about what to expect and to communicate key information to patients and other caregivers.

Bookmark with thank you message and poem about babies.
In order to measure improvement in patient satisfaction, several key questions on the patient satisfaction tool were selected for measurement pre and post implementation. Upon completion of the pilots, qualitative data was captured through focus groups that included patients, staff and physicians. A qualitative research methodology was selected which included the focus group data and text mining analysis of the key themes and words that emerged in the interviews. Additionally, staff and physician surveys were conducted to assess performance against the fiscal year strategic goal metric, “100% of employees in the pilot areas can articulate and demonstrate how they can foster ‘Sacred Encounters’. Each evaluation showed the positive impact of Spotlighting as it successfully fostered sacred encounters and enhanced staff engagement with our mission and goals.

Focus Group Findings
Does the Spotlighting Experience Foster a “Sacred Encounter?”

Yes, it does among both staff and patients.

Patient feedback:
• Patients indicate that caring is embedded in the St. Joseph Health System culture

• Patients are likely to be aware of a sacred encounter, and likely to identify it as caring

• Patients who cannot recall a prop associated with the spotlight experience still recall a caring, thoughtful experience

Front-line Caregivers feedback:
• Spotlighting provides a vehicle for staff to create an additional sacred moment

• Spotlighting also enhances a caring culture towards patients and fellow employees

• Spotlighting reminds nursing staff why they went into nursing in the first place

• Spotlighting causes nursing staff to stop, focus on the patient, and cherish this one, single moment

• Spotlighting provides the opportunity for nursing staff to thank their patients for letting them be a part of their life

Patients indicate that caring is embedded in the St. Joseph Health System culture. Patients discussed the quality of care they received. While there were a few exceptions, overall most participants explain that the staff members were kind, caring and let them know they were valued as a patient and a human being. As explained by participants:

“They were asking about me. Not just because they had to, but they were really there with their heart and soul and mind. Not just at particular times of the day or particular nurses or particular doctors. Every single one...they were really trained to do that before their job to make sure that you are first mentally and physically emotionally healthy, and then they would do the other things because it’s very important.”

“It was my first baby, I had a million questions, I was stressed, I was tired, and never once did anybody get frustrated and seem antsy or rude. They were just very respectful, very nice.”

The caring experience that most patients feel while in the hospital sets a standard for care that many expect during the time they are a patient. Because of this high standard of care, some patients may have a difficult time identifying a specific Spotlighting experience. However, patients indicate that sacred encounters occur on a regular basis.
“Just that they would come in and sit and talk to me.” Not ask me how I’m doing or anything like that. They would treat me like I’m one of their friends. Just asking where I live, what I did. Personal things more than, “Blood pressure is fine.” How are you feeling?” and all that you could expect from a hospital.”

“They were just – they became my friends, and I didn’t expect that. They just kind of embraced me.”

As many participants who delivered their baby at St. Joseph Hospital explain, when they arrive at the hospital it is a very stressful time. Their emotions are heightened, they may be in pain, and they are very anxious about the next few hours. One patient who experienced a Warm Welcome sacred encounter recalls the calming effect of this encounter, rather than specific props.

“Actually now I remember they put me in a transition room I guess where they took my blood pressure before I went into the actual labor and delivery room. It was the same nurse and she was super nice. They had a very comfortable rocking chair, which I liked. I was sitting in that and I was like, “Oh, this is great.” It was very calming.”

Another participant recalls that her physical needs were met during the Warm Welcome experience.

“I came in with flip-flops as well and she asked me if I wanted some socks to keep my feet warm.”

As this quote suggests, it is the interaction with hospital personnel, their desire to counteract the concerns of the expectant mother, and create a calming sacred encounter that participants recall.

Spotlighting causes nursing staff to stop, focus on the patient, and cherish this one, single moment. Participants providing patient care indicate that the Spotlighting experience has fostered sacred encounters by giving them the time and tools to connect with the patient on a personal level. As the following quotes indicate, the training they received and their experiences with patients during the Spotlighting experience has altered how they execute the responsibilities of their job. Nursing staff say that the Spotlighting experience has created the discipline necessary to embrace each moment.

“Personally, I think this is really where it’s at for me. This is where I make the connection; not in any of the items even though the patients are very appreciate of the items.”

“I’m focusing on this patient at this moment right now. And it helped me to think to do that more, only because it’s kind of like more in my thought process rather than, “Hurry up and get the job done.” And that’s what I think I take away from it, to slow down with this one patient right now, and try not to think about the other 15 that I have that I need to attend to. That helped me.”

Spotlighting provides the opportunity for nursing staff to thank their patients for letting them be a part of their life. Nearly every staff member we spoke with emphasized their desire to connect with the patient and show how much they appreciate the opportunity to serve. For many, the pace and intensity of their job limits these opportunities. The Spotlighting experience provides the nursing staff with the tools and time to create a sacred moment focusing on showing gratitude to the patient. This sacred encounter enriches the staff member as much as it does the patient. As one nurse explains:

“I handed her the bookmark and I said, ‘We signed a card for you. Thank you for allowing us to take care of you. I wanted you to know that I enjoyed taking care of you.’ I always make sure that it’s quiet and it’s still when I say that because I want it to mean something to them. I want them to understand somehow you’ve touched my life.”
Spotlighting provides the framework for the nurse and patient to connect. Particularly among participants receiving a Warm Welcome, this Spotlighting experience provides the tools and framework for the nurse to formalize a special connection that has already taken place. Many participants use the word ‘connection’ when describing their sacred moment as they were experiencing a Warm Welcome. It is this connection more than anything else that ensures a successful Spotlighting experience. One Physician who participated in spotlighting stated, “It’s really about the heart of medicine. It reaches beyond the technical side in this age of process improvement and increased productivity and doing things faster, better. This sort of takes a step back and says, “What are we really doing,” and I think having that awareness continually makes a difference. I think the Sacred Encounters sort of process or the way that it’s done puts that in a way that’s not intrusive and it makes sense. It was fun and I like that. It makes everything...plus it’s not only just with patients, but I think with coworkers and with staff and realizing we’re all in this together. When you spend this many hours with somebody there’s times when you can be there for each other and there can be Sacred Encounters in those relationships as well.”

Significant literature exists on the complexity of the current healthcare system and the national efforts to simplify processes and remove waste, in an effort to better serve the patients. At St. Joseph hospital, the “Spotlighting” pilot project provided an opportunity for staff and physicians to step away from the “noise” and recognize that a single, simple gesture of caring can make the most significant difference in the patient experience and outcome. In alignment with our strategic goal, a Sacred Encounter was simply waiting to happen.

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