PATIENT-CENTERED CARE PROGRAM RESULTS

The Labor Management Project (LMP) is a consulting group funded by 1199SEIU and the League of Voluntary Hospitals and Homes. The LMP helps labor and management to cooperatively develop solutions to the complex challenges facing healthcare providers today.

The Labor Management Project’s Patient-Centered Care (PCC) Program combines training and performance improvement to enhance the patient experience and connect interdisciplinary teams to the quality improvement process. The PCC program engages participants in understanding “the why” behind changes in the healthcare delivery system. It also provides tools and structures to allow all staff members to contribute to improvements and innovations that increase patient and staff satisfaction.

While improving the patient experience was always a major concern for high-quality hospitals, it is now of paramount importance, given recent changes in Medicare’s regulations that tie a portion of a hospital’s Medicare reimbursement to its HCAHPS scores. HCAHPS, which stands for Health Consumer Assessment of Hospital Providers and Systems, is a standardized national survey of patients’ perspectives of their hospital care. It asks about all aspects of a patient’s hospital experience, including the quality of communication, staff responsiveness, and the cleanliness of the environment.

Funded by a grant from the New York State Department of Health, the Labor Management Project began working with leaders from 1199SEIU and the League of Voluntary Hospitals to launch the PCC program in 2012. The following summary highlights the program’s objectives, processes, and outcomes at one of the New York City-area hospitals where it was implemented.
Bronx-Lebanon Hospital is the largest voluntary, not-for-profit health care system serving the South and Central Bronx, with 972 beds at two major hospital divisions. The Labor Management Project provided support for an internally led performance improvement initiative.

The Challenge
Maximize the patient experience by increasing staff responsiveness to call bells and improving communication, teamwork, and work processes, both within and across disciplines.

The Solution
A two-day Labor Management Project (LMP) training prepared nine Bronx-Lebanon Hospital Center (BLHC) union and management employees to coach fellow staff through performance improvement projects designed to improve patient satisfaction. With support from the LMP, two coaches then guided union and management staff on the 10th floor, a medical-surgical unit, as they identified problems, established project goals, implemented improvements and tracked outcomes. The team adopted these improvements:

- **Improve communication between staff by implementing interdisciplinary rounds.** Staff now gather at the nurses’ station every morning for huddles with physicians.
- **Reenergize the “No Pass Zone” policy.** Trained 194 staff from various departments on how to answer call bells and translated the “No Pass Zone” training and pocket card into Spanish.
- **Improve communication with patients.** Made presentations to staff about hourly rounding using the 4 Ps (assistance with pain, potty, position, and access to possessions), created a Spanish pocket card and updated lesson plan to facilitate use of the 4 Ps, and monitored and reinforced the practice.
- **Improve work processes.** Gave staff updated numbers so they can contact specialists more quickly. Worked with patient transport director to reduce wait times for procedures and tests.

The Results
Call bell use decreased 43% (from 234 to 134 over a five-day period), indicating that more patients’ needs were being addressed before they had to ring their bells. HCAHPS scores improved (see chart), suggesting that patient satisfaction increased as a result of the team’s efforts. The team is committed to monitoring call bell data, HCAHPS scores, and survey results to sustain and improve its outcomes.

**Positive Feedback**

1199SEIU member and unit associate: “Staff is discharging patients earlier in the day. Call bells are down. The floor seems quieter. There are less people queued up in the corridors. Nurses are approaching unit associates to report the needs of other nurses’ patients.”

RN, 10th Floor: “Communication between staff has improved. Transporters now call to let us know they are coming to pick up patients. Nurses are able to prepare in advance for patient discharges. Since meeting with the Transport Director, we’re more aware of the costs associated with delays.”

Chief Financial Officer, BLHC: “This is critical to Bronx-Lebanon’s survival. We have to make this work.”

SEIU Healthcare Committee of Interns and Residents member and resident: “Patients seem more aware of their plans of care. They talk to me now as active participants in managing their care.”