

The Reduction of Suffering Through Compassionate Connected Care TM

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Objectives

- Define Empathy
- Understand the Framework for Action
- Realize That It Includes All Of Us
- Compassionate Connected Care for the Caregiver

Empathy, Sympathy, Compassion

Sympathy

Sympathy is the heightened awareness of another person's plight as something to be alleviated (Lauren, 2005). The emphasis here is *awareness* i.e. coming into the knowledge that there is another person's whose situation is deserving of your attention and that there is some element of pain/suffering that that person is experiencing. From there, care and concern are shown towards that person. It typically sounds like this, 'I'm sorry for your loss' or 'I hope you are coping well.'

<http://www.positiveedu.com/edu-blog/empathy-sympathy-compassion-whats-the-diff>

Empathy

Empathy is the attempt of one who is self aware to understand and even vicariously experience another person's situation and emotional state (Baron-Cohen, 2006).

Compassion

Compassion is taken a step further, where a person feels empathy and then a desire to help alleviate the suffering of the other person. The emphasis here is on *action* i.e. wanting to help. Having compassion for another requires one to put the other person first, imagine what the person is going through, then consider ways in which to help the person feel better and cope.

<http://www.positiveedu.com/edu-blog/empathy-sympathy-compassion-whats-the-diff>





How Do You Make A Difference?



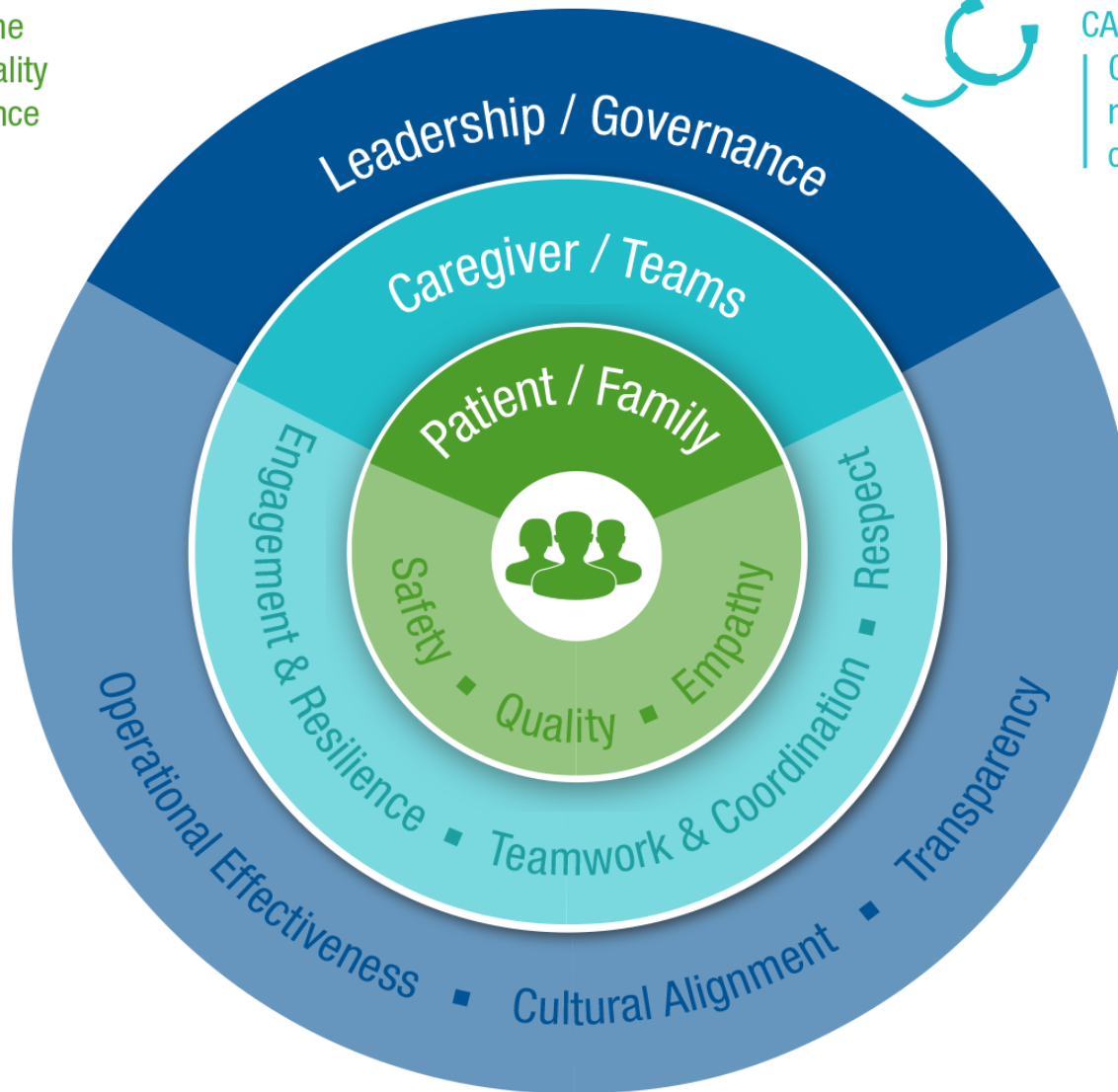
PATIENT / FAMILY

Improve the safety, quality & experience of care.



CAREGIVER / TEAMS

Create a culture to reduce patient and caregiver suffering.



LEADERSHIP / GOVERNANCE

Support patient-centered care across the organization.

OUR GOAL:

Prevent suffering by optimizing care delivery

OUR GOAL:

Alleviate by responding to Inherent patient needs

AVOIDABLE SUFFERING

Inherent Suffering associated with TREATMENT
Inherent Suffering associated with DIAGNOSIS

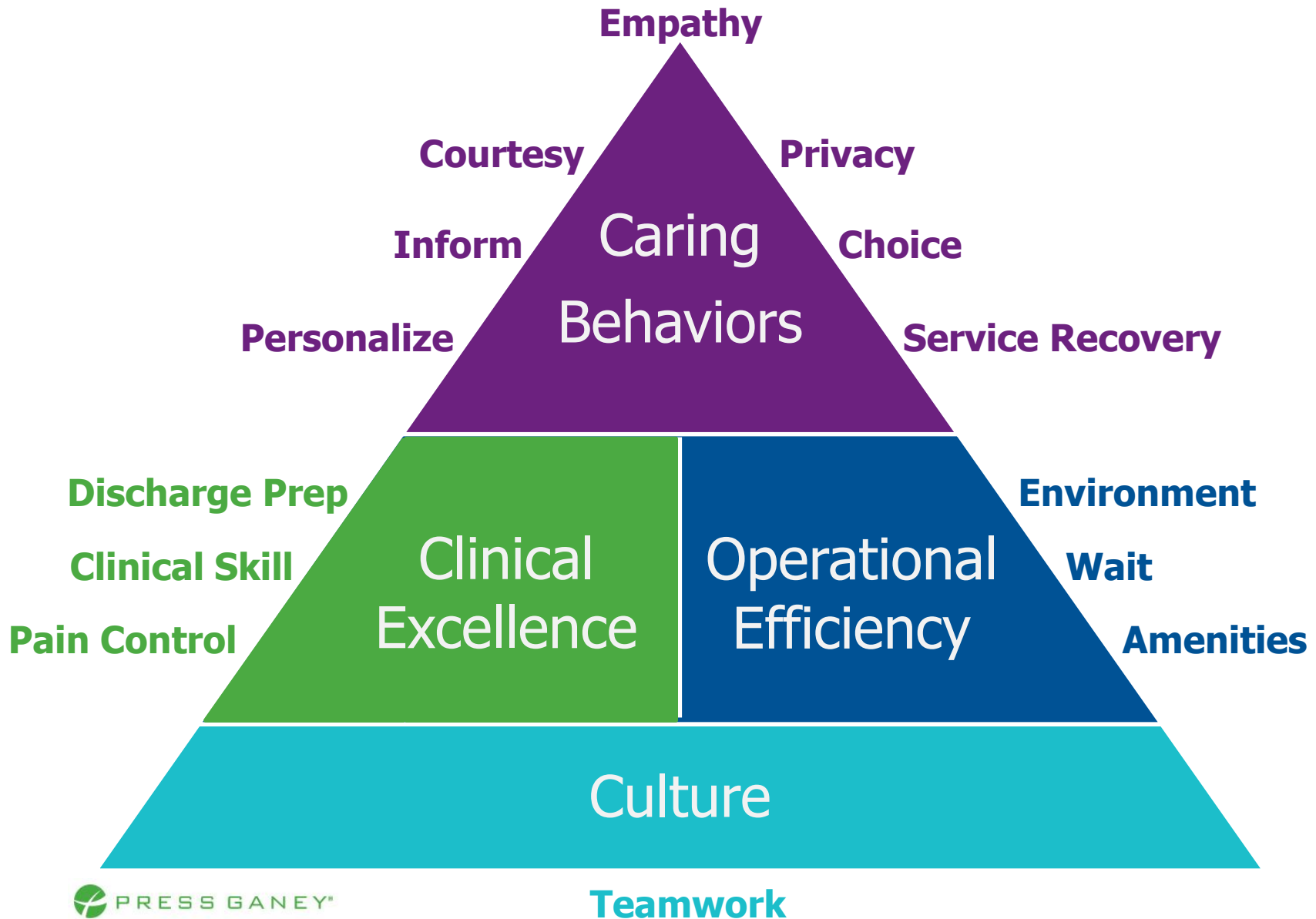
arising from defects in care and service

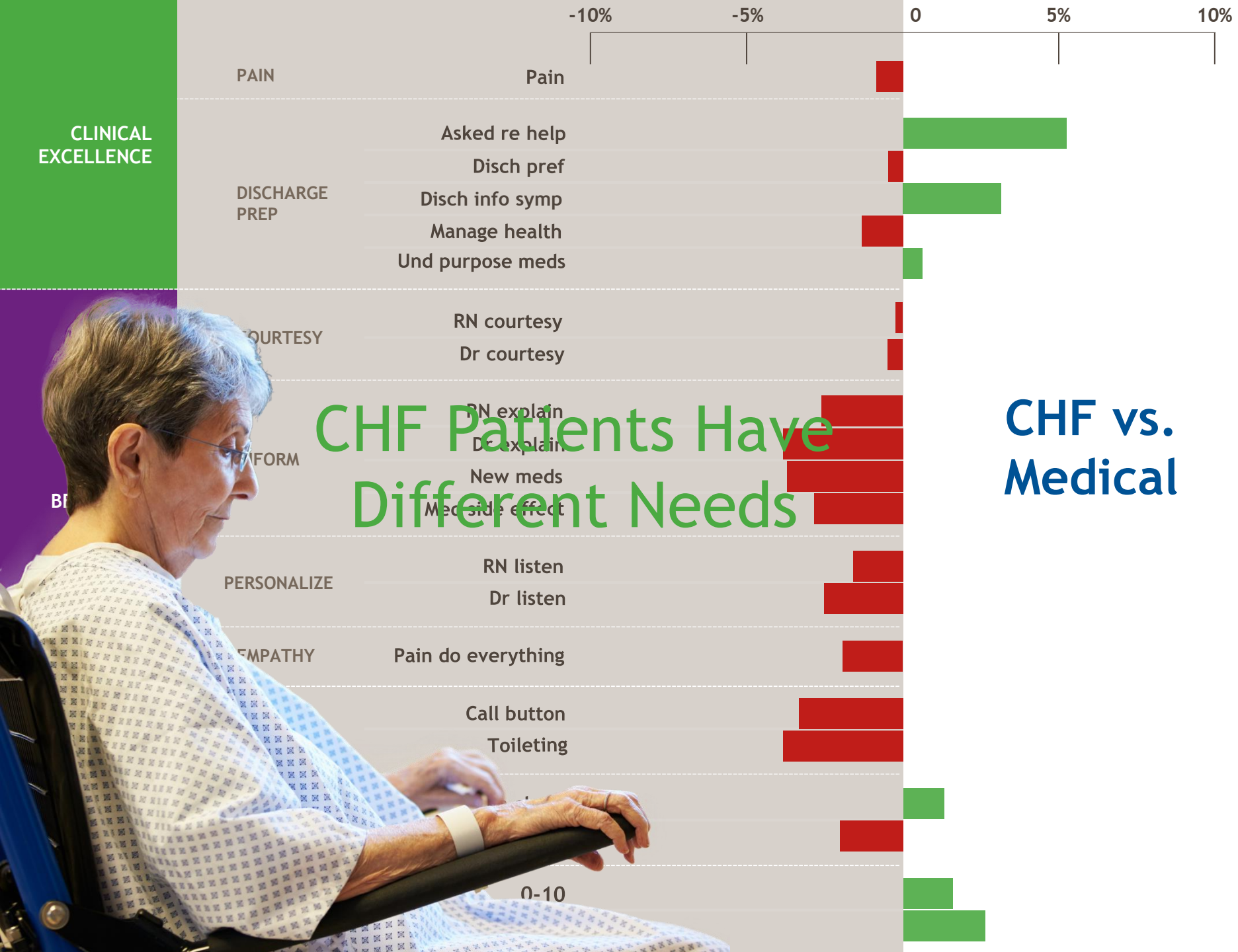
Measuring What Matters
to Improve the
Patient Experience

Compassionate Connected Care™



How Patients Experience Care





Compassionate Connected Care™ Themes

- **Acknowledge Suffering**

We should acknowledge that our patients are suffering, and show them that we understand.

- **Body Language Matters**

Non-verbal communication skills are as important as the words we use.

- **Anxiety is Suffering**

Anxiety and uncertainty are negative outcomes that must be addressed.

- **Coordinate Care**

We should show patients that their care is coordinated and continuous, and that “we” are always there for them.

- **Caring Transcends Diagnosis**

Real caring goes beyond delivery of medical interventions to the patient

- **Autonomy Reduces Suffering**

Autonomy helps preserve dignity for patients

Courtesy/Respect of the nurses

- This item measures how nurses approach meeting patients' needs.
- Scoring highly in this area does not require that nurses perform any additional tasks or duties but simply conduct their existing activities in ways that build relationships with the patient and family.
- No other staff group in the hospital will communicate with your patients and families as regularly or frequently as nurses.
- This measure assesses the sum of these interactions.

Responsiveness

Promptness in responding to the call button (Call Button help as soon as you wanted it)

- This question addresses the patient's perception of staff responsiveness.
- The question primarily assesses how quickly staff get to the patient's room after the call but also can assess how long it takes staff to fulfill the patient's request.
- Patients' expectations are tempered by an acute awareness that nurses are busy
- The most common reasons patients call is because they are in pain or their equipment is making noise or malfunctioning
- Expectations for the time it takes to fulfill each request will also be adjusted based upon the relative severity or importance of the request.

Attention

Amount of attention paid to your special or personal needs (Communication and Responsiveness)

- This question assesses the effort patients believe that hospital staff made to understand and meet their **minimum** requirements for care.
- These needs may be unique and highly variable necessitating an assessment, documentation and integration into the care plan.
- The capacity to adapt and personalize health services is becoming a core competence that will determine the success of health care organizations in the future.
- Meeting personal requirements is an almost universal definition of customer service and satisfaction.

How well you were kept informed (Communication)

- This question measures the patients' evaluation of the adequacy of the provision of information throughout the hospitalization.
- The patient expects to understand what will happen, when it will happen, why it will happen, who will make it happen, where it will happen, how it will happen and what the end result will be.
- Numerous studies have shown that the simple act of providing information is strongly, positively associated with patient satisfaction.

Skill of the Caregivers

This item measures patients' perceptions of how effective caregivers are in executing their duties and responsibilities.

- Patients do not judge clinical competence relative to professional standards; rather, various cues influence a patient's perceptions of a nurse's expertise:
 - Professional appearance (e.g., attire, grooming, cleanliness, free of perfume or smoke odors, etc.)
 - Adherence to safety guidelines (e.g., wearing gloves when touching patients' surgical sites or wounds)
 - Adherence to physicians' orders (e.g., following the medication schedule)
 - Communication skills and understandability of his/her speech
 - The effectiveness of collaboration, communication and coordination across disciplines and throughout the care continuum.
 - Number of attempts to successfully accomplish a procedure (e.g., How many tries were necessary to set up the patient's catheter? How many attempts were made inserting the IV?).
 - Maintenance of patients' privacy and confidentiality.
 - How nurses, physicians and other hospital staff treat each other.
 - Responsiveness to patients' needs.

Accommodations and comfort for visitors

- This question measures the patient's perception of how well the hospital made it easy and comfortable for people to visit.
- During difficult times, families and loved ones draw strength from each others' presence.
- Patients not only appreciate their presence, but can be quite concerned for the comfort and well-being of their visitors--as if they were in the patient's home.
- The scope of this question ranges from the responsiveness of staff to meeting to the amenities offered in the patient's room and hospital at large.

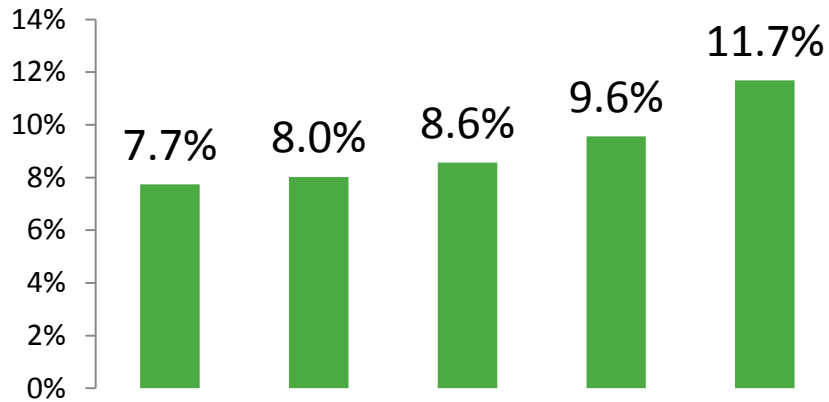
Discharge

Speed of discharge process after you were told you could go home

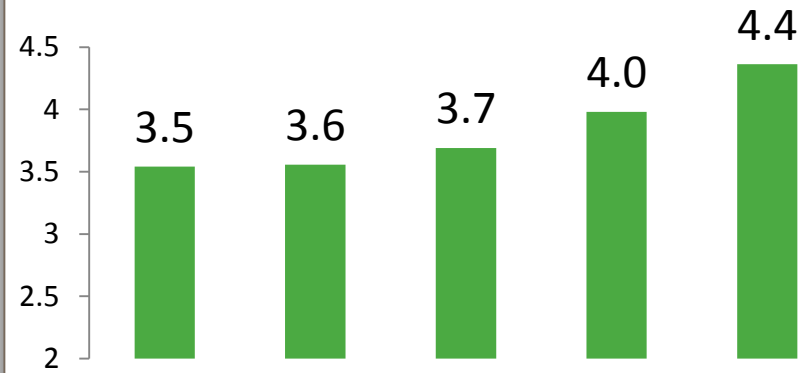
- This question measures the patient's perceptions of how long it took to get out of the hospital after the physician told the patient that they were going home.
- Once the physician makes the announcement, a clock starts in the patient's mind.
- The efficiency of the process will be reflected in the patient's perceptions.

Higher Patient Experience Reliability Scores Link to Higher Quality (quintiles of performance)

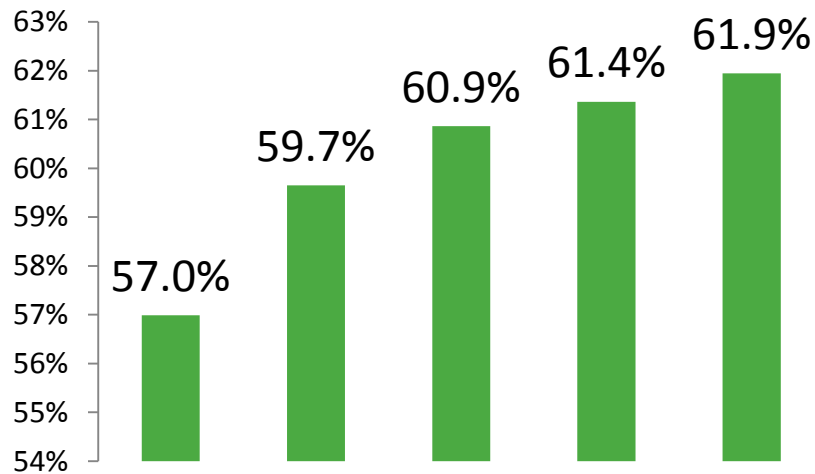
Readmission Rate by Patient Experience Score Ranking



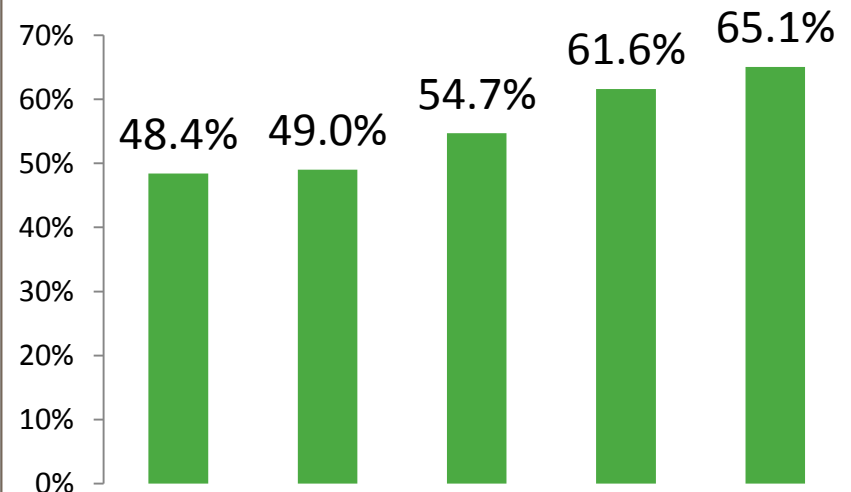
Average Length of Stay by Patient Experience Score Ranking



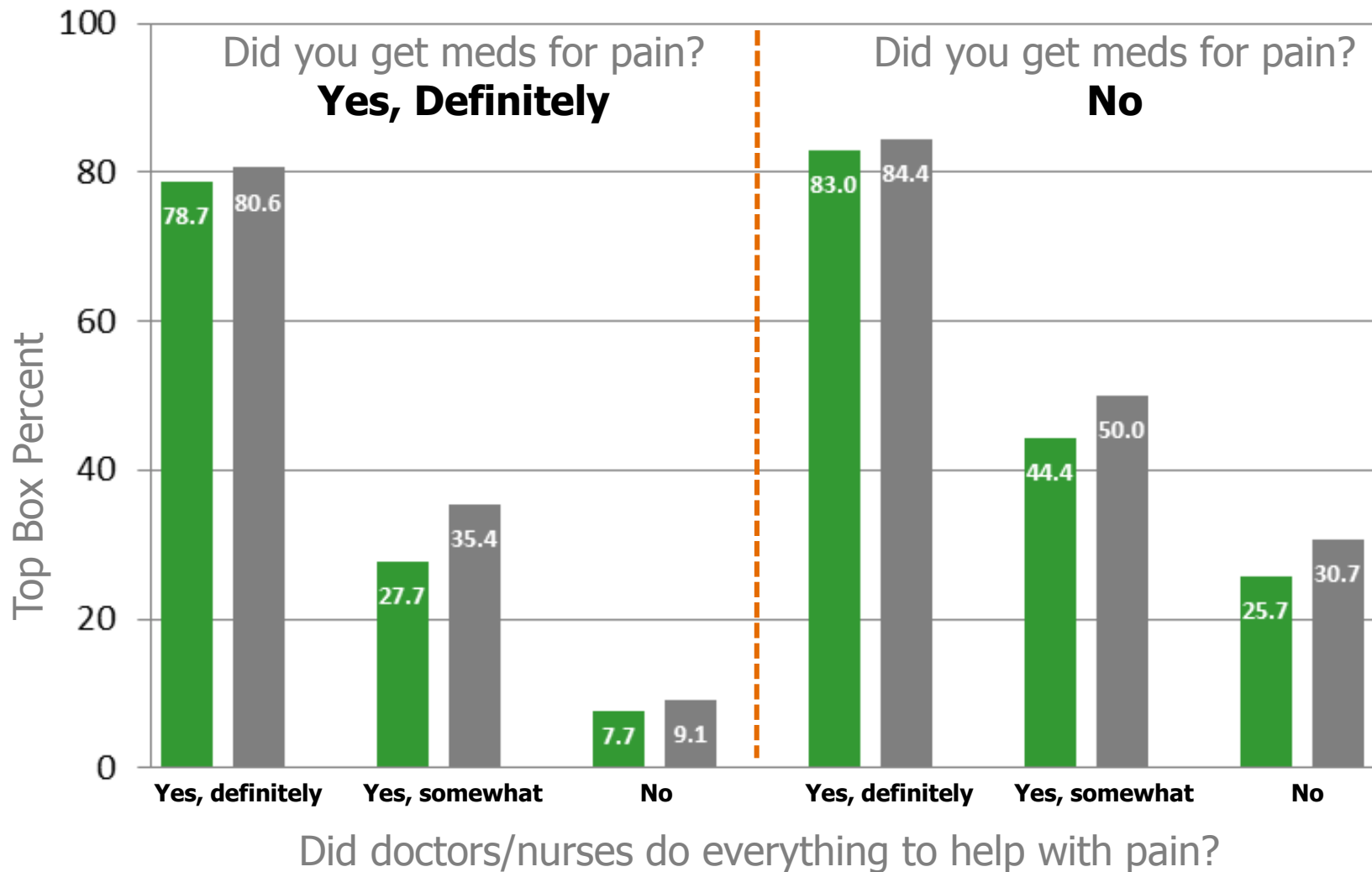
PSI-90 by Patient Experience Score Ranking



CLABSI by Patient Experience Score Ranking



Pain Control: Staff Have More Influence Than Meds



■ Rate ED 0-10
■ Recommend ED

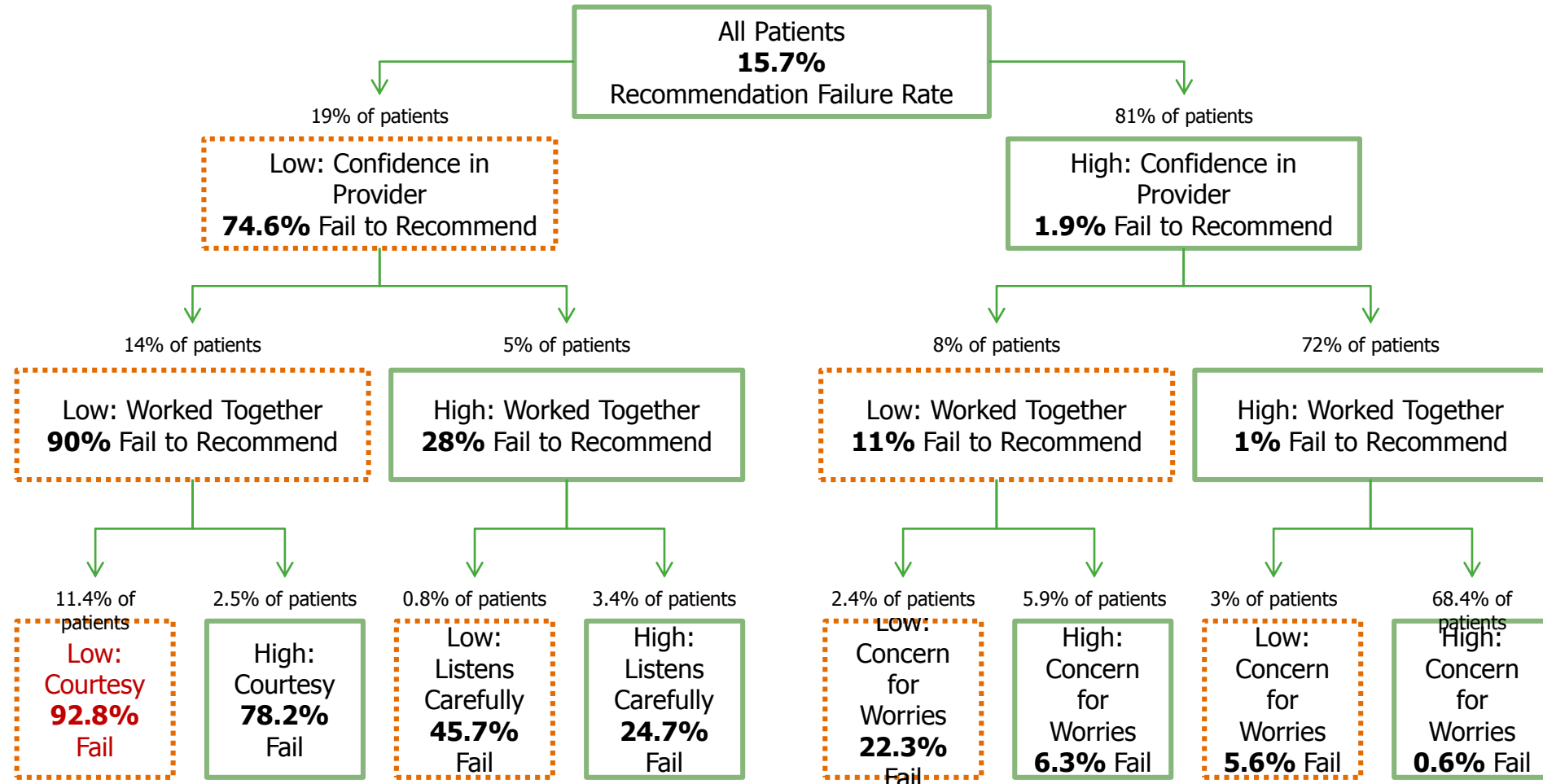
What is Correlated with Likelihood to Recommend?

Personalized Care
Information
Pain Control
Empathy

Discharge Prep

	Correlation to Likelihood to Recommend
Staff cared about you as a person	0.79
Kept informed about delays	0.72
Pain controlled	0.72
Doctor's concern for your comfort	0.72
Doctor kept you informed	0.71
Staff kept family/friends informed	0.71
Nurses' kept you informed	0.71
Information re self care at home	0.71
Nurses' attention to your needs	0.70
Doctor listened to you	0.69
Courtesy toward family or friends	0.69
Nurses listened to you	0.68
Courtesy of the doctor	0.68
Wait in treatment area to see doctor	0.66
Courtesy of the nurses	0.65
Nurses' concern for your privacy	0.63
Allow family/friend to be with you	0.62
Waiting time pre treatment area	0.58
Helpfulness person first asked re condition	0.58
Comfort of the waiting area	0.57
Concern for comfort blood draw	0.53
Courtesy person took blood	0.53
Wait for radiology	0.53
Privacy re personal/insur info	0.52
Ease giving personal/insur info	0.52
Courtesy person re personal/insur info	0.51
Waiting staff noticed your arrival	0.51
Concern for comfort during tests	0.50
Courtesy of radiology staff	0.48

What Do Patients Really Value?

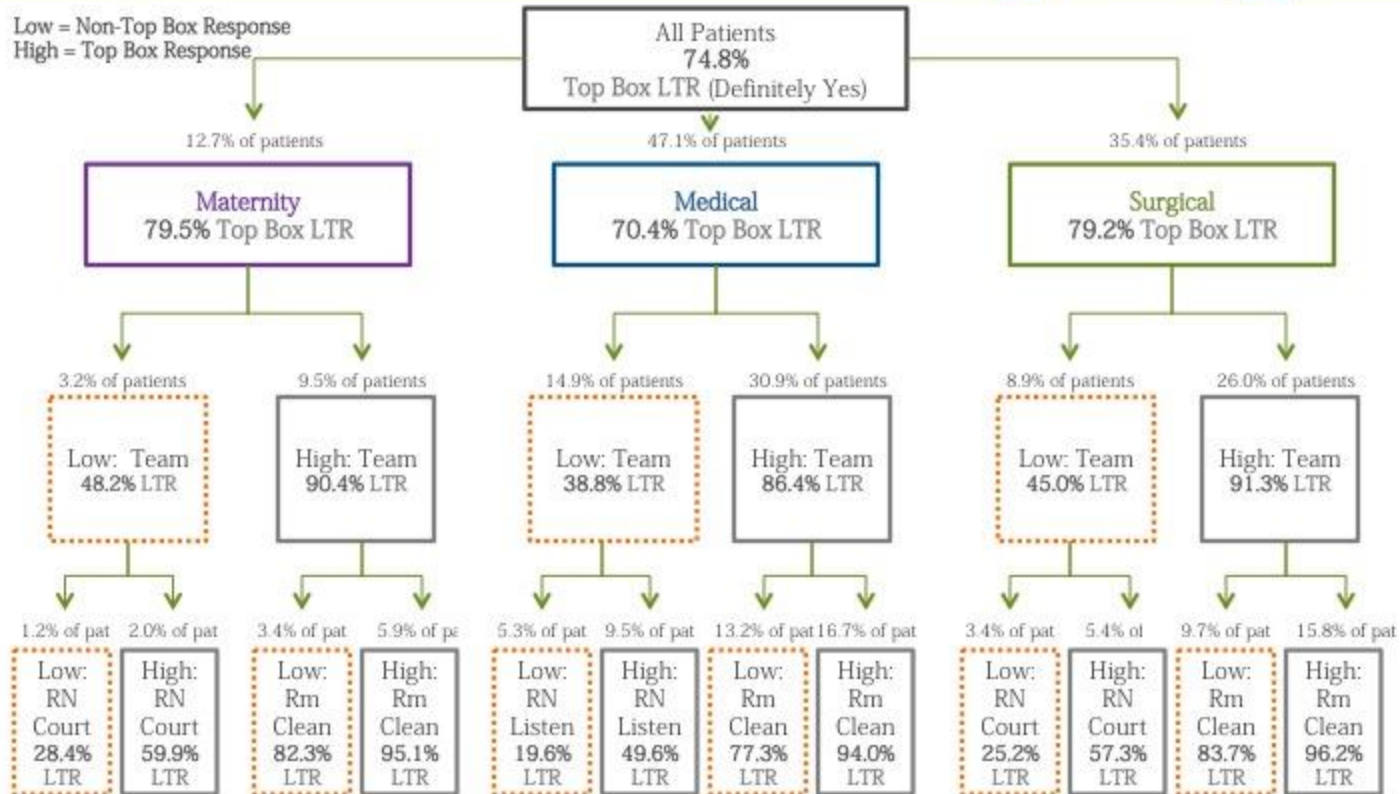


High Risk

Low Risk

Key Drivers

Inpatient (HCAHPS) Recommend – LTR Within Service Line



Team – “Staff worked together to care for you”

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Analyses reflect more than 1.5 million responses to inpatient surveys returned during the calendar year of 2013 that included HCAHPS and Press Ganey measures

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The Caregiver Experience

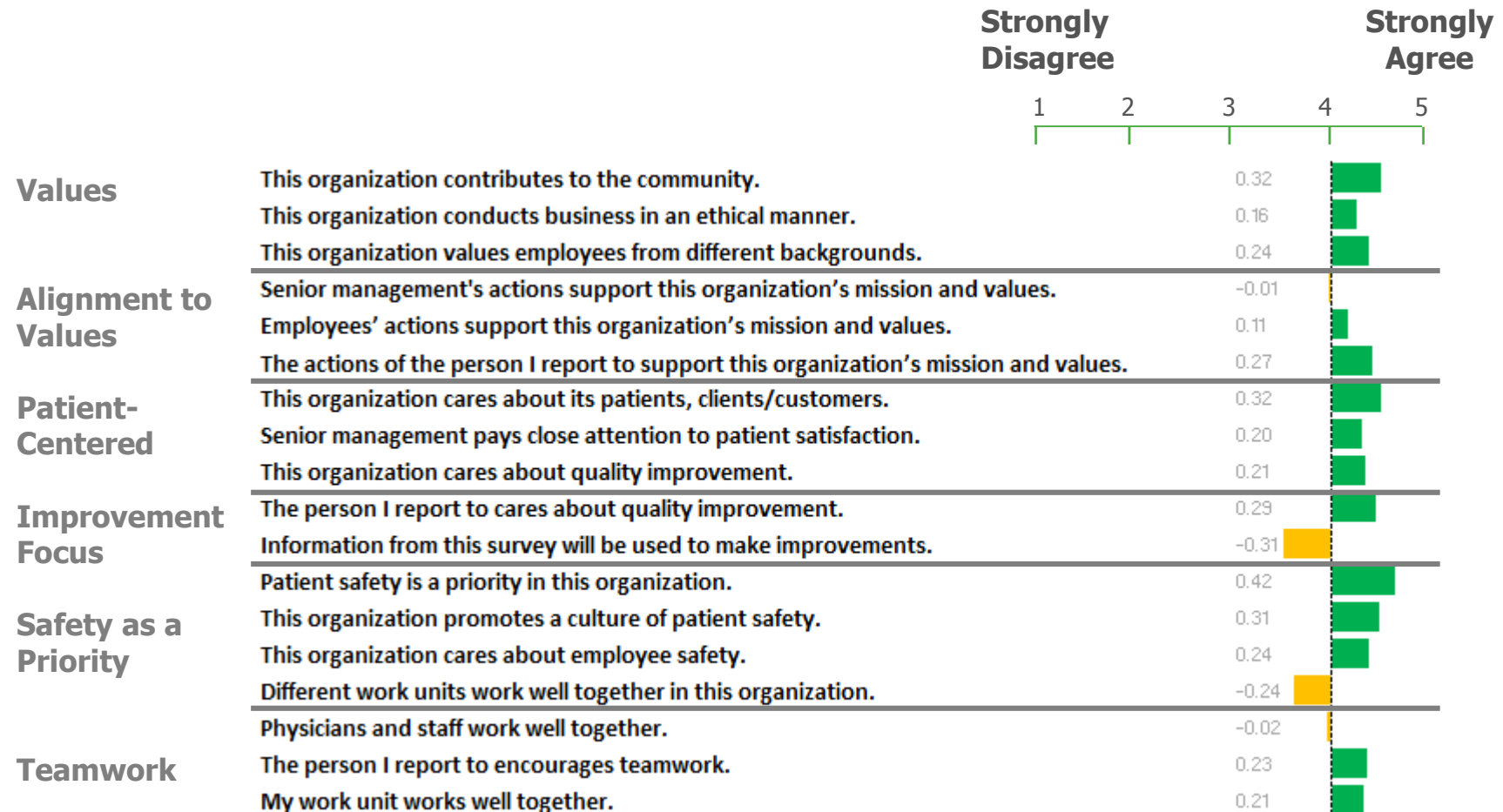
How Caregivers Experience Care



Caregiver Perspectives on Operational Excellence



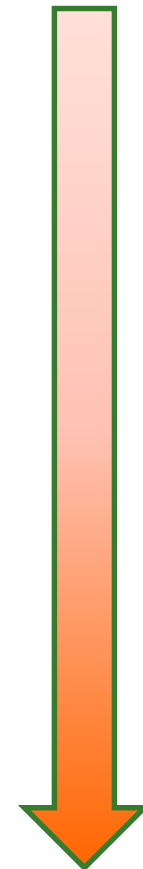
Caregiver Perspectives on Culture



What Stress & Harm Do Providers Cope With?

- Role**
 - Stress of clinical role - complexity, high stakes activities
 - Sympathy overload - secondary traumatic stress of witnessing suffering
 - Emotional labor of caregiving role
- Job**
 - Emotional labor of employee demands
 - Stress of interruptions, multitasking and task switching
 - Stress of pace of change in organization and larger industry
 - Lack of education/support to prevent/address compassion fatigue
 - Moral distress arising from inability to provide level of quality desired
 - Lack of appreciation
 - Lack of resources
 - Communication break downs, lack of needed information
 - Lack of trust in leadership
- Harm**
 - Lack of respect
 - Emotional abuse (bullying, humiliating, demeaning behaviors)
 - Back or musculoskeletal injuries
 - Unprotected exposure to blood-borne pathogens
 - Physical violence
 - Lack of safe refuge to report physical and psychological harm

Inherent



Avoidable

The Burden of Emotional Labor

Emotional labor or 'emotion work' is an element of job that requires an employee to display required emotions toward customers or others.

Creates an emotional cost embedded in the role.

Requirement to not display (turn off) an emotion you are feeling

- Stress, surprise, disgust, fear, uncertainty, sadness, grief

Requirement to display an emotion you are not feeling

- Deference, optimism, assurance, compassion

Much of clinician training requires the turning off of felt emotions and then we compound that emotional work by asking to simultaneously turn on the positive emotional displays.

The Process of Emotional Labor

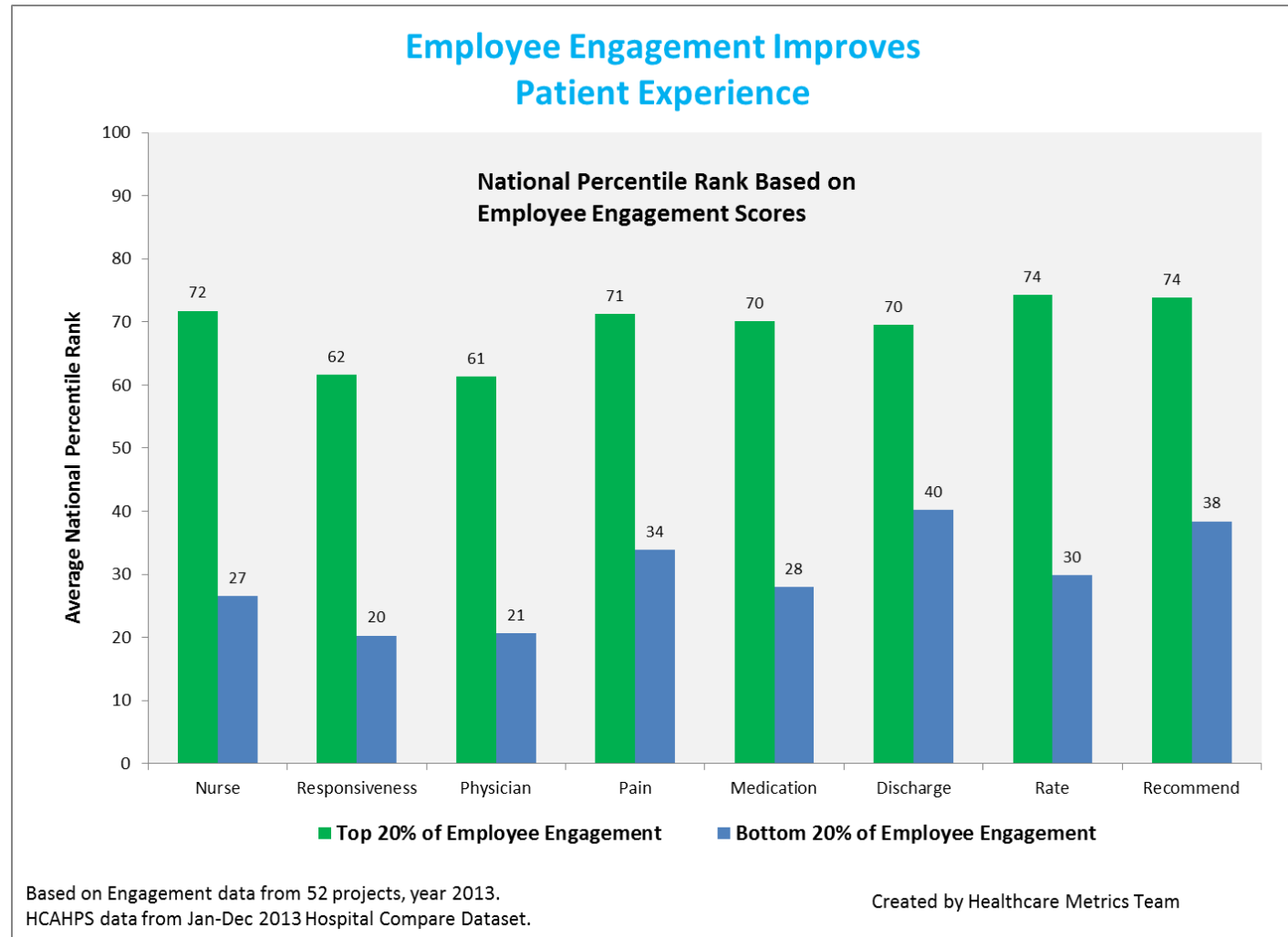
Emotional labor or 'emotion work' is an element of job that requires an employee to display required emotions toward customers or others.

Surface Acting - the process of displaying behaviors that would be congruent with the required emotion.

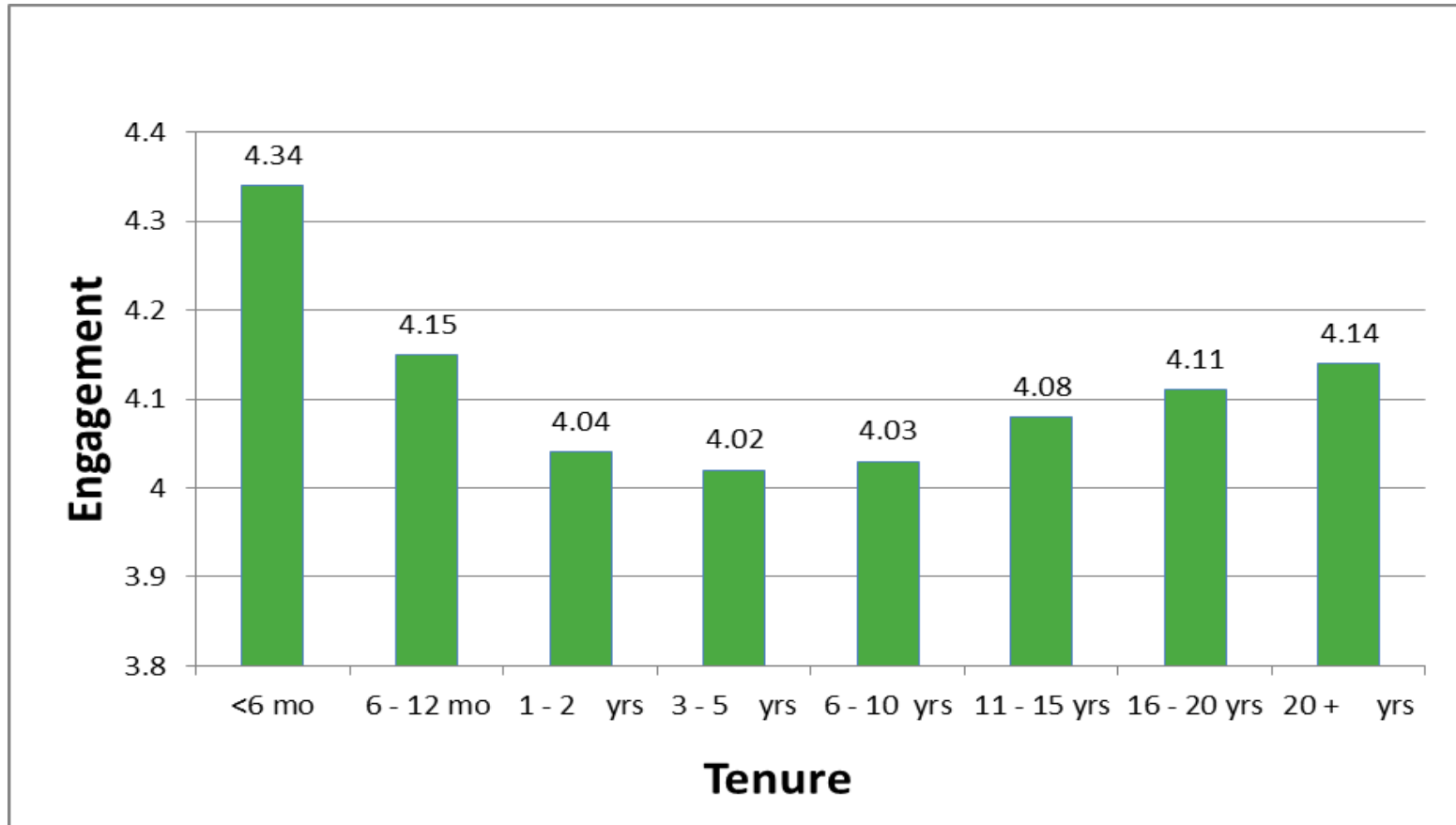
- Associated with burnout

Deep Acting - the process of creating an internal emotional state that is congruent with the required action.

Employee Engagement Matters

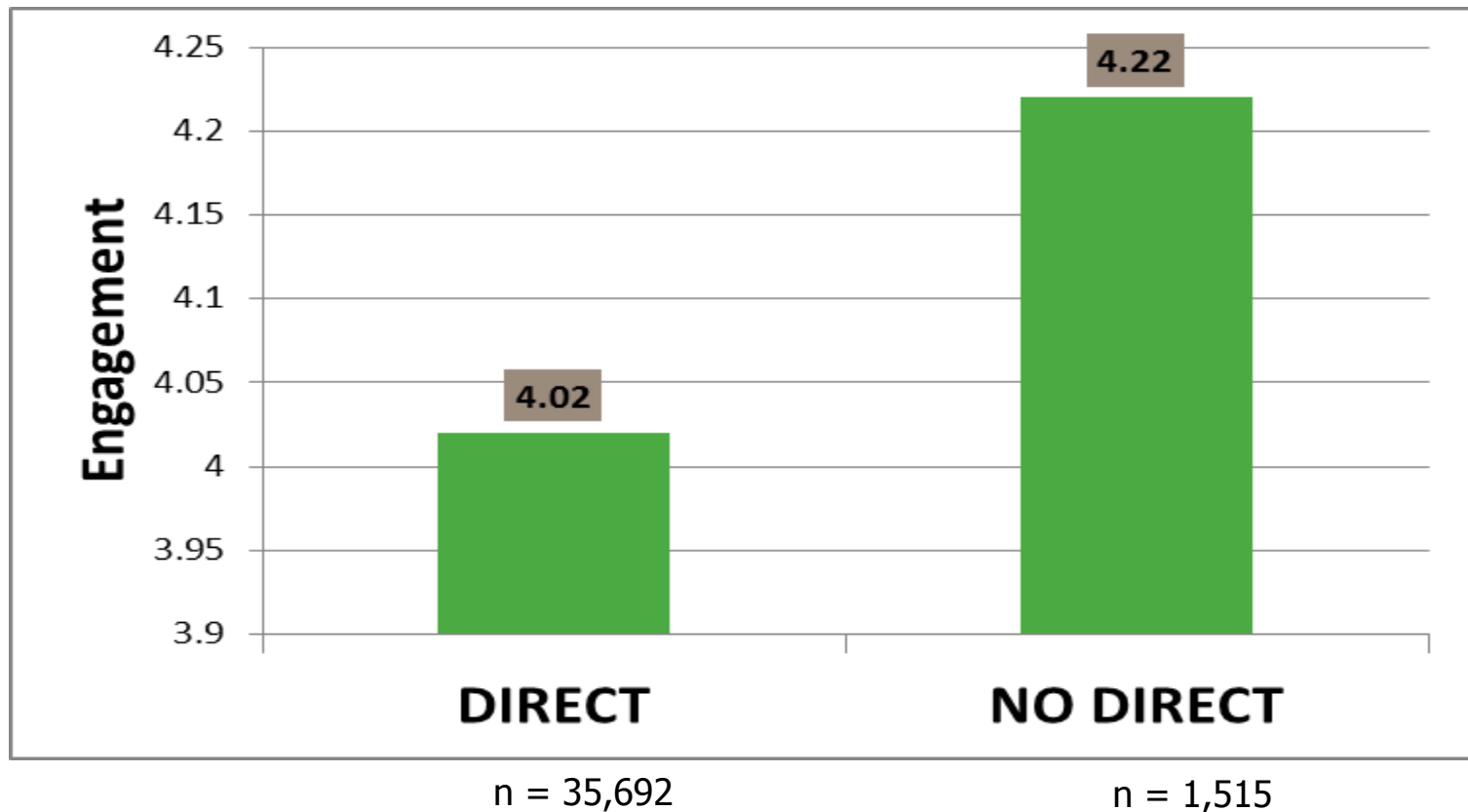


RN Engagement by Tenure



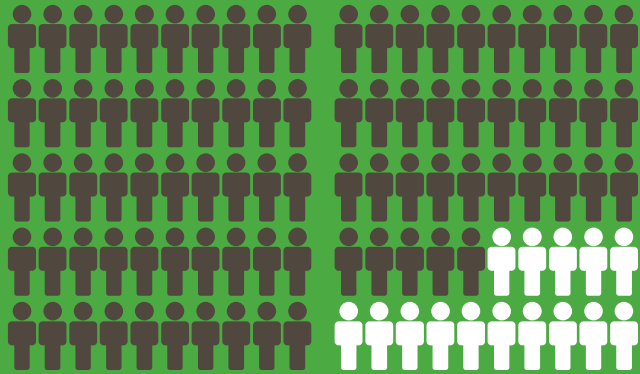
$F(1, 7) = 160.21, p = .000$

RN Engagement by Direct Patient Care



$t(37,205) = -9.38, p = .000$

Cost of Nursing Disengagement



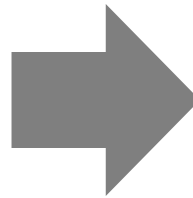
15

out of every 100 nurses are
disengaged from their workplace



\$22,200

Cost in lost productivity per
year from each disengaged
nurse



\$1,665,000

For a 400 Bed Hospital

\$49,995,000

for a hospital system with 15,000
RNs

Engaged Nurses More Likely to Stay, Important for Continuity of Care Teams



\$17,090,915,520

Estimated amount spent each year on RN turnover by US hospitals

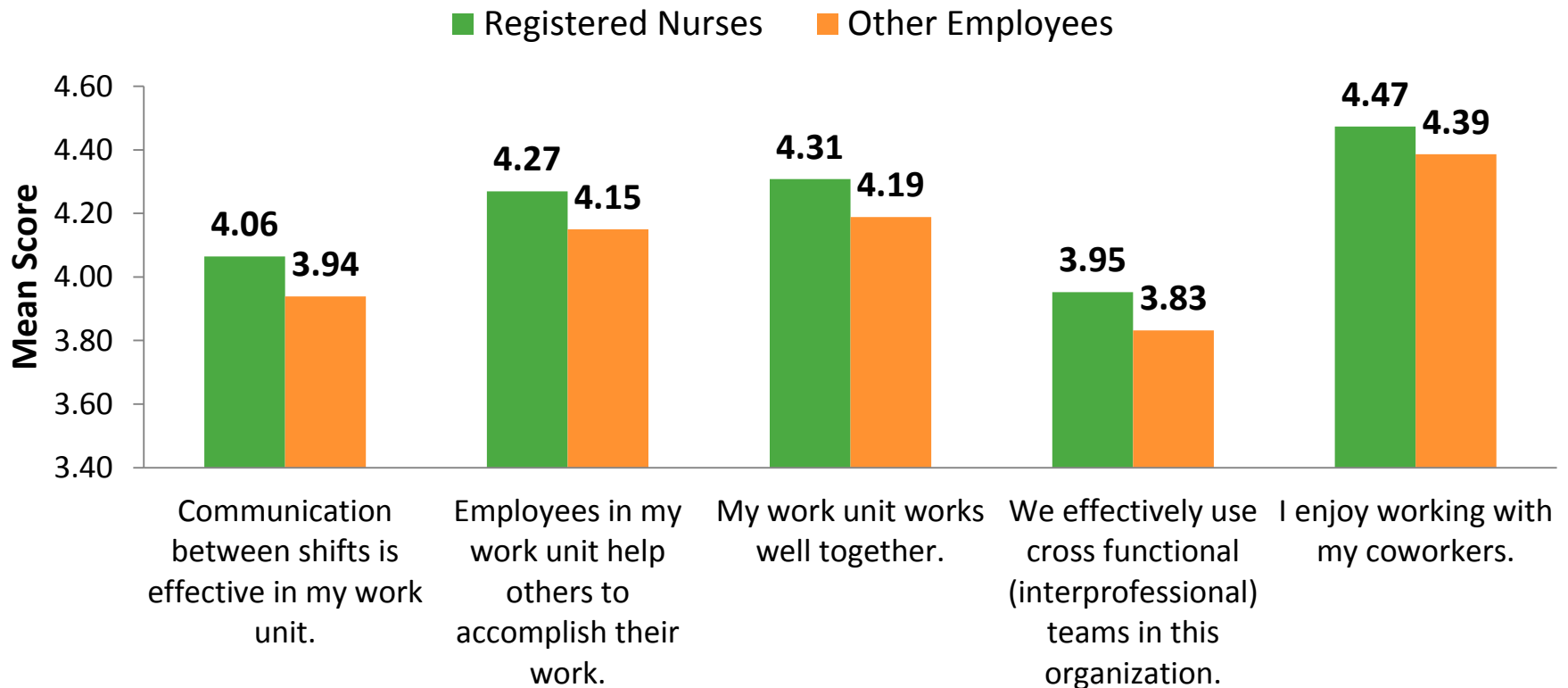
\$44,380

Estimated average cost to replace one nurse

Highly engaged nurses are 87% less likely to leave the organization.

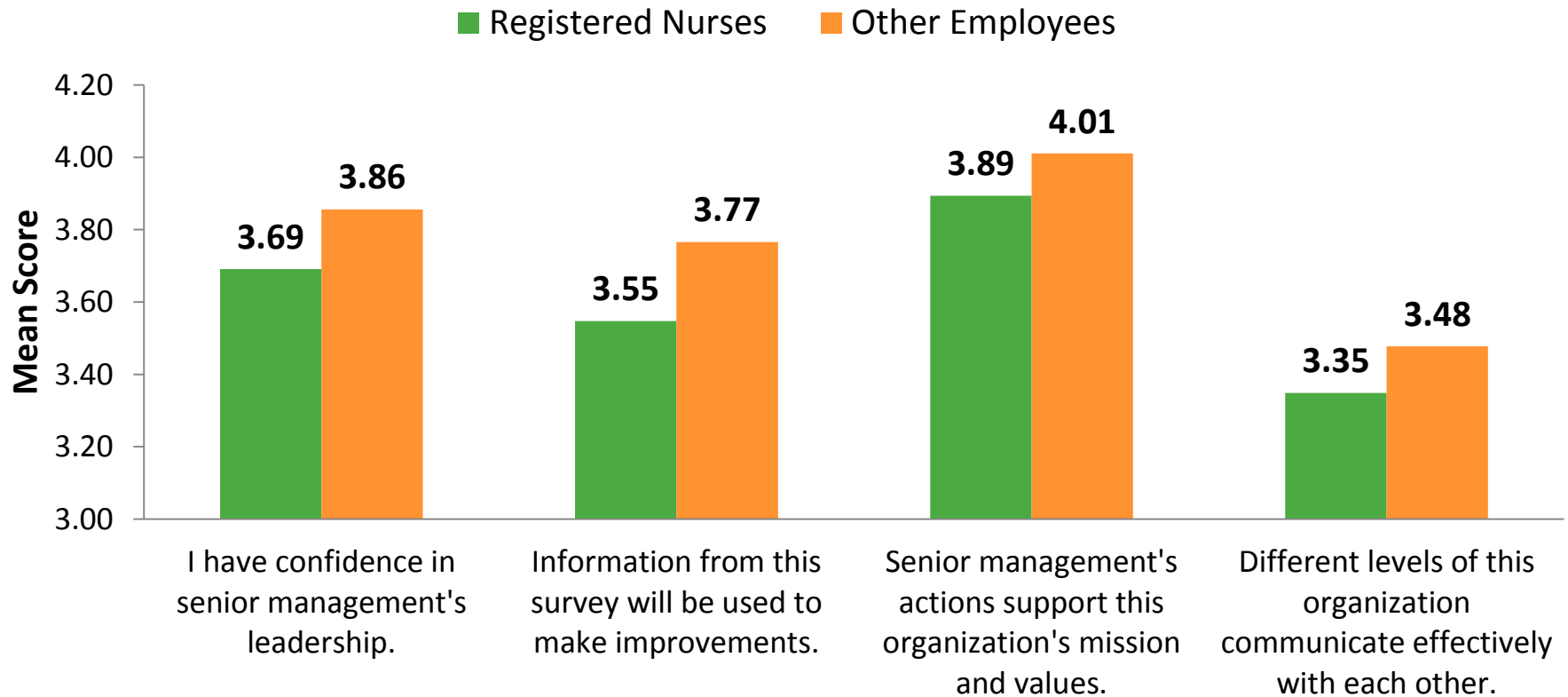
Teamwork and Communication Critical to RN Engagement

Registered nurses have significantly higher ratings on teamwork-related questions than other employees.



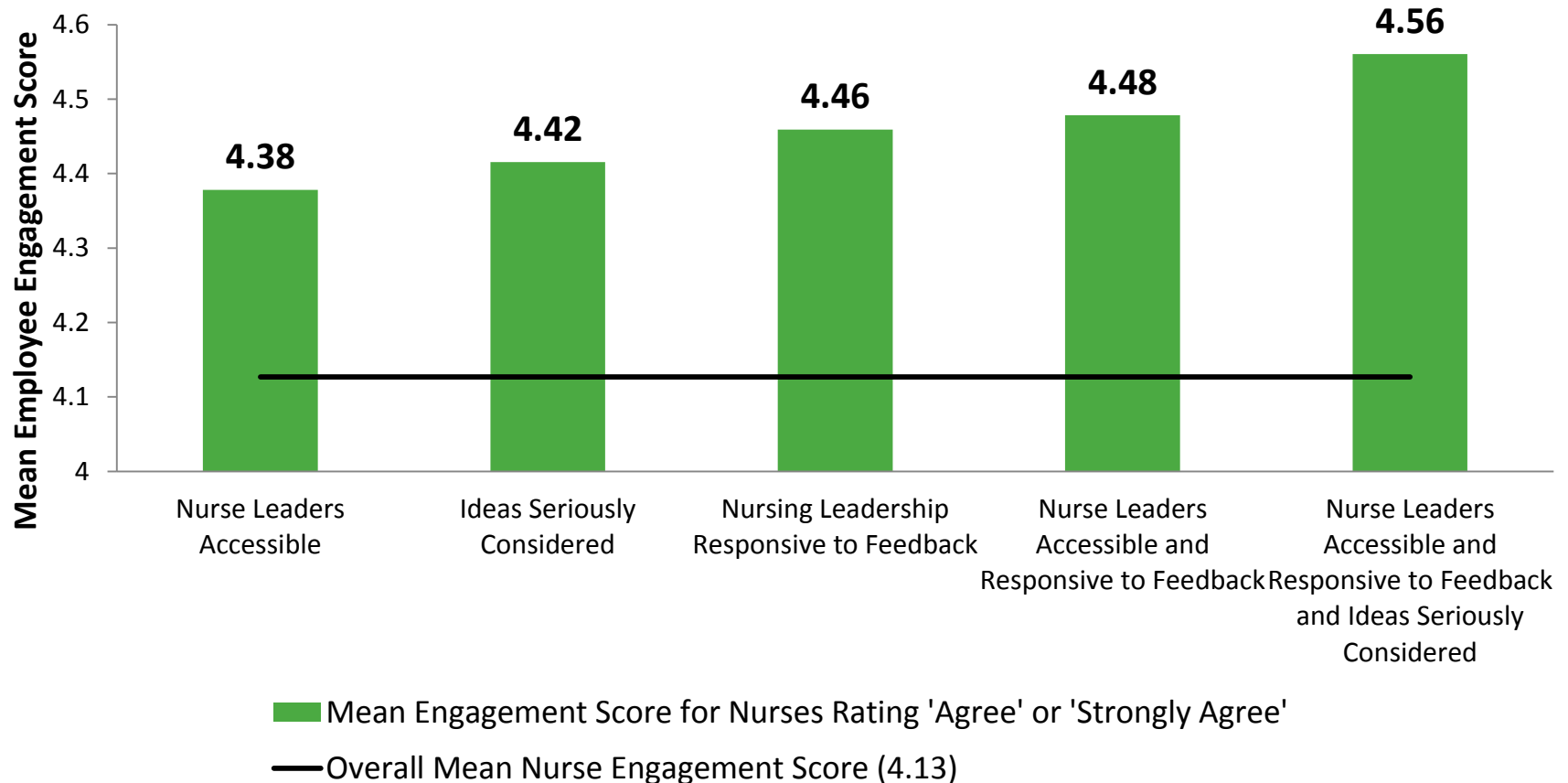
Relationship with Leadership Key Factor for RNs

Registered nurses tend to have a less favorable perception of senior management than other employees.



Relationship with Nurse Leaders Drives Engagement Improvement

Mean Engagement Score for Nurses Rating 'Agree' or 'Strongly Agree'



Nursing Structure, Process & Perceptions

		Total Staffing HPPD	> 8 Hrs No Meal Break		
RN Perception					
	Job Satisfaction	.370**	-.193**		
	Quality in General	.354**	-.229**		
Patient Experience					
	Rate Hospital 0-10	.261**	-.218**		
	Nurses Listen	.190**	N.S.		
	Prompt Response	.199**	-.158**		
Patient Outcomes					
	Unassisted Falls	-.202**	.170**		
	CLABSI	-.168**	N.S.		
	HAPU II	-.189**	N.S.		

Nursing Structure, Process & Perceptions

		Total Staffing HPPD	> 8 Hrs No Meal Break	Intent to Remain	
RN Perception					
	Job Satisfaction	.370**	-.193**	.784**	
	Quality in General	.354**	-.229**	.682**	
Patient Experience					
	Rate Hospital 0-10	.261**	-.218**	.330**	
	Nurses Listen	.190**	N.S.	.342**	
	Prompt Response	.199**	-.158**	.392**	
Patient Outcomes					
	Unassisted Falls	-.202**	.170**	-.248**	
	CLABSI	-.168**	N.S.	-.142**	
	HAPU II	-.189**	N.S.	-.202**	

Nursing Structure, Process & Perceptions

		Total Staffing HPPD	> 8 Hrs No Meal Break	Intent to Remain	Status of Nursing
RN Perception					
	Job Satisfaction	.370**	-.193**	.784**	.763**
	Quality in General	.354**	-.229**	.682**	.779**
Patient Experience					
	Rate Hospital 0-10	.261**	-.218**	.330**	.678**
	Nurses Listen	.190**	N.S.	.342**	.634**
	Prompt Response	.199**	-.158**	.392**	.609**
Patient Outcomes					
	Unassisted Falls	-.202**	.170**	-.248**	-.558**
	CLABSI	-.168**	N.S.	-.142**	-.383**
	HAPU II	-.189**	N.S.	-.202**	-.500**

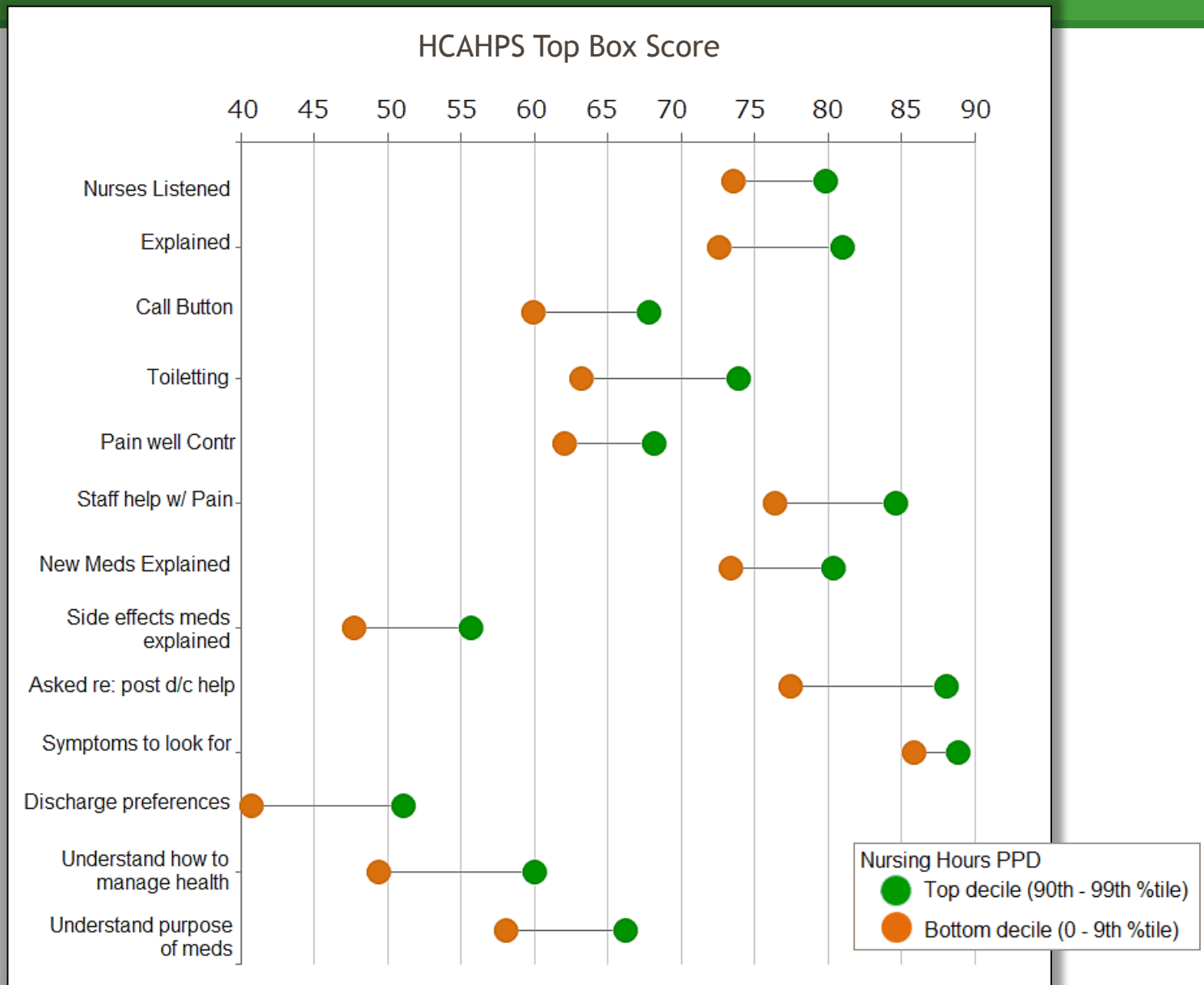
Spearman Correlation Coefficients for Nursing Staffing and HCAHPS

CMS QUESTION / STAFFING MEASURE	TOTAL NURSING HOURS PER PATIENT DAY	TOTAL RN HOURS PER PATIENT DAY
Communication with nurses	0.27005	0.31265
Communication with doctors	0.24184	0.24871
Responsiveness of hosp. staff	0.28594	0.31854
Cleanliness and quietness	0.23359	0.24057
Pain management	0.190	0.2344
Discharge information	0.34744	0.409
Communication about meds	0.31328	0.35432
Overall rating	0.29526	0.37618
Likelihood to recommend	0.27299	0.36181

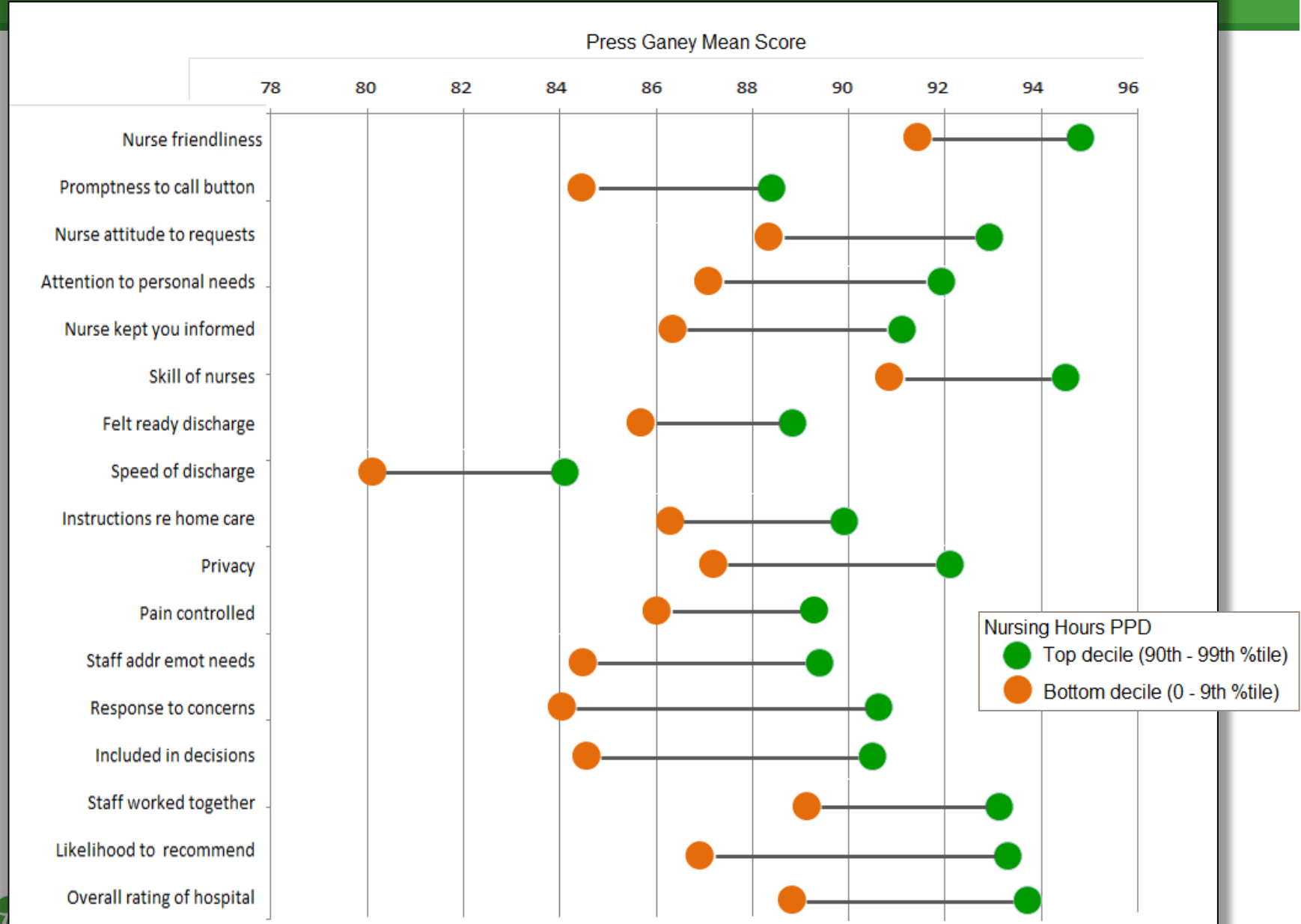
significant at the .01 level

rho < .2	.2 <= rho < .3	.3 <= rho < .4	rho >= .4
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The Effect of Staffing Levels on Meeting Patient Needs



The Effect of Staffing Levels on Meeting Patient Needs

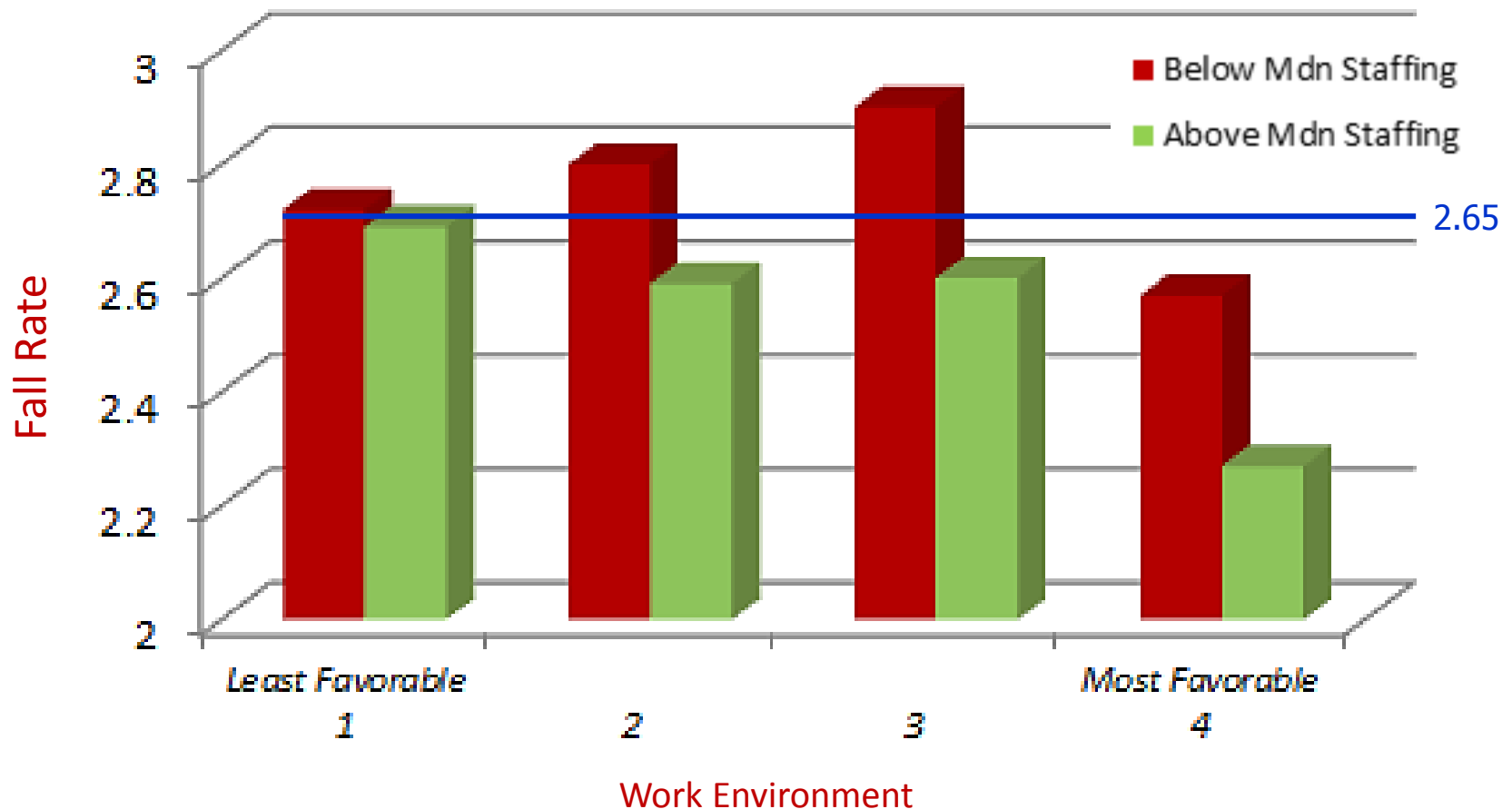


Composite Measures using NDNQI Data

- **Staffing Composite** measures Nurse Staffing and Expertise
 - RN Hours per Patient Day, RN Skill Mix, and Education and Certification of Nurses
 - Emphasis on RNs rather than non-RNs, Education (higher % BSN prepared nurses) and Certifications (higher % of certified nurses)
 - Hospitals categorized as **above** the median or **below** the median
- **Nursing Work Environment Composite** measures quality of work environment
 - Uses 4 of the subscales of the RN Practice Environment Survey:
 - Foundations for Nursing Quality of Care
 - Nurse Manager Leadership and Ability
 - Nurse Participation in Hospital Affairs
 - Nurse – Physician Interactions
 - *(Staffing and Resource Adequacy omitted – staffing factors isolated in Staffing Composite)*
 - Hospitals grouped according to quartile from least favorable to most favorable work environment

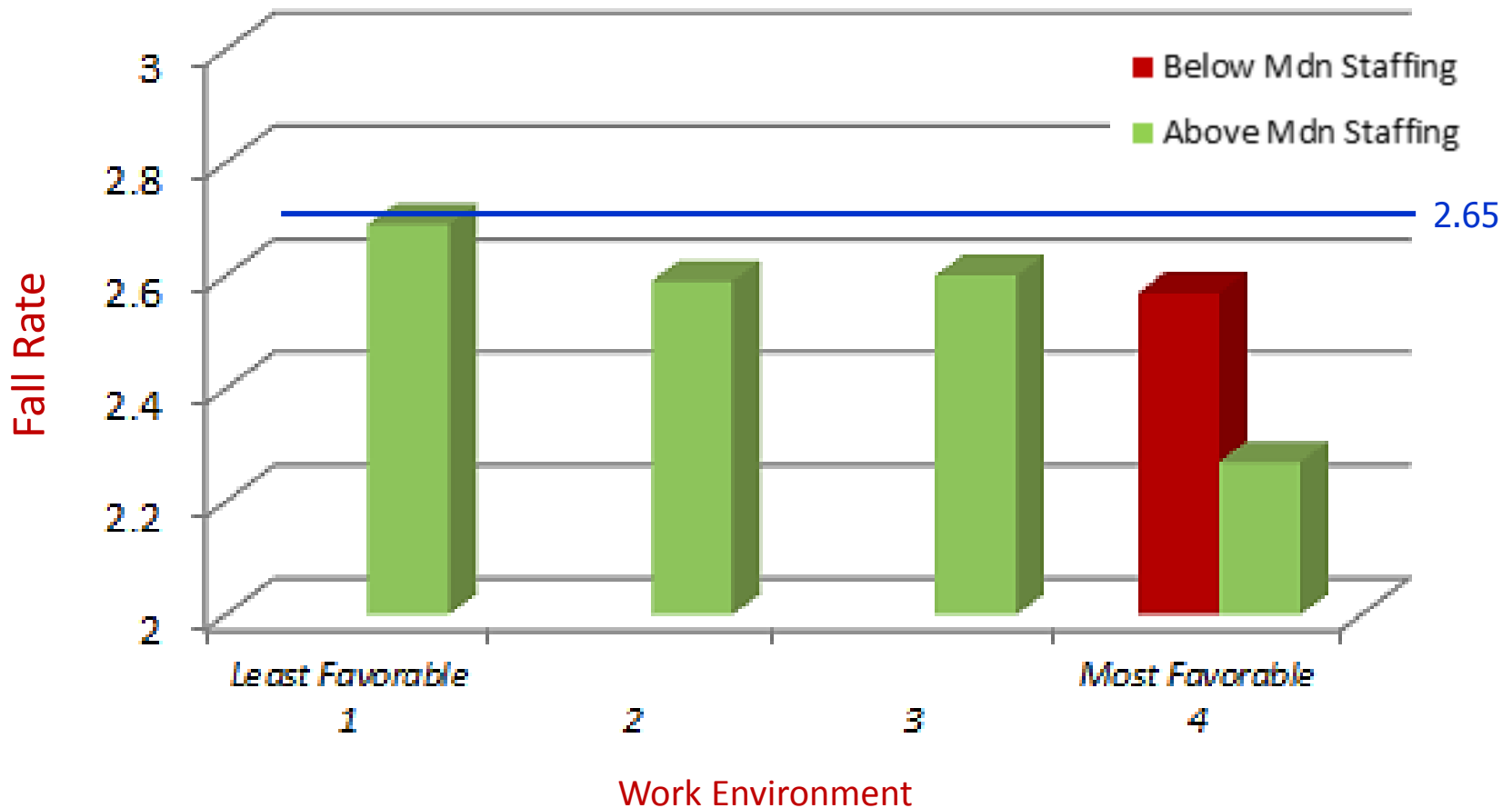
Does Work Environment Trump Staffing?

Fall Rate by Quartile of Work Environment



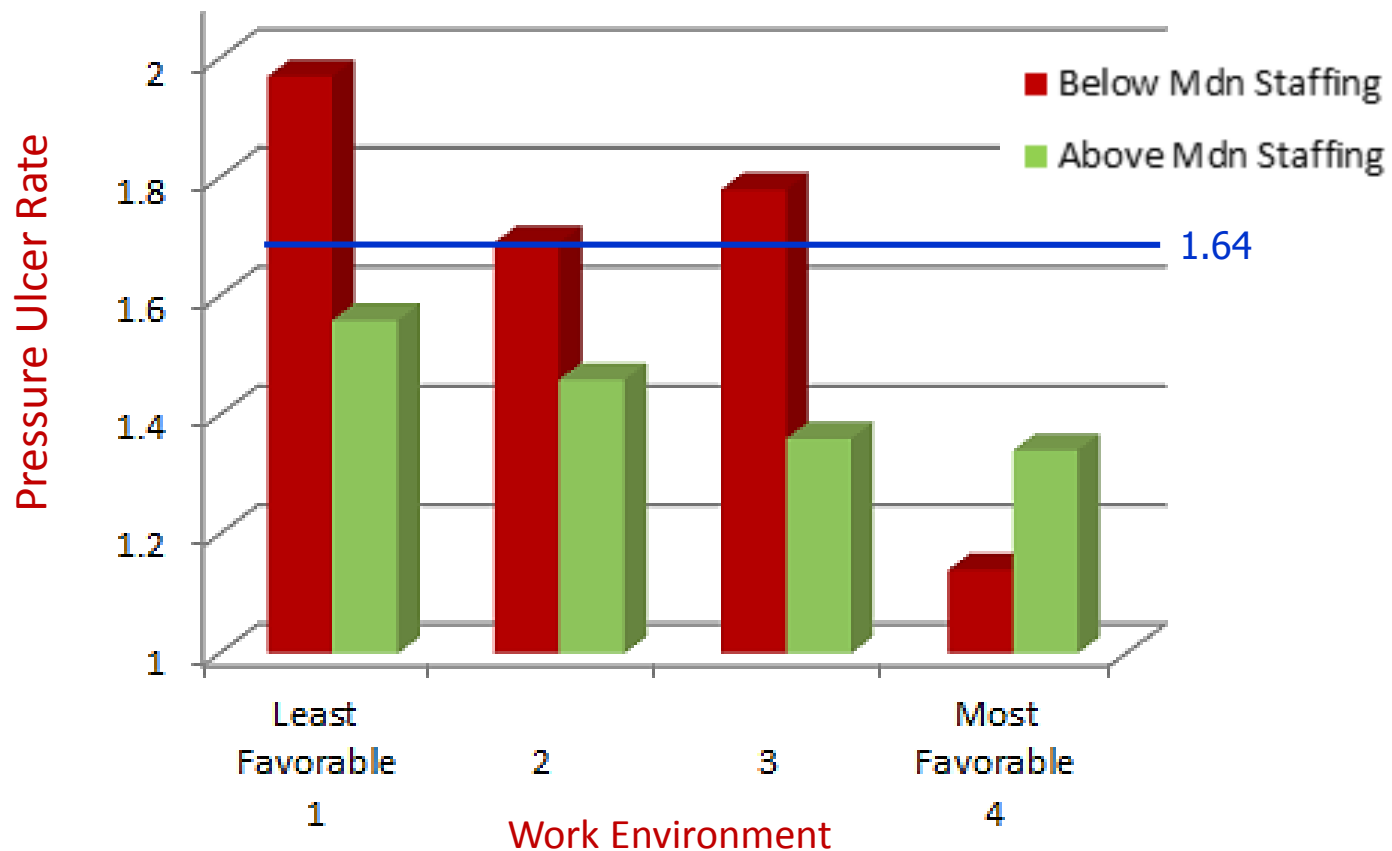
Does Work Environment Trump Staffing?

Fall Rate by Quartile of Work Environment



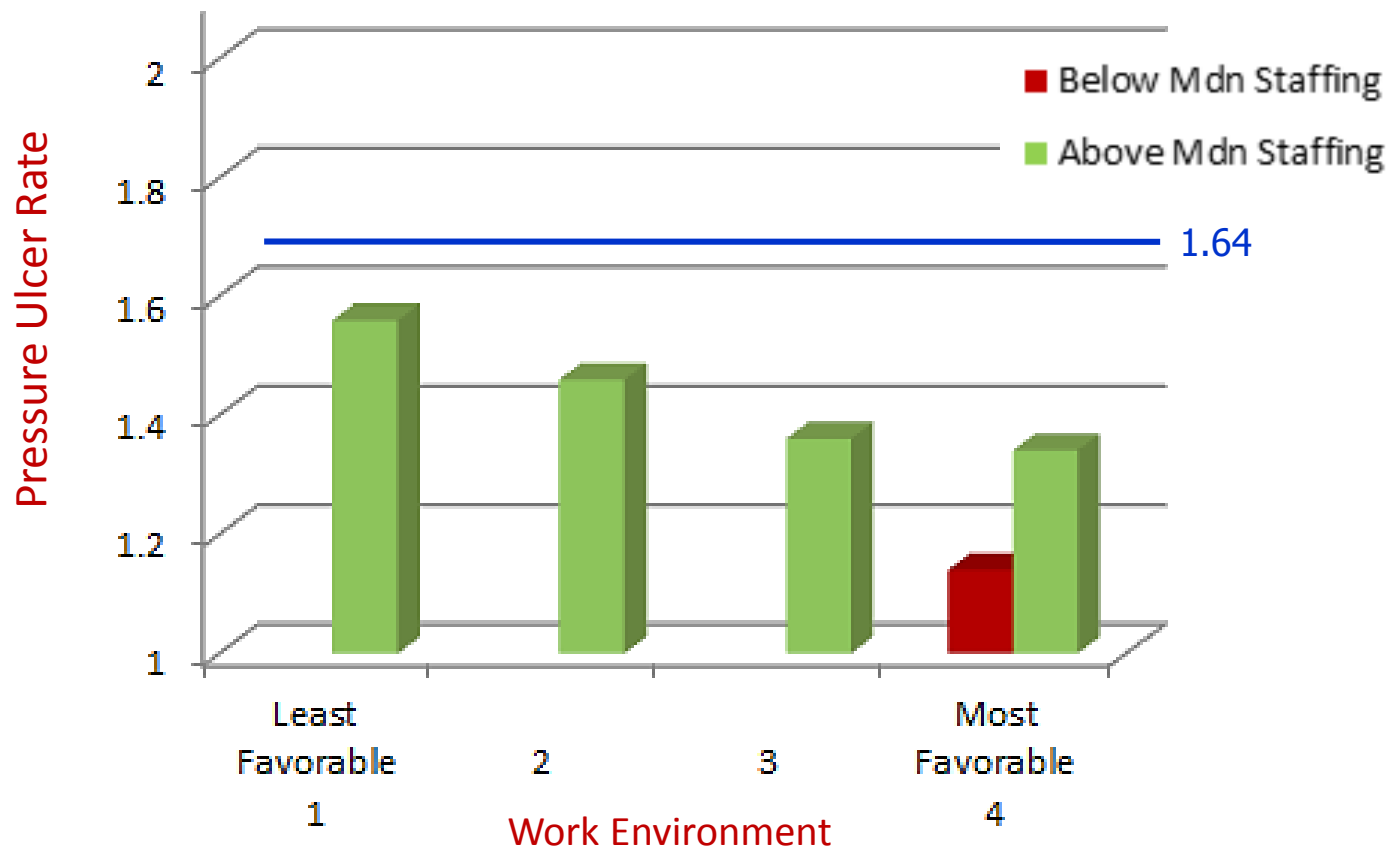
Does Work Environment Trump Staffing?

Pressure Ulcer Rate by Quartile of Work Environment



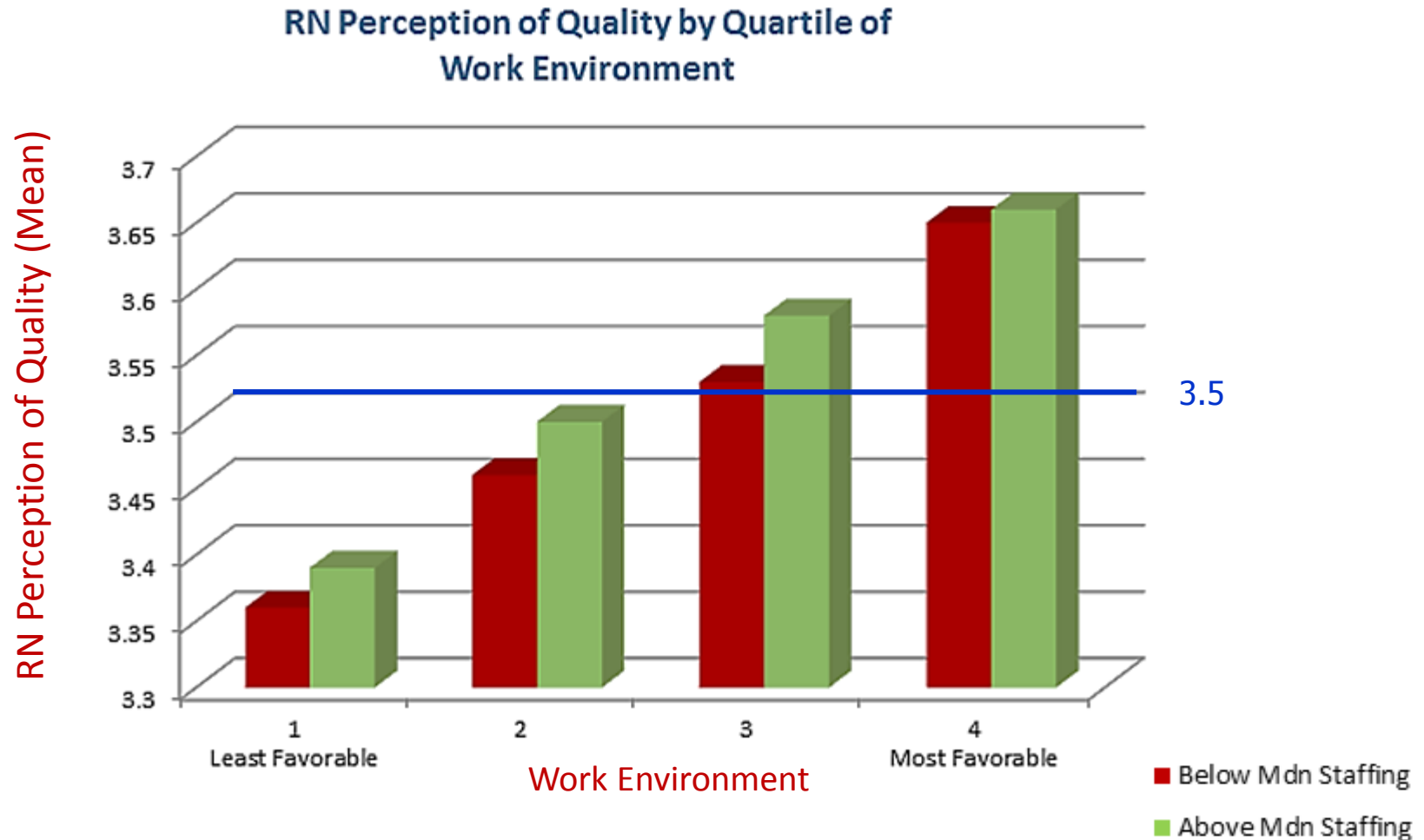
Does Work Environment Trump Staffing?

Pressure Ulcer Rate by Quartile of Work Environment



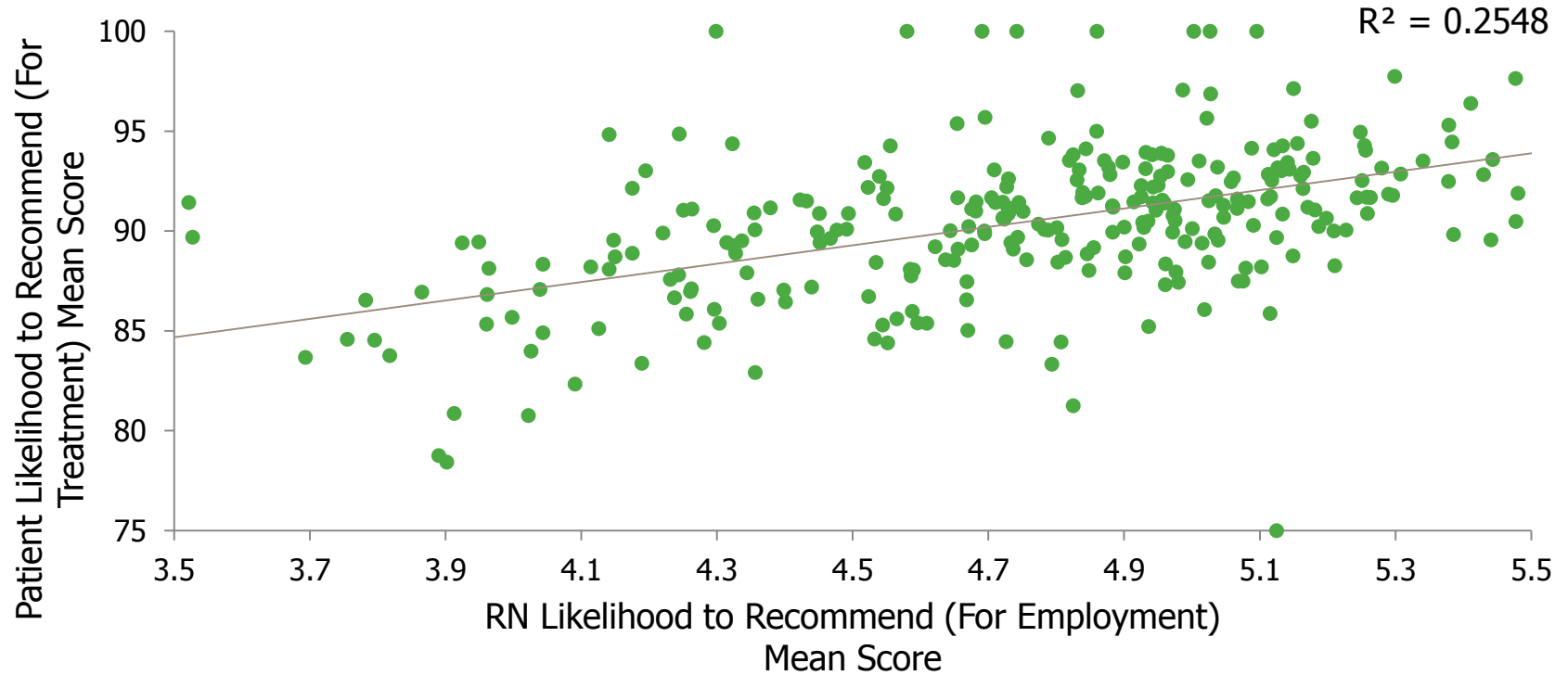
Does Work Environment Trump Staffing?

Work Environment and Staffing have Similar Impact on RN Perception of Quality



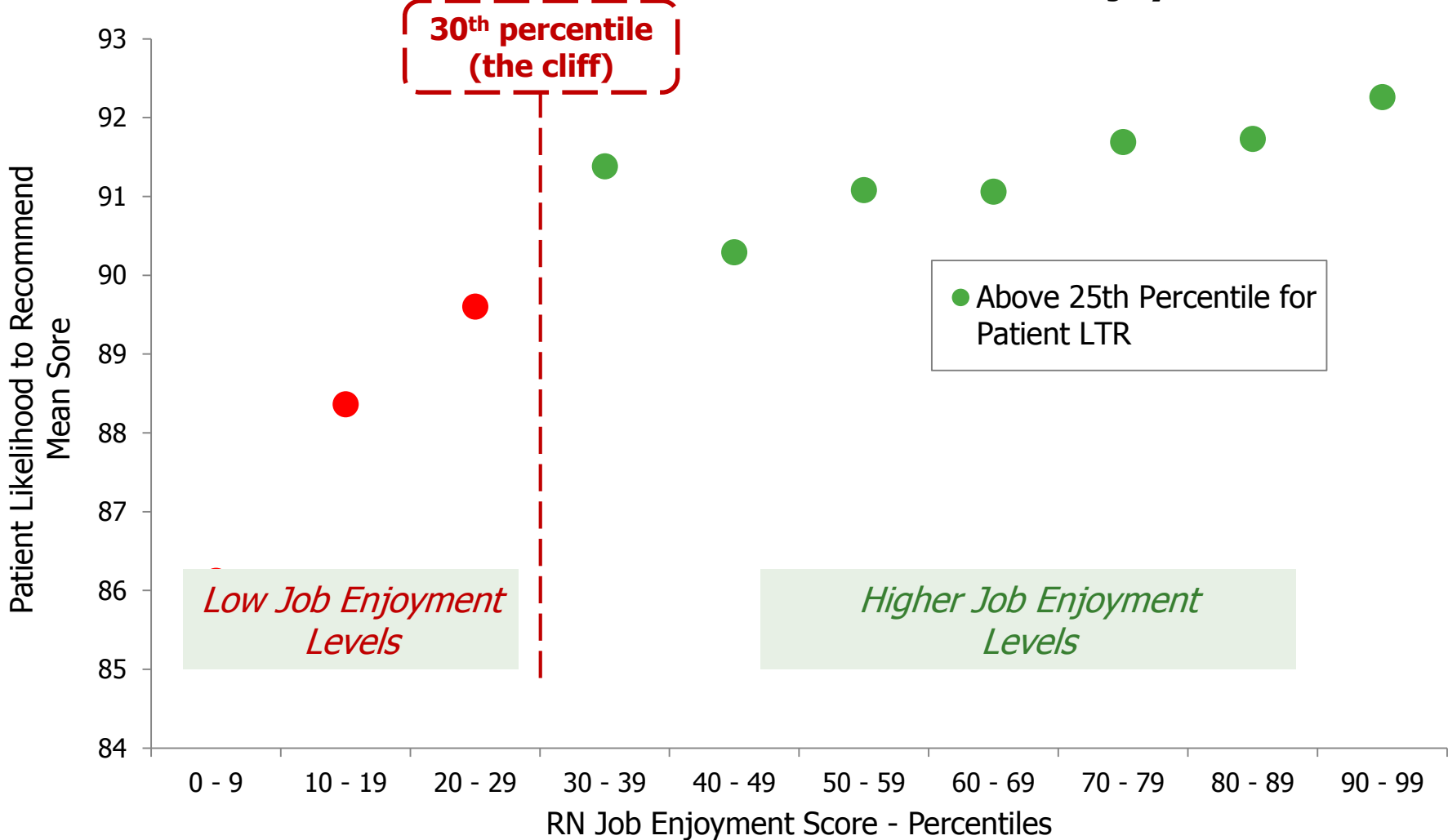
Patient Loyalty and Nurse Loyalty Are in Sync

Patient Likelihood to Recommend vs RN Likelihood to Recommend



Nurse Job Enjoyment Is Related to Patient Loyalty

Patient Likelihood to Recommend vs RN Job Enjoyment

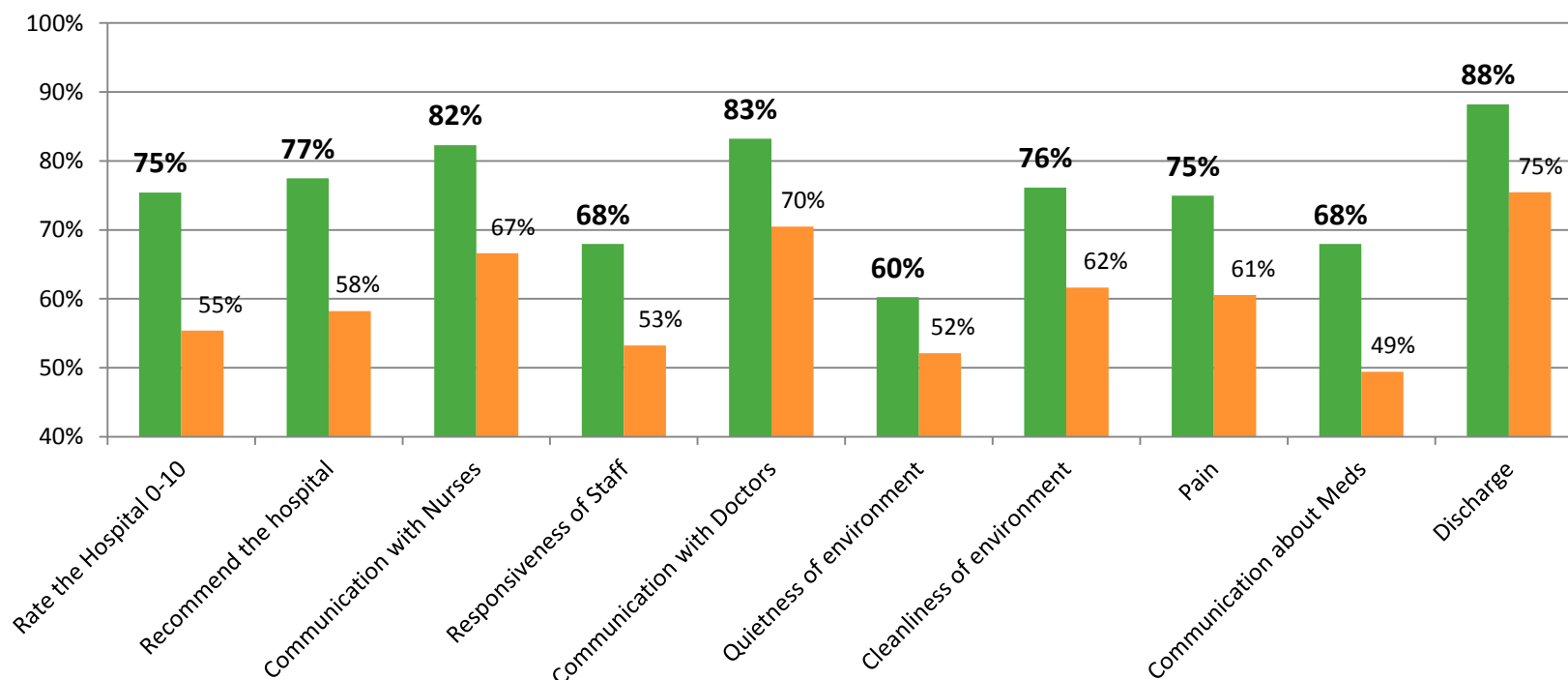


Strategies for Success Compassionate Connected Care for the CareGiverTM

We Know Leader Rounding Works

Were you visited by a Nurse Manager/Leader? HCAHPS Top Box Scores

■ Yes
■ No



Total # Facilities = 405
Total # Responses = 455,988

Press Ganey surveys: July 2013-June 2014

Transparency Matters

Gastrointestinal Tract
Surgery

MyChart®
Provider

Languages

- English

Responses are measured on a scale of 1 to 5 with 5 being the best score.

Likelihood of recommending doctor

4.9 ★★★★★

My confidence in doctor

4.9 ★★★★★

Time doctor spent with me

4.8 ★★★★★

Doctor spoke using clear language

4.8 ★★★★★

Doctor's effort to include me in decisions

4.8 ★★★★★

Doctor's concern for questions & worries

4.8 ★★★★★

Doctor's explanation of condition/problem

4.8 ★★★★★

Wait time at clinic

4.4 ★★★★★

Doctor's friendliness and courtesy

4.9 ★★★★★

Patient Comments

Patient comments are gathered from our Press Ganey Patient Satisfaction Survey and displayed in their entirety. Patients are de-identified for confidentiality and patient privacy.

UofU Patient February 24, 2014

Dr. Glasgow and his nurse were very thorough in their explanations of the surgical procedure and follow-up care. They both made sure that I understood everything very clearly. I placed a phone call to the nurse a few days ago and she responded within 15 minutes to answer a few more questions. All in all, I have very, very comfortable with my decision to proceed with the surgery.

UofU Patient February 07, 2014

one of the best Dr. and staff I have worked with as a patient

UofU Patient January 30, 2014

I felt fortunate that Dr. Glasgow was recommended and would recommend him to anyone who needed a surgeon

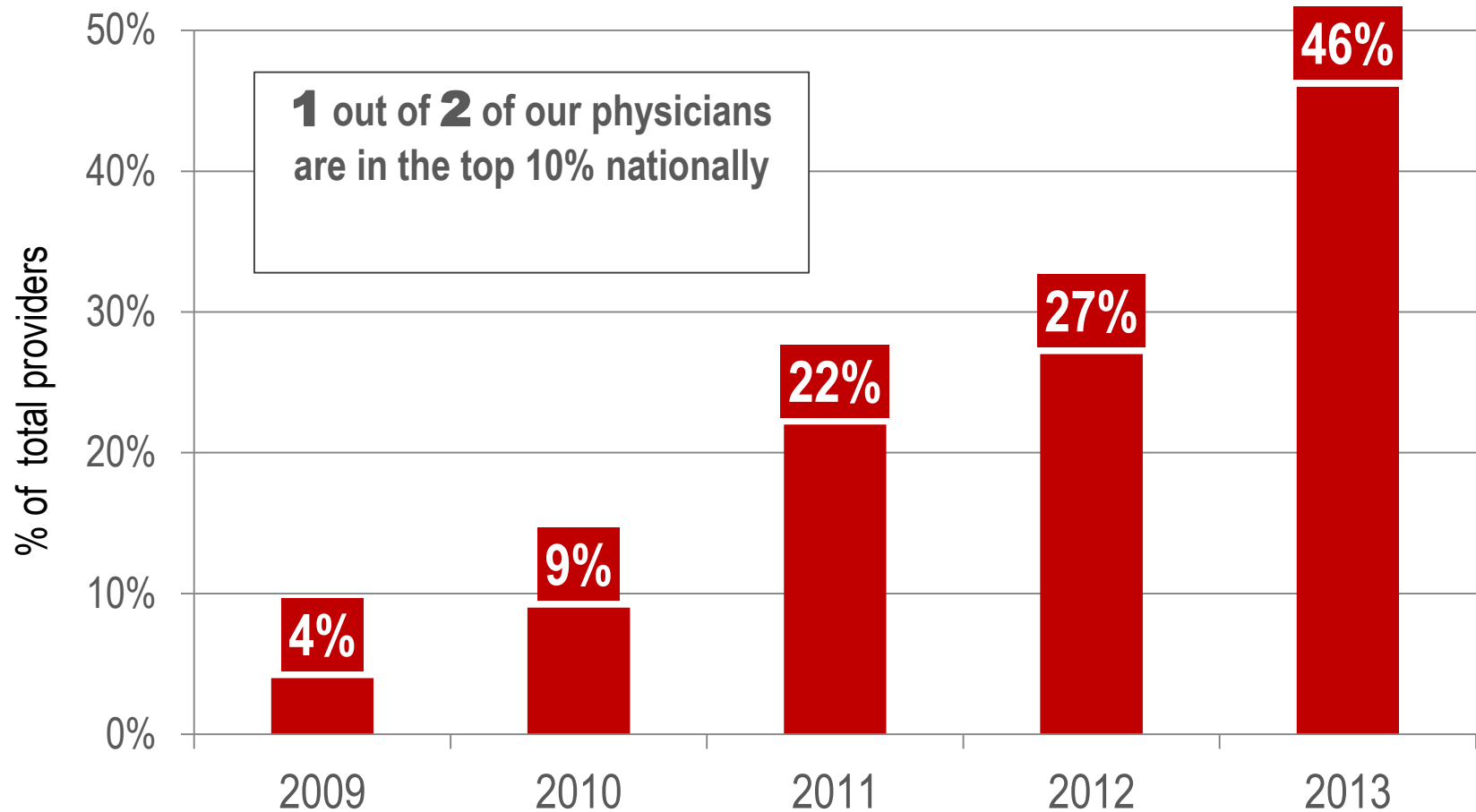
UofU Patient January 05, 2014

Rob Glasgow is a fine surgeon and has a great bedside manner.

UofU Patient December 27, 2013

Dr Glasgow is great!

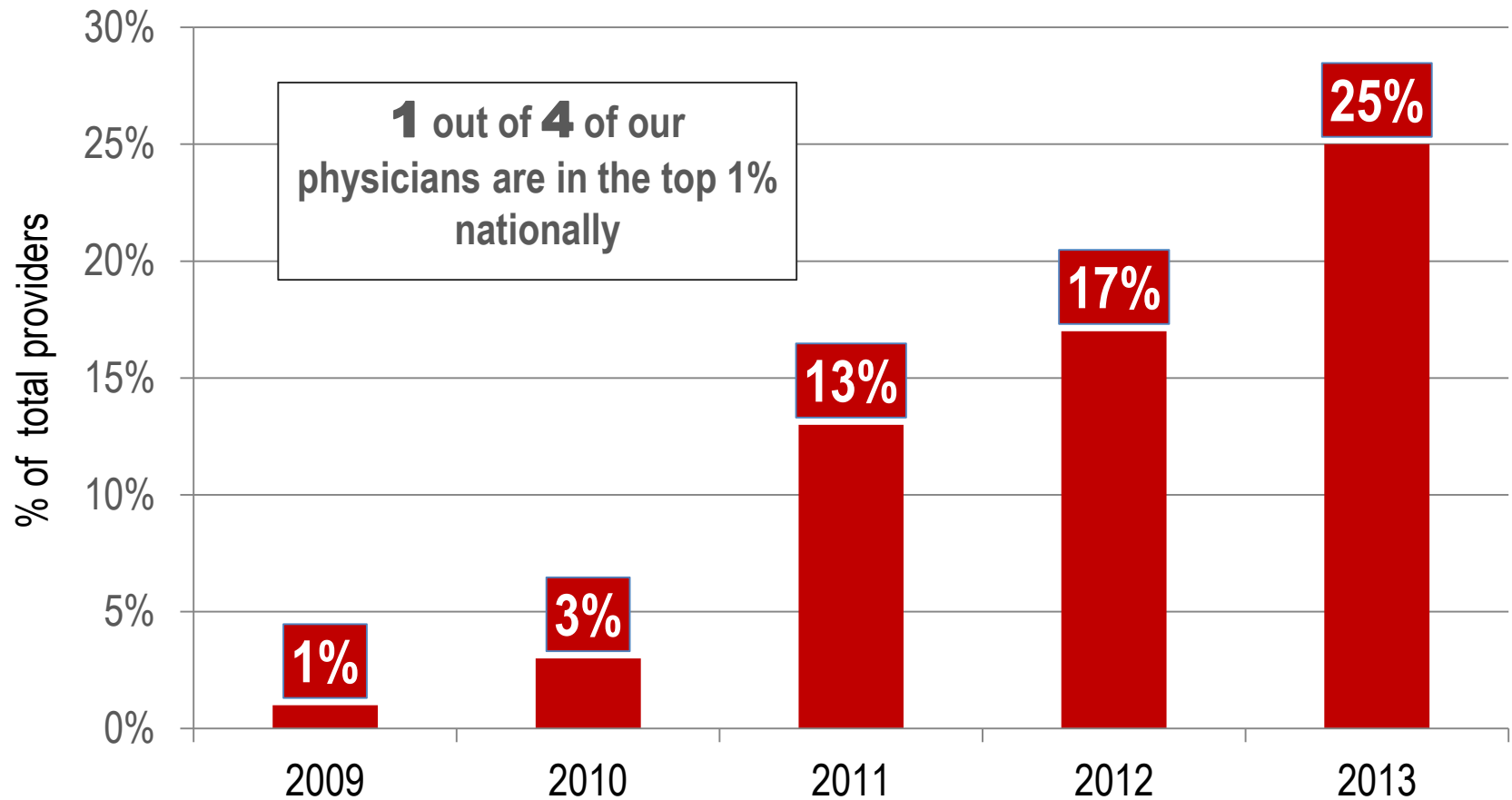
Exceptional Patient Experience



Medical Practice Survey - providers must have n=30 returned in calendar year
National Rank - compared against the Press Ganey National Database: 128,705 physicians

Exceptional Patient Experience

#GIA14



Compassionate Connected Care [™] for the CareGiver

An approach to reduce CareGiver suffering...

- We should **acknowledge** the complexity and gravity of the work provided by caregivers
- It is the responsibility of management to provide **support** in the form of material, human, and emotional resources
- **Teamwork** is a vital component for success
- **Empathy** and **trust** must be fostered and modeled
- Caregivers' perception of a positive **work/life balance** reduces compassion fatigue
- **Communication** at all levels is foundational

The Work is Hard

Theme

- We should acknowledge the complexity and gravity of the work provided by caregivers.

Action

- Caregivers need to receive recognition for the work they do by leaders and colleagues.
- Rewards may be tangible or intangible.
- Leaders voice their understanding of and appreciation for the work of caregivers.

The Nurse's Voice

- Managers recognize **good** work (not just pointing out what the unit is doing wrong).
- Managers work side by side with me.
- Receiving positive feedback from co-workers and patients.

CareGivers Need Support

Theme

- It is the responsibility of management to provide support in the form of material, human, and emotional resources.

Action

- Leaders create a positive work environment.
- Appropriate staffing is assured and well communicated.
- Material resources necessary for care are available and in good working order.

The Nurse's Voice

- Managers invest in the staff and let them know they care and support them.
- Managers understand the hurt/stress/grief that I am going through.
- Managers see that a staff member is going through something and would communicate/explain, and put themselves in my shoes.

We Must Work as a Team

Theme

- Teamwork is a vital component for success.

Action

- Multidisciplinary teams work together with patients at the center – organized around patient needs.
- Team members support one another.

The Nurse's Voice

- Team building – holding each other accountable and working together is active and fostered.
- Staff is aligned with the mission of the organization.
- Everyone works together as a team to meet one common goal-patient care.

Build Empathy and Trust

Theme

- Empathy and trust must be fostered and modeled

Action

- Caregivers demonstrate empathy to each other and patients.
- Trust is built on accountability, integrity, and fidelity at levels of the organization.

The Nurse's Voice

- Treating one another with respect, anticipating others' needs.
- Staff are capable of putting themselves in their patient's position (empathy) and being non-judgmental.
- Staff are people-oriented rather than task oriented.

Compassion Fatigue and Burnout are Real

Theme

- Caregivers' perception of a positive work/life balance reduces compassion fatigue.

Action

- Caregivers feel their work is meaningful.
- Leaders identify caregivers who exhibit burnout and intervene appropriately.

The Nurse's Voice

- Support is available to prevent and to treat burnout.
- Choices are provided: offer a selection of incentives to choose from.
- Flexibility in shift assignments is provided.

360 Degree Communication

Theme

- Communication at all levels is foundational.

Action

- Communication and transparency are fundamental for the demonstration of empathy and trust.
- Listening is a key component of communication.

The Nurse's Voice

- Listening to my patients and other staff members to understand their needs.
- Managers and coworkers listen and hear your worries and physical needs.
- We need to be alert because things can change so quickly, "life changing" instantly; communication and response is key.

Remember the Patient

Remember: your patient is **scared**

Remember: your patient has **lost** almost all control

Remember: they **hurt** and they are the ONLY judge that matters

Remember: YOU are likely their only means of **information**

Remember: they need **compassion**

Frontline Manager Support

<http://helpandtraining.pressganey.com/nurse-resource-center>

You Make Miracles Happen Every Day



Thank You!

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