Expedition Coordinator

Kayla DeVincentis, CHES, Project Coordinator, Institute for Healthcare Improvement, currently manages web-based Expeditions and the Executive Quality Leaders Network. She began her career at IHI in the event planning department and has since contributed to the State Action on Avoidable Rehospitalizations (STAAR) Initiative, the Summer Immersion Program, and IHI’s efforts for Medicare-Medicaid enrollees. Kayla leads IHI’s Wellness Initiative and has designed numerous activities, challenges, and educational opportunities to improve the health of her fellow staff members. In addition to implementing the organization’s first employee health risk assessment, Kayla is certified in health education and program planning. Kayla is a graduate of Northeastern University in Boston, MA, where she obtained her Bachelor of Science in Health Science with a concentration in Business Administration.
WebEx Quick Reference

- Welcome to today’s session!
- Please use chat to “All Participants” for questions
- For technology issues only, please chat to “Host”
- WebEx Technical Support: 866-569-3239
- Dial-in Info: Communicate / Join Teleconference (in menu)

When Chatting…

Please send your message to All Participants
Expedition Director

Kelly McCutcheon Adams, LICSW has been a Director at the Institute for Healthcare Improvement since 2004. Her primary areas of work with IHI have been in Critical Care and End of Life Care. She is an experienced medical social worker with experience in emergency department, ICU, nursing home, sub-acute rehabilitation, and hospice settings. Ms. McCutcheon Adams served on the faculty of the U.S. Department of Health and Human Services Organ Donation and Transplantation Collaboratives and serves on the faculty of the Gift of Life Institute in Philadelphia. She has a B.A. in Political Science from Wellesley College and an MSW from Boston College.

Today’s Agenda

- Introductions
- Debrief Action Period Assignment
- Live Case Study – Lessons from the field
  - York Hospital, York, PA
  - St. Michael’s Hospital, Toronto, CA
- Q & A
Overall Program Aim

Using the IHI Patient Experience Change Package, this program will aid participants in:
- a) harvesting updated concepts to improve the culture and strategies for improving patient and family experience;
- b) assuring the foundations for success are identified and implemented to support the stickiness of their strategies.

Expedition Objectives

At the end of the Expedition each participant will be able to:
- Identify new concepts to test that will improve patient experience
- Explain how attention to reliability affects the utility of change ideas
- Describe key issues to address when planning spread of effective ideas
- Modify current practices to increase reliability and ability to spread
- Recommend actions to engage colleagues at all levels in patient and family experience culture change
Schedule of Calls

Session 1 – Foundational Elements to Improve Patient and Family Experience
Date: Wednesday, June 26, 1:00 PM – 2:30 PM ET

Session 2 – Latest Thinking and New Ideas – Engaging Others for the Journey
Date: Wednesday, July 10, 1:30 – 2:30 PM ET

Session 3 – Using Reliability Concepts to Improve Patient Experience
Date: Wednesday, July 24, 1:30 – 2:30 PM ET

Session 4 – Spread and Adaptability
Date: Wednesday, August 7, 1:30 – 2:30 PM ET

Session 5 – Live Case Studies of Improving Patient Experience
Date: Wednesday, August 21, 1:30 – 2:30 PM ET

Faculty

Barbara Balik, RN, EdD, Principal, Common Fire Healthcare Consulting, is also Senior Faculty at the Institute for Healthcare Improvement. Her areas of expertise include leadership and systems for a culture of quality and safety, including patient- and family-centered care, patient experience, systems to improve transitions in care, and transforming care prior to or with optimization of an electronic health record implementation. She works with leaders to develop adaptive systems to excel and innovate in complex organizations, and to ensure sustained improvement and innovation every day. Ms. Balik’s publications include the book, *The Heart of Leadership*, and the IHI white paper on "Achieving an Exceptional Patient and Family Experience of Inpatient Hospital Care," among others. Previously, she served in senior leadership roles at Allina Hospitals and Clinics, United Hospital, and Minneapolis Children's Medical Center.
Action Period Debrief

- Using the Seven Spreadly Sins list, reflect on a change you are currently spreading at your organization
- Are you committing any of the “sins”?
- What can you do to change course?

The Seven Spreadly Sins

(If you do these things, Spread efforts will fail!)

Step #1 Start with large pilots
Step #2 Find one person willing to do it all
Step #3 Expect vigilance and hard work to solve the problem
Step #4 If a pilot works then spread the pilot unchanged
Step #5 Require the person and team who drove the pilot to be responsible for system-wide spread
Step #6 Look at process and outcome measures on a quarterly basis
Step #7 Early on expect marked improvement in outcomes without attention to process reliability

Robert Lloyd, PhD., Institute for Healthcare Improvement
Sometimes the questions are complicated and the answers are simple

Dr. Seuss

Expedition Recap

- Connections
  - Staff and Providers with Patients and Families
- Foundational Elements
  - Leadership
  - Engagement
  - Improvement and Infrastructure
Patient Experience Actions: Overview

Key areas for improving specific domains of patient experience

Staff and Physicians
- Systems designed to support staff and physicians' delivery of effective, reliable care consistent with patients' values and beliefs.

Leadership
- Leaders take ownership of defining purpose of work and modeling desired behaviors.

Engagement
- Staff, leaders, and physicians engage patients and families to improve patient experience.

Improvement/Infrastructure
- Daily improvements are solidly grounded in skills to achieve reliable change and meaningful understanding of data.

Patient and Family
- Systems designed to support engagement of patient and family in care to create optimal individual patient experience.

Connection
- Interchange to support mutual goals of care – calling on staff and physician expertise of health care and patient expertise of self.

Foundation for Improving Patient Experience

WellSpan Health – York Hospital

York, Pennsylvania
Bedside Shift Report Shadowing

**Purpose:**
1. Shadow staff to determine efficacy of current unit bedside shift report practices
2. Huddle with staff immediately to provide positive aspects and opportunities for improvement. Coach by giving examples of how the report could have been done more effectively
3. Provide daily feedback to unit manager and weekly feedback to Clinical Director, using copies of observation sheets.

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Bedside Shift Report Shadowing

**Successes:**
1. Force function for staff who are hesitant to try it
2. Increased peer accountability to complete bedside report
3. Increased pride and professionalism
4. Staff became more aware of how to incorporate computer on wheels in report.
5. Opportunity to emphasize need to visualize the patient together (i.e., drains, wounds, IV’s, etc)
Bedside Shift Report Shadowing

- **Challenges**
  1. Time and resource intensive due to nature of “add on” responsibility
  2. Arranging shadowing for evenings and weekends

- **Lessons Learned**
  1. Shadowing doesn’t need to be repeated on staff who are successful in first shadowing
  2. Next Step: include actual observations in each annual performance evaluation

Contact Information

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St. Michael’s Hospital - Heart and Vascular Program

- Toronto, ON., Canada

Successes

- Greatest success: Transfer of Accountability (ToA)
- Key lessons:
  1. **Sustainability**
  2. Strong and committed champions
  3. Organizational support
  4. Staff engagement
  5. Patient safety

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Challenges

- Biggest challenges:
  1. Staff engagement
  2. Sustainability

- Key lessons:
  1. Providing feedback to staff
  2. Audit charts provide visual representation of success
  3. Ensuring patient perspective is central to any initiative

"The greatest glory in living lies not in never falling, but in rising every time we fall.”

“IT always seems impossible until it's done.”

Nelson Mandela
IHI Resources

- 100K Lives Campaign Guide on Sustainability and Spread
  http://www.ihi.org/knowledge/Pages/Tools/HowtoGuideSustainabilitySpread.aspx

- IHI White Paper on Spread
  http://www.ihi.org/IHI/Topics/Improvement/SpreadingChanges/

Follow Up

- The listserv will remain active.
  - To use the listserv, address an email to PatientExperienceExpedition@ls.ihi.org

- Instructions to receive Continuing Education Credits will be sent with the follow-up email for today's session
  - Please complete the instructions within 30 days

- Please take 5 minutes to complete the Expedition evaluation survey
Thank you!