

SATISFACTION

Success Story

ACHIEVEMENTS WE ALL CAN LEARN FROM

NOT JUST GOOD VERY GOOD



*St John of God Health Care
Subiaco, Western Australia*

Because good ideas should be recognised

Press Ganey's Success Stories and testimonials acknowledge and reward the innovative efforts of our clients who integrate their satisfaction data and Press Ganey's solutions support to produce outstanding clinical outcomes, improvements in patient perceptions, staff morale, operational efficiencies and financial performance.

We hope these experiences will enlighten and motivate individuals in all types of health care organisations.

Contact Press Ganey:

info@pressganey.com.au

Ph: (07) 5560 7400

Fax: (07) 5560 7490

PRESS GANEY

INTRODUCTION

St John of God Hospital Subiaco (SJOGHS) is one of Australia's largest private hospitals, with the capacity to treat some 634 patients. The Hospital is a world class facility with a comprehensive range of clinical specialties and on-site diagnostic services. With its Mission and Values steeped in the history of the Sisters of St John of God, the Hospital has enjoyed a century of growth and success in the not-for-profit health care industry.

Employing some 1800 staff, referred to as caregivers, admitting more than 53,000 patients in the last financial year, and with over 600 accredited specialists, the Hospital has a large number of people with which it strives to maintain good relations.

With the organisation's Values focused on Hospitality, Excellence, Compassion, Justice and Respect, ongoing surveying and feedback is integral to the Hospital's ability to provide the very best service and facilities and respond to community needs. Patient satisfaction surveys enable the Hospital to listen to patients' experiences.

Over the previous three years, operating in a climate of increasing competition and consumer demand for excellence in service delivery, and following on from a \$100 million Hospital-wide refurbishment and redevelopment program, SJOGHS found itself in a position where patient satisfaction levels, as measured by Press Ganey, were decreasing.

The focus for the 2009 patient satisfaction survey was to not only encourage patient feedback but to move the feedback from 'good' to 'Very Good'.

In keeping with this, the Hospital launched an awareness campaign titled "not just good, Very Good" promoting the value of feedback and placing particular emphasis on our commitment to providing patients and their family/friends with "Very Good" care.

OUR APPROACH

Sustaining Change

In previous years, the development of complex action plans in accordance with the patient satisfaction survey results was a key feature of our planning. These plans were often complex and wordy and had little meaning to the caregiver at the patient's bedside.

The Hospital committed itself to promoting an approach to address patient satisfaction which focuses on maintaining momentum of the program "Promoting the Service Ethos".

The Divisional Management Committee's intimate knowledge of the Hospital suggested we needed to look at the bigger picture of organisational culture if we wanted sustained and meaningful change. In looking at patient satisfaction in the context of organisational culture we operated from a definition of culture being the behaviours, symbols and processes that communicate "what is valued, important and the way things are done" within the Hospital.

Collaborative and Team Approach

There was a high degree of commitment by all Executive and Managers to embrace and drive the cultural improvement plan. This plan committed the Hospital to improving cultural issues and striving to further develop the St John of God Hospital Subiaco culture.

To ensure the focus was on making a change, patient satisfaction became a standing agenda item at the Hospital Management Committee meetings and a steering committee was established which met weekly to drive the changes and strategies.

Research and Best Practice Review

Using the Press Ganey Solution Starters and embracing the principles espoused by the Studer Group, the Hospital committed itself to some simple strategies that embraced regular rounding of patients by caregivers, managers and executive and the use of whiteboards to communicate key messages to patients. This, along with an opportunity to see these strategies in action in other hospitals in Australia and overseas, led the team at SJOGHS to commit to implementing these principles as part of the overall patient satisfaction strategy.



HOW WE DID IT

Guided by our Service Ethos Model both short and long term strategies were developed including:

Focus on the St John of God Healthcare Service Ethos Model in order to provide a holistic and distinctive service;

Our theme is "Patient Care: not just good, Very Good". Our aim is to promote the value of receiving patient feedback. We want our patients to tell us that their visit to St John of God Hospital Subiaco was a VERY GOOD experience. The key question we asked all managers was, "WHAT MOTIVATES YOU AND YOUR CAREGIVERS?"

The central theme relied on the importance that relationships are central to improving our patient satisfaction and therefore the lead theme in our Service Ethos, Every Encounter is critical to this.

The other critical success factor is the way we work together and therefore it is vital that the concept of Shared Patient Care is adopted and implemented on each of the wards and units.

When we focus on improving satisfaction, we focus on the Service Ethos which promotes, "Every Encounter is an opportunity":

- Every Encounter
- Every Moment
- Every Person
- Every Day

AND

"The Way We Work Together as a Community is integral to our service":

- Compassionate
- Courteous
- Collaborative
- Coordinated

See attachment for a profile of the St John of God Healthcare Service Ethos Model.

One of the key themes that emerged from the 2009 Patient Satisfaction results was how important the concept of "Coordinated Care" and "Good Communication" is to our patients.

In 2009, our patients told us that working together to provide care, providing information and keeping the patient and family informed, involving the patient in the decision making process and making them aware of their rights and responsibilities were rated as being the most important.

Sustaining our Model of Care – Shared Patient Care

Our model of care is focused on the team concept where patient care is delivered by a team led by the Registered Nurse or Midwife. This is called **Shared Patient Care**, where a shared responsibility and focus on team work is embraced. This is integral to the way we work together as a community.

The team is made up of Registered Nurses/Midwives, Enrolled Nurses, Student Nurses and Patient Care Assistants who work together to care for a group of patients. Whilst each role has specific responsibilities which range from the planning of care, delivery of complex care such as wound dressings and specialised care such as chemotherapy and medication administration and the activities of daily living such as showering, toileting and comfort, the team works together to provide all of the patients needs in a coordinated and collaborative way.

Caregiver education specifically focused on the importance of rounding and keeping the patient informed

Rather than re-invent the wheel we needed to focus on the great work already done by the whole Hospital to improve our patient satisfaction over the last three years. We then focused our efforts on the three key themes in 2009/2010. These were:

- Promoting the Service Ethos. This includes caregiver education and a focus on the **every encounter and the way we care** component of the model.
- Developing and Implementing the Shared Patient Care (team nursing) Model across wards and units.
- Developing high end communication strategies such as whiteboards for patient's rooms, discharge phone calls and ward-based and leader rounding.

Patient Care

not just good, Very Good!



From the 5th February to the 29th March our external patient satisfaction survey process (called Press Ganey), will be underway. All patients will receive one in the mail after their stay with us. We need your help to promote the survey and encourage them to complete it and let us know how we are doing. We value our patients feedback as this is how we can improve the service we provide to patients.

Let's focus on the following areas to ensure the patients stay Isn't just good, It's VERY GOOD.

THEME 1 Concerns or complaints – let's encourage feedback from our patients and if there is a concern or complaint, ensure the Nurse Manager is aware of it.	THEME 7 Visitors comfort The comfort of our patients visitors is also an important part of the patients care. Please listen to their needs where possible.
THEME 2 Patients rights and responsibilities – we want to ensure patients know of their rights and responsibilities. These are available in the Patient Compendium or through our Customer Quality Coordinator, Michelle McCollill. If the patient still has any questions, please advise the Nurse Manager.	THEME 8 Patient discharge Ensuring the patient is prepared for their discharge is all part of our aim to provide very good care. Help in arranging home care services is also vital.
THEME 3 Emotional or spiritual needs – let's ensure the patients emotional and spiritual needs are being met. If there are any issue in this regard, please involve your Nurse Manager or a member of our Pastoral Services Team.	THEME 9 Keeping the patient informed The whiteboards in patients rooms should be used as one of the ways to keep your patient informed. Please ensure clear communication of treatment plans as part of our aim for very good care.
THEME 4 Keeping the family aware of the patients treatment To keep the patients family abreast of their treatment plan, please ensure the whiteboard is kept up to date.	THEME 10 Patient involvement regarding their care It is important that patients are involved in decision making around their care. Please remember to involve them to ally fears and make them comfortable.
THEME 5 Preparing the patient for discharge Correct and thorough preparation is essential, including instructions for care once the patient is at home. If there are any issues with this, please involve the Shift Coordinator.	
THEME 6 Pre Admission Thorough pre admission is vital to our patients care. If the patients does not feel they were properly prepared for admission, please advise the Nurse Manager or Tracey Parr, our Clinical Leadership Coordinator.	

Our commitment is to provide very good care.

ST JOHN OF GOD HOSPITAL
SURRELAGO

Rounding

Two types of rounding were introduced at SJOGHS. These were Caregiver Rounding which involves a member of the care team visiting the patient at least hourly. Rounding aims to reduce call bells as patient's needs are met proactively.

In the 2009 Survey, our patients told us that the response to the call bell had decreased from 2008. Our patients told us that this was an important issue for them.

Manager rounding saw the Nurse Manager visiting patients each day. This was an opportunity to allow patients and their families to discuss any issues. The name and the mobile phone number for the Nurse Manager were written on all whiteboards in the room and the patient was encouraged to call the Manager if they had any issues the caregivers could not answer.

Executive Rounding focused on confirming patient satisfaction, identifying any gaps and recognition of caregivers for good service.

Meal tray flyers

These flyers were distributed with each meal and rotated throughout the week.

The flyers focused on important areas of satisfaction such as mechanisms for making a complaint, rights and responsibilities, discharge planning, spiritual care and decision making. They were distributed to help maintain the patients' awareness.

The flyers were also used to reinforce the processes for patients to provide feedback and prompt the patient on who they should ask if they had a question about a specific issue.

We hope your visitors felt comfortable when visiting you during your admission.

We want our care during your stay to be Very Good.

If your visitors did not feel comfortable please ask to see the Shift Coordinator or speak to the Nurse Manager

You may receive a survey sent to your home once you are discharged from hospital.

We value your feedback as this is how we can improve the service we provide to patients.

We appreciate you completing the survey.

ST JOHN OF GOD HOSPITAL

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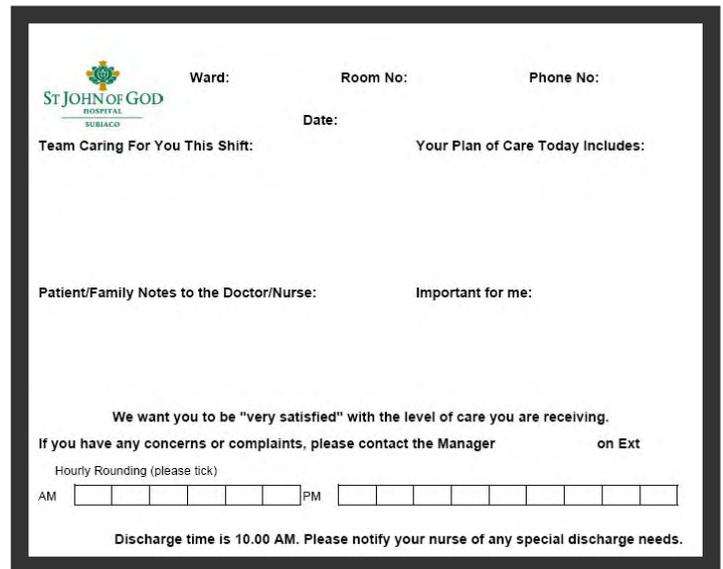
We appreciate you completing the survey.

ST JOHN OF GOD HOSPITAL

Whiteboards for patient rooms

Whiteboards were introduced into all patient rooms in 2008. The whiteboards are updated each shift by the nursing team. The key aspects of the whiteboard include:

- Identifying information for the patient that is important i.e. room phone number, team members caring for the patient, name of the Nurse Manager;
- Communicating key milestones/treatment activities for patient each day e.g. out of bed and walking with physio, hydrotherapy, drains out etc;
- Opportunity for family members to write notes for the nursing or medical caregivers;
- Providing an opportunity for the patient to communicate on admission what is important for them and reflects optimal care according to their individual needs i.e. pain management, discharge advice etc; and
- Scripting for patients on discharge time and opportunities to comment on the care they are receiving.



Implemented strategies to address waiting times and the admission process.

These strategies included patient preparation at preadmission and on arrival, as well as ongoing communication and co-ordination of the admissions process to improve patient's perception of waiting times and admission to the Hospital.

Although the patient's doctor sets the order of the operating list and decides what time the patients should be admitted, our aim was to make every effort to keep the patients waiting time to a minimum.

We installed whiteboards into each of the rooms in the Day Surgery Unit. Using the whiteboards to make notes of changes in waiting times or approximate times for procedures keeps our patients updated and helps to reduce their anxiety. This combined with frequent rounding by nurses, assisted in minimising anxiety by keeping patients aware of delays or changes in times.

The importance of keeping patients informed is paramount to ensuring that they have a very good experience and our role as their caregiver is central to achieving our commitment to them and their families.

Implementation of discharge phone calls

The Hospital developed its own in-house database for collecting information from discharge phone calls. Caregivers would call patients within 48 hours of discharge and would re-confirm discharge instructions, discuss clinical issues and provide advice and referral if necessary. They also provided a point of contact for any issues or complaints and helped in reinforcing patient perception that excellent care has been provided.

Discharge phone calls have been undertaken since April 2006 and have been proving successful in providing advice and reassurance to patients in the immediate days after discharge.

The post discharge phone call survey system has been modified to include key questions regarding the patients stay in hospital. The Discharge Phone Call Team survey around 65% of all inpatients discharged and 90% of all post natal patients.

Our strategies have resulted in a dramatic improvement in satisfaction with waiting times:

Question (Source: Day Surgery Report 2009)	2008		Mean Diff	2009	
	Mean	% All Pvt		Mean	% All Pvt
Information provided about delays	67.5	6	11.2	78.7 **	72
Wait time to receive surgery	76.7	23	5.1	81.8 *	66
Wait time in admission	74.3	10	7.5	81.8 **	59
Wait time to see surgeon	79.8	17	5.8	85.6 **	77
Nursing Staff let you know the time of procedure*	80.4	11	6.3	86.7 **	67
Overall rating of care	90.8	34	2.4	93.2	71
Likelihood of recommending	91.4	44	2.3	93.7	82

Source: Press Ganey Day Surgery Report

Communication with our patients and their families during all stages of their admission.

This was achieved by the increase in preadmission telephone calls and the review of preadmission scripting to ensure consistent and standard information was provided.

Ensuring our patients are prepared for discharge is a process that starts before admission. In previous years, our patients had not rated this part of our service well.

Our patients tell us that the pre-admission clinic appointment helps them get ready for home by providing them with information that prepares them for their stay and for discharge. The use of discharge instructions and checklists is valued by the patient and the provision of information by our nursing caregivers ensures they feel confident and comfortable about going home.

The strategy of providing clear and consistent communication, written information including the availability of services saw a significant increase in our mean score for these areas.

Review and update of all pre-admission information provided to patients to include information about waiting times.

The Hospital recently launched a new comprehensive Admission Guide for patients that has combined all admission information, plus other important information relating to the Hospital and our services/facilities, in one handy reference booklet. This has been well received by our patients.

The Admission Guide was created following on from a review of the Hospital's patient admission brochures. A copy can be found on our website. These books are distributed with the Clinical Information Forms. The Clinical Information Form is a document combines the patient's history, Dr's admission instructions and consent form into one document. This combination of information ensures that the patient only has to send one document into the hospital to arrange admission and is provided with the pre-admission information before admission.

The Hospital's mean score and percentile ranking over time have been variable but there has been a significant shift in the last year's mean score and percentile rankings in both the inpatient and day surgery surveys since the implementation of these strategies as highlighted below:

Inpatient Survey Results

Year	Mean		Percentile		
	Score	Change (from prev year)	all hosp	all private	300+ bed
2007	82.7	-0.7	37	26	44
2008	81.8	-0.9	32	20	44
2009	83.5	1.7	49	41	67

Question	2008		Mean Diff	2009	
	Mean	% All Pvt		Mean	% All Pvt
If stay pre-arranged, was the hospital was ready	83.5	28	2.7	86.2 *	50
Pre-admit process prepares you for your stay	84.3	54	1.4	85.7	69
Promptness of response to call bell	77.4	8	-0.1	77.3	11
Nurse effort to include you in decision making	81.5	15	1.4	82.9	34
Instructions for care at home	77.5	8	2.9	80.4 *	26
Help arranging home care services	75.9	11	4.6	80.5	33
Made aware of rights & responsibilities	74.6	28	2.1	76.7	46
Made aware how voice complaint	68.6	35	6.1	74.7 **	71
Likelihood of recommending hospital	89.1	41	1.9	91	59

Source: Press Ganey Inpatient Report

Day Surgery Survey Results

Year	Mean		Percentile		
	Score	Change (from prev year)	all hosp	all private	Prvt 5001-7000
2007	85.9	-0.1	32	25	41
2008	85.7	-0.2	29	23	29
2009	89.2	3.5	82	81	86

Question	2008		Mean Diff	2009	
	Mean	% All Pvt		Mean	% All Pvt
Information provided about delays	67.5	6	11.2	78.7 **	72
Wait time to receive surgery	76.7	23	5.1	81.8 *	66
Wait time in admission	74.3	10	7.5	81.8 **	59
Wait time to see surgeon	79.8	17	5.8	85.6 **	77
Nurses' instruction re home care	84.9	33	3.5	88.4 *	78
Nursing Staff let you know the time of procedure*	80.4	11	6.3	86.7 **	67
Response to concerns/complaints	81.1	7	7.6	88.7 **	71
Staff concerns for your privacy	84.4	30	5	89.4 **	92
Overall rating of care	90.8	34	2.4	93.2	71
Likelihood of recommending	91.4	44	2.3	93.7	82

Source: Press Ganey Day Surgery Report

CONCLUSION

Every day St John of God Hospital Subiaco receives many positive comments from patients through the patient feedback forms and the Discharge Phone Call Service. Patients tell us that we are doing a great job.

The aim of the ongoing patient satisfaction survey and customer feedback processes is about maintaining good communication with patients and families to ensure that the best care/experience is provided, as well as to solicit constructive criticism about how to maintain or improve the care that the hospital provides.

SJOGHS believes that the direction it has taken towards improving patient satisfaction is appropriate to patients, caregivers and the Hospital. The efforts we have employed must be sustained and the progress made applauded. However, our greatest challenge is to ensure that the significant change that has been achieved is maintained and continues to be a commitment of the Hospital and our caregivers in the long term.

This is a challenge the hospital is committed to.



Contact details:

Jeffrey Williams
Director Quality and Risk
St John of God Hospital, Subiaco

PH: 08 9382 6195

Fax: 08 9382 6725

Email: jeffrey.williams@sjog.org.au