



St. Anthony Foundation • 150 Golden Gate Avenue • San Francisco, CA 94102

## St. Anthony Free Medical Clinic

*"Restoring health, hope and human dignity."*

Employees Name:                     

Highlighted areas must not be changed.

### EMPLOYEE COMMUNICATION LOG

Employee Name:	_____	Date of Hire:	_____
Clinic Supervisor:	_____	Job Title:	_____
Clinic Manager:	_____	Unit:	_____

*This form may be used as a tool to document both POSITIVE & NEGATIVE performance through the review period.*

Date of Discussion or Action	Subject or Concern	Discussion Details / Action Taken. (Briefly explain what was said or done. Include date, time, place, correction plan, next meeting time, action steps to avoid issue, support )	Supervisors Name:

**Confidential**



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# ICEBREAKER

## **Forms of individual recognition:**

- 1. Handwritten note**
- 2. Email**
- 3. Public recognition (at a staff meeting, for example)**
- 4. Phone call**
- 5. 1:1 conversation**
- 6. Certificate of achievement**



# EXERCISE – LEADER ROUNDING

(Refer to Tool 8.a)

- ❑ **Form groups of two**
- ❑ **Take turns practicing these questions with each other:**
  1. Acknowledge relationship – For example, “How was your vacation?”
  2. “Is there anyone you would like me to recognize – Anyone who has been particularly helpful today?”
  3. “What could be working better?”
  4. “Do you have the tools and information you need?”
  5. “Is there anything else I can help you with?”



CALIFORNIA  
HEALTHCARE  
FOUNDATION

# EXERCISE – LEADER ROUNDING

## DISCUSSION QUESTIONS

- 1. How do you imagine rounding would work in your organization?**
- 2. How do you imagine your direct reports or coworkers would answer the questions:**
  - “What could be working better?” or**
  - “Do you have the tools and information you need?”**
- 3. What can you see as the value of rounding?**
- 4. What can you see as the barriers?**

# Transforming Health Through The Patient Experience

Zeke Montejano  
Clinic Administrator

**ST. ANTHONY'S**

SAN FRANCISCO



## Practice Profile

Type: 501(c) Not-for profit community clinic

Location: Tenderloin, San Francisco, Calif.

Staff: 25 staff and providers, including:  
4.5 FTE Physician/NP,  
3 FTE Register Nurses, 5 FTE Medical Assistants,

Patient HSF/Medical Home: 3,300

Patient Demographics: The patient population is primarily the working poor and 45% report that 3 grade is the highest level of education. 70% patients are Hispanic, 30% non-white.





# SAFMC AIM Statement

AT ST. ANTHONY'S FREE MEDICAL CLINIC OUR PATIENTS ARE OUR #1 PRIORITY.

WE ARE DEDICATED TO MAKING OUR PATIENT EXPERIENCE ONE THAT IS WELCOMING, CARING, AND IS DELIVERED IN A MANNER THAT ENSURES OUR PATIENTS CLEARLY UNDERSTAND DOCTORS' INSTRUCTIONS, ARE PREPARED FOR AND UNDERSTAND FOLLOW-UP PROCEDURES AND EXPECTATIONS, AND KNOW HOW TO REACH CLINIC STAFF DURING OUR NON CLINIC HOURS.

ST. ANTHONY'S  
SAN FRANCISCO



# Change, Testing, Implementing or spread:

- Daily Working Huddle: Provider/MA 30 minute Protected time.
- Greeting Standards: Standardized “Guest Standards”
- Patient Experience: Our PCCP patient experience survey results have demonstrated a positive increased “Overall Rating of Care” from 92% to 95%
- Agenda Setting: 100% of scheduled patients receive an agenda setting tool: (Exit interviews 1x mo performed ) Patient feedback has been overall positive : 85% of our patients found the tool informative and valuable;
- Patient Summary of Discharge: 75% of our patients receive a summary of discharge (Chart audit 1x month); 30% did not due to: staffing shortage, language, system issues.



**To improve your visit with the doctor, please fill out this sheet as completely as possible.**  
*Para mejorar la calidad de su visita con el/la doctor/a, favor de completar este formulario.*

**What concerns would you like to discuss with the doctor today?**  
*¿Cuales son los temas que usted quisiera tratar con su doctor/a hoy?*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Do you have any forms that you need filled out?**  
*¿Necesita que le llenemos algún formulario o tramite?*  Yes/ Sí  No

**Do you need medications refilled or renewed?**  
*¿Necesita que se le resurta una receta?*  Yes/ Sí  No

Medicine/Medicamento: \_\_\_\_\_ Medicine/Medicamento: \_\_\_\_\_

Medicine/Medicamento: \_\_\_\_\_ Medicine/Medicamento: \_\_\_\_\_

**Check any materials that you need (Diabetics Only)**  
*Indique los materiales que necesita. (Sólo para los diabéticos):*

- Insulin/ Insulina  Syringes/ Jeringas  Lancets/ Lancetas  
 Test Strips/ Tiras de prueba  Sharps Container/ Condensador para agujas

**Have you had any of the following performed since your last visit?**  
*¿Se le ha realizado uno de los siguientes servicios desde su última visita a nuestra clínica?*

- Lab Tests/ Pruebas de laboratorio  Specialist Visit/ Visita con un especialista  
 X-Rays/ Rayos-x  Other Tests/ Otras pruebas: \_\_\_\_\_

**Where were these tests performed?**  
*¿En dónde fueron realizados estos servicios?*

- San Francisco General Hospital  
 Quest Laboratories  
 Other/ Otro : \_\_\_\_\_

**Have you been to the Emergency Room or the Urgent Care Clinic since your last visit here?**  
*¿Ha visitado a la sala de emergencia o a la clínica de cuidado urgente desde su última visita?*

- Yes/ Sí  No

**If so, where did you go and when?**  
*¿Si es así adónde fue y cuándo?*

- San Francisco General Hospital  
 Other/ Otro: \_\_\_\_\_

**Date of E.R. / Urgent Care Visit:**

*Fecha de visita a la sala de emergencia o la clínica de cuidado urgente: \_\_\_/\_\_\_/\_\_\_*

**THIS SIDE TO BE COMPLETED BY CLINIC STAFF  
PARA EL USO DEL PERSONAL DE LA CLINICA**

**Summary of Visit / Resumen de visita:**

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**Follow Up/ Seguimiento:**

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**New Medications or Medication Changes/ Nuevos medicamentos o cambios de medicamento:**

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**Upcoming Appointments/ Próximas Citas:**

\*Always remember to bring any medications that you are taking with you to your appointment.  
*Acuérdese de siempre traer a su cita cualquier medicamento que esté tomando.*

\*Arrive 15 minutes before your scheduled appointment time.  
*Llegue a su cita con 15 minutos de antelación.*

\*Give us at least 24 hours notice when cancelling appointments by calling 415-241-8320  
*Si desea cancelar su cita llámenos con por lo menos 24 horas de aviso previo al 415-241-8320*

\_\_\_\_\_ at / a la(s) \_\_\_\_\_

\_\_\_\_\_ at / a la(s) \_\_\_\_\_

\_\_\_\_\_ at / a la(s) \_\_\_\_\_

**Additional Comments & Reminders / Comentarios y Avisos Adicionales:**

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**Emergency Call 911  
After Hours Non-Emergency  
Call: 1-888-738-8081**

**En caso de emergencia llame al 911  
Línea de asistencia fuera de horas  
laborales: 1-888 -738-8081**

**St Anthony Free Medical Clinic**  
150 Golden Gate Ave 2nd Floor  
San Francisco Calif  
Clinic Phone: 415-592-2711 Clinic Fax: 415-440-7776

**Patient:** John Smith **Date:** September 10, 2010

**Summary of Visit With: Dr. Lown M.D.**

Today you and your provider discussed:

Check Up before going to Mt Kailash - you physical exam and review of your health shows you are ok to go on your trip

Possible Diabetes - sugar test was high. we need to test again in 3 months.

High Cholesterol

Mild Liver Inflammation - likely from fat in liver (shot given today to protect against Hepatitis B)

Overweight

Blood Pressure - it is normal

Kidney blood test was normal

Thyroid Blood test was normal

Positive TB test - you have the infection and will need medicine when you return from Nepal

**Follow Up:** In order to make sure that your health *improves*, it will be important that you:

Increase your physical activity to 60 minutes every day

Eat small portions of food

Eat less starch (rice, bread, potatoes)

Take your cholesterol medicine every night

Get your blood and urine tests in beginning of December

Follow up with Dr Lown in middle of December

Go to TB Clinic (Tuberculosis) in December (Building 92 at General Hospital)

**New Medications or Medication Changes:**

VITAMIN D 1000 UNIT TABS (CHOLECALCIFEROL) 1 capsule daily

SIMVASTATIN 40 MG TABS (SIMVASTATIN) 1 By Mouth take at bedtime for cholesterol

**Upcoming Appointments:**

\*Always remember to bring any medications that you are taking with you to your appointment.

\*Arrive 15 minutes before your scheduled appointment time.

\*Give us at least 24 hours notice when cancelling appointments by calling 415-241-8320

----- at -----

----- at -----

**Additional Comments & Reminders:**

Please return to the clinic if your symptoms do not improve within 72hrs: If you require medical attention after hours please call 1888-738-8081 or visit San Francisco General Hospital Urgent Care Clinic. It was my pleasure being able to provide you medical assistance today.

<b>Emergency Call 911</b>	<b>After Hours Non-Emergency Call: 1-888-738-8081</b>
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***Thank you for agreeing to participate in this brief survey!***

At St Anthony Free Medical Clinic our patients are the number 1# priority. We are dedicated to making our patient experience be one that is; welcoming, caring, and is delivered in a manner that ensures our patients clearly understand doctors' instructions, are prepared for and understand follow-up procedures and expectations, and know how to reach clinic staff during our non clinic hours.

Which Provider did you see during your visit today?

Dr. Sonia Bledsoe, M.D.

Dr. Katie Broner, M.D. Teresa Dunn N.P.

Dr. David Lown, M.D.

Dr. Ana Valdés, Dr. Veronica Rayburn, D.O.

Dr. Mario Rizzo D.P.M.

***Now please take a moment to think about your overall clinic visit today.***

1. Upon your arrival were you greeted and felt welcomed by our front office staff?

Poor Fair Average Good Excellent

2. During your visit check in process did you receive a ***Patient Agenda*** worksheet?

Yes No

3. Did you and your provider review the concerns on your ***Patient Agenda*** worksheet?

Poor Fair Average Good Excellent

4. How patient was the provider with your worries/ questions on your ***Patient Agenda*** worksheet?

Poor Fair Average Good Excellent

5. Upon the completion of your medical visit today did you receive a printed copy of your personalized **Summary of Visit**?

YesNo

\* If you answered NO to question 5 please skip to questions #10

6. Did any member of our staff including front office staff review the **Summary of Visit** with you?

Poor Fair Average Good Excellent

8. How easy was it to understand the written plan on your **Summary of Visit** copy?

Poor Fair Average Good Excellent

9. How valuable will the printed copy of your **Summary of Visit** be to you?

Poor Fair Average Good Excellent

10. How would you rate the provider's care and concern for you?

Poor Fair Average Good Excellent

Please feel free to provide us with any comments or suggestions on how we can improve the care and attention that you receive here at St Anthony Free Medical Clinic.

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We thank you for participating in this survey; please know that we value you as a patient and your feedback.



# Creation, Implementation of GUEST standards

- The recommendation was made by our QLT (Quality Leadership Team) to our QIC (Quality Improvement committee) that the creation of standards for patient experience were needed.
- QIC determined the goal for the patient standard of care. (AIM statement introduced)
- Staff feedback from all departments of the clinic.
- GUEST Standards were introduced and rolled out  
Educational Resources used: FISH philosophy, Who Moved my Cheese:



As part of the PCCP and spreading the learning to the different areas of the clinic, effective July 1st we will be introducing **GUEST** standards to our front office team!!

Take a moment to think about your most recent experience while visiting your doctor's office. What made it a memorable experience? Was it a warm welcome? Was it the use of your name? Was it the attention that you received when you interacted with the staff?

In order to make our patients visit a memorable experience we will need do to do the following 100% of the time.

**GREET USE PT NAME ESTABLISH  
EYE CONTACT SMILE  
THANK THE PT SINCERELY FOR VISIT**

***GUEST Standards?*** Our front office team will commit to **G**: greet every patient upon exiting the elevator on the 2<sup>nd</sup> floor. **U**: use the pt name at least 3 times during the visit **E**: establish eye contact **S**: Smile **T**: Thank every patient sincerely upon completing the interaction/visit.

That is right!! We will do it every time! Every patient contact! Every telephone conversation!

Starting 7/1/2010 our front office team will be measured based on the patient exit surveys being completed by our patients at the end of every visit.

During week 2 (7/12/2010) we will be introducing an on-the-spot observations tool to ensure that our F/O staff are adhering to the GUEST standards.

The F/O employee with the highest GUEST on-the-spot survey score during the measured period of July 26-August 13, 2010 will receive a special gift.

# The Tools



## PATIENT CARE QUALITY SURVEY

**The front office staff made eye contact and smiled when I arrived today.**

*Yes, definitely*    *Yes, somewhat*    *No*

**The front office staff used my name.**

*Yes, definitely*    *Yes, somewhat*    *No*

**The front office staff thanked me for visiting.**

*Yes, definitely*    *Yes, somewhat*    *No*

**I felt a personal connection with my nurse.**

*Yes, definitely*    *Yes, somewhat*    *No*

**The nurse really understood and appreciated my concerns.**

*Yes, definitely*    *Yes, somewhat*    *No*

**My provider understood and appreciated my concerns and responded to them appropriately.**

*Yes, definitely*    *Yes, somewhat*    *No*

**After meeting with my provider, I feel like I have the power to improve my health.**

*Yes, definitely*    *Yes, somewhat*    *No*

**Comments:** \_\_\_\_\_

\_\_\_\_\_

**ST. ANTHONY'S**

SAN FRANCISCO





# Wowing the patient with an exceptional experience....Things to consider.

- ✓ Welcoming Greeting: 5 second patient acknowledgement. “Welcome” “Good morning we will be with you in a moment”. Acknowledging the patients presence is key!
- ✓ Phone etiquette: It establishes a professional image of the practice and treatment of respect/dignity.
- ✓ Working agreements among the different areas of the practice. Who, By when and How. Increase employee moral and reduces employee differences.
- ✓ Agenda Setting at check in /Patient summary of discharge.
- ✓ Patient experience standards: Clear patient expectation of the practice and the practice expectations of the patient. “patient bill of rights”
- ✓ “Return call commitment” & after hours phone number for non emergency request.

Things to consider continue....

## **Provider Patient “E” exceptional Communication**

### **Standards:**

Engage: Ask-tell-ask

Empathy: Increased Connection

Educate: Ask about self diagnosis

Enlist: Invite patient to collaborate in decision-making:

### **Clinical Staff-Patient Communication Standards:**

Connect: Choice of words, Eye contact

Appreciate: Listen carefully, understand

Response: Clarify, Use common language

Empower: Create choice, offer to help.

### **Clinical staff-Self introduction to patient:**

“Good morning my name is Susie Q I am a medical assistant working with Dr. Q today please follow me this way”



## Staff reward and recognition... WIFM

Identifying your teams preferred method of recognition; survey the staff for feedback.

Monthly recognition awards may include: \$5.00 Starbuck's gift cards, service pins, movie tickets, A Thank You note, or a simple verbal thank you for your hard work.

Our teams recognition program: Monthly staff recognition pins during our monthly all staff meeting. Staff and patients nominate the employee to receive the service pin.

[woldclasspins.com](http://woldclasspins.com)



Kind words go a long way and are priceless!

# Recognition Board/QI Board

- Monthly Employee Recognition: Shared team results and highlight individual success.
- Updates to Working Agreements:
  - Progress on QI work or projects:



## The end result.....

- ✓ Decrease in no show rates
- ✓ Increase in staff retention
- ✓ Increase staff satisfaction
- ✓ Increase in patient experience results
- ✓ Increase in staff moral
- ✓ Improvement in patient self management
- ✓ Increase in patient loyalty
- ✓ Decrease in expenses ; less referrals, fewer diagnosis
- ✓ Improved patient understanding of instructions and follow up
- ✓ Increase in revenue
- ✓ Increase in internal referrals; health management
- ✓ Decrease in the patient visit

Entire Team Win-Win situation

# Patients First Program Palo Alto Medical Foundation



**OVERVIEW FOR  
California Healthcare  
Foundation  
January 28, 2011**

# In a Nutshell



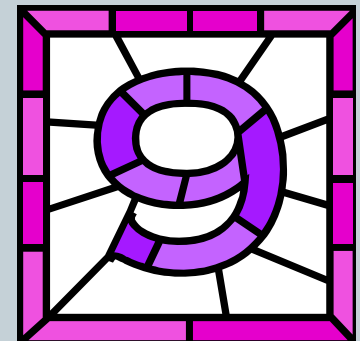
- Patients First describes a culture of excellence based on the mission, vision, and values of our organization as modeled by top leadership.
- Patients First also leverages the organization's strategic goals.



# 9 Principles of Patients First



- **Commit to Excellence**
- **Measure the Important Things**
- **Build a Culture Around Service**
- **Create and Develop Great Leaders**
- **Focus on Employee (and physician) Satisfaction**
- **Build Individual Accountability**
- **Align Behaviors with Goals and Values**
- **Communicate at All Levels**
- **Recognize and Reward Success**



# How Does It Work?



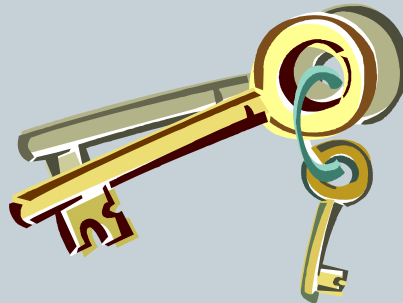
- **Patients First provides local leadership with the training, tools and support they need to be accountable for every aspect of the patient's experience.**



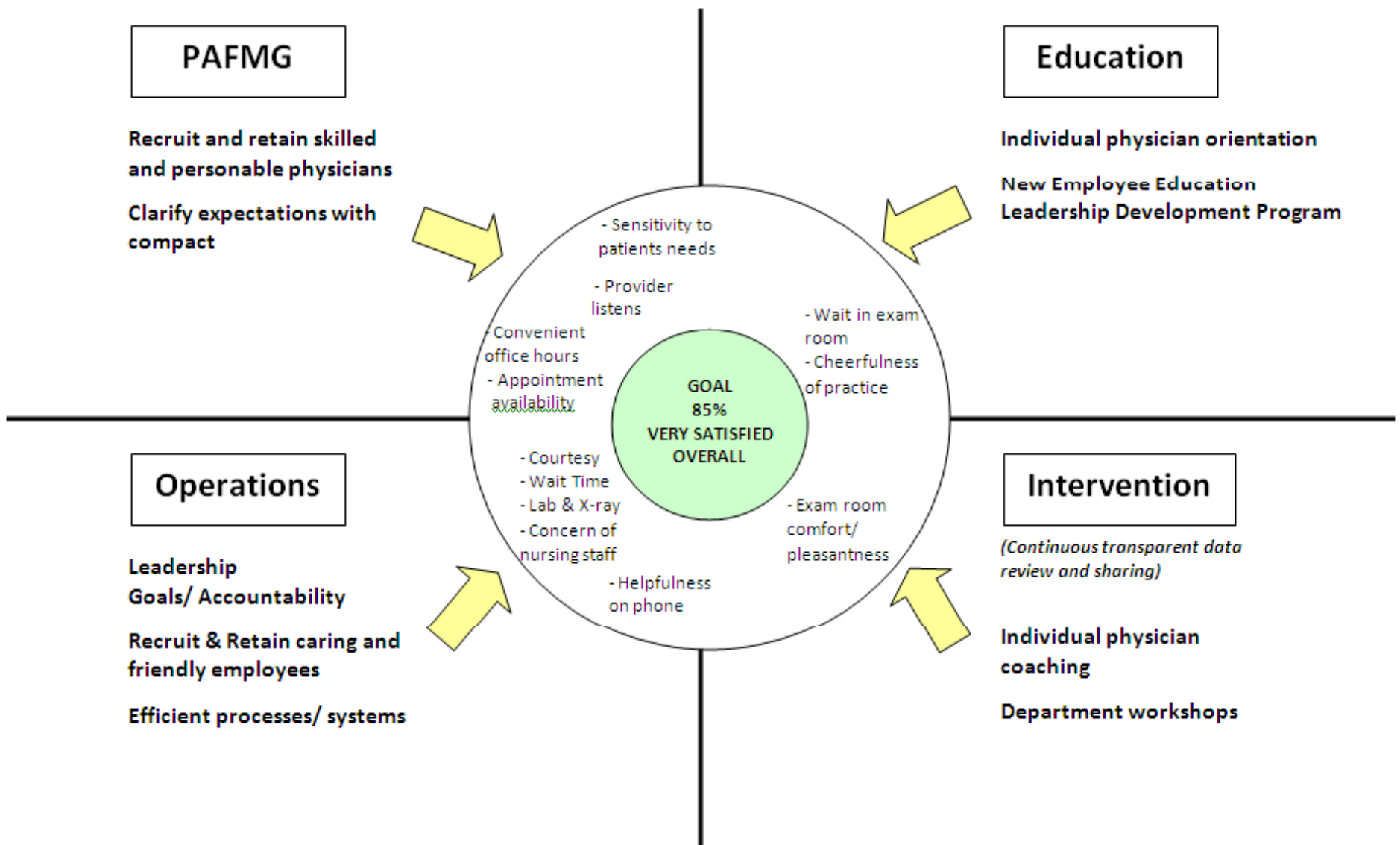
# Keys to Success



- Partnered leadership, ownership and accountability
- Employee and physician engagement



# Integrated Approach to Outstanding Patient Experience



# Preparing Our Leaders to Lead



- **Patient's First Boot Camp for all Directors, Managers and Supervisors**
  - **Tool Kit**







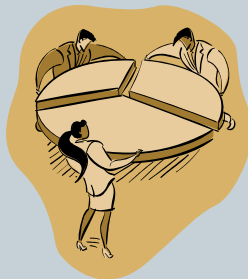
## Principle One

### *Commit to Excellence*

#### **TOOL 1.a**

##### **Alignment with Medical Staff Partner**

- ❖ The Director or Manager and his or her Department Chair or Site Leader together share responsibility for ...
- The patients' experience while in the department  
*and this in large part results from....*
- ✓ The efficiency and effectiveness of the physicians' practice.
- ✓ The employees' experience of work and degree of engagement.



***Complete the assessment on the flip side of this card and discuss results with your physician partner and/or director.***



##### **Partnership Alignment Indicators**

- You and your partner have discussed how the organization's mission, vision, values and goals guide the work of your team, and what role your department plays in the organization's success.
- You and your partner meet regularly.
- Your relationship can be characterized as mutually respectful and enjoyable.
- You have an established and effective way of dealing with issues such as employee disciplinary action, service failures, physician requests & expectations, and problematic performance results.
- Your physician does or is willing to participate in staff meetings and training sessions related to patient satisfaction.
- Your physician partner is emphasizing patient satisfaction at your department's monthly physician meetings.
- Your physician partner is actively involved with all process improvement activities.
- ***Advise your Director or Administrator if you believe your working relationship with your physician partner could be improved.***



## Principle One

### *Commit to Excellence*

#### TOOL 1.e

##### DESC Scripts

DESC Scripts are another tool for facilitating a conversation between two individuals when one has concerns about the other's behavior.

- Describe in objective terms the exact behavior that you wish to address.
- Express how this behavior disappointed, or concerned you.
- Specify exactly what behavior you believe would have been more appropriate.
- Clarify how you believe the preferred approach would have been better for your relationship, team or patient.

**Flip this card over to see an example of a DESC script and how you might introduce this to your team.**



##### DESC Scripts - Example

###### Describe:

"This morning when I returned from my break my doctor told me that you had not roomed his patient as you promised you would."

###### Express:

"I was really disappointed. This was a new patient and evidently she was left in the waiting room 10 minutes past the appointment time. This was poor service and it caused the next several patient appointments to start late."

###### Specify:

"In future if you do not think you really will have time to help out or you yourself get behind while I am on my break, I would like you to either tell me at the start so that I can make other arrangements or ask another M.A. to help."

###### Clarify:

"If you could do this I think we will be able to provide our patients and doctors with better service and support and I will feel more comfortable relying on you."

"Of course I would also feel good about helping you out when you take your break or need my help".

Review the definition of DESC with your staff and show them this or another example at a staff meeting. Then allow the group to break into pairs and practice the technique. After about 10 minutes of practice, call the group back to order and invite members to discuss their practice session and ask questions.

**Note:** The DESC script is an effective way to structure a dialogue with co-workers who might be somewhat intimidating. For example, if this is a doctor, the manager can help the employee write the script and facilitate the discussion.

Feel free to invite your Director or Administrator to assist with this staff meeting.



## Principle Five

### *Focus on Employee (and Physician)*

#### *Satisfaction*

#### **TOOL 5.a**

#### **New Employee Orientation**

- ❖ New employees are now introduced to the organization in a combined one and a half day general orientation program that dovetails with many of the concepts of the Patients First Program.
- ❖ Specific roles such as PSR and M.A. include additional orientation to the information systems they will be using and other role specific functions.
- ❖ Department specific orientation should include a checklist of all items to be covered during the new employee's first 30 days.

**Suggestions for developing and managing a department orientation checklist can be found on the flip side of this card.**



#### **Department Orientation Checklist**

- ❑ If you already have a department specific orientation checklist, distribute it beforehand or at a department meeting.
- ❑ Depending on the number of people attending your meeting you can work as one group or break into two or three smaller groups with each group having the assignment to review the list and offer suggestions for update, including items to delete, items to reword, or new items.
- ❑ Allow approximately 20 minutes for this activity.
- ❑ After 20 minutes return to the full group and ask a spokesperson from each group to present his or her group's recommendations.
- ❑ All suggestions should be documented on a white board or a flip chart with someone assigned to write down anything placed on the white board.
- ❑ Before the next meeting revise your department's checklist incorporating all the ideas.
- ❑ The updated checklist can be shared with all of the staff via e-mail, bulletin board and/or distributed at a future meeting.



**Check the Patients First tab on SharePoint for examples of department orientation checklists developed by other managers in our organization.**



## Principle Eight

### *Communicate at All Levels*

#### **TOOL 8.a**

##### **Leader Rounding**

- Refers to the practice of walking through your department daily and not only acknowledging all your staff and other customers, but taking the time to stop and interact in a brief, but purposeful way with selected individuals.
- All leaders round on their direct reports. For example, directors round on managers and supervisors, managers round on supervisors and all leaders round on their employees.
- The size of the department and number of employees will affect the frequency of rounds and the number of times per month any one individual is “rounded on”.
- Ideally rounding on 2-3 employees per day and allowing 5 minutes per employee adds up to 15 minutes plus another 15 minutes for follow up equals 30 minutes per day. For most managers this allows every employee to be rounded on monthly. Leaders with very large departments may move the frequency to rounding on each individual every two months.
- It is a good idea to create a schedule and a log to help keep rounding on track.

***A sample of such a schedule and a rounding record is available in the Patients First section of SharePoint***



##### **Getting Started**

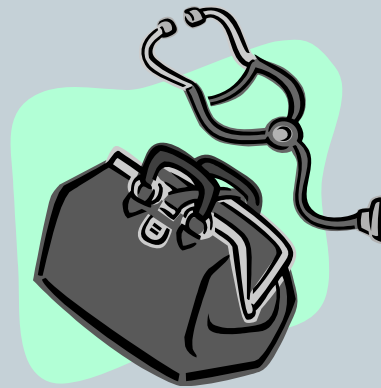
- ✓ Introduce process and purpose at a staff meeting – Use role play to demonstrate.
- ✓ Acknowledge relationship- “How was your vacation?” “How is your husband wife/child?” Learn and use their names.
- ✓ “Is there anyone you would like me to recognize – Anyone who has been particularly helpful today?”
- ✓ What could be working better?
- ✓ “Do you have the tools and information you need?”
- ✓ “Is there anything I can help you with?”
- ✓ BONUS: Are you aware of what we are all working on this week? (i.e. AIDET, Managing Up, etc.) Do you have any questions about that?



# Physician Engagement



- **Just – in- Time Workshops**
- **Doctor's Bag**





# **Examples from the Tool Kit and The Doctor's Bag**



# ACCESS TO CARE



## **A.4: Our promptness returning your calls.**

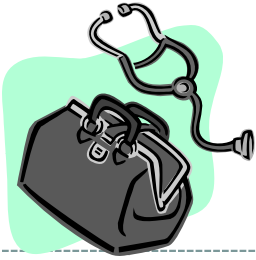
### ***Your patient is waiting by the phone...***

- ❖ Our patients' rating of this element of the Press Ganey survey ranks it as 5<sup>th</sup> on the Top Ten priorities for improving overall satisfaction.
- ❖ Operations has completed a critical assessment of the quality of messages coming from the Call Center and implemented the improvements indicated.
- ❖ If a patient has to call back a second time we are in service recovery mode and no matter how hard we try, we've probably set back the doctor: patient relationship.

*The reverse side of this card offers some suggestions for managing call backs...*

## **A.4: Our promptness returning your calls.**

- ❖ Create a "Welcome to My Practice" letter that includes mention of your approach to returning calls. Most patients can understand that their calls may not be answered immediately, but will understand a.m. calls being returned during your lunch break or afternoon calls being returned after you've completed your last visit of the day.
- ❖ Use the "Welcome to My Practice" letter to let your patient know that often they will hear back from your nurse or medical assistant, and that she'll be acting in accordance with your specific directions.
- ❖ Your staff has been taught the technique of "Managing Up" meaning with your encouragement they will return your patient's calls saying. "Dr. \_\_\_\_\_ asked me to give you a call to let you know...."



# DURING YOUR VISIT



## **B.6: Friendliness and courtesy of the nurse/assistant.**

### **B.7: Concern the nurse/assistant showed for your problem.**

#### ***Your nurse or medical assistant is an extension of you***

- ❖ This element of the Press Ganey survey has appeared on our Top Ten Priorities list monthly since the survey was initiated in January 2010.
- ❖ Your manager has worked hard to improve this score by teaching the staff how to use AIDET and key words and we have seen the scores improve every quarter.
- ❖ Nonetheless, we are still performing below the 60 percentile as compared with the Western U.S.

*The reverse side of this care offers suggestions on how you can help improve your nursing staff's satisfaction rating in this area*

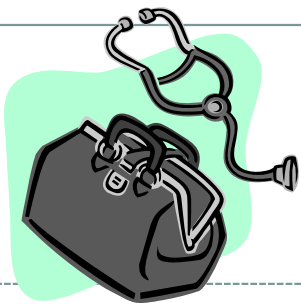
## **B.6: Friendliness and courtesy of the nurse/assistant.**

### **B.7: Concern the nurse/assistant showed for your problem.**

- ❖ With your manager's help you can receive a written report of how your patients rated every element of the Press Ganey survey. Make time to share your Press Ganey results with your nurse or medical assistant and discuss how you can **work together** to improve this rating.
- ❖ Teach your staff about your specialty and the special needs of your patients so that they can verbalize genuine concern for the patient's problem ....
  - To the elderly patient: *"Here is a print out of your follow up care plan. The print is small. May I read it to you?"*
  - To the diabetic patient: *"For today's exam we'd like you to remove your shoes and socks so we can make sure you don't have any blisters that you might not have noticed."*

*Never underestimate the degree to which your nurse or medical assistant take their cues from you. Find time to tell your nurse what your concerns for this patient are. She will reflect your concern when she interacts with your patient.*





# DURING YOUR VISIT



## **B.8: Waiting time in the exam room before being seen by your care provider.**

*This one's all yours.*

❖ This element of the Press Ganey survey ranks 10<sup>th</sup> on the Top Ten priorities, but keep in mind that this means it's the 10<sup>th</sup> most important element of the 30 elements included in the survey.

❖ The “Doctor On Time Boards” posted in most waiting rooms have made doctors more conscious of how much this aspect of the visit matters to our patients and have been received very enthusiastically by patients.

❖ Yet, there are still a handful of doctors in almost every department who tend to run behind schedule.

*See the reverse side of this card for some suggestions for starting and staying on time...*

## **B.8: Waiting time in the exam room before being seen by your care provider.**

❖ Start on time. Managers tell us that many doctors fail to see their first patient of the day on time and fall further and further behind as the day progresses.

❖ Talk to your Site Leader about your schedule.

- Are you trying to see too many patients per day?

- Is there an appointment type that tends to slow you down?

- Are there peers who have successfully solved these problems with whom you could consult?

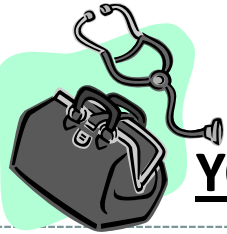
❖ Talk to your manager.

- What does she hear from staff and patients?

- Are they picking up on some time wasters that you're not aware of?

❖ Are you using the “Patient Visit Guidelines or Agenda process?”

- Refer to card C.3 for review of this approach to ending appointment on time.



## **YOUR CARE PROVIDER**



### **C.4: Care provider's efforts to include you in the decisions about your treatment**

***"Let's discuss your options."***

- ❖ As a physician practicing in the Silicon Valley you are probably working with the most sophisticated, educated and informed patients anywhere in the world.
- ❖ Often your patient has already searched the web and comes with a mind boggling list of questions, ideas and concerns.
- ❖ You will also see patients who, for reasons owing to age, ethnicity, education or life experience are most comfortable with you making all the tough decisions.
- ❖ It will take your art as well as your skill at medicine to partner with all of your patients in a way that they perceive as genuine and respectful.

*Flip this card over for some helpful suggestions...*

### **C.4: Care provider's efforts to include you in the decisions about your treatment**

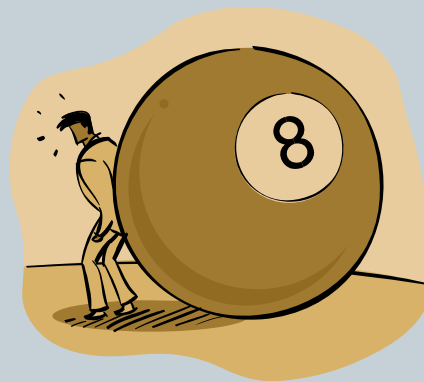
- ❖ Whether you are a specialist or a primary care physician you can use the "Welcome to my practice" letter to let patients know your philosophy on partnering for optimal wellness and management of illness.
- ❖ At the time of your first encounter with the patient and at key times during your ongoing relationship talk to your patient about their expectation for shared decision making.
- ❖ Provide references or print outs for information about those conditions you see and the procedures you perform most often so that your patients review accurate and safe information rather than depending on their internet searches.
- ❖ Discuss with your colleagues who may have found other ways of finding ways to meet the expectations of similar patients.

# The Reality of Patient Satisfaction Improvement



If the other guy is getting better, than you'd better be getting better faster than the other guy's getting better....or you're getting worse.

*Tom Peters*



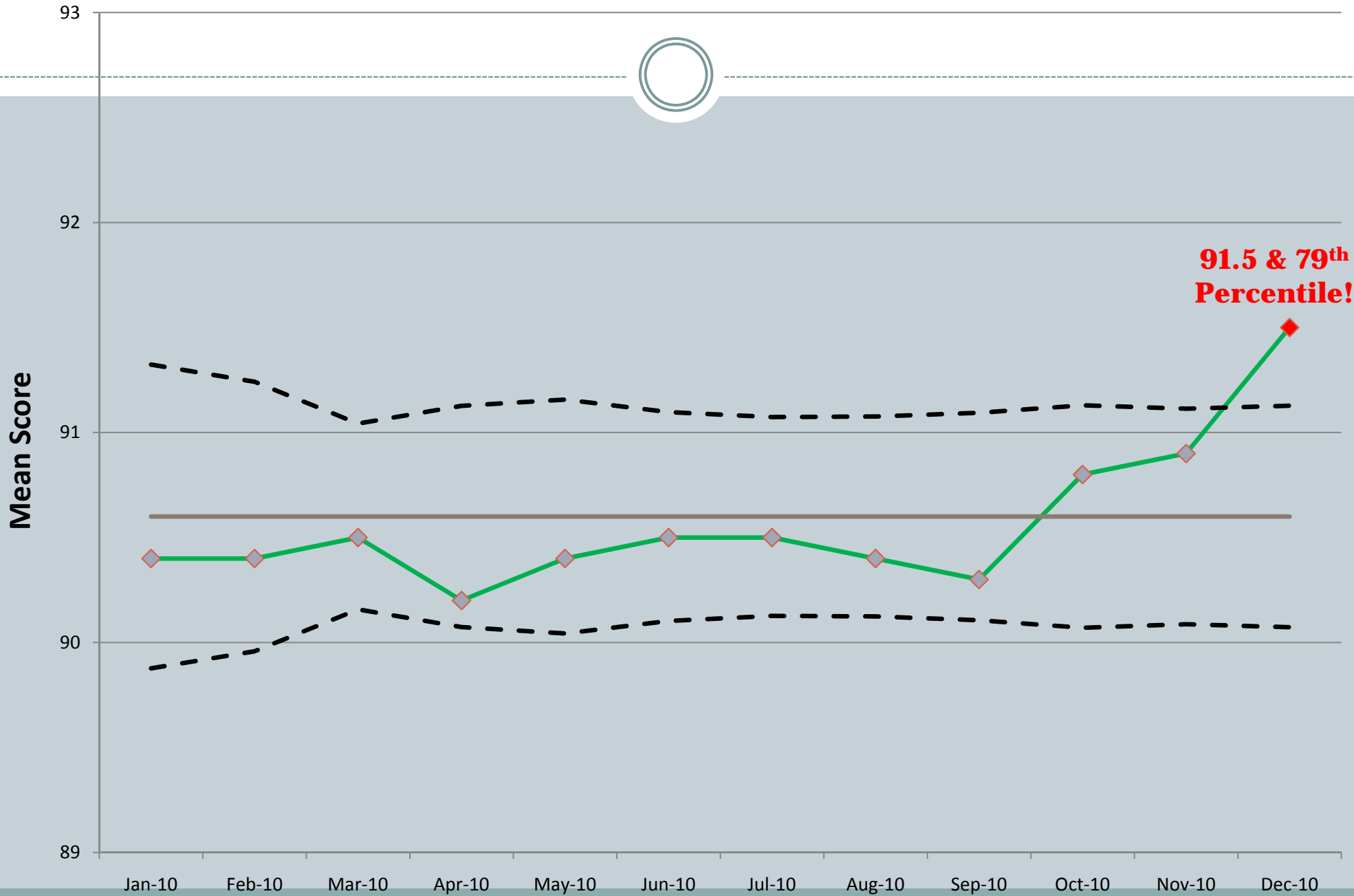
# Sustaining the Gain



- **Continuous monitoring re: established goals and targets**
- **Continuous Process Improvement**
- **Ongoing leadership development**
- **Support for local initiatives**
- **Leadership recognition and reward**



# CAD Mean Score - 2010 Monthly Overall Rating



# Questions

