Returning to the Why: Patient and Caregiver Suffering and Care

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Quality does not mean the elimination of death or perfect compliance with guidelines. Efficiency does not mean the elimination of all spending or even 100% elimination of all wasteful spending. And compassion for patients does not mean the elimination of all pain.

- Thomas Lee, MD
CMO Press Ganey
Measuring What Matters to Improve the Patient Experience

OUR GOAL:
Prevent suffering by optimizing care delivery

OUR GOAL:
Alleviate by responding to inherent patient needs
CHF Patients Have Different Needs

CHF vs. Medical
What Do Patients Really Value?

19% of patients

- Low: Confidence in Provider 74.6% Fail to Recommend
  - Low: Worked Together 90% Fail to Recommend
    - Low: Courtesy 92.8% Fail
    - High: Listens Carefully 78.2% Fail
  - High: Listens Carefully 24.7% Fail

81% of patients

- High: Confidence in Provider 1.9% Fail to Recommend
  - High: Worked Together 1% Fail to Recommend
    - High: Concern for Worries 0.6% Fail
    - High: Concern for Worries 5.6% Fail
  - Low: Concern for Worries 6.3% Fail

All Patients 15.7% Recommendation Failure Rate
Inpatient (HCAHPS) Recommend – LTR Within Service Line

All Patients 74.8%
Top Box LTR (Definitely Yes)

12.7% of patients

Maternity
79.5% Top Box LTR

Low: Team 48.2% LTR
High: Team 90.4% LTR

3.2% of patients

Low: RN
Court 28.4% LTR
High: RN
Clean 82.3% LTR

1.2% of pat

Low: RN
Clean 82.3% LTR
High: RN
Clean 95.1% LTR

3.4% of pat

Low: RN
Court 59.9% LTR
High: RN
Clean 95.1% LTR

5.9% of pat

Low: RN
Clean 95.1% LTR
High: RN
Clean 95.1% LTR

5.3% of pat

Low: RN
Court 59.9% LTR
High: RN
Clean 95.1% LTR

9.5% of pat

Low: RN
Clean 95.1% LTR
High: RN
Clean 95.1% LTR

13.2% of pat

Team = “Staff worked together to care for you”

Medical
70.4% Top Box LTR

Low: Team 38.8% LTR
High: Team 86.4% LTR

14.9% of patients

Low: RN
Listen 19.6% LTR
High: RN
Listen 49.6% LTR

3.4% of pat

Low: RN
Court 25.2% LTR
High: RN
Court 57.3% LTR

5.4% of pat

Low: RN
Clean 83.7% LTR
High: RN
Clean 96.2% LTR

15.8% of pat

Surgical
79.2% Top Box LTR

Low: Team 45.0% LTR
High: Team 91.3% LTR

8.9% of patients

Low: RN
Court 28.4% LTR
High: RN
Clean 82.3% LTR

26.0% of pat

Low: RN
Clean 95.1% LTR
High: RN
Clean 95.1% LTR

9.7% of pat

Low: RN
Clean 95.1% LTR
High: RN
Clean 95.1% LTR

15.8% of pat

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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.
# Pain Control: Staff Have More Influence Than Meds

<table>
<thead>
<tr>
<th>Did doctors/nurses do everything to help with pain?</th>
<th>Rate ED 0-10</th>
<th>Recommend ED</th>
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<tbody>
<tr>
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<td>50.0</td>
</tr>
<tr>
<td>No</td>
<td>25.7</td>
<td>30.7</td>
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</table>
Higher Patient Experience Reliability Scores Link to Higher Quality (quintiles of performance)
Excellent care - My mother was in bed 24/7 for 9 years and never had a pressure sore. That is incredible care.

I had to wait as long as 1 1/2 hrs. for a pain pill. The aides say they forgot to tell the nurses when I complained. I had major surgery on my leg and I wouldn't have asked for a pain pill if it wasn't needed.

Nurses, CNA's, and PT/OT staff were exceptional. Caring and attentive. Treated residents with dignity and respect. Excellent care. Positive experience for both patients and family.

Sometimes I would wait 30-60 minutes for a response to call light.

Waited 2 hrs. for pain med & left on commode for 1/2 hr.; a.m. meds sometimes not given until late morning.

They always did their jobs well, my needs were met.
I had the best experience I could have. They took care of my needs and how I felt.

I was in so much pain I did not know if I would ever be right!! I was scared to get up on my feet. I was having a hard time - I cried. I owe it all to my therapists. I got stronger & stronger!!

The Rehab doctor was out of touch with treatment plans and gave conflicting discharge instructions compared to discharge nurse.

My husband was admitted on a Monday & went into arrest on Thursday afternoon so his stay was very short. He died on the way to the hospital. When I arrived to see him Thursday afternoon he was radically changed, pale & in pain. I was with him several hours before the crisis that resulted in his death. I would have felt better if, during that time, a physician had been in to evaluate for changes or to talk to me instead of just sending pain medication with the nurses. I think the symptoms my husband was having warranted more concern & thought even if the outcome probably would have been the same.
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.
Best Practice Strategies

- Courtesy/Respect of the Nurses
- Promptness in Response to Call Lights
- Skill of the nurses/doctors
- Discharge
- Cleanliness
- Attention to Special/Personal Needs
- Accommodation and Comfort for Visitors
Relationship Between Engagement and Experience

National Percentile Rank Based on Employee Engagement Scores

Average National Percentile Rank

<table>
<thead>
<tr>
<th>Category</th>
<th>Top Quintile of Employee Engagement</th>
<th>Bottom Quintile of Employee Engagement</th>
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<tbody>
<tr>
<td>Nurse</td>
<td>71</td>
<td>31</td>
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<tr>
<td>Responsiveness</td>
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<td>23</td>
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<tr>
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<td>63</td>
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<tr>
<td>Rating</td>
<td>84</td>
<td>47</td>
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</tbody>
</table>

How Caregivers Experience Care

- Cared About
- Respect
- Trust
- Job Security

Connected

- Belong
- Enjoy Work
- Recognition

Clinical Excellence

- Providing Quality Care
- Providing Safe Care

Operational Excellence

- Job Fit, Clarity, Pay/Benefits
- Work Training, Development
- Physical/Staff Resources
- Good Management
- Input, Feedback, Autonomy
- Leadership

Communication

Culture

- Mission/Values
- Teamwork
- Patient-Centeredness
- Improvement Focus
- Safety as a Priority
What Stress & Harm Do Providers Cope With?

- Stress of clinical role - complexity, high stakes activities
- Sympathy overload - secondary traumatic stress of witnessing suffering
- Emotional labor of caregiving role

- 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

- 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
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.
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.
Key Drivers of Engagement

1. I feel like I belong in this organization.

2. This organization provides high-quality care and service.

3. I have confidence in senior management's leadership.

4. This organization treats employees with respect.

5. The amount of job stress I feel is reasonable.

6. My pay is fair compared to other healthcare employers in this area.

7. My work provides me an opportunity to be creative and innovative.
Compassionate Connected Care ™ for the CareGiver

- 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
Best Practice Strategies

• Work toward a culture of caring
• Know people
• Develop leaders formally
  • Not simply the tasks for management
  • Coaching
  • Mentoring
  • Succession planning
• Frequent senior leader rounding
• Assure transparency

http://helpandtraining.pressganey.com/nurse-resource-center
Teams

- Aligned mission, vision, values
- Unwavering leadership support
- Formal and ongoing education
- Stable structure
- A Culture of shared responsibility, accountability, and obligation
- Shared patient stories
- Standardized communication
- Evidence based practice
- Involvement of clinicians, patients, and families
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**
...and the CareGiver

Remember: caregivers are **working hard**
Remember: they are members of a **team**
Remember: they need **information**
Remember: they need **resources**
Remember: they need **compassion**
This is Why it Matters
Thank You!

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