# The Dignity Health Way

Creating an Exceptional Patient Experience in Emergency Care



### Welcome

At Dignity Health, we want every person who passes through our doors to be cared for in a way that consistently expresses dignity, compassion, and kindness. This is who we are, and it is at the core of our healing ministry.

I believe all of us are inherently kind, but sometimes our systems and processes can get in the way. The Dignity Health Way was created to address these challenges. It will focus on key clinical areas, such as our Emergency Departments.

We started by listening to our patients. We asked about what matters to them, what we do that makes them feel like welcome guests, and how we sometimes fall short. From these discussions we developed the Experience Principles (detailed on the next page). The Dignity Health Way was developed with these principles in mind; it helps direct our efforts to be a more caring organization and ensures that the voices of our patients are heard throughout the process.

We then used Design Thinking to understand the obstacles and develop solutions. Design Thinking is a creative, problem-solving approach to improving how we deliver care. The map on pages four and five is an outgrowth of this method and visually depicts how patients transition through the Emergency Room and how the Dignity Health Way will improve their experience.

After testing dozens of design concepts, listening to our patients again, and hearing hundreds of stories and suggestions from staff all across Dignity Health, we selected six transformational processes (pages six through eleven). When these processes are implemented, patients will know when they are at a Dignity Health Emergency Department because of the exceptional experience.

The remaining parts of this booklet will provide additional details. I hope you will find this information useful as we all work together to unleash the healing power of humanity throughout the Dignity Health ministry.



Marvin O'Quinn Senior Executive Vice President/Chief Operating Officer Dignity Health



### **The Experience Principles**

The Experience Principles reflect the patient's voice, and the Dignity Health Way was designed with these principles in mind. The Experience Principles will also help us to be a more caring organization and to ensure that the patient's voice is continually heard.

#### Know me as a person

Connect with me, not my diagnosis. Ask me about my hopes, worries, and fears. Understand my culture, my beliefs, and my preferences. Treat me, my family, and my loved ones as you would treat your guests.

#### Communicate with me

Listen to me. Keep me informed. Keep your promises. Tell me when I will be helped, how long things will take, and why I am waiting. Explain everything so that I can understand it.

#### Empower me

Allow me to be in control of all aspects of my care that are within my reach. Advocate for me, and teach me how to advocate for myself.

#### Comfort me

Greet me with a smile. Recognize when I am in pain, and help relieve my suffering. My family and loved ones need support too. Help them. Create a soothing, healing environment.

#### Keep me safe

Describe what will happen to me. When I need you, be there for me. Let me know when you will be back. Again, keep your promises.

#### Work together as a team

Support each other. I want to be confident in the care I receive, so show me you respect your colleagues. Include me, my family, and my doctor on the team.

Justice

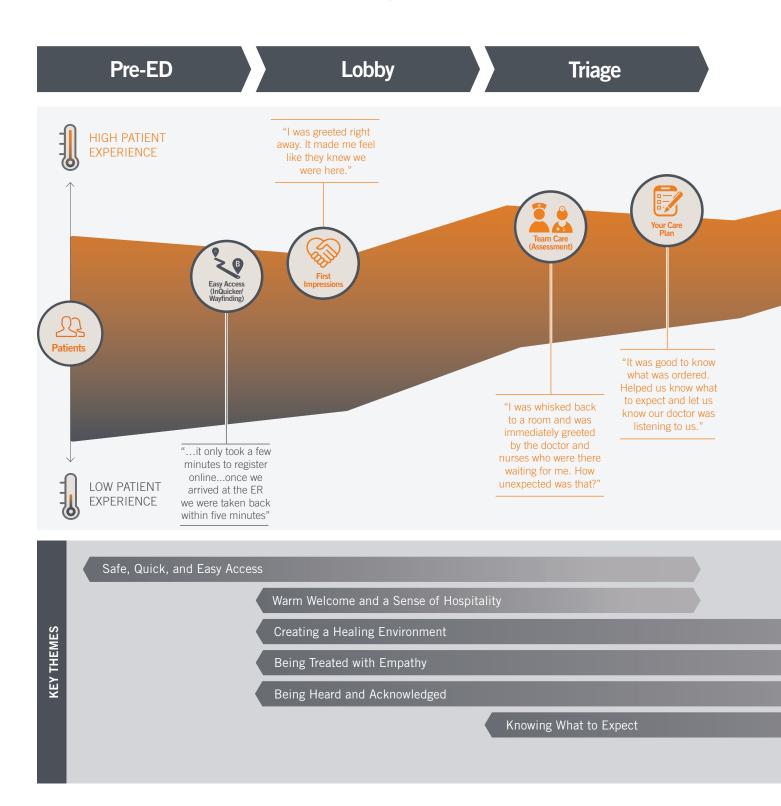
Stewardship

Collaboration

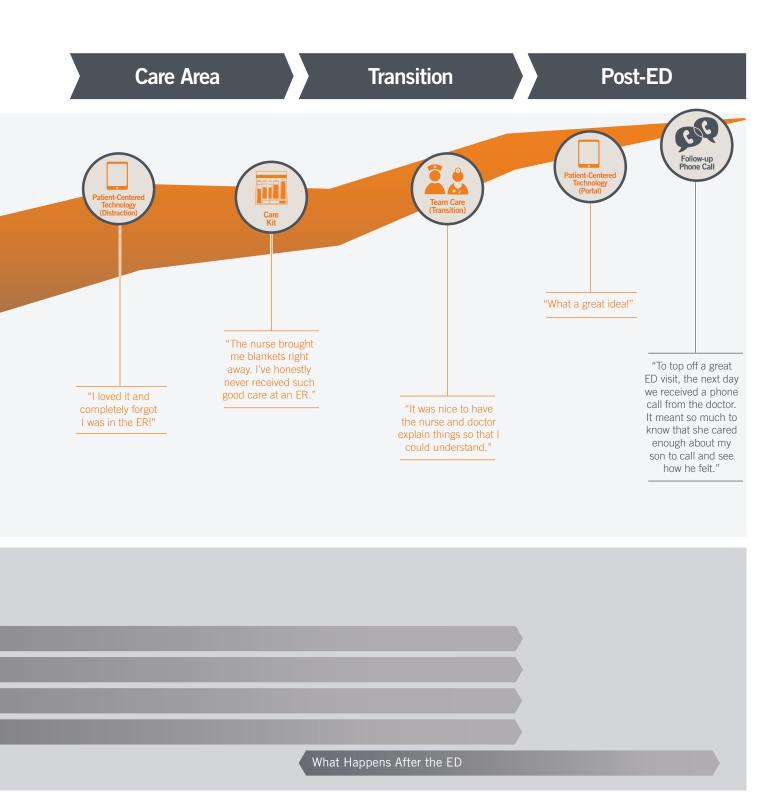
Excellence

## **Dignity Health Way**

Emergency Department Patient Experience Journey Map Patients begin their emergency health care experience even before they enter our Emergency Departments. Some will use InQuicker, others will be brought in by ambulance, and many will come in with family members or others supporting them. Within 5 seconds or 5 feet of entering our facilities, they will receive a warm welcome, and the Team Care Assessment will begin. Once patients are seen by their care team and their orders are entered, they will receive



a "Your Care Plan" information sheet, which details everything that was reviewed verbally but could be forgotten or misunderstood amidst the stress of an ED visit. Patients who are not treated or transitioned home within a few of hours (e.g., ESI levels 1, 2, and some 3) will be offered an iPad, to use while they wait for procedures to be initiated and/or test results to be completed, and a Care Kit containing items to help ease some of the anxiety inherent in an ED visit. After their emergency care has been completed, the patient's care team will meet with them to cover all aspects of care following their transition, whether it is to another level of care or back home. Once they are home, they will receive a call following up on the care they received and addressing any unanswered questions. On the next few pages you will find additional details about the experiences described above.



#### First Impressions: Warm Welcome (5 feet or 5 seconds)



Know me as a person.

The "Warm Welcome" component of the Dignity Health Way is about sharing humankindness with all those around us. We want everyone who visits us to feel like a welcome guest.

We know how important a warm welcome is to our patients. It eases anxiety and reinforces that they came to the right place.

So we will greet each patient within "5 feet or 5 seconds" of coming through the door. We will greet them with a friendly smile, make direct eye contact, and be aware of our body language.

#### AT A GLANCE

#### **Key Steps:**

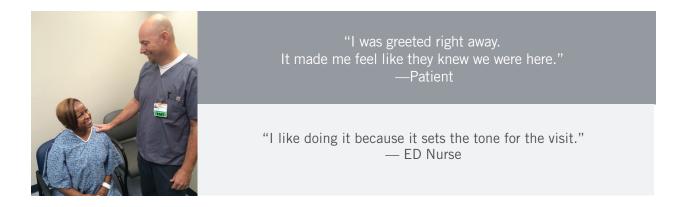
Use the patient's preferred name every time you address them

Maintain eye contact

Remember that body language and professional appearance are important

Be kind and confident

Whether at the bedside or not, all of us play a role in creating an exceptional patient experience. It is everyone's responsibility to make the first impression warm, inviting, and caring.



# Greet everyone with HUMANKINDNESS

Prototype Development Hospital: Dominican Hospital Santa Cruz

#### Team Care: Assessment



Work together as a team.

Our patients have said repeatedly that they feel better about their care when we work together as a team. The patient safety literature clearly reinforces the idea that teams that work collaboratively and

respectfully are more efficient, provide safer care, and even have more fun.

Team Care Assessment is the part of the Dignity Health Way that will help us work together. Team Care Assessment is a process in which the health care team is at the bedside during the first encounter to collect patient information and determine the care plan. **AT A GLANCE** 

Key Steps:

Triage

Provider and nurse do medical evaluation screening together

Provider and nurse discuss plan of care and disposition with the patient

The purpose of Team Care Assessment is to make it easier to communicate and coordinate assessment and treatment. It also ensures that our patients get consistent information. The Dignity Health Emergency Departments that tested this approach during the pilot phase noted better door-to-provider times and received great feedback from patients.

Facility Test Results:







"I was whisked back to a room and was immediately greeted by the doctor and nurses who were there waiting for me. How unexpected was that?" —Patient

"I feel the patients like it better because the nurse and the provider are both present to answer any questions that the patient may have." —ED Physician

## Enhance **COMMUNICATION** between patients and their providers

Prototype Development Hospitals: Mercy Medical Center Redding and St. Bernardine Medical Center

#### Your Care Plan

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Communicate with me.

To keep our patients informed about their treatment during their visit, a simple onepage document called "Your Care Plan" has been developed.

This helpful sheet is created from the information in the Cerner electronic health record and individualized for each patient. In easy-to-understand language, "Your Care Plan" lists the working diagnosis, medications, and pending tests and/or procedures. For hospitals not yet using Cerner, a paper version is being created.

Providers or nurses should review a "Your Care Plan" document with each patient, and give them the document to keep for reference. This will help patients better understand the plan and know what to expect.

#### **AT A GLANCE**

#### Key Steps:

Physician inputs orders during Team Care Assessment

Nurse prints "Your Care Plan"

Nurse sits with patient and reviews instructions

Nurse asks what questions the patient has and lets them know when they will be back



"It was good to know what was ordered. Helped us know what to expect and let us know our doctor was listening to us." —Patient

"It helped to keep the patient informed of their care and tests." —ED Nurse

## **KNOW** our patients and keep them **INFORMED** of their care

Prototype Development Hospitals: Chandler Regional Medical Center and Mercy Hospital of Folsom

#### **Patient-Centered Technology**



#### Empower Me.

Emergency Rooms can be busy, highpressure places. The surroundings, pace, and intensity of activities sometimes make our patients anxious. The stress associated

with being in an Emergency Department can also interfere with healing.

To help patients manage stress or just to pass time while waiting for results, we will give patients electronic tablets (iPad) to use when they are in our Emergency Departments.

In some cases, this patient-centered technology will simply provide entertainment and serve as a diversion for patients and their family. These electronic tablets will also empower patients by giving them access to information and educational materials.

And after patients leave our facility, they can stay informed and connected to Dignity Health through the electronic patient portal.

#### **AT A GLANCE**

#### **Key Steps:**

Clinical staff/volunteer provides electronic device to patient (once settled in room)

Staff checks in on patient on use of device for duration of their treatment

Clinical staff/volunteer helps patient set up patient portal

Nurse directs patient to portal for their discharge information

Clinical staff sanitizes device and stores it

Portal is available to patient after leaving hospital



"It is the best thing ever! It makes the pain go away...I feel better now." —Patient

"I think this is a great tool for our patients to get involved in their care." —ED Physician

## **EMPOWER** and **COMFORT** patients with resources beneficial to their healing

Prototype Development Hospitals: iPad: St. Mary Medical Center, Long Beach, and Bakersfield Memorial Hospital Portal: Mercy Hospital of Folsom

#### Care Kit



#### Comfort me.

We will soon offer Care Kits with personal items for our patients as another way to provide comfort. Care Kits were created to show our patients that we understand what they are going through

and that we want to make their visit a little more relaxing.

Packaged in the Care Kit are items that may help patients rest a little easier. The contents are still being finalized, but we are currently considering a humankindnessbranded blanket to help provide comfort and warmth; ear plugs and an eye mask to help reduce noise and bright light; personal toiletries such as lip balm and mouthwash; and games to provide distraction for the patients and/or their family members.

#### AT A GLANCE

#### Key Steps:

ED staff member identifies patient who would likely benefit from a Care Kit

Staff member asks patient/ family if they would like a Care Kit

Care Kit obtained and given to the patient using key words

The Care Kits will be offered to patients who wait more than a few hours and to any of their family members or friends who stay with them. The kits will demonstrate our humankindness and hopefully provide some comfort at a stressful time.



"The nurse brought me blankets right away. I've honestly never received such good care at an ER." —Patient

"As I tucked the blanket under the patient, it reminded me of why I chose my profession—to care for the patient." —ED Physician

## Create a **HEALING SPACE** for patients

The contents of the kit will be finalized by the end of April, 2015, and ready for distribution by July, 2015.

Prototype Development Hospitals: Prototypes are currently being developed and will be tested with patient advisory groups.



#### Team Care: Transition from Emergency Care



Keep working together as a team.

The team-based approach that began in triage continues throughout the patient's stay. It culminates when they are ready to leave the Emergency Department.

The Team Care Transition process involves a provider and nurse (not necessarily the nurse who initially cared for the patient). They jointly provide education, conduct a "teach back" to ensure patient understanding, and address any unanswered questions. They make sure patients have the information they need before they are admitted or transition back home.

The effective use of Team Care Transition can save time for clinicians. It can reduce delays and "re-work" caused by incomplete or inconsistent information. Most importantly, patients love it!

#### AT A GLANCE

#### Key Steps:

Provider and nurse communicate about possible patient disposition

Provider and nurse enter patient's room and provide tests and results

Nurse completes final reassessments

## Next step depends on destination of the patient

Facility Test Results:

9% reduction in length of stay for patients transitioning home





"It was nice to have the nurse and doctor explain things to me in ways that I could understand." —Patient

"I think it's a great way to get the doctor, nurse, and patient on the same page. Answering questions and covering results together so there is no confusion really helps." —ED Physician

## Ensure **UNDERSTANDING** and **ADDRESS** unanswered questions

Prototype Development Hospitals: Mercy Medical Center Redding and St. Bernardine Medical Center

## **Supporting Activities**

The Dignity Health Way will help us deliver on the promise of *Hello humankindness*. It was not designed in isolation; the Dignity Health Way is part of a comprehensive patient experience plan that also includes Humankindness retreats. The retreats will help shape our culture and support the Dignity Health Way. Our employee engagement efforts are also tightly connected to the Dignity Health Way. How far we can go is dependent upon our ability to recognize and celebrate excellence, support and nurture each other, and hold ourselves accountable.

#### **Humankindness Retreats**



Organizational culture was discussed in virtually every meeting about the Dignity Health Way. How much will the organization support change? What will get in the way? Can we really do this, and will it stick? In many ways, organizational culture holds the key to what we can achieve with the Dignity Health Way.

Culture is the "personality" of the organization, and it influences what we do and how we do it. It originates from our mission, values, shared

feelings, and heritage. Organization culture is shaped by our leaders, but, really, all of us contribute to it.

Hopefully, you've heard of the Dignity Health Humankindness Retreats. They are taking place all across the system, and all of us—all 55,000 employees—will attend one. They provide opportunities for us to reflect on our culture and how humanity holds the power to heal. The retreats will inspire acts of kindness, improve employee morale, and move us to create an exceptional experience for all of our patients.

Over the next few months, our Emergency Department staff will be invited to a retreat in their service area. This will coincide with the early implementation of the Dignity Health Way. Insights and inspiration from the retreats will directly complement and reinforce the goals and spirit of the Dignity Health Way.

"I had a nurse who was complaining about being required to attend a retreat 'so far away' from home—she couldn't believe we were making her drive so far. She came back and shared that the retreat 'changed my life.' She said everyone in Dignity Health should have to attend a retreat every six months. She became tearful over the impact to her, both at work and in her life and this is NOT a person who cries..." —Humankindness Retreat Facilitator

## **Supporting Activities**

#### **Recognition Program**



Just about everyone wants to be appreciated; it's a fundamental human need. When our good work is recognized and acknowledged, it affirms the value of what we do. As part of the Dignity Health Way, we want to recognize attitudes and behaviors that are not only necessary for the process to be successful, but also illustrate acts of caring and humankindness.

Almost all hospitals within the Dignity Health ministry have a recognition program in place; some are more visible and active than others. In the Dignity Health Way toolkit, there are examples of programs used at various

facilities. In collaboration with Human Resources, each Emergency Department should select and commit to a strong recognition program. And don't forget the celebrations of great work and big (and small) acts of kindness!

In a recent Dignity Health employee engagement survey, only 55 percent of employees in the Emergency Department gave a favorable response to the question "I feel valued" with an average score of 2.82 on a five-point scale. This is the lowest rating for any of the high-risk departments in Dignity Health and significantly lower than the national database average.

#### Peer-to-Peer Coaching and Accountability



Everyone plays a role in creating an exceptional patient experience, whether we are at the bedside or in an office. As such, we need to hold ourselves and each other to high standards to ensure patients, their families, and our colleagues are treated with dignity and kindness. We don't need to wait for formal feedback from supervisors. When we share feedback with each other every day, we get better at our jobs and become more connected as a team.

In the design phase of the Dignity Health Way, groups practiced peer-topeer coaching. A team tested the use of a "code word" to gently point out to colleagues when their words or actions were not consistent with our values or in the spirit of humankindness. It allowed the person to pause, reflect, and re-engage. The team found this approach was more effective than confronting or possibly embarrassing a coworker.

There are other choices for peer-to-peer coaching. In the upcoming months, experts from the Human Resources Learning and Organizational Development Department will be working with Emergency Departments to review options and select the right approach.

## **Measuring Our Success**

Below is an infographic representing our current performance in some of the key metrics we will be using to determine how effective we are at creating an exceptional experience for our patients one filled with humankindness and excellent clinical care, delivered in a healing environment.

65% of patients surveyed would recommend Dignity Health without hesitation. This is a drop from our peak two years ago. We are now at the 40th percentile

We are now at the **HUIN** percent compared to other Emergency Departments nationally.

**30th** percentile is our rating in how well we listen and respond to patient's needs. We've declined significantly over the past two years.



Our Emergency Department teams are rated in the bottom third **1/3** teamwork.

Our internal Safety Attitude Employee Engagement results show that the Emergency Department is the lowest scoring of the high-risk departments (e.g., ED, ICU, surgery, perinatal) at Dignity Health.

Patients who are admitted spend an average of an **hour more** in our EDs than the average ED patient nationally, and **two and a half hours more** than patients treated in the top 10 percent of hospitals nationally.



**50%** of patients surveyed strongly agree that, compared to others in our regions, our ED provides the best emergency care.

Of the approximate 146,000 patients who visit our EDs monthly:



were seen by a provider in 16 minutes or less

were seen within 30 minutes or less

## Thank You

"I would like to recognize the hundreds of employees, physicians, and patients who have been involved in developing and refining this important effort. We are grateful for their hard work and dedication, and all that you do each day to create an exceptional experience for our patients."

> *—Marvin O'Quinn,* Senior Executive Vice President/ Chief Operating Officer

