

Improving Responsiveness of Hospital Staff to Drive Patient Satisfaction Scores

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Background

Nursing theorist Hildegard Peplau was best known for her theory of interpersonal relations. She believed that the relationship between nurses and patients is primarily transactional and that there is a positive correlation between the degree of dependence on the staff and the patients' stage in the recovery process. The central aim of this project was to establish a plan for delivery of care that was patient and family centered. Achieving this goal was dependent on educating the staff about Peplau's theory, understanding the perceptions of the care they provide and being receptive to making changes in their current practice. Assessing the attitudes of staff prior to any changes was necessary to plan effective interventions. Using input from staff surveys, the facility's Patient and Family Advisory Council and reviewing the comments left by patients on the Press Ganey surveys helped shape the project and guide its direction.

Planned Interventions

- Leader Rounding daily focusing on new admissions to unit
- Purposeful Hourly Rounding with the "5 P's"
- Scripting Techniques for message taking and managing up colleagues
- Welcome Letter explaining the unit routine and expectations
- Commit to sit at eye level with each patient for at least 5 minutes per shift
- Peplau Inservice to explain framework of project to staff

Purpose

In an effort to increase patient satisfaction in an acute care setting, an intervention was implemented on a 32 bed Telemetry unit. This was a combination of staff education about Peplau's interpersonal relations theory, leadership rounding, purposeful hourly rounding, staff scripting and distribution of an admission packet to patients and families.

Hospital and Pilot Unit Characteristics

- Community Hospital in suburban New York
- Telemetry is a 32-bed unit
- 128 Acute Care Beds
- Nurse Manager on the unit
- 35,000 Emergency Department visits per year
- 6:1 Nurse to patient ratio
- 2 Labor Unions for employees
- LPN as a cardiac monitor technician

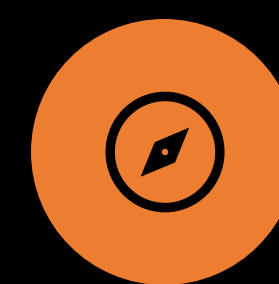
Nursing Sensitive Indicators Over Time on the Pilot Unit

- Hospital rating 9 or 10 **increased by 17%**
- Likelihood to recommend **increased by 13.8%**
- Responsiveness of staff **increased by 21.7%**
- Call bell answered quickly **increased by 47.6%**

Nursing Sensitive Indicators Over Time on the Comparison Unit

- Hospital rating 9 or 10 **increased by 10%**
- Likelihood to recommend **increased by 10%**
- Responsiveness of staff **increased by 9.5%**
- Call bell answered quickly **decreased by 25%**

Practice Issues and Challenges



ALL CHANGES WERE ROLLED OUT AT ONE TIME



AGGREGATE DATA WAS DIFFICULT TO CALCULATE INFERRENTIAL STATISTICS



MAINTAINING STAFFING RATIOS AND ROLE DELINEATION



PRESENCE OF LABOR UNIONS INTRODUCED VARIOUS CHALLENGES

Implication for practice

- Practice change was easy to support. There was little financial or human capital expenditure needed for successful outcomes
- Plan was adaptable to different nursing units and practice settings
- Leader engagement and active role modeling of patient and family centered care is critical for success
- Provided clarity on areas that the organization as a whole was doing well and where it was struggling. This enabled some plans to be generalized for more uniform outcomes

References

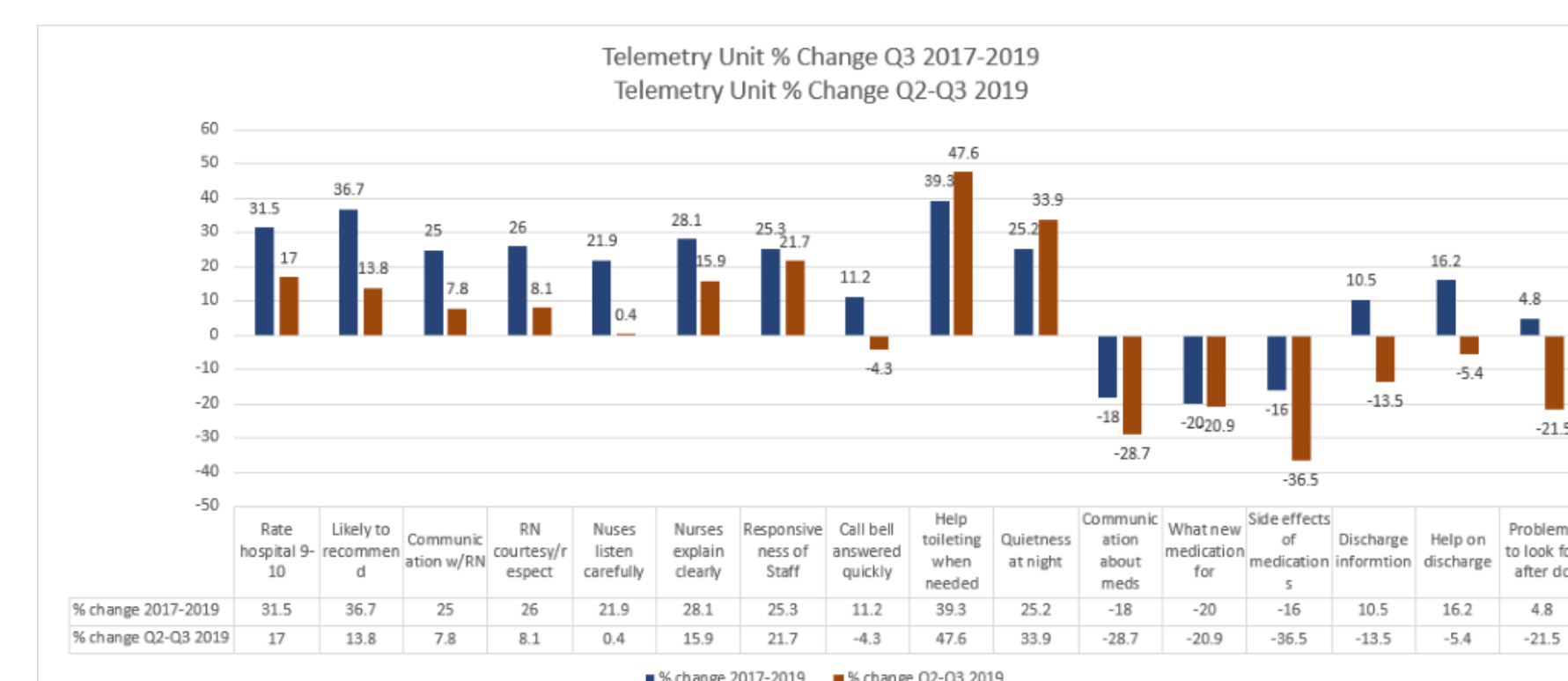
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Visual Representation of Press Ganey Results

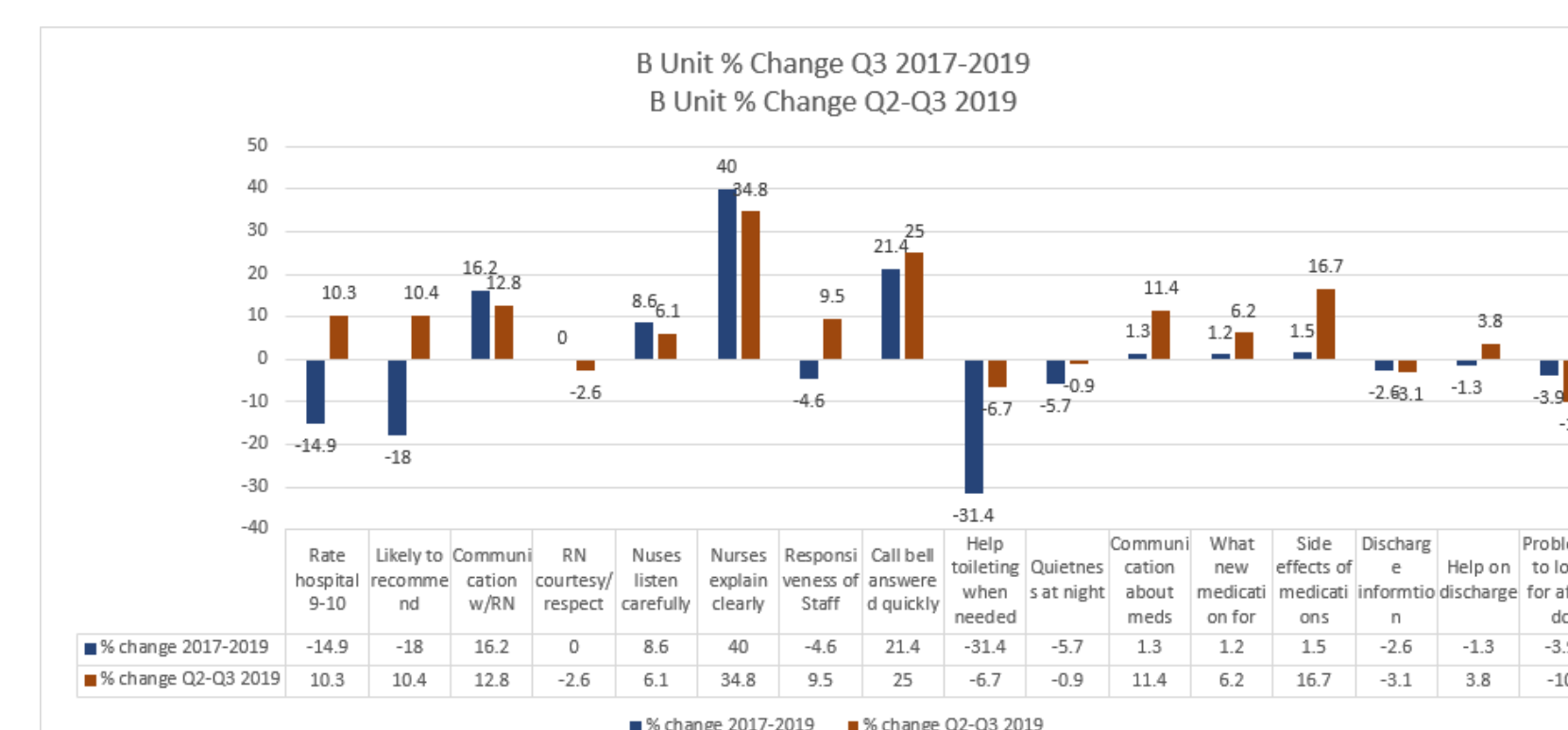
Blue Bar: Baseline 2017-2019

Orange Bar: Intervention Period Q2-3 2019

Pilot Unit



Comparison Unit



About the Author

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