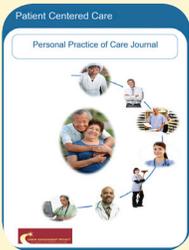


Patient Centered Care

The Labor Management Project's Patient Centered Care (PCC) initiative began in 2012 and continues through 2013, with grant funding from the New York State Health Workforce Retraining Initiative. The Labor Management Project (LMP) developed a robust curriculum and has provided training and technical support to participating hospitals to advance their approach to patient centered care. As of January, 2014, 3,166 hospital employees have received PCC training, and 12 hospitals have launched and completed Performance Improvement (PI) projects with assistance from the LMP. The LMP has also developed and delivered Train the Trainer services to ensure broader spread within hospitals.



What is Patient Centered Care?

Patient centered care involves partnering with patients and families to personalize care and to preserve patients' normal routines as much as possible. A provider of patient centered care takes into consideration cultural traditions, personal preferences and values, family situations, social circumstances and lifestyles when interacting with patients and their families. Care is based on continuous healing relationships and is customized based on patients' needs and values. Each and every hospital employee has a role to play in providing patient centered care.

Key Components of the LMP's Patient Centered Care Curriculum

Health Care Reform/HCAHPS

The PCC training includes an orientation to Health Care Reform, the Affordable Care Act, and federally mandated measures of the patient experience – HCAHPS surveys (Hospital Consumer Assessment of Healthcare Providers and Systems). Participants come to understand how HCAHPS survey results impact hospital Medicare reimbursement.

Relational Coordination

Relational coordination is teamwork. It emphasizes that ALL staff and ALL departments play an important role in how the patient experiences a hospital stay. Employees from environmental services, social services, security, food and nutrition, pharmacy, and nursing can all treat patients with kindness and respect, lower patient anxiety, and create a healing environment.

AIDET (Studer)

AIDET® is a communication approach that promotes simple but important behaviors that all staff can practice when interacting with patients. AIDET stands for:

- ▶ **Acknowledge:** Greet the patient with a warm, receptive attitude.
- ▶ **Introduce:** Offer your name and role in the patient's care. Communicate your desire to help.
- ▶ **Duration:** Explain how long a procedure, process, or activity will take, including how long it will take to reach your destination, if applicable.
- ▶ **Explanation:** Provide detailed information. Answer the patients' and/or family members' questions.
- ▶ **Thank You:** Thank the patient for choosing the hospital and for trusting you to provide services.

AIDET is a registered trademark of StuderGroup.

The one-day PCC training addresses the following topics:

- Health care reform
- HCAHPS
- The use of AIDET
- Cultural competence
- Process improvement
- Teamwork and relational coordination
- Creating a healing environment

Cultural Competence

Cultural competence in health care describes the ability of organizations and their staff to provide care to patients with diverse values, beliefs and behaviors. It includes tailoring care delivery to meet patients' social, cultural, and linguistic needs.

Circle of Influence (Stephen Covey)

A Circle of Influence refers to matters over which we have some control. A Circle of Concern encompasses areas that we are concerned about, but may not be able to influence. Covey defines proactive as "being responsible for our own lives.... our behavior is a function of our decisions, not our conditions." Proactive people focus on issues within their circle of influence. By doing so, they are able to reduce stress levels and increase happiness, because they can initiate and influence change.

Adapted from The Seven Habits of Highly Effective People by Stephen R. Covey, Simon & Schuster 1992.

Bracketing

Bracketing is a method of staying calm while having the ability to listen in a situation where you are provoked. Bracketing requires two unique processes:

- Holding back initial reactions to create a space to think through what's best.
- Developing a revised internal thought process and action plan based on your goals as an effective leader and communicator.

LMP Research Spotlight: Bronx-Lebanon Hospital

A New Beginning of Care: A Patient Centered Care Performance Improvement Project

Performance Improvement (PI) is a method for examining performance and testing ways to improve processes and the quality of care. When PCC training was completed at a hospital, the LMP assisted each hospital to undertake a performance improvement project aimed at enhancing the patient experience, with a specific focus on HCAHPS measures.

The Challenge: The Labor Management Project (LMP) worked with union and management sponsors to implement a PI project aimed at lowering the number of call bells on the ninth floor. A decrease in call bells would suggest improved responsiveness: needs are anticipated and addressed before the patient feels the need to call for assistance. Both 1199SEIU and the CIRSEIU (Committee of Interns and Residents) were engaged in this work.

The Solution: A PI team was established on the ninth floor, with representatives from management and the unions across shifts. The LMP provided facilitation training to the team's union and management co-leads; the co-leads then guided the PI team through a process of: implementing new responsiveness policies (hourly rounding and "stay in district," which encourages workers to stay near their room assignments); and training all support and medical staff on the floor to respond to call lights and follow a "no pass" policy (282 employees trained). Additionally, the team trained all nursing staff on how to round using AIDET, the 4Ps (Pain, Position, Potty, Personal), and other proven best practices. The process took approximately three months.

The Results: In April 2013, the team was happy to report a 30% decrease in call bells (from 250 to 175) by the midpoint of the intervention, and an overall 55% decrease in call bells (from 250 to 112) by the end of the project. These decreases suggest that the changes the floor implemented over the twelveweek intervention period increased the likelihood that patients' needs were addressed before they felt the need to ring their call bells.

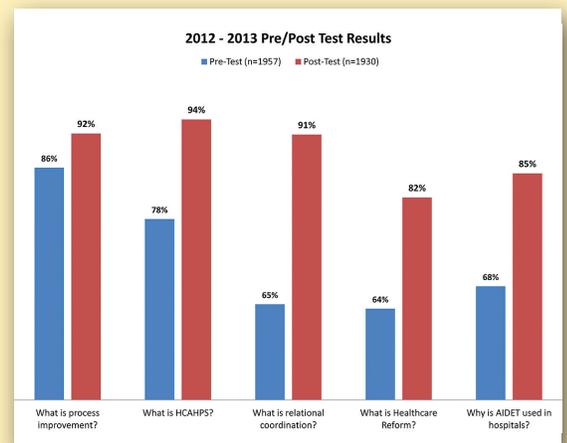
Sustainability: The LMP created a PI coaching Train-the-Trainer program to develop Bronx-Lebanon staff as PI facilitators, including 1199SEIU members, CIR members and managers. To date, nine trainers have completed the Train-The-Trainer program and a Labor Management team has launched

a new PI initiative. Bronx-Lebanon will continue to track how many PCC trainings they have independently facilitated using the cofacilitator model. The LMP will coach the internal facilitators and track performance outcomes as the hospital further expands its PCC program.

Training Evaluations

Pre and Post Quiz Results Across 18 Hospitals

Before and immediately after each PCC training, the LMP trainers administered a knowledge quiz. There were improvements between pre-test and post-test results across all sites. For instance, the percent of individuals who answered the "What is HCAHPS?" question correctly showed an improvement of 15% after the training.



Resources

Studer Group Hourly Rounding Tools

This toolkit includes a checklist for competencies and behaviors used during rounding, and an action plan to implement hourly rounding.

[https://www.studergroup.com/what-we-do/institutes/upcominginstitutes/taking-you-and-your-organization-to-the-next-level/taking-you-and-your-organization-to-the-next-l-\(2\)/tyo-post-event-page/temp_tools/hourly-rounding/](https://www.studergroup.com/what-we-do/institutes/upcominginstitutes/taking-you-and-your-organization-to-the-next-level/taking-you-and-your-organization-to-the-next-l-(2)/tyo-post-event-page/temp_tools/hourly-rounding/)

Patient-Centered Care Improvement Guide

This guide is designed as a practical resource for health care organizations that are striving to become more patient-centered. It contains best practices and practical implementation tools contributed by hospitals from across the United States.

<http://www.ihiknowledge/Pages/ToolsPatientCenteredCareImprovementGuide.aspx>

Advancing PCC Across the Continuum of Care (Whitepaper)

This paper summarizes a framework for defining, implementing and measuring PCC across the continuum of care. The framework lists criteria organized within 11 PCC domains encompassing human interactions, family involvement, environmental design and measurement.

<http://planetree.org/wp-content/uploads/2012/01/Advancing-PCC-Across-the-Continuum-Planetree-White-Paper-August-2012.pdf>