

Patient-Centered Excellence Assessment Case Study

Presented by
Baptist Leadership Group
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Case Study of Texas Presbyterian Hospital Kaufman



Situation Analysis

Texas Presbyterian Hospital (Kaufman) is one of 16 acute care hospitals among the Texas Health Resources system. With 91 beds it is situated in Kaufman, Texas a community of fewer than 6,500 residents 40 miles southeast of Dallas.

Scores of patient perceptions were low both nationally and among the Texas Health Resources System, and the organization was struggling with patient satisfaction.

Prior to the Assessment, Kaufman's senior leaders had been introduced to multiple tactics in 2010 to assist in improved patient satisfaction. They also had an employee based team "Spark Plugs" that was implemented to "pull in" employee feedback, and obtain employee ownership. However, the tactics had not "stuck" and were not consistently executed or deployed. Senior leaders were not accountable to regular rounding, much less purposeful rounding. There was no connection between using these tactics as a means to achieve their patient satisfaction goals.

In May 2010. Kaufman's senior team engaged Baptist Leadership Group (BLG) to perform our Patient-Centered Excellence Assessment. The Assessment was a means to help leaders prioritize their 90-day action plans, as well as clarity around linking tactics to outcomes. They were looking to have the findings accomplish key objectives that will enable them to achieve breakthrough performance in 2011:

- Create urgency among leaders
- Establish true buy-in and ownership to Kaufman's journey
- Establish a baseline level of performance to set targets
- Prioritize their roadmap to achieve service targets in 2011



Assessment Approach

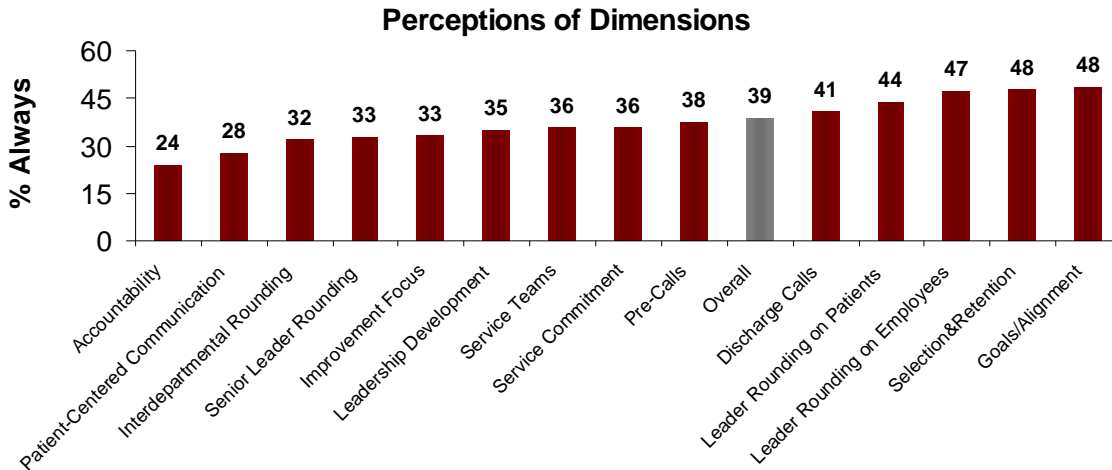
Kaufman was indeed using many best practices (patient rounding, scripting, etc) but not seeing the desired outcomes. Based on their objectives, BLG partnered with the senior leaders to build an assessment methodology custom to their organization and needs.

Their Assessment focused on several key “inputs:

Performance Review	<ul style="list-style-type: none"> • Patient, Physician and Nurse Satisfaction Survey Results • Partner Profile for Discovery
Patient-Centered Excellence Survey (PCES)	<ul style="list-style-type: none"> • Survey of all employees using Baptist Leadership Group’s Patient-Centered Excellence questionnaire • Administered to Texas Health Kaufman senior leaders, leaders and employees from June 2 – 11, 2010

Findings

Our findings identified critical strengths and gaps for the organization. Overall, Kaufman scored 39% Always on the PCES survey items, indicating a lack of consistency on the behaviors that yield world-class results:



While Kaufman respondents rated the items representing Goals/Alignment most favorably, there were significant execution gaps to achieve the goals (as indicated by accountability, patient centered communication scoring lowest). Additionally, while respondents tended to report patient and employee rounding more favorably, there were gaps in their rounding practices and the corresponding employee satisfaction and patient satisfaction outcomes (see chart above).



The highest scoring survey items included:

- All new hires must review and agree to live Standards of Performance
- Discharge Phone Calls are made on all Emergency Department patients discharged to home
- The organization's Standards of Performance are used as criteria to make sure potential new employees are a good fit
- Behavioral based standards are a part of leaders' performance evaluations
- Your patient satisfaction scores are openly communicated throughout the organization

The lowest scoring survey items included:

- Leaders hold their staff accountable for using patient-centered communication scripts
- Leaders and staff work together to create patient communication scripts
- Poor performers are not tolerated in this organization
- Thank you notes are used to show appreciation

"We were under the impression that to improve our performance that we had to change all aspects of our culture, the assessment process allowed us to focus on key priorities and gaps in our culture that if we improve and are consistent will accelerate our performance with patient perceptions of care."

Patsy Youngs
Chief Executive Officer, Texas Health
Presbyterian Hospital Kaufman

BLG also found significant variance in the organization. Kaufman's leaders tended to have the most favorable perceptions of consistency in the survey. Leaders scored performance significantly above the hospital average on 23% of the items. This level of variance suggests that the leaders "think" they are focusing on the right things but the connection is not made with the staff.

Based on reviewing the survey results and Kaufman's performance outcomes, several focus areas were prioritized:

Kaufman needed to close several key gaps in execution through 90-day plans:

- Leaders Rounding on Patients
- Patient-Centered Communication
- Leaders Rounding on Employees
- Accountability
- Improvement Focus

They needed to leverage rounding to ensure consistency among every leader, every staff member, every patient, every time. Leadership Development needed to be implemented as a means to close gaps by equipping leaders with tools to impact patient satisfaction.

In addition to presenting findings, BLG coaches facilitated a 90-day plan workshop integrating findings of the Assessment into tactics for leaders to accomplish over their 90-day plans.



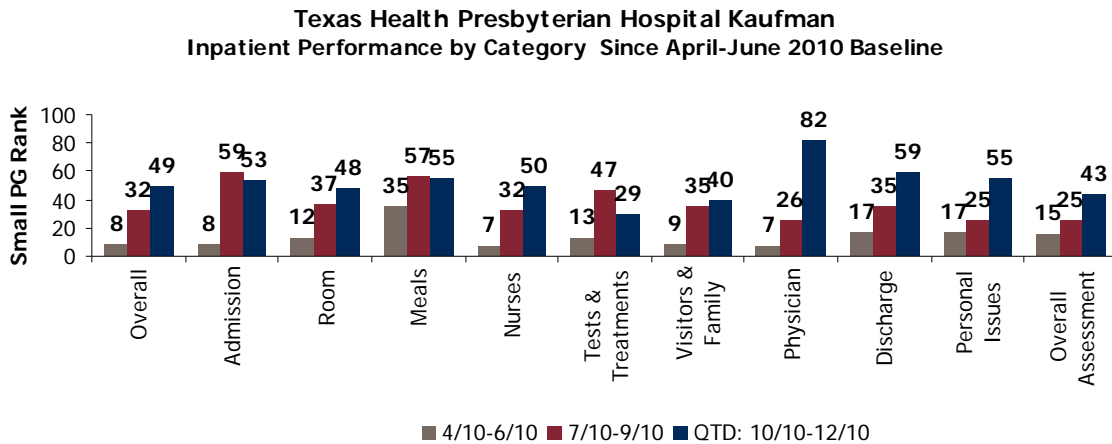
Kaufman's current focus is prioritizing linking measurement to performance outcomes (using a measurement team), monthly supervisory meetings to assess progress on 90 day plans and targets, and introduction of key service teams (patient experience/service recovery, measurement, employee engagement, communication and standards).

Performance Improvement Driven by Assessment Priorities

As a result of our work, Kaufman is currently experiencing quarter-over-quarter improvement. A few of their key accomplishments include:

- HCAHPS increase in Overall Rating from the 11th percentile to 68th percentile
- Emergency Department Overall Satisfaction increased from the 28th percentile to the 37th percentile
- Ambulatory Surgery Overall Satisfaction increased from the 7th percentile to the 34th percentile
- Outpatient Overall Satisfaction increased from the 9th percentile to 49th percentile

Kaufman's Inpatient Performance increased quarter-over-quarter among targeted survey categories:



Kaufman is now on their way to achieving world-class results by focusing leader's time and attention on disciplined activities, with accountability through goals and 90-day action plans.



About Our Patient-Centered Excellence An Evidence-Based Approach

Our proprietary process assessment evaluates what you are doing, and how well you are doing it by uncovering where there are gaps between the expectations – of patients, of employees, of physicians – and their actual experience. It focuses on whether there is consistent execution of best practices, and evidence-based tools and tactics designed to bridge those gaps, as well as leader alignment to organizational goals. This is critical to achieving and sustaining high patient satisfaction scores, employee engagement, quality outcomes, and increased profitability for the long-term.

This rapid diagnostic process typically involves several “inputs” from your organization:

- Completion of an Organizational Profile for discovery and inquiry
- 30 minute Senior Leader Interviews
- Performance in Patient, Employee and Physician Satisfaction and other key indicators for Quality, People and Finance
- Focus groups with employees, leaders and physicians
- Participation in the Patient-Centered Excellence Survey™ (PCES)

Patient-Centered Excellence Assessment Supports Organizations When:

- They are sure where to start
- A new CEO, Senior Team Member, or Leader joins or advances in an organization and needs to develop a plan for service and operational excellence
- There are limited resources for coaching services
- They have tried rounding (etc) but have not sustained/hardwired practice
- Scores have been stagnant or inconsistent

Assessment Methodology

The Patient-Centered Excellence Assessment Diagnosing for patient-centered excellence is a process of inquiry, analysis and reporting of findings and recommendations.

Assessing Variance

- Senior Leader Rounding
- Patient Rounding
- Employee Rounding
- Interdepartmental Rounding
- Goals/Alignment
- Accountability
- Service Teams
- Effective Communication
- Discharge Calls
- Pre-Calls
- Service Commitment
- Selection/Retention
- Measurement
- Leadership Development

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Inquiry and Analysis

Based on your unique Assessment Roadmap for, a team of BLG coaches and researchers will

- review your respective discovery profiles for each location
- travel onsite to the facilities for observation, focus groups and/or interviews
- review and analyze performance indicators (service, people, quality, finance)
- review and assess your performance management system





Report of Findings and Recommendations

The results of the Patient Centered Excellence Assessment will be coupled with your performance outcomes and organizational inquiry to provide your organization with a focused Report of Findings that will prioritize recommendations and roadmap for maximizing your strengths and closing gaps.

Assessment Deliverables

- Review of performance outcomes (People, Service, Quality, Finance) and relevant materials
- Evaluation of discovery and inquiry information
- Patient-Centered Excellence Survey (PCES) administered to all employees and physicians in your organization
- A performance report identifying your strengths and gaps
- Identification of your Priorities for Action
- Recommended next steps/interventions that are proven to drive patient-centered excellence

Ultimately, we will present a report of findings and travel onsite to facilitate discussion regarding our findings and recommendations for action

How the Patient-Centered Excellence Assessment Supports Your Roadmap

- Provides the organization with a rapid diagnostic process
- Diagnostic tools are validated through our partnerships with healthcare organizations across the country
- This process will engage your respective senior teams, leaders and employees- ultimately soliciting their buy-in and ownership for your Recommendations and Assessment Roadmap
- Our team of experts will be supporting you with data collection, intelligence gathering, observation
- Our experts will synthesize all information obtained and provide you with recommendations to address quick win opportunities, help you identify the biggest opportunities and priorities



Key Assessment Components

Discovery & Inquiry	Performance Trends	Engagement Trends	Performance Management
<ul style="list-style-type: none"> • Senior Leader Rounding • Patient Rounding • Employee Rounding • Support Department Rounding • Goals and Alignment • Accountability • Patient-Centered Communication • Service Commitment • Pre and Post Visit Communications • Selection and Retention 	<ul style="list-style-type: none"> • People • Finance • Quality and Safety 	<ul style="list-style-type: none"> • Patient • Physician • Employee 	<ul style="list-style-type: none"> • Leader Evaluations • Organization and Leader Performance

Bottom Line: An Executable Plan
 Uncovers the strengths to build upon and gaps to close yielding...
 Prioritization... Sequencing... Results... Sustainability

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