2012 Webinar Series

Enhancing the Patient Experience through “Spotlighting”

Anne M. Mendoza, RN, MS, Manager, Patient Experience, St. Joseph Heritage Healthcare

Dial-in Number: 1-877-668-4493
Passcode: 803 624 299
Defining Patient Experience

The sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care.

- The Beryl Institute
The Patient Experience Body of Knowledge is a framework to capture the knowledge central to the role of the patient experience leader. The intention of this work is to develop a broadly accepted set of domains and associated skills that fully reflects the core accountabilities associated with being an effective patient experience leader.

Public comment period ends April 16, 2012. Provide your input through the feedback worksheet at: http://www.theberylinstitute.org/?page=PEKNOWLEDGE

The Fourteen Domains of Knowledge include:

| History: Customer Service to Service Excellence and Patient Advocacy to Patient Experience | Patient & Family Centered Care |
| Healthcare Leadership & Management | Experience Design |
| Communication | Clinical Partnerships |
| Organizational Effectiveness, Performance Improvement, & Change | Service Recovery & Complaint Management |
| Employee Engagement | Hospitality & Healing Services |
| Coaching & Developing Others | Metrics & Measurement |
| Cultural Competence and Diversity | Policy & Regulatory Issues |
Housekeeping

- All participant phone lines are muted
- The presentation will run 45-50 minutes with about 10-15 min for Q&A
- Q&A will be conducted through the chat function. Please submit questions to the host for a facilitated Q&A after the presentation.
- Webinar materials and session recording will be available for all attendees (an email will notify you when available with the appropriate link)
- A post-webinar survey will be distributed following today’s session

www.theberylinstitute.org
Enhancing the Patient Experience through “Spotlighting”

Anne M. Mendoza, RN, MS, Manager, Patient Experience, St. Joseph Heritage Healthcare

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 is not just good customer service; it's care, compassion, connection and dignity. In this webinar participants will:

• Understand how to design an exceptional patient and family experience by focusing on how we make patients feel during key moments throughout the patient journey.
• Learn the steps to design a scene that will foster an environment that supports caregivers to consistently provide care, compassion, connection and dignity for patients and families.
• See examples of scenes, props and gestures used at St Joseph Hospital to foster exceptional patient and family experiences.
Enhancing the Patient Experience through “Spotlighting”

Anne M. Mendoza, RN, MS
Manager Patient Experience

St. Joseph Hospital
Where is St. Joseph Hospital?
About St. Joseph Hospital

- A Ministry of the St. Joseph Health System
- Faith based organization
- 523 bed community hospital
- Over 100,000 ED visits per year (Not a trauma center)
- Approximately 5,000 babies delivered annually
- Magnet Hospital
- Next to Children’s Hospital Orange County
Our Mission:
To extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve.

Our Values:
Dignity ~ Service ~ Justice~ Excellence

Mission Outcome:
That every interaction will be experienced as a “Sacred Encounter”
...to be a community that serves, that speaks, that celebrates in such a way that others – regardless of their religious belief – encountering this community experience a revelation of life’s deepest truths – about human dignity, community, success, power, growth, sacrifice, love, suffering, debility, and death.

Experiencing a harmony between their heart’s deepest resonances and this community’s character, persons go from this encounter more healed, more whole, more able to live, to love, to hope.
Attributes of a Sacred Encounter

- **Dignity** – *We respect each person as an inherently valuable member of the human community and as a unique expression of life.*

- **Care** – *Close attention, watchful oversight, attentive assistance or human response to those in need.*

- **Compassion** – *Deep sympathy and sorrow for another accompanied by a strong desire to alleviate suffering.*

- **Connection** – *A bond between people that often touches the heart.*
Sacred Encounters takes us back to the heritage of the Sisters of St. Joseph.

In 1650, Father Jean Pierre Medaille called the people of Le Puy "the dear neighbor."

Similarly, we consider the people who come to us for care our “Dear Neighbors.”
Spotlighting is a process to focus on the concept of the “dear neighbor” and express the human dignity of all. It is a process that allows us to more deeply understand the patient experience, elevating good service to Sacred Encounters.
Patient Experience

- Sacred Encounters
- Service Excellence
- Basic Patient Needs
An innovative approach to bringing Sacred Encounters to life in our everyday environments.

Optimizing key moments in the patient experience to make a lasting impression.
Women’s Services selected for pilot initiative

- Serves a population base of more than 600,000 women of reproductive age (15–44 years)

- Over 5,000 babies delivered annually

- This area experiences the highest volume of visitors
Reason for Action

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

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

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

- To impact the patient experience before, during and after care.
Scene Basics

A scene is not...
- A band-aid for a process or efficiency issue.
- A rare occurrence or quick response.
- A formalized script.

While the scene design process is led by the Spotlighting Facilitator, each scene is created by a design team composed of staff from that particular unit or department and a set of “fresh eyes.”

A team begins with a moment in the patient journey and then designs a scene that responds to the patient’s emotional state at that time.
Warm Welcome

We want patients to feel welcome, respected and important—like guests in our home. This scene should feel very human, minimizing any evidence of process and recognizing the patient’s individual experience. Tone: Embraced

Sweet Dreams

Although spending the night in the hospital will probably never feel like sleeping in one’s own bed, patients should feel comfortable, at ease and in control of their situation, just as they might be at home.

Tone: Motherly

Thoughtful Goodbye

People should feel recognized, connected to the hospital, and delighted from the experience. Like graduation day, there are moments of apprehension due to lack of confidence in the future, but hints of excitement that encourage you to move on. Tone: Special
Other Potential Scenes

- **Orientation**
  Keep patients and their loved ones informed about status and location.

- **Dress Rehearsal**
  Help patient and family feel comfortable with medical procedures before they take place.

- **Team Meeting**
  Highlight the people who are responsible for the patient’s care.

- **Teachable Moments**
  Make learning about a new situation or condition feel valuable and manageable.

- **Back to Being You**
  Help patients feel like themselves again both physically and emotionally.

- **Diversion**
  Make passing the time more pleasant for patient and their family.

- **Mile Markers**
  Recognize little milestones that mark progress along a patient’s journey to recovery.

- **Meal Time**
  Celebrate an important daily ritual.

- **Defining Moment of the Day**
  Create a daily ritual that gives patients and staff something to look forward to.

- **Reflection**
  Support patients in reflecting on their time in the hospital – while they’re there and after they leave.
Scene Theme

A unifying idea to inspire scene designs. This theme remains common to all scenes throughout the hospital.

Theme = “The Dear Neighbor”
The physical location(s) where the scene takes place.

Such as: Patient room, lobby, hallway, etc.

Our scenes:
- Labor & Delivery – Triage room and LDR room
- Mother Baby Unit – Patient room
Establish the Scene
Scene Structure

Beginning, middle & end

Defining these steps allows you to be specific about where you have the best opportunity to design for the scene.
Build Empathy

What are our patients feeling?

Neg
- Anxious
- Dependent
- Angry
- Vulnerable
- Impatient
- Unsafe
- Confused
- Frustrated
- Scared
- Agitated
- Apprehensive
- Uncomfortable
- In pain
- Nervous
- Unaware
- Worried

Pos
- Informed
- Educated
- Comfortable
- Knowledgeable
- Acknowledged
- Affirmed
- Cared for
- Treated
- Listened to
- Readied
- Romantic
- Happy

Questions

- How do you feel when you're told you've been prescribed a new med?
- When you receive your meds - did you feel you knew what it is for? Side effects?
- When you're given meds - what is helpful, what's not? Communicate by RN?
- What would help you remember important instructions?
Explore the Tone
Scene Tone

The desired mood of a scene.

Responds to the human emotions present in a scene, by focusing on how we make them feel.

“People don’t remember what you say or do, they remember how you make them feel.”

L & D – Embraced
MBU – Nurtured
Establishing the Tone

- How do we want our patient and families to experience a warm welcome?
- What word best describes what we want the scene to feel like?
- How does the tone tie into the four attributes of a Sacred Encounter?
- When have I experienced our tone?
- How did it make me feel? What key things come to mind?
Props

Prop – a physical offering made to a patient.

Serve as a cue and help anchor a moment.
A verbal offering made to the patient.

They can stand alone or correspond to a prop.

Small gestures can be just as impactful as large ones.

(\textit{ie.} Words, hug or hand on shoulder.)
Avatar – Patient satisfaction measures

Patient, Staff and Physician focus group feedback.

100% of employees in the department can articulate and demonstrate how they can foster sacred encounters.
Step 1: Care giving RN warmly welcomes the patient in the L&D triage room. She gives them a welcome card and reviews the information inside regarding her L & D care team, what to expect during her stay and answers any questions.
Welcome to St. Joseph Hospital
Labor and Delivery

Welcome Card

We wish to extend a warm welcome to you and your family. We want to make your experience as comfortable as possible. The following information is provided so you will know what to expect while in Labor and Delivery.

Introducing Your Labor and Delivery Care Team:
OB Admitting: Staff who assist with registration and paperwork.
Charge Nurse: Labor and Delivery Nursing Supervisor
Patient Care Nurse: Nurse providing your bedside care and updates your doctor about you.
OB tech: Assists your nurse to care for you.
Anesthesiologist: A doctor who is available 24 hours a day for your pain management needs.
OB/Gyn: Your doctor or another doctor covering while your doctor is off duty.
Laborist: An OB/Gyn who is available in Labor and Delivery after hours to provide immediate care if necessary.
Neonatologist: A doctor available 24 hours a day to care for your newborn.

Baby Monitoring: Your baby is being monitored at all times from the nurses' station.
Birth Plan: If you have a birth plan, please share it with your nurse. Pain Management is individualized. Please speak with your nurse about your options.

We would like to offer a few items for your comfort. If you wish to use any of the following items please ask your nurse.
- Birthing ball
- Booties to keep your feet warm
- Warm neck wrap
- Lavender aromatherapy
- Warm blanket

Patient and Visitor Information:
Visitors are permitted in the Labor and Delivery Unit 24 hours a day. Please limit visitors to three at a time in the patient room.

Cell phones are permitted in the patient room. Please do not use cell phones in the hallways.

The cafeteria is located in the basement of the hospital. It is open 6:30 a.m. – 7 p.m. and from 8 p.m. – 3 a.m.

If there is anything we can do to help make you more comfortable, please do not hesitate to ask.

Thank You!
Step 2: Care giving Nurse returns after the patient is settled. She orients her to the room and baby monitors, asks about her birthing plan and offers comfort items to make them more comfortable during their stay in L&D.

Step 3: Care giving nurse returns with items requested by her patient to make her more comfortable.
Tone: Nurtured
Setting: Patient room

Step 1: L & D nurse transfers patient to MBU. Lullaby is sounded by the patients on the way to MBU.

Step 2: Patient is greeted by RN in the patient room. Nurse writes parent’s and baby's names on warm welcome board. She reviews the Mom's to do list and baby steps to home.
### Mommy’s Plan of Care

<table>
<thead>
<tr>
<th>Task</th>
<th>Status</th>
<th>Nurse Aide</th>
<th>Charge Nurse</th>
<th>Manager</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Time Up</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bath</td>
<td>Done</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd Time Up</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hep B Immunization</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lactation Consult (if needed)</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn Screen (Blood Test)</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pertussis/Whooping Cough Vaccine</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing Screen</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pertussis/Whopping Cough Vaccine</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn Screen (Blood Test)</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Birth Records</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OB Discharge Order</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TcB 24 Hour (Jaundice Test)</td>
<td>Done</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TcB 36 hour</td>
<td>Done</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrician Exam</td>
<td>Done</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Circumcision Consent</td>
<td>Done</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrician Discharge Order</td>
<td>Done</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Things to Remember</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Baby Steps to Home

<table>
<thead>
<tr>
<th>Task</th>
<th>Status</th>
<th>Nurse</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Time Up</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bath</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd Time Up</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hep B Immunization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lactation Consult (if needed)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn Screen (Blood Test)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pertussis/Whopping Cough Vaccine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing Screen</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pertussis/Whopping Cough Vaccine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn Screen (Blood Test)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Birth Records</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OB Discharge Order</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TcB 24 Hour (Jaundice Test)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TcB 36 hour</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrician Exam</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Circumcision Consent</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrician Discharge Order</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Notes

- **Make Sure Car Seat Ready in Car (do not bring to room)**
Step 3: Care giving nurse, offers the bookmark as a welcome gift to thank the new Mom for choosing St. Joseph Hospital.
## Scenes Created

<table>
<thead>
<tr>
<th>Location</th>
<th>Scene</th>
<th>Tone</th>
</tr>
</thead>
<tbody>
<tr>
<td>SJO Labor and Delivery</td>
<td>Warm Welcome</td>
<td>Embraced</td>
</tr>
<tr>
<td>SJO Mother Baby Unit</td>
<td>Warm Welcome</td>
<td>Nurtured</td>
</tr>
<tr>
<td>SJO Maternal Fetal Testing</td>
<td>Warm Welcome</td>
<td>Connected</td>
</tr>
<tr>
<td>SJO Mother Baby Assessment Center</td>
<td>Warm Welcome</td>
<td>Empowered</td>
</tr>
<tr>
<td>SJHMG Radiology</td>
<td>Thoughtful Goodbye</td>
<td>Valued</td>
</tr>
<tr>
<td>SJO Medical Telemetry</td>
<td>Teachable Moment</td>
<td>Involved</td>
</tr>
<tr>
<td>OC Regional Breast Cancer Strategy</td>
<td>Turning Points: Diagnosis of Cancer</td>
<td>Embraced</td>
</tr>
<tr>
<td>SJHMG Batavia Woods</td>
<td>Thoughtful Goodbye</td>
<td>Special</td>
</tr>
<tr>
<td>SJO Medical Pulmonary</td>
<td>Teachable Moment</td>
<td>Connected</td>
</tr>
<tr>
<td>SJO Cardiac Renal</td>
<td>Teachable Moment</td>
<td>Connected</td>
</tr>
<tr>
<td>SJHMG Urgent Care</td>
<td>Warm Welcome</td>
<td>Gracious</td>
</tr>
</tbody>
</table>
“Just that they would come in and sit and talk to me. Not just ask me how I’m doing or anything like that. They would treat me like I’m one of their friends. 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 so caring – they became my friends, and I didn’t expect that. They just kind of embraced me.”

Patient SJH
“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.”

Patient SJH
"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.”

Employee SJH
“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.”

Physician SJH
“True medical quality doesn’t come from the physical stuff that we do as doctors. The true medical quality comes from the spiritual stuff we do as doctors yet the measurements are mainly on physical things and more of the encouragement is get these notes, do those things. Task related tasks and stuff. Not personally oriented stuff and so if we really want to impact people’s future lives we have to do both jobs and begin counting the spiritual investments we make in patients where they are not really counted now.”

Physician SJH
Findings

Does the Spotlighting experience foster a “Sacred Encounter?”

**Patients:**

- Patients indicate that caring is embedded in the St. Joseph Hospital 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 recalled a caring, thoughtful experience
Findings

Does the Spotlighting experience foster a “Sacred Encounter?”

**Front-line Caregivers:**

- Spotlighting 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**
Patient Benefits

- The patient experience is individualized to the patient needs/desires as it relates to the scene
- Lasting impressions and connections are fostered
- Personal attentiveness is enhanced through patient/staff dialogue about patient needs
- Patients are invited to be participants in some of their care through the dialogue that Spotlighting supports
Frontline Caregivers Benefits

- Allows staff to re-connect with their call to extend the healing ministry on a personal and individual level, to internalize their call to health care

- One nurse, after Spotlighting training, said she understood more deeply that she was “the face, the heart and the hands of God for her patients.”

- Attributes made Sacred Encounter more tangible and understandable which helps staff be more engaged in Sacred Encounters
Questions??
Upcoming Webinars

June 7
The Hospital Noise Project: Lessons on Addressing Noise from 241 U.S. Hospitals
*Presented by Gary S. Madaras, Ph.D., Director – Making Hospitals Quiet program, Building Momentum Group, LLC with Jason A. Wolf, Ph.D., Executive Director, The Beryl Institute*

July 17
Managing Tradeoffs between Patient Experience and Clinical Quality - Evidence from US Hospitals
*Presented by Anne Mendoza, Manager Patient Experience, St. Joseph Heritage Healthcare*
We invite you to Join us...

The Beryl Institute is the leading community of practice for individuals and organizations committed to improving the Patient Experience. Through its efforts, the Institute:

• Engages over 8,000 members and guests from 6 countries
• Produces two monthly e-news features *Patient Experience Newsl ink* and *Patient Experience Monthly*, sharing leading policy and practice around the patient experience
• Publishes 6-8 comprehensive white papers a year and offers accompanying webinars
• Supports 10 patient experience research grants
• Conducts the leading benchmarking study on the state of patient experience
• Hosts the annual Patient Experience Conference and Regional Roundtable gatherings

Become a member – join today!

www.berylinstitute.org
Thank you for participating!

Please keep your eyes open for a post-webinar evaluation coming soon...

www.theberylinstitute.org