

# Building a Lasting Patient Experience and Gaining Community Support

Angela Smith, MPA, CAVS

# Speaker Background

- Angela Smith is a certified Administrator of Volunteer Services (CAVS) by the Association for Healthcare Volunteer Resource Professionals (AHVRP) of the American Hospital Association (AHA). She holds a Masters in Public Administration (MPA) with a concentration in Non-Profit Administration from The University of Akron receiving the Ohio Board of Regents Graduate Fellowship for graduate study. She received her Bachelor of Arts in Political Science from Walsh University in North Canton, Ohio. She is a graduate of the Walsh Honors Program receiving the award for Honors Program Student of the Year.
- Ms. Smith is currently the System Director of Volunteer Services at Summa Health System where she is responsible for developing and implementing Summa's volunteer program system-wide. As part of this role, she also manages a grant and sponsorship process, employee volunteer program, hospital gift shops, auxiliaries, and several other community initiatives. Her past experience includes management positions at both the Sisters of Charity Health System and Akron General Health System.
- Her past community involvement consists of Past President and Past Board Member for the national AHVRP Board of Directors, Past Co-Chair of the Susan G. Komen Northeast Ohio Associate Council, Past Chair of the Akron Reads Steering Committee and Peer Evaluator for the AmeriCorps grant review process through the Ohio Commission on Service and Volunteerism. Some of her other past board service benefited organizations such as the Ohio Healthcare Volunteer Management Association, Big Brothers Big Sisters of Stark County, and the YMCA of Canton.
- She has contributed writing for three national publications. Most recently she, along with three other authors, published an article in the American Organization of Nurse Executives' Voice of Nursing Leadership publication. The article highlighted the development and impact of Summa's Emergency Department Volunteer Rounder Program. She is also the recipient of the Athena Young Professional Leadership Award.

# Summary of Experience

- Leadership roles at three different health systems
- Past volunteer management role at a traditional, non-healthcare non-profit organization
- Past volunteer management role at an inpatient hospice Care Center and hospice in the home care setting
- Experience with gift shops and auxiliaries
- Experience developing and implementing corporate social responsibility and community benefit programs
- Experience with corporate giving initiatives both in-kind and financial awards to the community

# The Influence of Experience

*“We are the sum total of our experiences. Those experiences – be they positive or negative – make us the person we are, at any given point in our lives. And, like a flowing river, those same experiences, and those yet to come, continue to influence and reshape the person we are, and the person we become. None of us are the same as we were yesterday, nor will be tomorrow”. B.J. Neblett*

# Reflection: Our Experience



# Exercise: Value of Words

*Three words to describe your current experience at work during the past year*



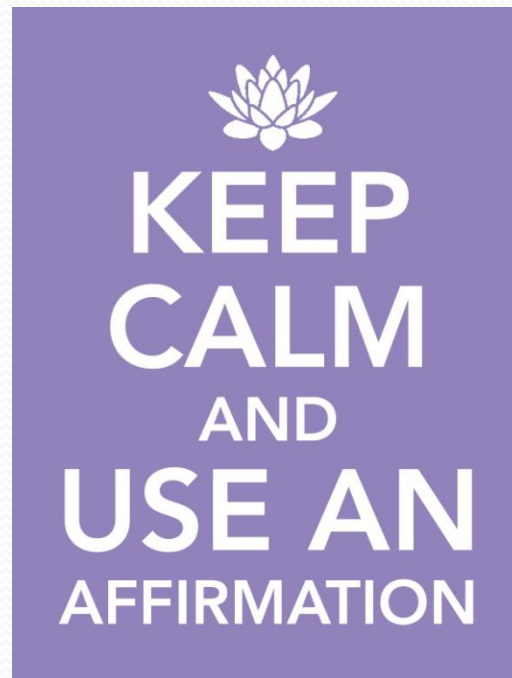
# Exercise: Value of Words

*Three positive words to describe your desired future experience in the profession of volunteer administration*



# Goal for these Presentations

- For each of you to believe that three words of affirmation are attainable and provide you with the tools to obtain them





# Dramatic Changes to Healthcare

- End of Sick Care System
- Accountable Care Organizations (ACOs)
- Health of the Community
- Payments to Health Systems/Profitability
- Streamlining of Services
- Health Outcomes Linked to Payments
- Preventative Medicine

# Revenue Demands

- Hospitals are under increasing pressure to cut costs and control spending.
- Amid the uncertainty in the industry, one thread remains clear: *Hospitals will, in the future, exist in a world where they are rewarded more for the quality of care than for the volume of patients they treat. As this transition occurs, hospitals must live in **two worlds** — one where they still earn money per procedure and another that views the treatment of patients in a more holistic way, with successful outcomes the most important measure of a hospital's performance.*

# Reduction of Costs: Labor

- Cleveland Clinic officials announced this week that they would be offering 3,000 buyouts in an effort to cut costs, citing financial pressures from health care reform as one of the reasons for their decision. More than a dozen hospitals across the country are taking similar measures, due in part to health care reform requirements, but also because of the \$9.9 billion in government sequester cuts to Medicare, hospital debt and states' refusal to expand Medicaid, the government's health insurance program for the poor.
- "For hospitals in general this is kind of the new normal," says Eileen Sheil, executive director of corporate communications for the Cleveland Clinic. According to most recent estimates from the Bureau of Labor Statistics, the hospital sector lost about 4,400 jobs in July. In May, hospitals shed 9,000 jobs, the worst month for the industry in a decade.
- Ron Stiver, senior vice president of engagement and public affairs for Indiana University Health, which plans to cut 800 employees, says the assertion that health care reform is the reason behind hospital cuts is "overly simplified." IU Health is making cuts partially because of the health law, he says, but also because the state has not expanded Medicaid, the hospital system has fewer inpatient volumes, and payment rates for its services have been declining.
- Vanderbilt University Medical Center in Nashville, Tenn., plans to cut 1,000 positions, citing an aging population, lower reimbursement rates, a reduction in National Institutes of Health grant funding and a lack of Medicaid expansion in Tennessee.

# Thoughts on Fear

- *Fear can be good when you're walking past an alley at night or when you need to check the locks on your doors before you go to bed, but it's not good when you have a goal and you're fearful of obstacles. We often get trapped by our fears.*
- Any DVS you know who has been trapped by fear?
- Have you been trapped by fear?

# People React in Different Ways

1. Bad News Bears
2. Gossip Kings/Queens
3. Chicken Littles
4. Victims
5. Problem Solvers/Positive Engager/Taking Care of Business

Which are you? With fear and organizational change, have you fallen into any different types?

# Companies Started During Recession

- Hyatt
- Microsoft
- FedEx
- Burger King
- CNN
- GE
- Sports Illustrated
- HP



# Best Advice I Ever Received

- Never assume that everyone in the organization knows what you're doing...they do not.
- It is your role to inform them about what you are working on.
- Never leave a meeting without providing an update – if you do, it is a wasted opportunity
- If they know what you're working on and it is in alignment with the organization's strategy, you have a better chance to survive organizational change

# Challenge of Participation

- **Study shows that societal norms mean women feel they must be modest**
- **Women tend to downplay their achievements while men are happy to boast**
- **Research shows that there are ways to help women overcome this – look for mentors, prep for meetings, have no fear, and speak up!**



# A Challenge

- Leave behind what is wrong
- Take with you what is right
- Build on the right and **open the door**



# The DVS Role: A Creative License

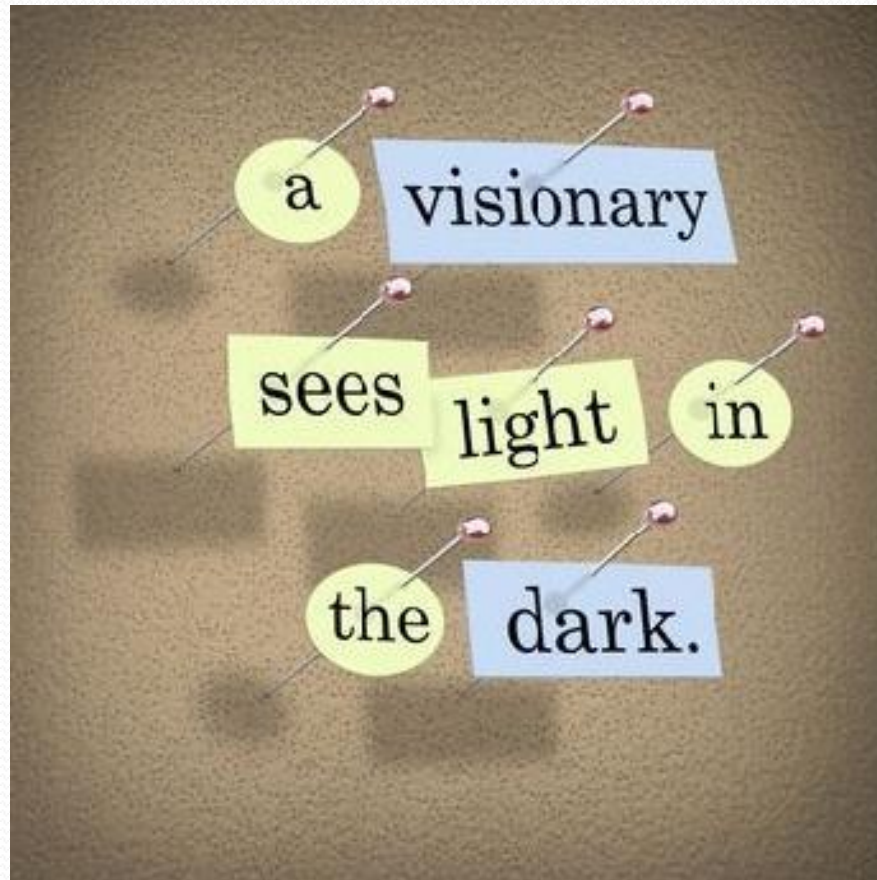
1. Permission to think outside of the box (embrace the circus/party planners analogy)
2. It is something that you must first give yourself – **if you don't believe it, no one else in your hospital will!**
3. Creative people do not have all of the answers, but they do have the opportunity to create
4. It is the role of the DVS to find time to use their creative license and engage others in creativity

# Don't Leave it at Work, Create your Experience at Work

- Take Time for Yourself
- Take Time to Think
- Invest in Yourself
- Don't be so Hard on Yourself
- Encourage Yourself
- Find a Mentor, Find a Friend
- Stay Away from Negativity

Example, “Power of Positive Thinking”

# Think Like a Visionary...



# It's About More than Metrics

What does the DVS bring to the hospital?

- ✓ Programs
- ✓ Stories
- ✓ Experiences
- ✓ Impacts
- ✓ Changes



- ✓ Numbers? Are numbers really the number one thing we offer?

*Example, my CEO's story...*

*"You know good leadership when you see it."*

# A Seat at the Table

I am not at the table with numbers - they come to me for...

- Issues/Problems
- Meet Service Needs for Departments
- Meet Patient Needs
- Enhance the Patient Experience
- Create a Volunteer Experience



# More than Feel Good Programs

Knowing the Difference Between Feel Good and High Impact

## Feel Good

- Just because
- We have always done it
- It's nice to do

## High Impact (getting there without the metrics)

- An impact you hear about from all program constituents
- An impact you see when observing the service
- **SERVICE ROUNDING**

# Some Things Cannot be Measured

*Not everything that counts can be counted, and not everything that can be counted counts.*





# Creative License

*One of the Number One Things that Sets the DVS apart in the organization is Creativity*

Examples of Creative Programs...



# New Strategy for DVS

- Instead of being like everyone else in the health system (number and metrics people), figure out what makes your department unique, what could make your program unique, or how to solve a program creatively with the use of volunteers
- We must embrace our differences
- We must embrace the unique opportunity to create programs

# Playground Analogy

At work, similar to the playground when we were growing up, every person has their strengths or niche.



# How to Brainstorm

- *There is no right way or wrong way to brainstorm*
- It is important to have a process and stick to it
- Through brainstorming, you are looking for the free flow of ideas rather than the answers
- The most important thing is creating the ideas and having an openness to explore these ideas
- Decisions about the ideas can come later

# Key Parts of Brainstorming

1. Define the Business Issue
2. Generate Ideas
3. Sort and Rank Ideas
4. Revisit Ideas

*How often do we sit at our desk and only think?*

# Tips for Creative Brainstorming

- Brainstorm New Ideas
- Create a Bubble Map
- Change your Environment
- Engage Others in the Creative Process
- Embrace all Ideas
- Write it Down

# Brainstorming Techniques

- **Free-Form Brainstorming:** This is the type of brainstorming where participants express their ideas as they occur.
- **Round Robin Brainstorming:** People contribute ideas in turn, feeling free to “pass” if they have no idea to share in that round. The session is over when everyone passes. This ensures everyone participates.
- **Mind Mapping:** this offers a more graphic approach to scribing responses, than simply listing ideas on a flipchart. One or two people are used as scribes for the group.

The process begins by creating a large writing space, at least 4 feet by 4 feet, on a wall. Write the topic statement in circle in the center of this space. Then gather responses and scribe them as lines branching out from the center circle.
- **Pencil and Paper Brainstorming:** Participants write their ideas first, and then share them, either in turn or anonymously. The advantage of this technique is that it encourages participation by people who might otherwise feel intimidated.
- **Group Technique:** This is a very structured form of brainstorming that results in the generation and prioritization of ideas. It is particularly useful when a large group is involved in the brainstorming process and when there is a need to take a brainstormed list and synthesize it into several prioritized items.





# Factors Affecting New EDs

- 1. Heightened emphasis on improving patient outcomes and quality of care.**
- 2. Use of Lean concepts to optimize operational efficiencies.**
- 3. Super-flexibility for quick expansion.**
- 4. Deeper—much deeper—integration of technology.**
- 5. Greater outreach to the community.**
- 6. Enhanced preparation for catastrophic incidents.**
- 7. Rise of the freestanding emergency center.**

# Biggest Complaint in EDs

- Wait Times
- <http://projects.propublica.org/emergency/>

The screenshot shows a Windows Internet Explorer browser window displaying the website <http://projects.propublica.org/emergency/>. The website header includes the ProPublica logo and the tagline "Journalism in the Public Interest". A navigation menu contains links for Home, Our Investigations, Data, MuckReads, Get Involved, and About Us. A search bar is located on the right side of the header. Below the header, the main content area features the title "ER Wait Watcher" and the subtitle "Which Emergency Room Will See You the Fastest?". The article is attributed to Lena Groeger, Mike Tigas, and Sisi Wei, dated Dec. 19, 2014, with an update on Jan. 14, 2015. The text of the article begins with "Heading to the emergency room? You may wait a while before a doctor or other treating professional sees you — and the hospital nearest to you might not be the one that sees you the fastest. Use this tool to look up average ER wait times, as reported by hospitals to the federal government, as well as the time it takes to get there in current traffic, as reported by Google. [Find out more >](#)". Below the text is a search interface titled "Find emergency rooms near you" with a search box containing "akron, ohio" and a "Search" button. A map of Akron, Ohio, is displayed on the left side of the search results. On the right side, the results for "SUMMA HEALTH SYSTEMS HOSPITALS" are shown, including the address "525 East Market Street, Akron, OH 44309", a "Check Current Wait: 330-375-3000", a "15 min" wait time, a "Current Travel Time: 6 min (1.4 miles)", and an "Average Wait Time: 9 min". Below this, it states "69 of patients would 'definitely recommend' this hospital (State Avg: 72)". At the bottom of the search results, "AKRON GENERAL MEDICAL CENTER, Level I Trauma Center" is listed. The browser window also shows the Windows taskbar at the bottom with various application icons and the system clock displaying "2:34 PM 2/18/2015".

# Rounding in EDs

- Over and over again, rounding has proven to be the best way to collect vital information, reward and recognize, build relationships, and validate key behaviors for safety. It builds engagement by all stakeholders.



# My Experience

- Emergencies are unplanned occurrences as a result, people are:
  - Hungry
  - Tired
  - Cold
  - Disorientated
  - Stressed
  - Scared

*How do we change an unpleasant, unplanned experience into a positive one?*

# Idea for Volunteers

- ED volunteer assignments are some of the most common assignments at hospitals.
- It is one of the busiest areas of the hospital.
- Most prospective volunteers identify with the Emergency Department as a great place to volunteer through our culture, their exposure to media, and their own experience.
- Volunteers understand what happens in the ED more easily than they understand the purpose of other areas.

# Does anyone remember ER?



# Get a Champion for the Program

## **Role of the Champion** *(items to be effective)*

1. Must be in the department (in a leadership role) where the service is occurring
2. Must be invested in the program knowing that it adds value and is necessary
3. Must be committed to diverting department resources to support the program (staff, supplies, etc.)
4. Must be committed to working one-on-one with the volunteers
5. Must work with Volunteer Services as a partner

# Training for Volunteer Supervisors

- Send them the Handbook for Supervisors of Volunteers
- One-on-one meeting or phone conversation with a commitment
  - Can you keep volunteers busy?
  - Who will be their supervisor?
  - Do you understand that volunteers are a responsibility on your part?
- If they agree, they write the service description and Volunteer Services edits it
- Manager/Director of Department and Director, Volunteer Services signs the description



# A Good Handbook?

- Overview of Volunteer Services
  - Application and Intake Process
  - Health Screening
  - Our Role and Purpose
  - Resources (request forms for new volunteers)
- Overview of Key Policies and Supervisor's Role in Policies
  - Attendance and Call Offs
  - Volunteer Corrective Action
  - Equal Opportunity
  - Volunteers with Disabilities
- Other Information
  - How Managing Volunteers is Different than Managing Paid Staff
  - Tips for Appreciation of Volunteers

# Our Story

- It happened at “Talk with Tom”
- There was rounding already occurring but could not continue for operational reasons
- It started simple with two goals:
  1. *Improved Press Ganey Patient Experience Survey percentile scores in the ED*
  2. *Developing a tracking system to document the number of non-clinical needs addressed during a patient’s stay in the ED*

# Tasks for Volunteers

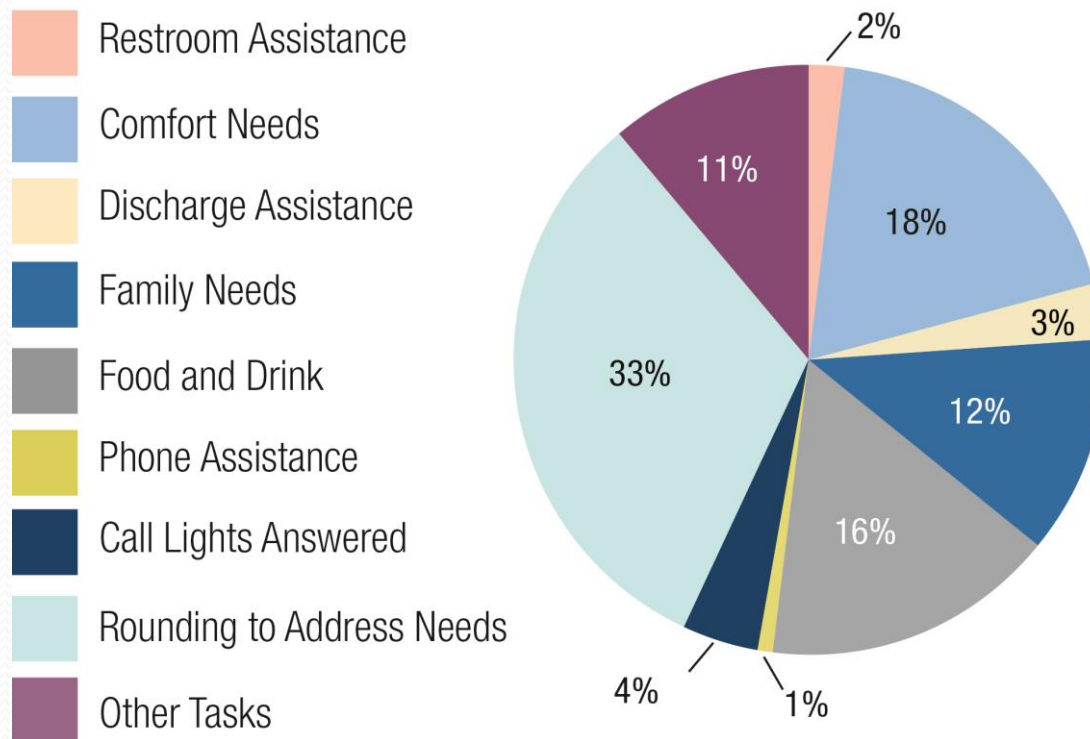
- Make sure phone and call light are within patient's reach
- Escort patients and families
- Answer call lights. . .turn off call light **only if** task is completed
- Escort patient out when discharged
- Visit with Patients and Families
- Offer beverages to family members
  - Patient drinks must be okayed by nurse

# Tasks for Volunteers

- Load blanket Warmers
- Refreshment Areas
  - Clean
  - Stock
  - Make Coffee
- Round to nurses
  - Offer Drinks
  - Check Stock
  - Fold and Stock Linen

# Summary of Tasks

## Volunteer Tasks in the Emergency Department, 2012



# Orientation

We assigned one specific ED staff member as the volunteer orientation coordinator. She handled all one-on-one volunteer orientations, thus keeping the training for all volunteers consistent and efficient. *We knew that by teaching volunteer rounders to focus on one task and one patient at one time, we would make the patient experience in the ED more individualized and focused on their care.*

# Orientation

- Orientation booklets for volunteers included maps of the hospital, a list of hospital resources, and sample scripting to assist the volunteers with frequently asked questions or concerns received by patients and visitors.
- An orientation checklist and a scavenger hunt were developed to assist the volunteers to retain the information they learned. We added a personal touch by including a “welcome” page to thank the volunteers for willingly giving their time to help us in this program.

# Scavenger Hunt

- Where would you find something to keep pt's warm?
- Get yourself a cold drink.
- Find at least 2 ice machines.
- Locate the hot drinks.
- Find the closest pt. bathroom to you.
- Where are the staff bathrooms?
- Find your way from the waiting room to the main hospital.
- Find the charge nurse's office.
- FIRE!!!! FIRE!!!! Find 1 fire extinguisher, 1 alarm pull box, and 1 fire hose
- Find the ER Security Office (ext. 53277)
- Find VOCERA, sign on / sign off / storage
- Call the Service Excellence office and leave a message (ext. 53216)



# Orientation Structure

- Notify Charge Nurse Upon Arrival (call 57105)
- Service Excellence Office
  - Rounding/volunteer notebook
  - Rounding sheets
    - Document
- Notebook to place completed sheets
- Assignment Schedule
- Vocera
- Call Lights
- Answering/Turning Off
  - Volunteer: \_\_\_\_\_ Preceptor: \_\_\_\_\_ Date: \_\_\_\_\_
- ED Floor plan
  - North, Central, and South District
  - Ice Machines
  - Cold/Hot Drinks
  - Blanket Warmers
  - Restrooms
  - Snack Refrigerator
  - Fire Extinguishers, Alarms, and Hose
  - Emergency Exits
  - Cafeteria (Food for volunteers is free in the cafeteria😊)
- Find a Nurse/Staff member
- District location and recognition of staff member

# Support from Volunteer Services

- The volunteer services department still plays an active role in this program. We continue to screen individuals for the program and they provide support in all aspects of the program. For example, we visit the ED to gather feedback from the volunteers to address concerns and/or discuss areas of improvement.
- We also act as an advocate for the program, highlighting its benefits and achievements to hospital leadership on a regular basis.

# Patient Comment Cards

## Patient/Family Comment Card

- Patient Registration: \_\_\_\_\_
- Triage/Primary Nurse: \_\_\_\_\_
- Family Coordinator: \_\_\_\_\_
- Volunteer: \_\_\_\_\_
- Attending Physician: \_\_\_\_\_
- Resident/ PA/ NP: \_\_\_\_\_
- Our goal is to provide the very best care and service, as well as exceed your expectations. We hope to earn a “very good” from you. We appreciate your comments and suggestions! Completed cards can be left at the bedside.

*Thank you for choosing Summa*

# Patient Comment Card

- **Comments** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Patient / Family Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Patient Sticker:**

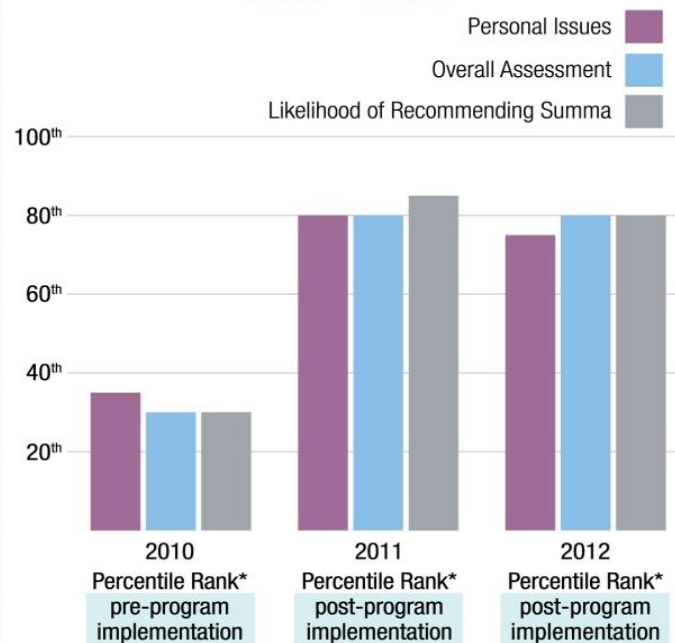
# Results of Comment Cards

- Patient and guest comment cards have also been created to track comments about interactions of patients with both the staff and volunteers. These comment cards were implemented in the ED around the same time the ED Rounder Program began.
- In 2012, the ED received 568 of these cards. One-sixth of them mentioned a volunteer by name with positive feedback. For example, one patient wrote: *“Clifford was very friendly and helpful to us. He explained how things worked in the ER. He even got us coffee and water to drink. I would say he went far beyond the call of duty to assist us. You can be proud of this type of volunteer. We sure appreciate him!”*
- Another patient and family wrote: *“Tom is an extremely wonderful person. Tom continued to come around and make sure that there is nothing that we needed. This has been a great experience. Thank you so much!”* Along with tracking the positive comments, the comment cards support a relationship to our improved patient satisfaction scores.

# Patient Experience

- With respect to our first goal, our Press Ganey Patient Experience Survey overall satisfaction scores demonstrate a high degree of improvement, as seen in the bar graph.
- We feel that the ED Volunteer Rounder Program was a key contributor to this improvement.

Patient Satisfaction  
Press Ganey Survey Results  
2010 – 2012



The percentile ranking is a tool that hospitals use to measure how effectively they are meeting their patients' needs. Higher percentile scores indicate that patients are more satisfied.

# Dangers of A Causes B in Research

- **Correlation** - When researchers find a correlation, which can also be called an association, what they are saying is that they found a **relationship between two, or more, variables**. Correlations can be positive or negative. A **correlation** is a simple statistic that explains whether there's a relationship or association between any two variables.
- **Causation** - Causation was found, this means that the researchers found that **changes in one variable they measured *directly caused* changes in the other**.

# When Utilizing Data...

- Be careful not to use the word “cause” or infer that the volunteer service was a direct cause of “X” unless you have a research study
- To establish a correlation or relationship with the data, use a statistical analysis with someone with a research background (ex. regression analysis)
- You may still present the raw data as it is and let the reader draw his/her own conclusions

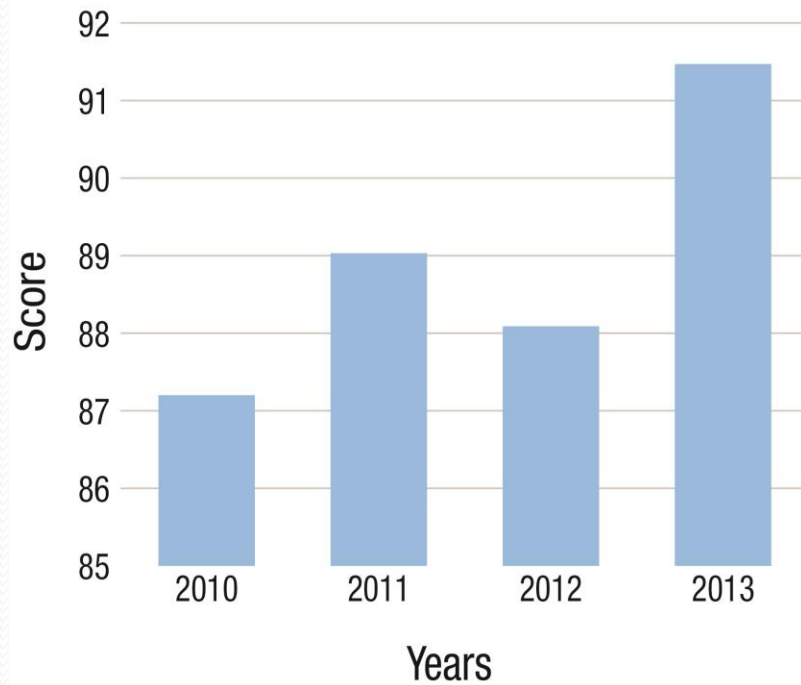


# Regression Analysis

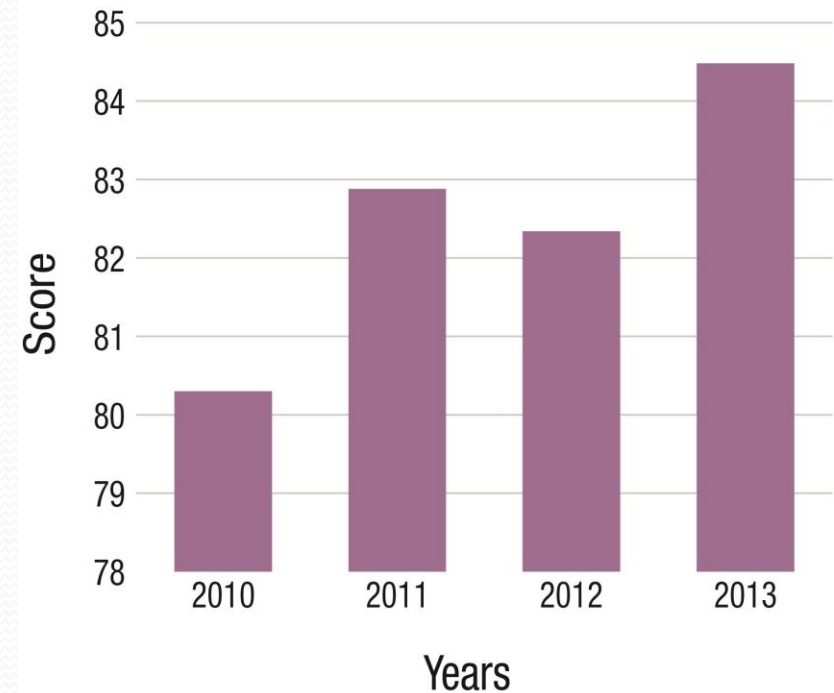
- In **regression analysis** is a statistical process for estimating the relationships among variables. It includes many techniques for modeling and analyzing several variables.
- More specifically, regression analysis helps one understand how the typical value of the dependent variable (or 'criterion variable') changes when any one of the independent variables is varied, while the other independent variables are held fixed.

# In Depth on Standards

## Standard Family or Friends



## Standard Personal Issues



# In Depth on Standards

- The overall patient satisfaction ranking can also be broken down into specific categories where volunteers play a key role. Two of these standard categories are “Family and Friends” and “Personal Issues”.
- Both incorporate the patient’s feelings related to the care and courteousness they received at Summa Health System and the amount of information relayed to them. There has been significant improvement in these two categories.
- The small decrease in 2012 is attributed to the opening of our new ED. After the construction was completed, it took us several months to orient volunteers to the new setting, equipment and processes.

# Staff Support for Program

- The ED Volunteer Rounder program also has had a positive impact on our staff. They call on the volunteers regularly to help with many tasks. One nurse commented, *“From a staff perspective, our volunteers have proven to be a valuable asset to our team. Their presence and comfort to our patients is unequalled. The support they provide is excellent. I appreciate each one and am grateful for their help.”*
- Another sent an email crediting a volunteer for the *“tremendous help that was given to a patient and family that just needed someone to listen and assist with comfort needs.”*



# Art Cart Program

## About the Program:

- Recent studies have demonstrated that art helps improve the patient experience and promote a healing environment. Summa Health has engaged with Akron Public Schools to offer the Art Cart Program to patients. Through this program, students create art for patients. Art Teachers then evaluate the art and select pieces for distribution to patients at Summa Akron City Hospital. Hospital volunteers then frame the selected art in small 5 by 7 frames and place it on the Art Cart to distribute it to patients.

# About the Program

- After a patient selects a piece of art for his/her room, they can display it in their room and take it with home when they leave the hospital. A student who has art selected for the program will receive a thank you letter from Summa Health. Letters will be provided to each school for distribution.

# Role of the Volunteer

- Place art pieces on cart and take cart to nursing floors
- Leaving the cart in the hallway, take a few pieces into the patient's room, and offer them the art – each patient gets one piece of art for their room.
- When offering the art, explain the program in the scripting provided below
- If a patient selects a piece, they can set it up on their bedside table
- Please ask the patient if they have any comments about the program and record this data on the form provided

# Scripting for Volunteers

*“Good Morning/Good Afternoon, as part of our Art Cart Program, we are giving free art to patients to display in their room and take home with them. An elementary student completed these art pieces. Would you like to see them? If you would like one of them, it is your work of art to keep as part of our healing arts program.”*



# Local Newspaper Coverage



# Comfort Cart

## Summa Health Comfort Cart filled by local construction staff



When the owners of Pleasant Valley Construction Company, Barbara and Gino Faciana, learned about a volunteer staffed program called the Comfort Cart, they knew that they and their generous staff could make a meaningful impact in the lives of Summa Health patients. The Comfort Cart provides patients and visitors at Summa Health with free personal care and other travel-size items. Mrs. Faciana, a member of the Summa Health board of directors, worked with the construction company's office administrator to give employees the chance to contribute.

"Small items can offer an emotional lift during a stressful time," Mrs. Faciana said about their involvement. "Our staff was happy to be able to give patients and their families some normalcy and enjoyment during their hospital stay."

For more information about making a difference at Summa Health, please contact Summa Health Volunteer Services at [volunteer@summahealth.org](mailto:volunteer@summahealth.org) or 330.375.3247.

In photo above - Summa Health volunteer Kajal Madan offers Comfort Cart items to patients and visitors during her volunteer shift at Summa Health System – Akron Campus.

# Resources

- Supervisor's Handbook
- [www.arha.org/resources](http://www.arha.org/resources)

## Contact Information:

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Any Questions?