Engaging Behavioral Health Inpatients to Improve the Patient’s Experience on One South

Introduction
BHC-One South is an 18-bed adult inpatient unit that provides diagnostic evaluations and comprehensive individualized treatment for patients with severe psychiatric mental illnesses. Our mission is to provide excellent patient-centered care and evidence-based treatment while promoting dignity and respect in a safe and therapeutic environment.

The project will impact the patient’s experience by building relationships with our patients, reduce the patient’s anxiety and being proactive by listening to the patient’s concerns.

The goal of the project is to improve the overall patient experience score moving from the 50th percentile to the 80th percentile utilizing the Press Ganey tool. Other goals include the patient’s understanding of their discharge medication instructions, friendliness and courtesy of nurses and helpfulness of time with the psychiatrists.

Case Report

The continuous quality improvement methodology used in this project was the Model for Improvement with Plan-Do-Study-Act (PDSA) cycles. In this project we tested hourly purposeful rounding and leadership rounding. The stakeholders include One South teammates, Nursing, Psychiatric Technicians, Physicians, Social Work, Peer Support Specialist, Environmental Services, Quality and Behavioral Health Leadership.

One South team identified concerns on the unit that included:
• A lack of daily structure for patients
• Low patient satisfaction scores
• Increased utilization of physical restraints.
• A lack of a recovery oriented approach
• A lack of communication between teammates and patients.
• A lack of teammates practicing active listening regarding patient’s needs.
• A lack of empathetic response from teammates.

Discussions began in daily MDI huddles and monthly staff meetings to brainstorm ideas to improve the patient’s experience. From the brainstorm sessions, the team suggested to test two change ideas on the unit. The ideas were hourly purposeful rounding and leadership rounding. A brief definition for hourly purposeful rounding is rounding every hour on every patient, engaging patients in their care and purposefully having a conversation with each patient. Leadership rounding is rounding by the unit leaders to all patients on the unit. This rounding is designed:
• To build relationships with patients
• To address complaints and grievances in real time
• To obtain the patient’s perspective of care processes
• To model behavior and effective rounding for employees

The team activities began with developing teammate scripting for hourly purposeful rounding. The scripting six steps are:
Step 1 - Introduce Self and Warm Greeting
"Hi Mr. John, I am doing hourly rounding."
Step 2 - Ask questions using 2 P’s
• Personal/Comfort Needs
• Plan for the day
Step 3 - Anticipate patient’s needs and meet those.
Step 4 - Scan the environment for safety hazards
Step 5 - Ask the patient “Is there anything else? I have time.”
Step 6 - “Someone will check on you again in about an hour”

On the unit staff began completing and documenting hourly purposeful rounding every hour in the morning and in the evening. During the night shift rounding was conducted every two hours.

Results/Outcomes

The outcomes of the project resulted in an increase in the overall patient experience score moving from the 50th percentile to the 84th percentile.

One South experienced:
• An immediate decrease in the number of patient’s complaints on the unit.
• A decrease in use of PRN medications.
• Positive feedback from patients and families regarding quick responses to questions about care.
• Positive feedback from nurses regarding timely answers to patient’s questions.
• Positive feedback from all multidisciplinary team members regarding efficient and accurate communication.

Helpfulness of Nurses

This item measures the nurse’s approach to meeting the patients’ needs. In other words, how friendly and courteous was the nurse? The helpfulness of nurses measure before the project was at the 71st percentile and increased to the 77th percentile after implementation of the project.

Helpfulness of time with the psychiatrist

This question measures the extent to which the time the physician was physically present with the patient and met the patient’s needs effectively. The helpfulness of time with the psychiatrist measure before the project was at the 47th percentile and increased to the 97th percentile after implementation of the project.

Discussion

The outcome of this project resulted in an increase in the overall patient experience score from the 50th percentile to the 84th percentile. The lessons learned from the project was an immediate decrease in the number of patient’s complaints and improved patient engagement overall.

Resources

Press Ganey Associates, Inc.
www.pressganey.com

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