

Superior Patient Experience Behaviors

in 30 seconds or less



FLORIDA HOSPITAL
Rehabilitation

The skill to heal. The spirit to care.

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Quality Care



Facility



Patient Experience



Employee Engagement



Communication




Trust - Who

Belonging - What

Hope - Why

What is unique about SERVICE in healthcare? (What's the challenge?)



Healthcare is a “need” service rather than a “want” service. They “want” to go to Disney, restaurant, hotel; they “need” to go to a hospital.

We *treat or serve* people who are sick or injured and under considerable stress.

Healthcare is inherently personal. Other services do not require customers to bare themselves physically and emotionally.

Healthcare customers are at risk of being harmed beyond their existing medical needs by an incorrect treatment plan, hospital infection or medical error.

The Driving Principle

“If we listen to what the patient says,
we may be able to meet their needs”

So, what is they are saying?

In order to answer the question:

- 200 patients were followed and interviewed from time of admission, during hospitalization and through the discharge process.
- The key “experience drivers” were collected at each stage of their hospital experience.

What was found:

On average patients have 25 – 30 interactions per day;



70% of the interaction were 10 minutes or less;



On average patients interact with 16 different caregivers each day;



There is inconsistency in the quality of interactions.

What the Patient said:

Admission:

- Building TRUST.
- *"I am afraid; I am uncertain; I am in pain"*

Hospitalization :

- Ensuring a sense of BELONGING.
- *"I am alienated; I am bored; I am lonely"*

Discharge:

- Providing HOPE.
- *"I feel inadequate, unprepared, abandoned."*

Identifying Purpose, Objectives and Expectations *(Customer Service – Points to Ponder)*

- **Doable**
 - If I knew what my patients needed, I would commit to meeting their needs.
- **Meaningful**
 - Caring for others is: My task, my job, my responsibility, my pleasure.
- **Sustainable**
 - One patient at a time, every time is: realistic, idealistic or impossible.
- **Transferable**
 - If my experience with patients becomes more positive and meaningful, I would encourage others in my team to change as well.
- **Simple**
 - If I could learn Service Behaviors in 30 seconds or less, I would make them part of my daily practice.

Can you make a Difference?

At 211 degrees, water is hot.

At 212 degrees, it boils water

Raising the temperature of water by one extra degree means the difference between something that is simply very hot and something that generates enough force to power a machine.

“...seemingly small things can make a tremendous difference.”

What the Patient Experiences:

- **Trust:** “Who are you?”
 - How can they trust you if they don’t know who you are?
- **Belonging:** “What are you doing?”
 - Involve the patient or provide choices whenever possible.
- **Hope:** “Why are you doing it?”
 - They need to understand the reasons.

“Hello Mr. Smith. My name is Sarah and I am here to clean your room so that your environment continues to be safe and healthy in order to speed your recovery”.

The difference between “always” and “usually”

1. **If I became sick one day to the point that I needed to be admitted to a hospital, and I had a choice to select which hospital I prefer, I would chose the one in which Nurses, Doctors and Hospital Staff:**
 - a. Always provide the highest quality care.
 - b. Usually provide the highest quality care..
 - a. Always listen and explain things to me .
 - b. Usually listen to me and explain to me .

2. **When it comes to pain management:**
 - a. Doctors and Nurses always do everything they can to control my pain.
 - b. Doctors and Nurses usually do everything they can to control my pain.

3. **When it comes to the Hospital environment:**
 - a. One where staff usually wash their hands.
 - b. One where staff always wash their hands.

So, let's review our "Points to Ponder" SIMPLE

If I could learn Service Behaviors in 30 seconds or less,
I would make them part of my daily practice.

Always address patients, families and staff by stating

Who you are

What you are doing and

Why you care.

So, let's review our "Points to Ponder" DOABLE

If I knew what my patients needed, I would commit to meeting their needs.

Rounding- Does it work?

- Yes if done appropriately
- Always engage patients, families and staff by asking them, "what is the most important thing I can do for you today/now?"

So, let's review our "Points to Ponder"

MEANINGFUL

Caring for others is: My task, my job, my responsibility, my pleasure.

Why did you get into healthcare?

- **Principle:** Care becomes meaningful when it is driven by a sense of purpose that leads to pleasure and not just seen as a task, my job or my responsibility. Care becomes a superior experience when patients perceive it coming from a sincere sense of meaning and pleasure as if they were our family.
- **Expectation:** Always end conversations with patients, families and staff by stating: "It is my pleasure."

So, let's review our "Points to Ponder"

SUSTAINABLE

One patient at a time, every time is: realistic, idealistic or impossible.

- **Expectation:** Always give your full attention "one patient at a time, every time."
- **Principle:** I sustain that which is realistic not idealistic. The ultimate reality of service and care is that I am only able to care for one person at a time, every time, even when I have a multiple load of patients. Superior experience and care comes down to that simple reality.

So, let's review our "Points to Ponder" TRANSFERABLE

If my experience with patients becomes more positive and meaningful, I would encourage others in my team to change as well.

- **Expectation:** Always come prepared "to live Trust, Belonging and Hope" everyday and invite others to do the same.
- **Principle:** I transfer that which has meaning. When I experience the meaning of trust, belonging and hope in my heart, I am able to transfer that experience to others. The more I transfer the more I receive, the more I receive the more I transfer. This is known as "dynamic culture".

Service Behavior in 30 seconds

- **Who I am?**
 - Patient's perspective - "I trust you when I know you."
 - Do you know yourself? Do you know how you present yourself?
- **What I am doing?**
 - Patient's perspective – "It's not what you said, but what I heard."
 - Whatever is left **blank** in the mind of patients, will get filled by others (Media, interpretation).
- **Why are you doing it?**
 - Have you considered the meaning of "It is my pleasure?"
 - What is keeping your care of your patients from being a pleasure?
- **Accountable Rounding**
 - **"What is the most important thing I can do for you today?"**
 - Allows the patient to be a partner in their care.
 - **"Is there anything from the last shift that I need to follow-up on?"**

“Key principles for successful deployment”

- 1. Providing the same experience for employees as we do for patients**
 - building trust, ensuring belonging, providing hope
- 2. Patient Care driven by purpose not just function.**
- 3. Providing consistent encounters through specific behaviors**
 - Name - who I am, Function - what I am doing, Purpose - why am I doing it.
- 4. Operational Processes that focus on the Person**
 - “What is the most important thing I can do for you today?”

Sustaining a commitment to a new way of being

The employee experience and the patient experience does not happen by chance it has to be intentional. It has to be how we engage everyday – every shift.

Can you make a 1 degree change?

“...seemingly small things can make a tremendous difference.”

The End



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