Storytelling Strengthens Patient Experience and Builds Safety Culture

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Judy Geiger, Chief Nursing Officer

Intermountain
Primary Children’s Hospital
Objectives

This session will describe one institution's journey to improve the culture of Speaking Up!

Giving staff, patients and families the clear message that everyone has the obligation to speak up in order to keep patients and families safe and informed of the plan for care.

This session will focus on discussing various ways to enhance story sharing to improve the awareness and partnership for a safe patient experience and share strategies utilized to move the Speak Up culture for staff, patients and families.
Intermountain Primary Children’s Hospital
Intermountain Primary Children’s Hospital
Philosophy....

‘The Child First and Always’
Every Primary Children’s team member has an absolute obligation to speak up for safety.”
## Culture of Safety Scorecard

|:-----------------------------------------------------------------------------------------------|---------|---------|---------|
| Q07 At work my opinions seem to count                                                          | 3.66    | 3.63    | 3.61    |
| C20 Staff members in my department work well together and communicate effectively to provide the safest care for patients. | 4.26    | 4.27    | 4.32    |
| C21 In my department, we have enough time and resources to safely care for our patients.       | 3.81    | 3.79    | 3.71    |
| C22 In my department, we regularly discuss ways to prevent errors from happening or from happening again. | 4.28    | 4.21    | 4.37    |
| C23 Staff in my department will freely speak up if they see or do something that may negatively affect patient safety. | 4.23    | 4.22    | 4.27    |
| C24 In my department, staff members are very attentive to any possible problem that could harm a patient. | 4.43    | 4.44    | 4.46    |
| C25 In my department, there is good teamwork and effective communication between staff members and physicians. | 4.12    | 4.13    | 4.17    |
| C26 In my department, we communicate effectively with our patients and their families to provide the safest care. | 4.38    | 4.40    | 4.40    |
| C26 In my facility, we have good policies, procedures, and systems for preventing errors from happening. | 4.41    | 4.39    | 4.37    |
| C27 The actions of top management show that patient safety is a top priority.                   | 4.18    | 4.11    | 4.31    |
Safety + Service = Patient Experience

- Barriers expressed by staff about Speaking Up
- Fear of Retribution
- Looking stupid
- Getting colleagues in trouble
- Spoken up before, nothing changed, why now?
- Perceived lack of leader support
- Speaking up culture is foundational and we had work to do.
Building Our Speak Up for Safety Culture

6 month journey
Storytelling- An Educator’s Perspective

“Storytellers are “directors of the theater of the mind,” co-creating the story’s images and emotions with the audience. Sharing Stories builds community ….from one listener to the next.

Storytelling Arts of Indiana
What Storytelling can do…

- Capture the imagination
- Engage emotions
- Open the mind of listeners
Storytelling Messaging Pathways

- Dept. Head Mtg
- Peer Coaches
- Speak Up Culture Development
- Leadership Forums
- Safety Moments
- Imagery
- Rounding for Outcomes
Sharing Stories
Speak Up-Story telling from the heart…
Real Stories

Physician Perspective

- High Output renal failure
- Cardiac patient
- 2 days lost 8000mL fluid
- Orders: IV fluids 300 ml/hr
- MD not notified of delay in order change until 2300

Care giver Perspective

- Day nurse concern
- IV handle that rate
  - Discussed with Intern and if IV can’t handle call for second IV at 1900
- Night nurse called at 2300
  - 120 ml/ all day
  - 0100 IV placed and fluids administered at 300 ml/hr
- PT. upset
“Listening is not just a skill, It is a choice”

- Empowerment
  - Leadership perspective
  - Physician perspective

- Hierarchy
  - Responsibility for final decision
  - Respectfully listening

- Deference to expertise
“When I listen I have the power, when I speak I give it away.”

Voltaire
Listening Video
Listening Talking Points

- Importance of listening
- Recognize someone is listening to you
- Listen to your patients & families
- Barriers to listening
- Removing barriers
Hospital Wide Speak Up Imagery
RELEASE THE HERO INSIDE

SAFETY COMMITMENTS
Speak Up for Patients and Families

Speak up... We’re here to listen and partner with you and your child — and to provide the best care possible.

You can ask us anything, anytime. You are your child’s best advocate and a valuable member of our team.

Speak up and provide important information about your child —

- As the person who knows your child best, sharing information about your child will help us provide personalized care.
- Tell us about medications and how they may interact.
- Prescriptions, over-the-counter medications, vitamins, and natural remedies your child is taking.
- Allergies or bad reactions your child has had to medications.
- Problems your child or other family members have had with previous surgeries or conditions.

Speak up and ask us to identify ourselves — You can expect healthcare workers to wear ID badges and introduce themselves and tell you what they’re about to do. If you’re unsure about who is caring for your child, ask us to help you identify caregivers.

Speak up if you think a caretaker has confused your child with someone else — Make sure you know who is caring for your child. Nurses and doctors should check your child’s name and birthday and re-introduce before giving medications or treatments.

Speak up if you have any concerns about whether we’ve washed our hands — Hospital staff take precautions to keep your child safe. Everyone who enters your child’s room should wash their hands prior to providing care for your child.

Speak up... We’re here to listen and partner with you to provide the best care possible.

You can ask us anything, anytime. You are your child’s best advocate and a valuable member of our team.

Speak up and provide important information about your health —

- Sharing information about your health will help us provide personalized care.
- Tell us about medications and how you react to them.
- Prescriptions, over-the-counter medications, vitamins, and natural remedies you are taking.
- Allergies or bad reactions you have had to medications.
- Problems other family members have had with previous surgeries or conditions.

Speak up and ask us to identify ourselves — You can expect healthcare workers to wear ID badges and introduce themselves and tell you what they’re about to do. If you’re unsure about who is caring for you, ask us to help you identify caregivers.

Speak up if you think a caretaker has confused you with someone else — Make sure you know who you’re talking to. Nurses and doctors should check your identity and re-introduce before giving medications or treatments.

Speak up if you have any concerns about whether we’ve washed our hands — Hospital staff take precautions to keep you safe. Everyone who enters your room should wash their hands prior to providing care for you.
HCAHPS-P: Providers discussed how to report mistakes

<table>
<thead>
<tr>
<th>Month</th>
<th>Primary Children's Hospital</th>
<th>Total (24.3)</th>
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<tbody>
<tr>
<td>Jan 2015 (n=131)</td>
<td>22.1</td>
<td></td>
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<tr>
<td>Feb 2015 (n=130)</td>
<td>21.5</td>
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<td>Mar 2015 (n=121)</td>
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<td>Apr 2015 (n=101)</td>
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<td>May 2015 (n=110)</td>
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<tr>
<td>Aug 2015 (n=126)</td>
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<td>Sep 2015 (n=112)</td>
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<tr>
<td>Oct 2015 (n=90)</td>
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<tr>
<td>Nov 2015 (n=74)</td>
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<td>Dec 2015 (n=97)</td>
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High Census and High Acuity Impact to Speak Up Journey
# Culture of Safety Scorecard

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Winter Staffing Engagement Project

PCH Average Daily Census, 2006 - 2015

- 250
- 258
- 242
- 250

Year:
- 2006
- 2007
- 2008
- 2009
- 2010
- 2011
- 2012
- 2013
- 2014
- 2015
Pediatric Critical Care Census

PICU Average Daily Census, 2006 - 2015

The graph shows the average daily census of Pediatric Intensive Care Unit (PICU) from 2006 to 2015. The census fluctuates over the years with notable peaks in 2010 and 2011. The highest census in 2015 was 43 patients.
RN Staffing Demand
What we did…

- Conducted focus groups
- Formed multiple planning groups to address concerns
- Developed a tiered incentive plan for compensation
How did the plan work?

- Winter came late but came with a vengeance this year
- Many days of more critical care patients than beds
- Anecdotally staff dealing with winter much better
- Feel more supported
- Plan to do follow-up focus groups
Evidence of Success
Changing the Culture of Speaking Up

- Safety concerns reporting in Daily Safety Brief
- Zero Harm leadership receiving feedback
- Leaders holding staff accountable for not speaking up
- Culture of Safety Score

- Good “Speak Up” stories shared
- Conversion of non-believers into champions
- Number of process improvement requests
- Safety conversations
- Growing number of parents in team meetings within the hospitals.
Overall Assessment of Speak Up Effort and Storytelling…

- Consistent messaging
- Responsiveness
- Time Investment worth taking
- Families at the table have increased.
  - Board of Trustees
  - Quality and Safety Review Committee
  - Patient Experience Committees
  - Family Advisory Committee
  - Residency Communication IPASS project
  - Facility Improvement Committee
  - Wayfinding Committee
Questions?