

Rx for your Px: Four Models to Listen, Analyze, and Improve the Patient Experience

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Who is Mass General Brigham?

Mass General Brigham is an integrated academic health care system, uniting great minds to solve the hardest problems in medicine for our communities and the world. Mass General Brigham connects a full continuum of care across a system of academic medical centers, community and specialty hospitals, a health insurance plan, physician networks, community health centers, home care and long-term care services. Mass General Brigham is a non-profit organization that is committed to patient care, research, teaching and service to the community. In addition, Mass General Brigham is one of the nation's leading biomedical research organizations and a principal teaching affiliate of Harvard Medical School.



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(Boston, MA)

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(Boston, MA)

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(Belmont, MA)

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(Boston, MA)

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(Martha's Vineyard, MA)

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(Salem, MA)

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(Newton, MA)

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Massachusetts General Physicians Organization

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Newton-Wellesley Physician Hospital Organization

North Shore Physicians Group

Community Physicians Organization

Additional Members

AllWays Health Partners

HealthCare At Home

MGH Institute of Health Professions

Presenters

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Presenters:

Jesse Russell, MBA; *Program Manager for Surveys and Qualitative Evaluations* – Massachusetts General Hospital

Audrey Bosse; *Director, Office of Experience & Engagement* – Newton Wellesley Hospital

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Learning Objectives

Describe how to build a patient experience measurement strategy to harness the power of big survey data.

Define how to create and sustain an Experience Council to work with data and feedback, build engagement and drive improvement.

Identify how to utilize human-centered, design-thinking methods to identify key patient segments, learn about key drivers, gaps and opportunities.

Create and sustain an Experience Council to work with data and feedback, build engagement and drive improvement.

Develop techniques for sharing positive feedback to motivate individuals, strengthen teams, and build alignment with organizational mission.





Massachusetts General Hospital
Founding Member, Mass General Brigham

Harnessing the Power of Big Survey Data

Jesse Russell, MBA

Program Manager for Surveys and Qualitative Evaluations

August 21, 2022



Massachusetts General Hospital, by the numbers

Operational Outcomes



Conducts over **3M** clinical encounters each year, including **50K** admissions, **50K** surgical procedures, and **100K** Emergency Department visits



Operates **1,043** licensed beds and outpatient services spanning a **30-building** main campus and **six** satellite ambulatory care/community health centers



Employs **29K** employees and credentialed providers, plus hosts **1,500** physician trainees and **19K** nursing & allied health students

Figures above reflect CY2021 activity



Real-Time Survey Outcomes



1.3M annual outreach attempts generate **400K** survey completions, containing over **180K** qualitative and **5M** quantitative responses



Surveys are administered on behalf of **700** unique clinical locations, distributed across **24** New England cities and towns



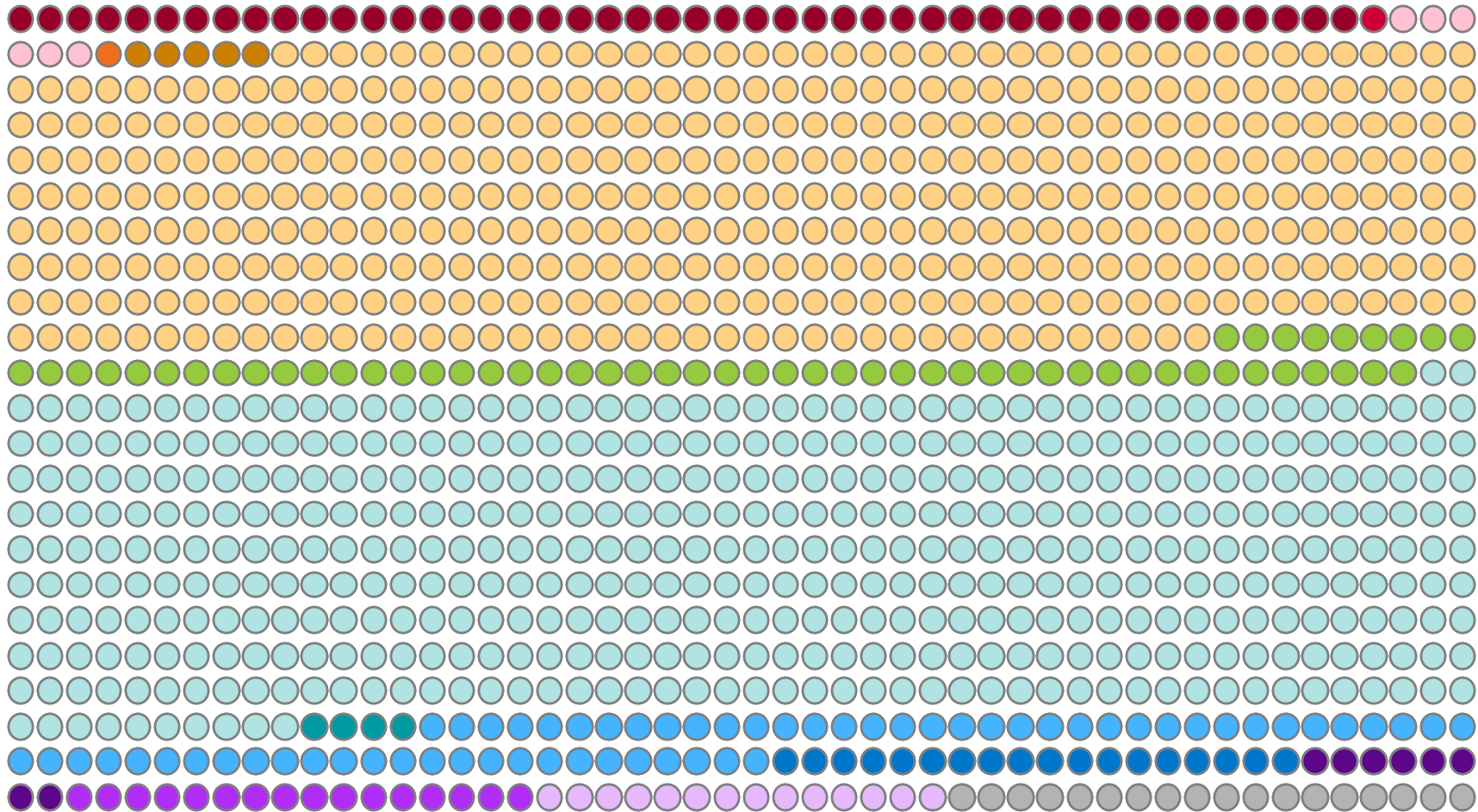
The feedback collected represents more than **3,500** individual clinicians

Step 1: Curate

Profile your organization to match clinical structure and measurement needs to central PX survey offerings

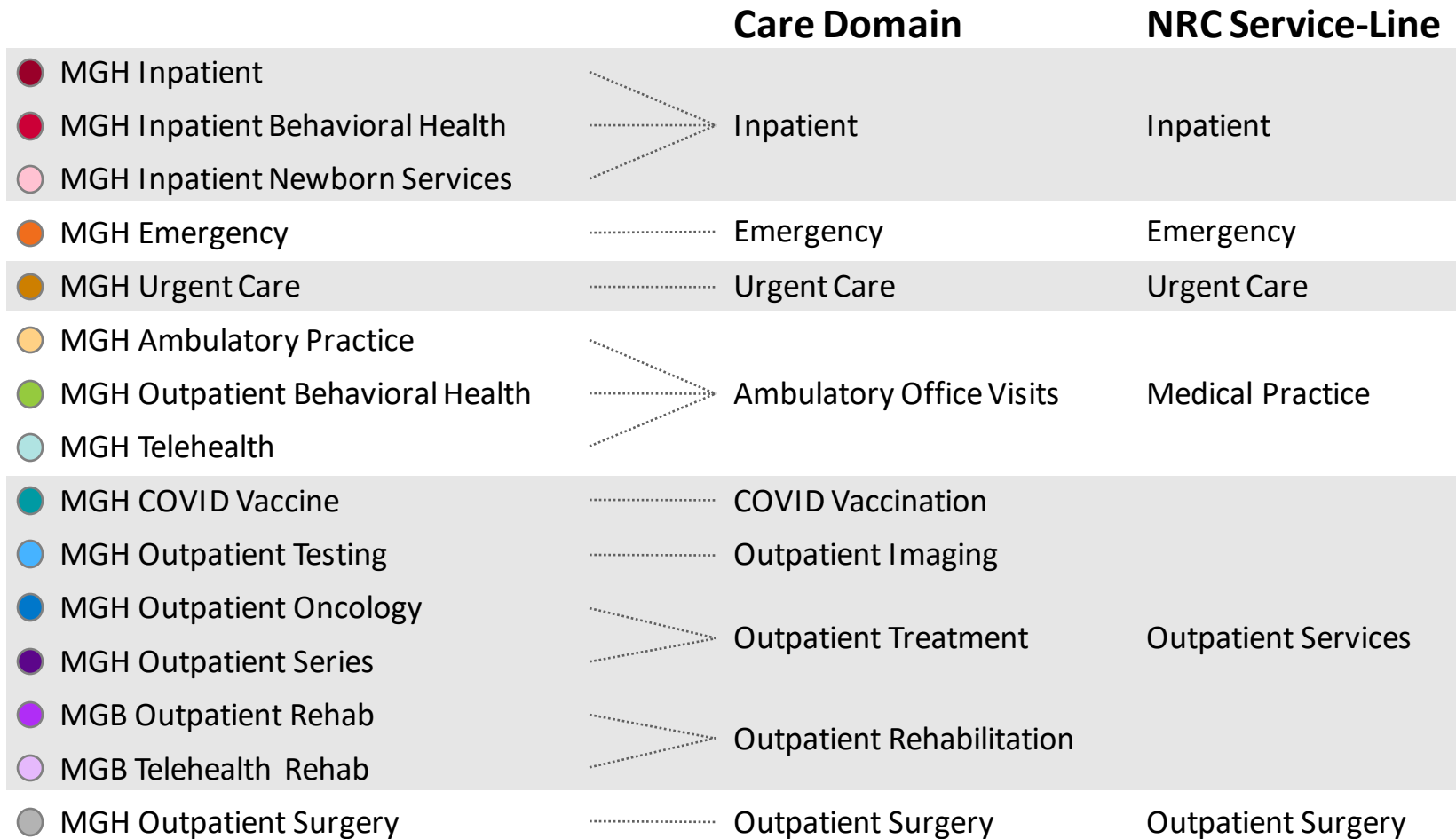
Each location was mapped one or more of 15 site or system-standardized Real-Time question pods

- MGH Inpatient
- MGH Inpatient Behavioral Health
- MGH Inpatient Newborn Services
- MGH Emergency
- MGH Urgent Care
- MGH Ambulatory Practice
- MGH Outpatient Behavioral Health
- MGH Telehealth
- MGH COVID Vaccine
- MGH Outpatient Testing
- MGH Outpatient Oncology
- MGH Outpatient Series
- MGB Outpatient Rehab
- MGB Telehealth Rehab
- MGH Outpatient Surgery



Step 1: Curate

Then organize your portfolio into logical reporting groups with defined comparators and goals



- Question pods track to nine care domains and six NRC service-lines for clear, digestible reporting
- Top-box and net promoter scores are monitored over time and against the respective NRC Average & Location 90th Percentile
- NRC portal subscriptions are pushed to service, division, and frontline management:
 - Weekly deidentified comment report
 - Monthly qualitative summary
 - Monthly department summary
 - Monthly provider scorecard
- Up to three measures are prioritized within each care domain for focused improvement every FY



Step 2: Enable

Engage stakeholders in the measurement process through intuitive, self-service analytics



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User Guide Report Definitions

Description
The MGH Patient Experience Real-Time Dashboard is a dynamic tool that offers a comprehensive view of survey results across care environments and enables leaders to analyze quantitative performance at various organizational levels.

Navigation

- Executive Summary
- Domain Summary
- Question Drilldown
- NPS Drilldown
- Equity - Questions
- Equity - Demographic Compare

Dashboard Refreshed: Monthly
Data Through: 5/31/2022

For questions and access requests, please contact
MGHCQSQPM@partners.org

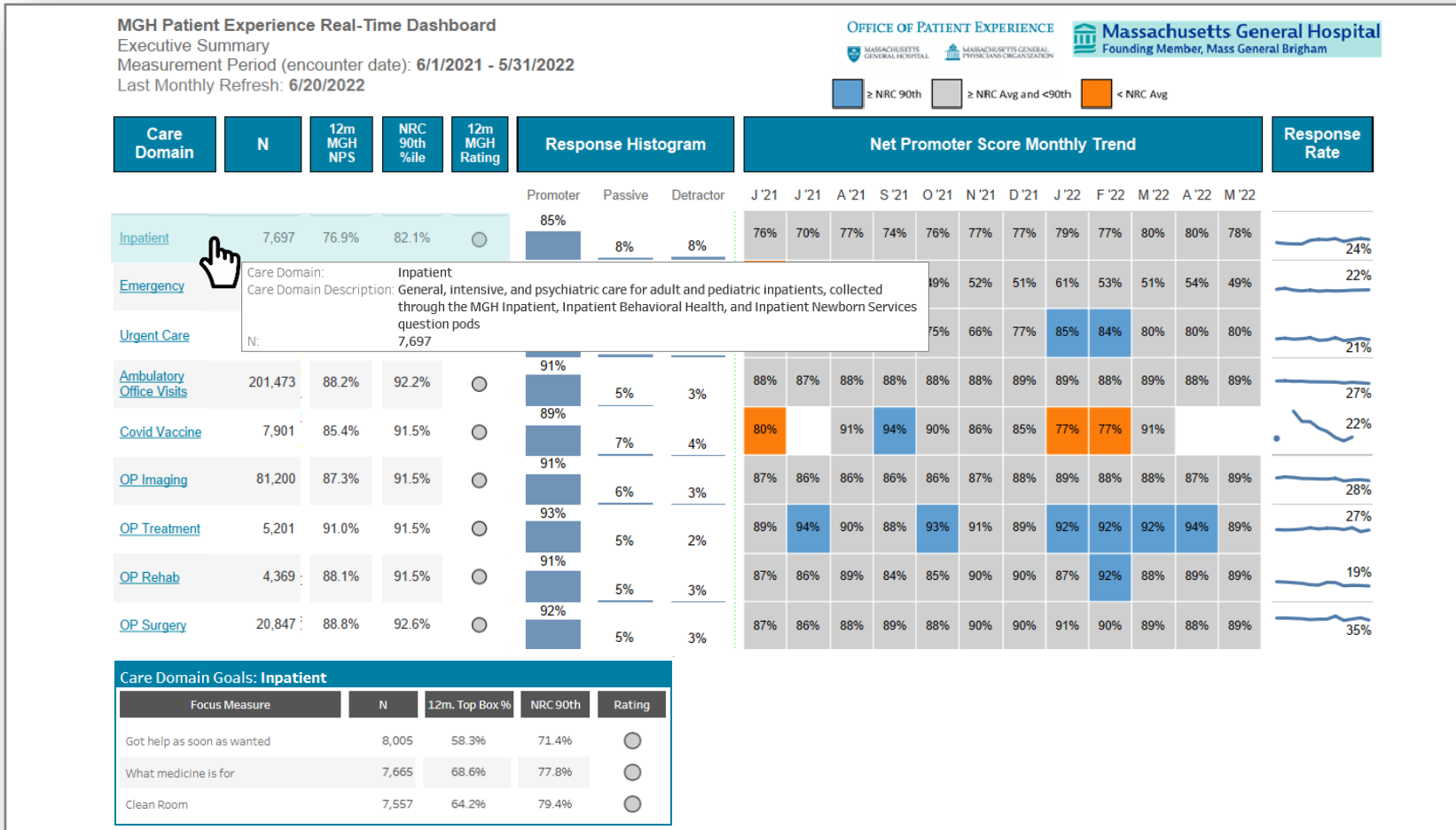
MGH/MGPO Lawrence Center for Quality & Safety
Patient Experience Executive Dashboard

Survey results are transferred to Mass General's data warehouse every day and enriched with local data sources, which fuels an internal dashboard used by senior leaders, clinical & operational management, and quality/PX champions across the organization



Step 2: Enable

Engage stakeholders in the measurement process through intuitive, self-service analytics



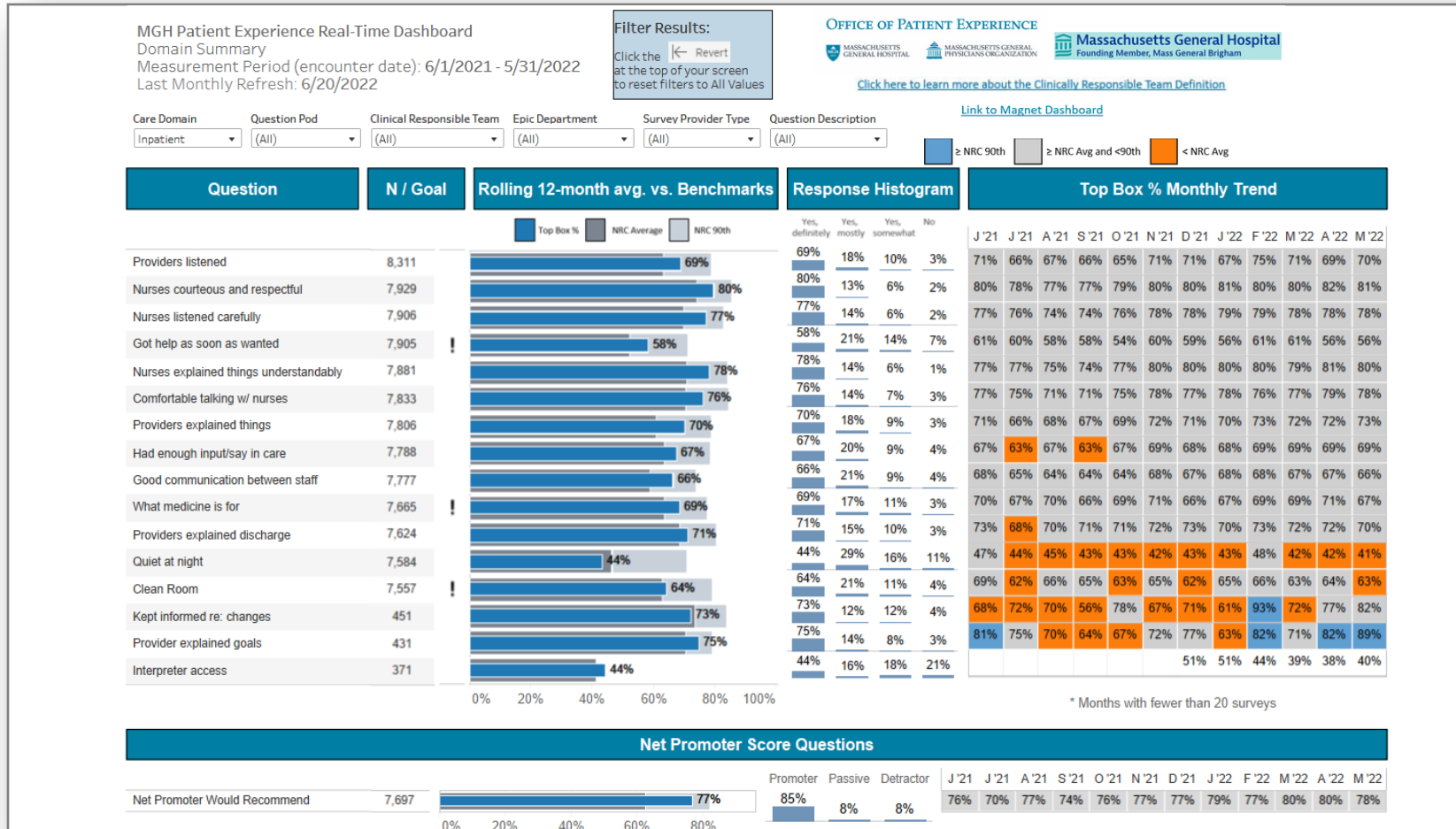
Executive Summary

An enterprise view of net promoter scores (NPS) overtime and against benchmarks for each care domain surveyed, alongside participation rates and FY22 focus measure performance



Step 2: Enable

Engage stakeholders in the measurement process through intuitive, self-service analytics

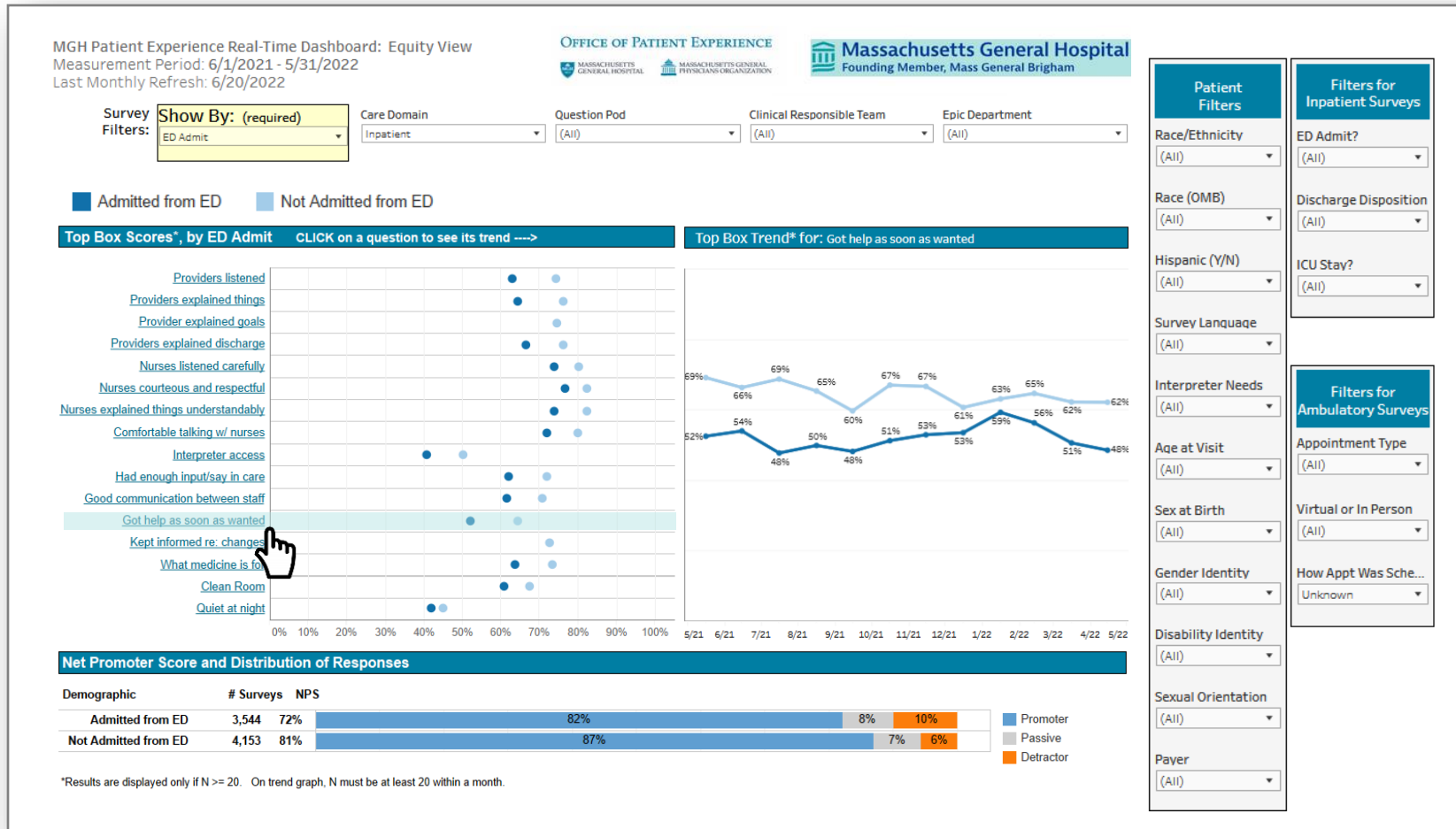


Domain Summary
 Displays performance on all survey questions within a selected care domain, with filtering and pivoting capabilities used to drill into performance by common attribution categories



Step 2: Enable

Engage stakeholders in the measurement process through intuitive, self-service analytics



Variation Analysis

Explores survey results through an equity lens, allowing users to stratify scores by common patient and operational characteristics in a single click and conduct multivariate analyses



Step 3: Integrate

Amplify results by embedding PX data in other institutional reporting channels



Organizational Communications

- Annual goals
- House-wide broadcasts
- Intranet and public-facing website
- Recognition events (e.g., PX Awards)

Quality & Safety Measurement

- Board-sponsored KPIs (e.g., KQSI, KCO)
- Domain-specific reports (e.g., Annual Report on Equity in Health Care Quality, MGH Readmission Dashboard)

Operational Measurement

- Central and departmental dashboards (e.g., MGPO Ambulatory Dashboard, Annual DOS Quality & Safety Report)
- Performance appraisals

Regulatory Reporting

- Compliance reviews (e.g., PCS Magnet Dashboard, TJC and CSTK surveys)
- External reputation/incentive program forecasts



Key Takeaways

1 Curate

- Don't get stuck in the weeds – streamline and simplify, where possible
- Set expectations and goals, reinforcing with out-of-the-box NRC Health resources
- Refine survey content over time to match evolving organizational needs

2 Enable

- Questions are valuable intel! Inventory analytic requests/FAQs and weave answers into reporting
- Leverage familiar platforms and formats
- Build gradually – start with homeruns and phase-in more complex/nuanced measurement over time

3 Integrate

- Embed PX data in non-PX reporting to heighten visibility
- Use Real-Time results to monitor and predict external performance
- Scores and stats are powerful, but even more powerful when paired with the patient's voice





Mass General Brigham
Newton-Wellesley Hospital

We're All in this Together: Building Engagement and Fostering Collaboration through an Experience Council

Audrey Bosse

Director, Office of Experience & Engagement

Newton-Wellesley Hospital

Experience Council – History

Service Operations Committee – monthly meeting

Chairs, Chiefs and Administrative Directors (ADs) attend

Focus on HCAHPS scores and patient comments
(positive and negative)



Experience Council Today

Format: Bi-weekly (inpatient / ambulatory), 1-hour zoom meetings run by the Office of Experience & Engagement with data support from the Office of Quality & Patient Safety

Quarterly meetings bring inpatient and ambulatory together for quality improvement projects

Participants: CMO, CNO, Chairs/Chiefs, Associate Chief Nurses, Nurse Directors, Nurse Educators, Administrative Directors, Practice Managers, Supportive Services leaders



Companies can no longer afford to think about organizational change as something separate from everything else they do. They now have to be “change capable,” all the time.

Source: The Change-Capable Organization,
www.accenture.com



Guiding Principles of Change

Focus on the human side, collaboration and teams and how we collectively improve patient experience

Leaders are responsible for driving change, but involvement and engagement at every level is necessary

Change in one area impacts another

Communicate and validate

Low-pressure peer pressure



Experience Council Goals

Share data and trends from NRC Real-time and HCAHPS surveys to ensure all leaders have shared understanding of data

Identify and brainstorm best practices and scalable solutions to systemic problems

Provide training leaders can take back to their teams

Use Experience Council as the vehicle to launch and monitor quality improvement projects



NRC Health Launch

The Experience Council format was the primary way we communicated to organizational managers and leaders about the launch of the NRC Health Real-time Survey

- What is it?
- What does it give me?
- What am I supposed to do with it?
- *How in the world am I supposed to manage all this?!*



Data, Feedback & Service Alerts



Service Alerts





I KNOW THERE IS A FOREST IN THERE SOMEWHERE...

Sharing Data



**Dashboard
creation**



**Thematic
trends**



**Quality
improvement
focus**



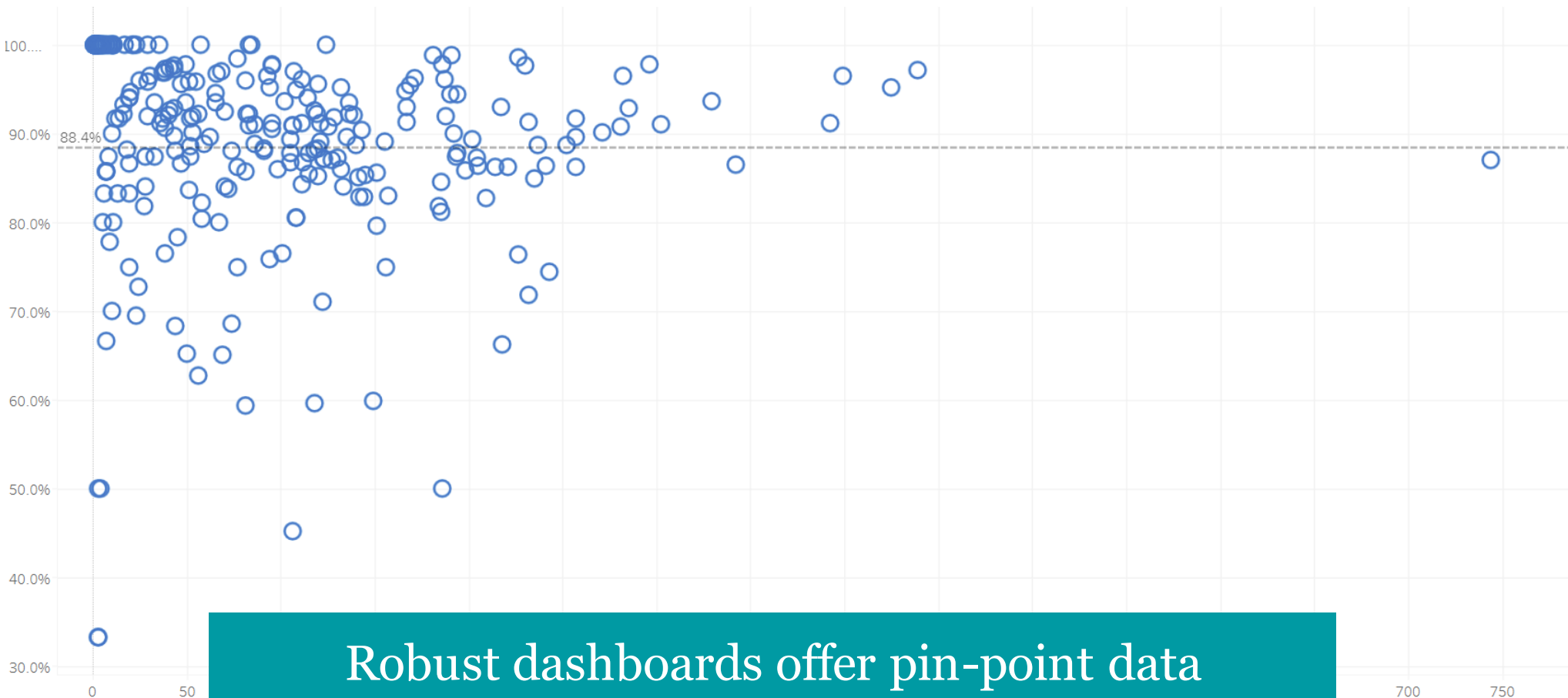
NWVG Patient Experience

by the Office of Quality, Patient Safety, & Experience
data refreshed twice per month

Discharge Date	NWVG Location	Survey Name
Last 12 months	(Multiple values)	(All)
Provider Name	Question Text	Labels On/Off
(All)	How likely would you be to recommend this provider to your family and friends?	<input type="radio"/> On <input type="radio"/> Off

Question Scores by Provider: "How likely would you be to recommend this provider to your family and friends?"

Reference Line is NRC 75th Percentile



Robust dashboards offer pin-point data



Patient Experience | Inpatient Units

Office of Quality, Patient Safety, and Experience

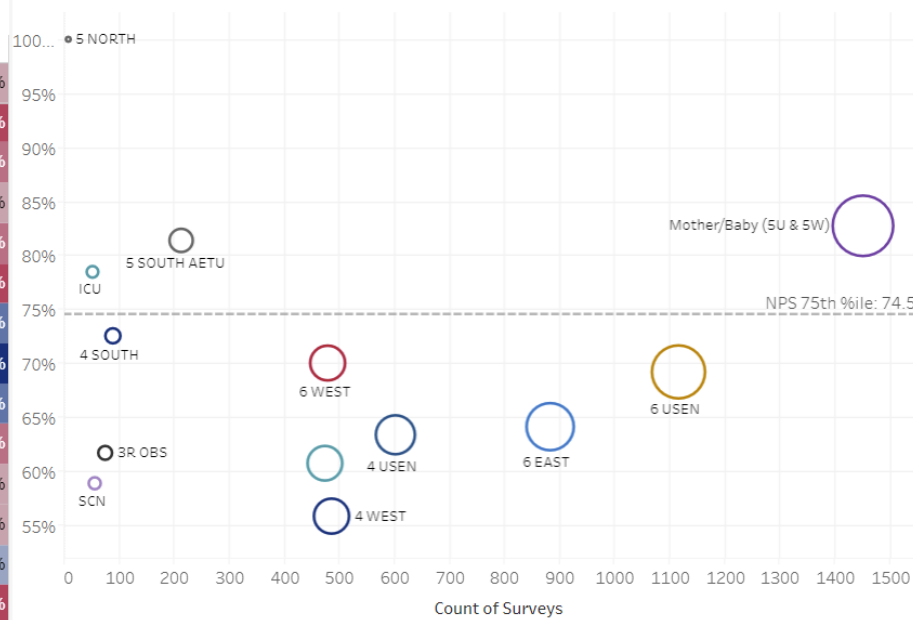
Location Name	Discharge Date
(All)	Last 6 quarters

Net Promoter Score (NPS) All

Blue/Red Cut-off is NPS 75th %ile of 74.5%

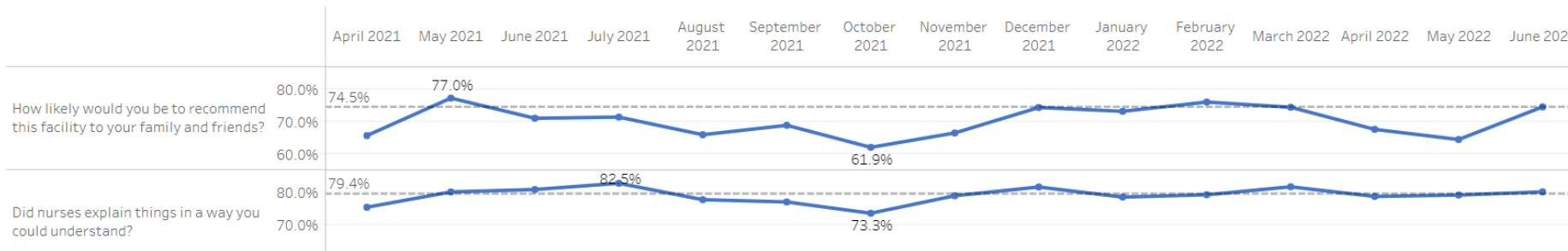
Location Name. (group)	2021 Q2	2021 Q3	2021 Q4	2022 Q1	2022 Q2	Grand Total
Grand Total	71.3%	68.6%	67.6%	74.3%	67.4%	69.8%
NWH 3 WEST	65.8%	66.0%	60.2%	64.9%	39.1%	60.7%
NWH 3R OBSERVATION	61.6%					61.6%
NWH 4 SOUTH			100.0%	82.1%	60.5%	71.8%
NWH 4 USEN	64.0%	65.4%	65.1%	60.0%	61.0%	63.3%
NWH 4 WEST	43.8%	57.7%	61.6%	66.7%	53.8%	55.8%
NWH Mother/Baby (5U & 5W)	83.2%	79.2%	81.3%	88.7%	82.8%	82.7%
NWH 5 NORTH	100.0%	100.0%	100.0%	100.0%		100.0%
NWH 5 SOUTH AETU	71.8%	86.4%	82.9%	88.2%	77.1%	81.3%
NWH 6 EAST	77.3%	62.2%	50.3%	64.3%	66.5%	64.1%
NWH 6 USEN	72.7%	62.2%	68.3%	73.6%	69.1%	69.2%
NWH 6 WEST	78.3%	65.8%	63.2%	77.8%	72.4%	70.0%
NWH ICU	84.6%	92.3%	70.0%	80.0%	60.0%	78.4%
NWH SPECIAL CARE NRSY	53.8%	61.5%	83.3%	83.3%	0.0%	58.8%

Net Promoter Score (NPS) All



All

Reference Lines are CY2021 NRC 75th Percentile Benchmarks, Labels are Max/Min Scores for time period selected



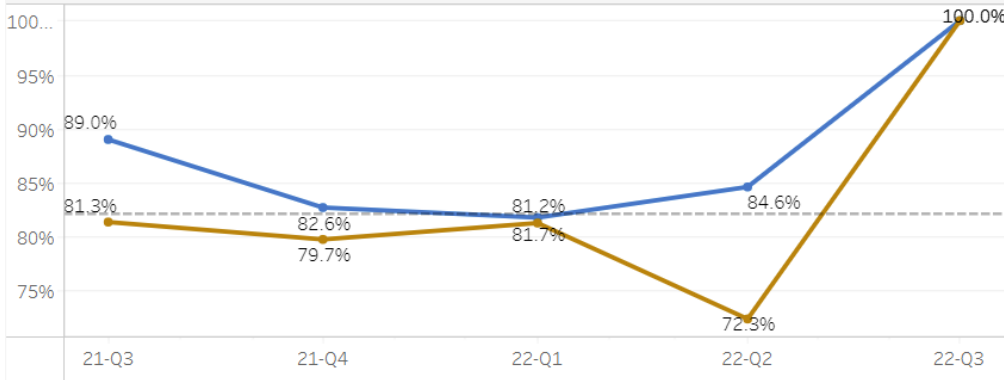
Visualization of trends reveal themes and opportunities

HCAHPS Communication with Doctors and Nurses

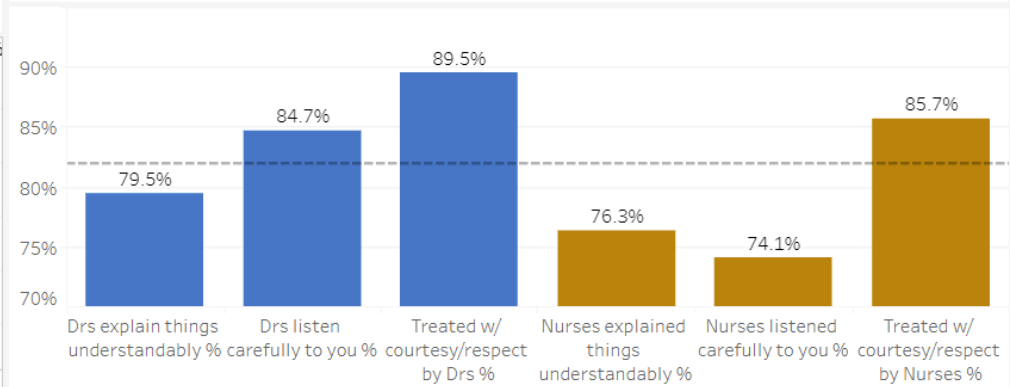
Internal Performance Framework (IPF)
Office of Quality, Patient Safety, and Experience

Discharge Date: Last 5 quarters (Multiple values) | Unit Name: (Multiple values)

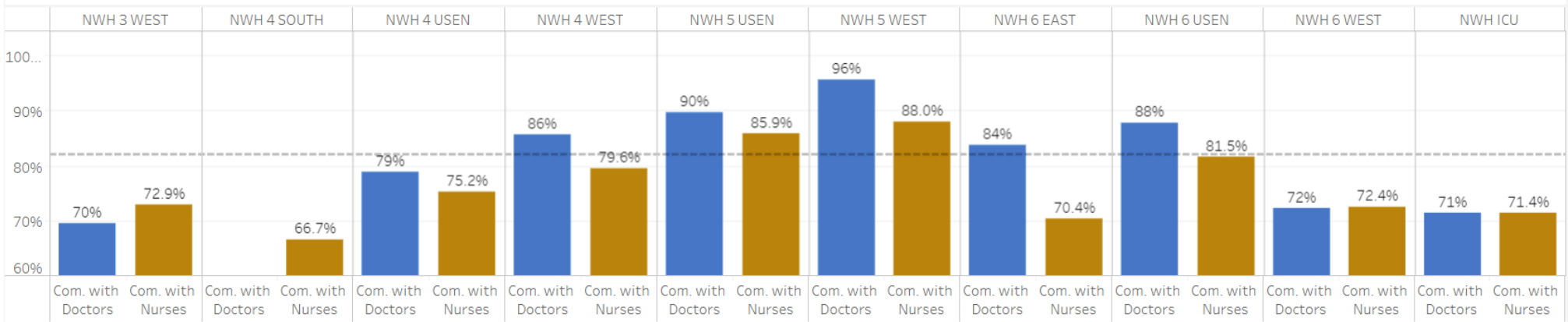
Communication with **Doctors/Nurses** dimension scores by quarter
The dimension score is the numerical average of the three questions scores
Reference Line is IPF target of 82%



Communication with **Doctors/Nurses**, question scores
Reference Line is IPF target of 82%



Communication with **Doctors/Nurses**, dimension and scores by Unit
Reference Line is IPF target of 82%



Thematic Deep-Dives



Thematic Deep-Dives

Share data, feedback and insights on a specific question or service **theme** (*Examples: listening, keeping patients informed of delays, quietness on the floors*)

Cull and share
patient
comments,
identifying
themes and
lessons

Review literature
for additional
insights and
possible
interventions

Intended as a
“take-away”
presentation for
leaders to take
back to their
teams



Listening to Our Patients

In the patients' words



Listening Insights

Listen for what matters *to* them, not just what's the matter *with* them

Avoid Preconceptions

Be Curious

Avoid Judgment

Prepare in Advance

Listen to the Individual – Respect Their Values and Preferences

Respect Patient's Self-Knowledge

Don't Rush – Be Patient

Demonstrate Empathy and Compassion

Listen Before Speaking

Acknowledge the Patient

Validate the Patient's Concerns

Communicate Calmly and Consistently



Prepare in Advance

Listen for what matters *to* them, not just what's the matter *with* them

“

It was a first time meeting and she listened to me, and explained in detail what my blood tests implied and why she had concerns and what she would do about it. She was very thorough, knowledgeable and caring. **She had done her homework and read my entire chart** and knew of previous tests and illnesses. She took her time and I did not feel rushed.

”



Avoid
Preconceptions

Listen to the
Individual –
Respect Their
Values and
Preferences

“

The approach was formulaic and not individualized. The providers didn't listen and refused to answer questions that challenged their 'one size fits all.'

”



Are You Listening as Well as You Think?

2018 Medscape poll:

89% of nurses and APRNs & **87%** of physicians rated their listening skills as **high**

2019 Journal of General Internal Medicine study:

In 112 recorded clinical encounters between doctors and patients at general practices in Minnesota and Wisconsin, including Mayo Clinic and its affiliates, they found:

Clinicians interrupted patients in **67%** of the recorded encounters.

Clinicians listened to patients for a median of **11 seconds** before interrupting.

Some providers interjected within **3 seconds** and others waited up to 234 seconds.

<https://preview.new.advisory.com/daily-briefing/2018/12/14/listening>



Singh Ospina, N., Phillips, K.A., Rodriguez-Gutierrez, R. *et al.* Eliciting the Patient's Agenda- Secondary Analysis of Recorded Clinical Encounters. *J GEN INTERN MED* **34**, 36–40 (2019). <https://doi.org/10.1007/s11606-018-4540-5> <https://rdcu.be/chmLg>

Phrases to Demonstrate Active Listening

Check for Understanding

Do you mean...?
I'm not sure I understand.
Could you tell me a bit more about that?

Clarify Meaning

It sounds like...
What I'm hearing is...

Demonstrate Attention to Nonverbal Cues

I've noticed that...
You seem a bit...

Summarize

Let me make sure I've got this right.
These are the main points I've heard you make so far.
Let's pause to make sure we're on the same page.

Encourage Elaboration

Really?
When?
How?

Show Empathy

I'm sorry. That sounds awful.
I'm sorry you're going through that.
What a difficult situation to be in. I'm sorry.
That's rough. How can I help?



Quality Improvement Projects



Sharing Best Practices

Celebrating consistent high-performers

Learning from one another

Collaborating to help your colleagues reach their goals

Recognition from senior leaders

Achieving organizational goals

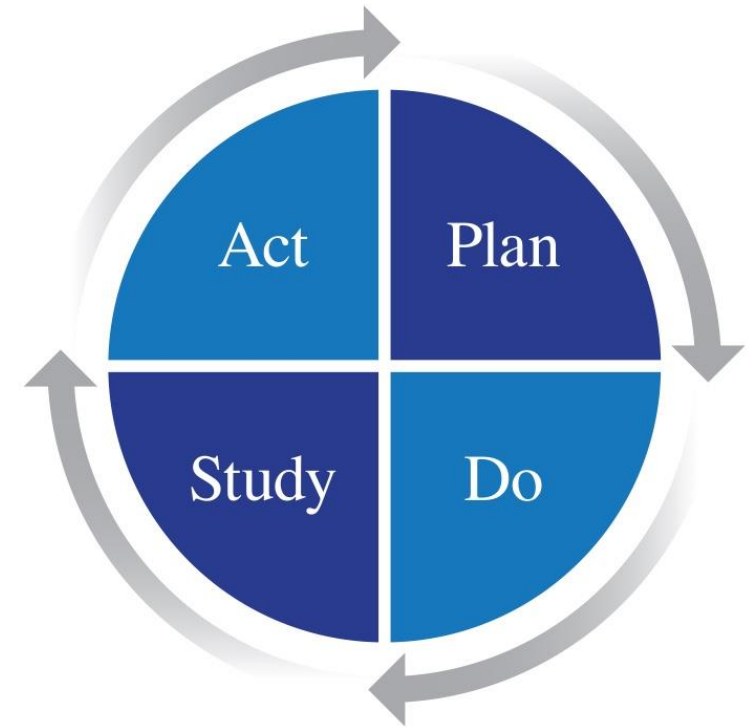


Patient Experience Reporting Process

Improvement Plan Template

- Improvement Opportunity → Plan
- Improvement Goal → Plan
- Intervention Plan(s) → Do
- Empirical Outcomes → Study
- Next Steps → Act

Process Improvement Model



Quality Improvement Process Steps

1 Identify the Problem

- What needs improvement?
- How do you know it really it needs to be improved?
- What information are you going to use to determine if it's a real problem?

2. Develop a Goal

- Is it specific?
- Can you measure it?
- Can you actually achieve it?
- Will it really make a difference?
- Can you achieve it within a certain amount of time?

3. Implement a Plan

- What are we going to do?
- How are we going to do it?
- How often are you going to measure it to check for results?
- Do you need to make revisions or pivot?

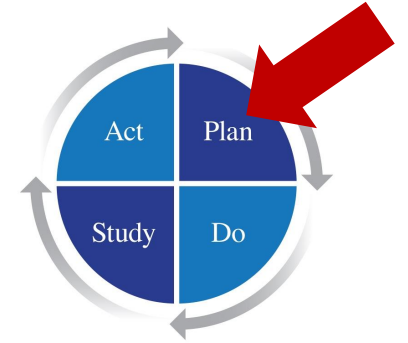
4. Analyze the Results

- Did we achieve our goal?
- How will we know?
- Are the results sustainable?
- Can the results be spread to other areas?



Area of Focus/Improvement Opportunity

What's the problem?



Using your NRC results choose an area where you would like to focus for improvement.

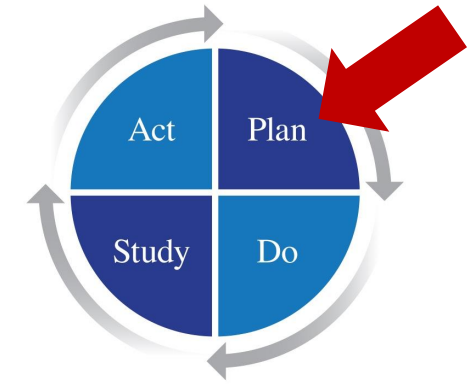
- Look for trends over time vs. a one-time drop in the score
- Consider results that are below the NRC Average (50th percentile) to start. The overall NWH goal is to achieve the 90th percentile rank but incremental improvements can be more motivating and achievable for staff.

The first datapoint will be considered your baseline or starting point



Improvement Goal(s)

What does success look like?



SMART Goal format

Specific - who or what does your goal target?

Measurable - what data/metrics are you going to use to determine if you meet the goal?

Achievable - does your goal inspire motivation and is also reasonable to achieve?

Relevant - does your goal align with the outcome/improvement you are trying to achieve?

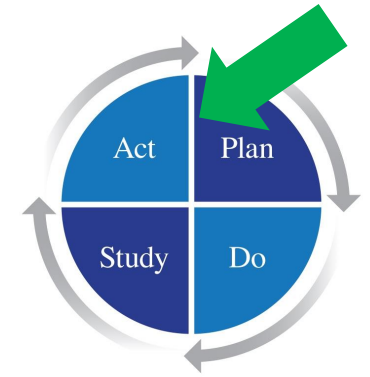
Time-based - when will you reach your goal by?

Example: Our goal is to improve the Staff Responsiveness Score on (name of unit) to outperform the NRC mean by September 2022.



Intervention Plan

What are you going to do? What did you do?



- List specific intervention(s) to be taken to impact the experience score you are aiming to improve
 - Be careful not to choose too many interventions at the same time – this will make it hard to evaluate which intervention made the actual difference in your score and worth hardwiring into practice
 - You can add or change your intervention(s) if your outcome is not achieving your goal in the time-frame you originally set
 - You can plan for multiple interventions and implement at different times once you have a chance to measure how the current intervention is working towards achieving your goal.



Improvement in Patient Communication of Procedural Delays in the Gastroenterology Department

Background/Current Condition

Patient Satisfaction surveys identified inconsistent healthcare communication to patients surrounding procedural delays. This causes patient dissatisfaction, can affect patient outcomes and the patient experience.

Improvement in Patient Communication of Procedural Delays in the Gastroenterology Department

Project AIM/Goal Targets

Improve communication time regarding delays to patients and family (rides).

Improve patient satisfaction/experience.

Analysis of Improvement Effort

Providing education for staff and patients with pre calls to include: script stating, “We will try to keep your scheduled appointment time, but unanticipated emergencies or prolonged procedures may impact your procedural start time, but we will keep you and your family updated/informed”.

Identify areas where breakdown in communication can occur – workload, distractions, transition of care (handoffs).

Providing tools to communicate patient location, time of procedure and proceduralist.

Collect information from Patient Satisfaction surveys and post procedure calls.

Improvement in Patient Communication of Procedural Delays in the Gastroenterology Department

Proposed Interventions/Countermeasures

Improved utilization of the Status Boards.

Staff education on utilization of Status Boards (legends)

Changed format of status boards to include: event, patient location and patient RN.

Will add Status Boards to the RR/prep area with appropriate information.

Whiteboards outside of prep bays to include: MD, # in the queue, scheduled time and RN.

Team huddles to prep for day expectation if anticipated delays due to high volume, inpatient load, increased advanced therapeutic procedures.

Delays will be communicated by the prep/procedure RN in a timely manner.

Improvement in Patient Communication of Procedural Delays in the Gastroenterology Department

Follow-up Actions & Conclusions

Continuous evaluation of the communication process.

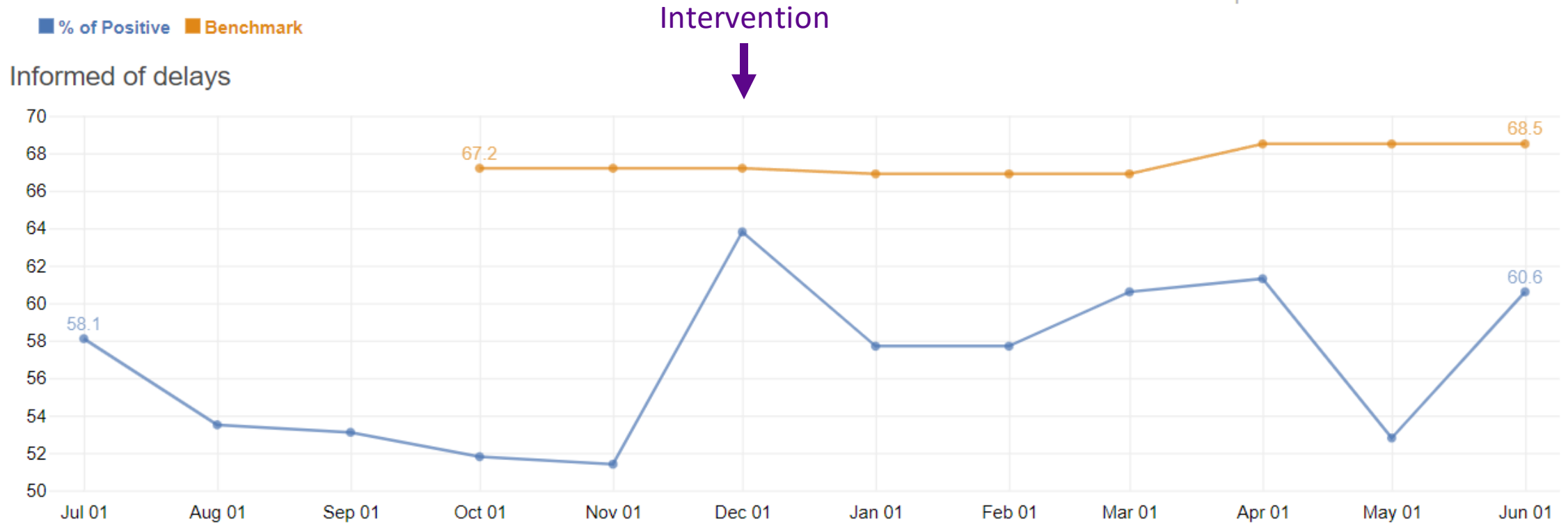
Monitor the need for daily team/charge RN huddles to anticipate potential delays.

Monitor surveys and callbacks and relay information to the staff for feedback.

Opportunities – If a question concerning a delay is asked in a post call and addressed, this might improve the patient satisfaction survey and patient experience.

“Informed of Delays”, Gastroenterology, July 2020 – June 2021

Respondents 2,049



	Jul 01	Aug 01	Sep 01	Oct 01	Nov 01	Dec 01	Jan 01	Feb 01	Mar 01	Apr 01	May 01	Jun 01
% of Positive	58.1 n = 43	53.5 n = 101	53.1 n = 211	51.8 n = 247	51.4 n = 173	63.8 n = 185	57.7 n = 163	57.7 n = 168	60.6 n = 208	61.3 n = 199	52.8 n = 176	60.6 n = 175

Example Quality Improvement Efforts – InPatient

Improving Patient Experience with Nursing Care

New Start Medication Education IPF Initiative

Improvement of the Discharge Process for Same Day Arthroplasty Patients

Teach Back Method OSC Discharge Process

CVC Discharge Instruction Process

Improvement in Patient Communication of Procedural Delays in the Gastroenterology Department

ED Patient to Provider Time

EVS – Improving Room Cleanliness Scores



Example Quality Improvement Efforts – Ambulatory

Diabetes & Nutrition Clinic – Courtesy/Respect & Listen Carefully

Women’s Health – Wait Before Talking, Provider Timely to See You, Courtesy of Reception Area

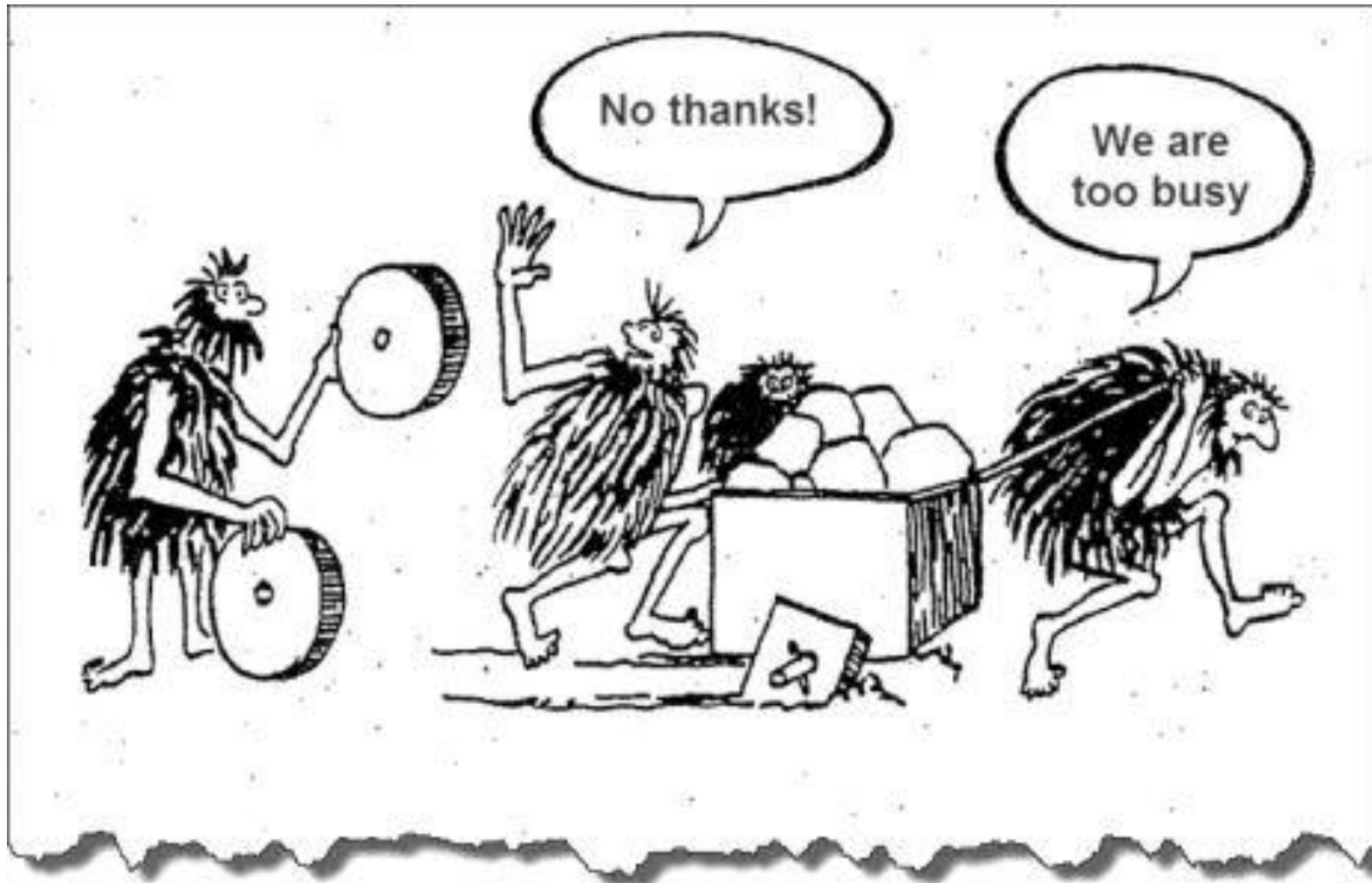
Radiology – Facility Update

Laboratory – Staff Explanations

Outpatient Rehab – Office Wait Time

Cancer Center – Improve Perception of Reception (Courtesy/Respect)





Factors for Success

Senior leadership participation

Turning on your zoom camera

Sharing the positive

Celebrating a team's success, best practices

Encouraging collaboration on similar initiatives

Enthusiasm!



Experience Council – Final Thoughts

It creates a sense of community with a shared goal and vision

It brings people together from across the organization and allows us to get to know each other on a deeper level and fosters greater respect

Encourages teamwork





Brigham and Women's Hospital
Founding Member, Mass General Brigham



PXPLAYBOOK

Aamer Ahmed, MBA
Executive Director, Patient Experience



HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL

Our Role in the Patient Experience Journey

1. To be healers
2. To navigate with patients throughout their journey
3. To create lasting memories
4. To establish long-term relationships

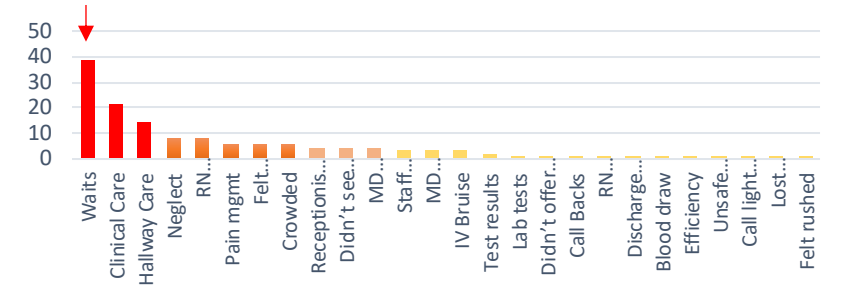


How is Patient Experience Analyzed?

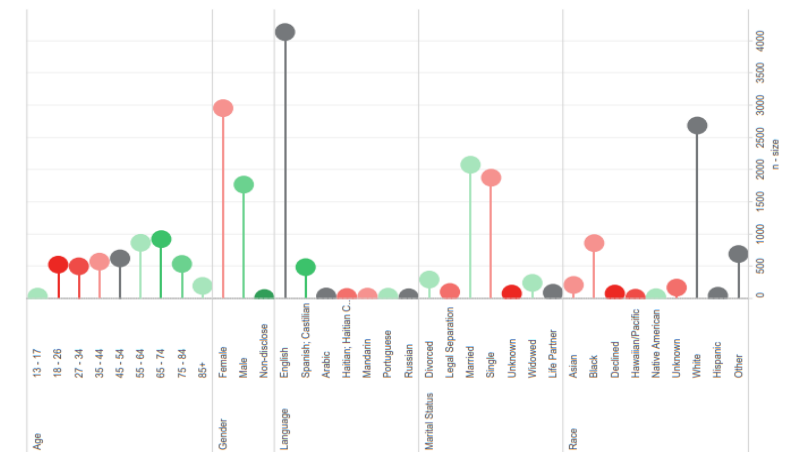


How to analyze your patient experience data

- Start with patient comments** to capture the biggest themes that patients are identifying. Consider focusing on comments from detractors (scoring 0-6) over the last 3-6 months. Create a visual of the themes and identify the top theme. [\[Link to NRC Tool\]](#)
- Identify top key drivers** correlated with the NPS and highlight the ones that are underperforming. Do the comment themes align with any of the key drivers? Comments may not align with key drivers since key drivers focus exclusively on survey questions used. Patients may comment on experiences that they are not asked about in out surveys. If there is an overwhelming opportunity identified in the patient comments that are not reflected in key drivers, prioritize the comment theme. [\[Link to NRC Tool\]](#)
- Compare score to other factors** using other data sources to understand the theme from an equity lens and narrow in on key patient segments. [\[Link to NRC Tool\]](#)
 - Examples:*
 - Demographic: By Race/ Ethnicity
 - Clinical: By Diagnosis/ Acuity
 - Operational: By Volume/ Waits/ Staffing
- Conduct observations and interviews** to humanize the data and understand the experiences better.



Priority	Question ID	Question FriendlyText	Positive %	Respondent n-size	Correlation Coefficient
Low Positive % and High Correlation	1033	Good communication by iv staff	55.4%	1,474	0.64
High Positive % and High Correlation	1041	Care providers listened	62.2%	1,456	0.67
	1031	Had enough input/ say in care	60.0%	1,455	0.65
	1056	Care providers explain things	63.8%	1,574	0.62
	109	Nurses listened carefully	68.7%	1,482	0.69
	1032	Comfort talking with nurses	68.2%	1,467	0.66
Low Positive % and Low Correlation	1066	Seen in timely manner	43.3%	1,658	0.64
	1325	Knew what to do if questions after	51.7%	1,454	0.50
	1137	Informed of delays	58.0%	1,390	0.50
	4092	Interpreter access	42.0%	1,103	0.39
High Positive % and Low Correlation	109	Nurses courteous and respectful	72.2%	1,497	0.52
	180	Nurses explained things understandably	70.7%	1,497	0.54
	2575	Attentive, courteous and respect	62.6%	1,624	0.44



Analysis:
BWH Emergency Dept



ED Monthly Trend

47th %ile

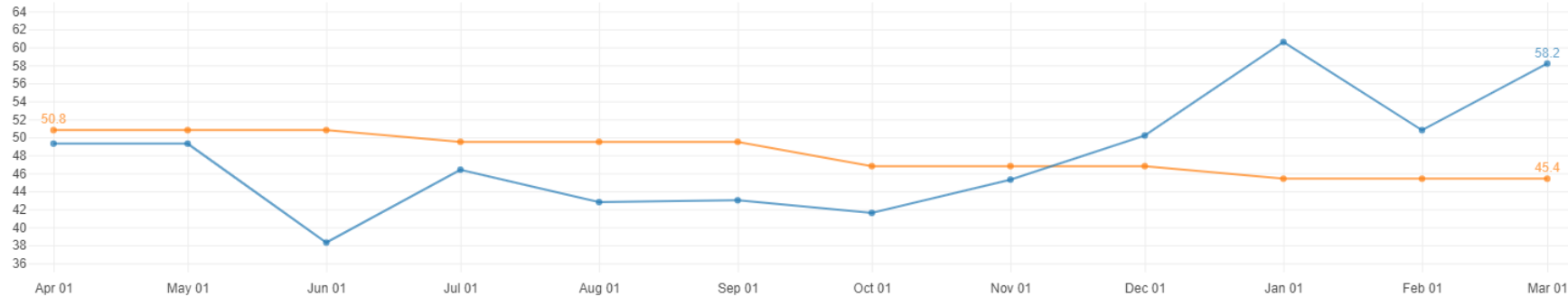
Benchmark = Emergency Med Nat'l NRC Ave

■ Benchmark ■ Net Promoter Score

Respondents

4,876

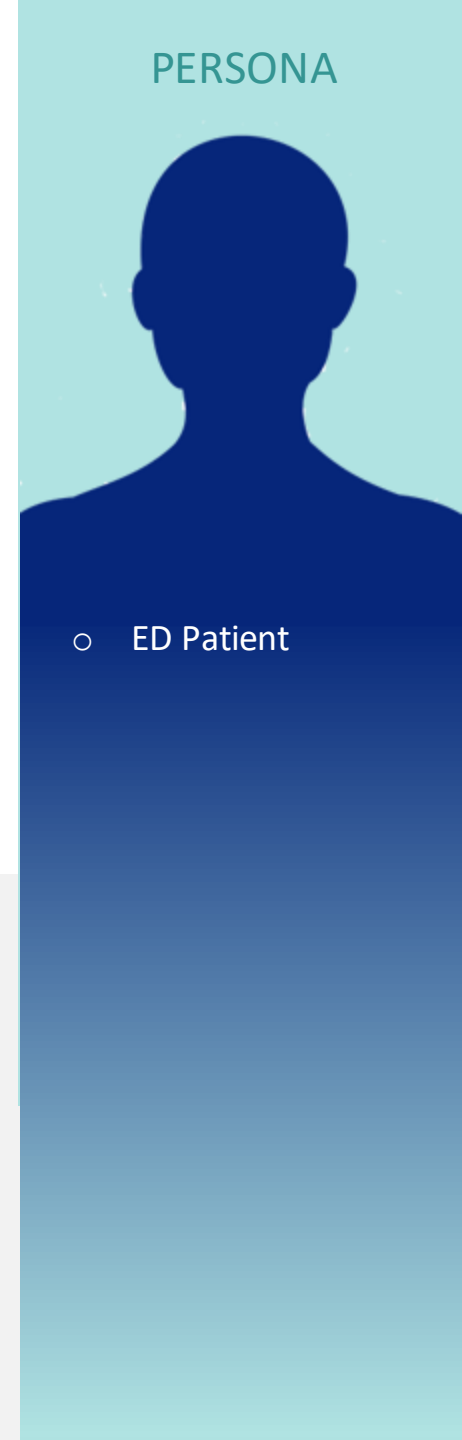
NPS: Facility would recommend



Net Promoter Score	Apr 01	May 01	Jun 01	Jul 01	Aug 01	Sep 01	Oct 01	Nov 01	Dec 01	Jan 01	Feb 01	Mar 01
	49.3 n = 473	49.3 n = 420	38.3 n = 394	46.4 n = 461	42.8 n = 460	43.0 n = 421	41.6 n = 457	45.3 n = 411	50.2 n = 406	60.6 n = 355	50.8 n = 295	58.2 n = 323

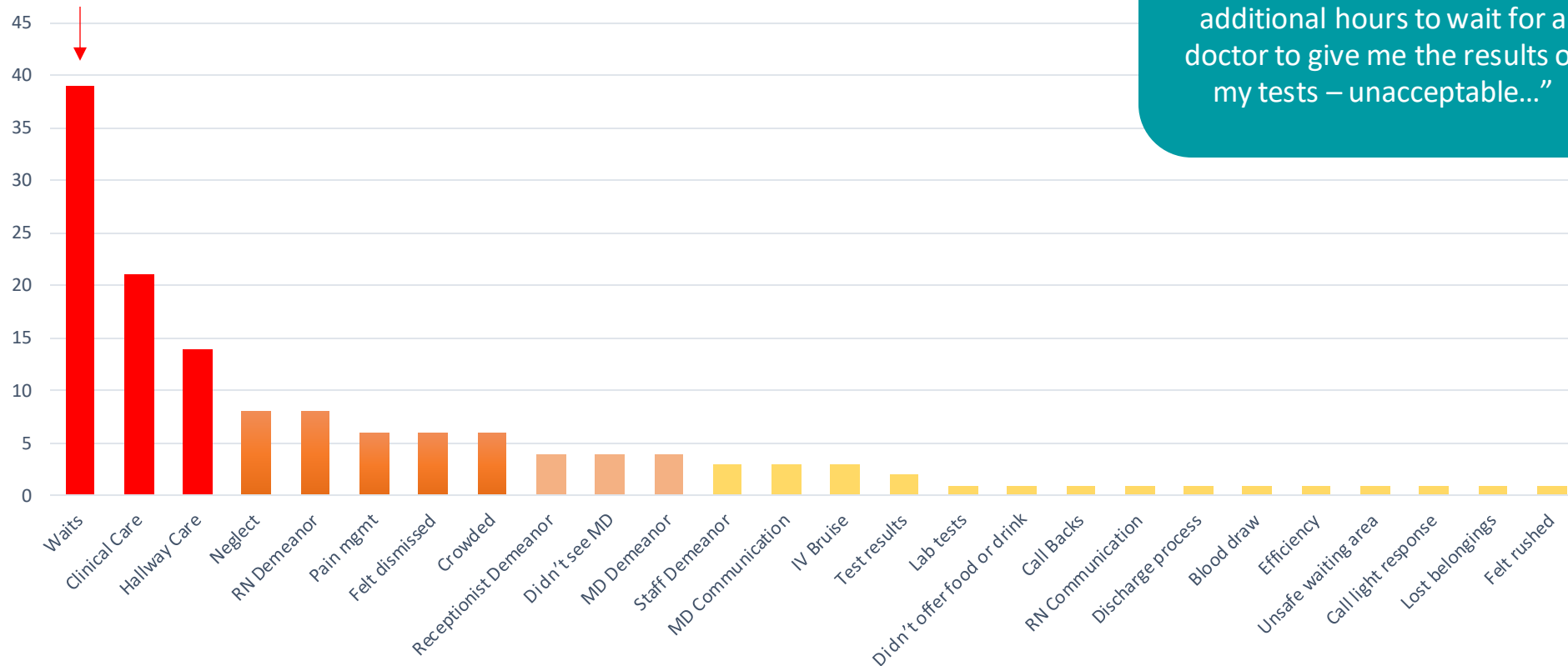
Key Reflections:

- The national average has decreased over the past year while our raw score has increased. Consider identifying and sustaining contributors to the increase before launching new tactics.
- What contributors led to an increase after October?
- What contributors led to a dip in June? Identifying contributors will help forecast and prepare for future dips.



○ ED Patient

Comment Themes



“I wait 4 hours before seeing a doctor and no information on timing were given. I spent 4 additional hours to wait for a doctor to give me the results of my tests – unacceptable...”

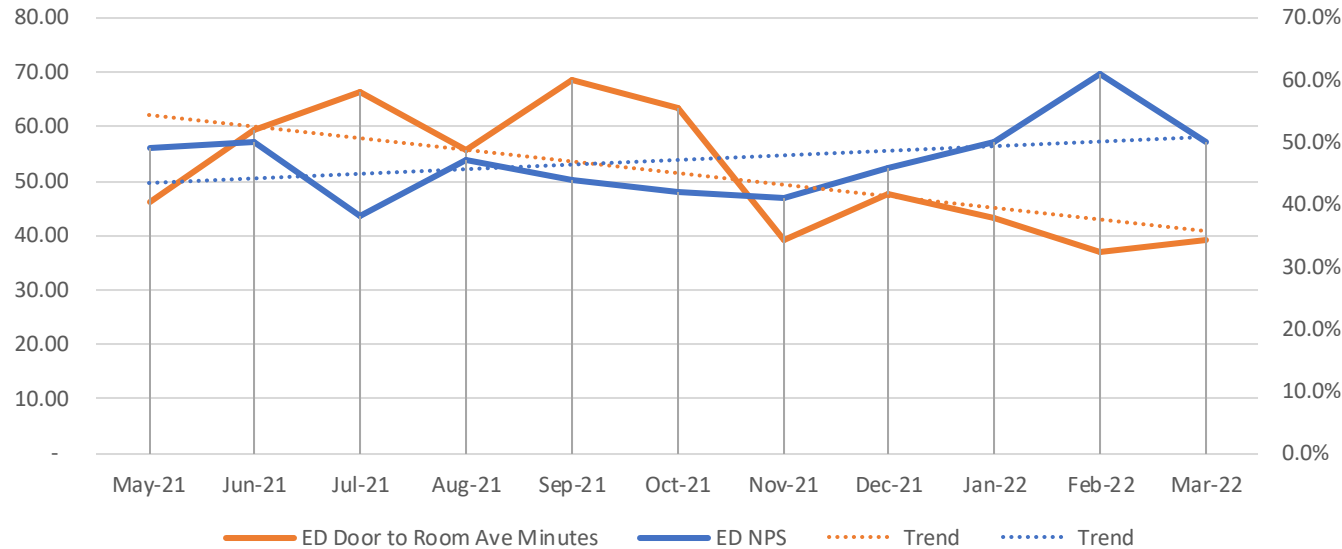


- ED Patient
- ➔ Values their time

Key Reflections:

- The top theme from comments from patients scoring a 0-6 (detractors) on their likelihood to recommend BWH is related to waiting for care.
- Waiting is reflected by waiting in the public waiting area or waiting after being roomed.

Score by Wait Times



“I was sent to the ER by my GI doctor. Waited 2 hours for triage, then another 3 hours before deciding to leave to go elsewhere. I left mostly out of Covid concerns...the waiting room was extremely crowded and people were either not wearing masks properly or taking masks off to eat.”

PERSONA



- ED Patient
- ➔ Values their time

Key Reflections:

- Months where patients waited longer to be roomed have lower patient experience scores

Score by Demographics

Key Reflections:

- Scores are lower for patients who are young, single, black or female.

“It is hard for me not to think of this situation as a health care disparity. I am a black female, who happens to be a BWH employee. What happens to the marginalized patient population who does not know how to advocate for themselves!”



PERSONA



- ED Patient
- Values their time
- ➔ Age 18-26
- ➔ Female
- ➔ Single
- ➔ Black

Key Drivers

Overall

1. Had enough **input/say** in care
2. Good **communication** b/w staff
3. Care providers **explain** things
4. **Felt safe** in environment

By Race

Black [n=15]	Asian [n=223]	Hispanic [n=58]	Native Amer [n=15]	White [n=2,777]
1. Seen in timely manner	1. Had enough input to say in care 2. Good communication b/w staff	1. Care providers listened 2. Knew what to do if questions after	1. Good communication b/w staff 2. Care providers listened	1. Good communication b/w staff

“I value **respect and dignity** from nurses and doctors caring for me, **consistent messaging** across my care team, and a **safe and private** healing environment.”

PERSONA



- ED Patient
- Values their time
- ➔ Age 18-26
- ➔ Female
- ➔ Single
- ➔ Black

Key drivers represent NRC survey items that have the highest correlation to the net promotor score and perform lower than others. Focusing on tactics related to key drivers will increase the likelihood to improve the Net Promotor Score.

Patient NPS Score by Acuity

ESI	NPS	n
4	58.4	238
3	48.5	1253
2	58.8	675

Emergency Severity Index (ESI) is assigned to patients triaged through the ED

“I had excruciating pain and was dismissed by triage. I sat in the waiting room for 3.5 hours with no explanation. Others who came in after me with simple cuts got in first and left before I was even brought back. It turned out i had a hemorrhaging ovarian cyst that could have been blocking flow to my ovary which is very dangerous and still waited this long to be seen.”

PERSONA



Key Reflections:

- Patients with an ESI of 1 or 5 typically are not surveyed
- Patients with an ESI of 2 will wait to be triaged but then quickly seen and discharged
- Patients with an ESI of 4 are top priority and will be seen then discharged
- Patients with an ESI of 3 wait to be triaged and then wait for results

Focused Demographics

- ✓ ED Patient
- ✓ Values their time
- ✓ Age 18-26
- ✓ Female
- ✓ Single
- ✓ Black
- ✓ Medium Acuity



Capture Key Learnings From Focused Demographic

From Patient Interviews:

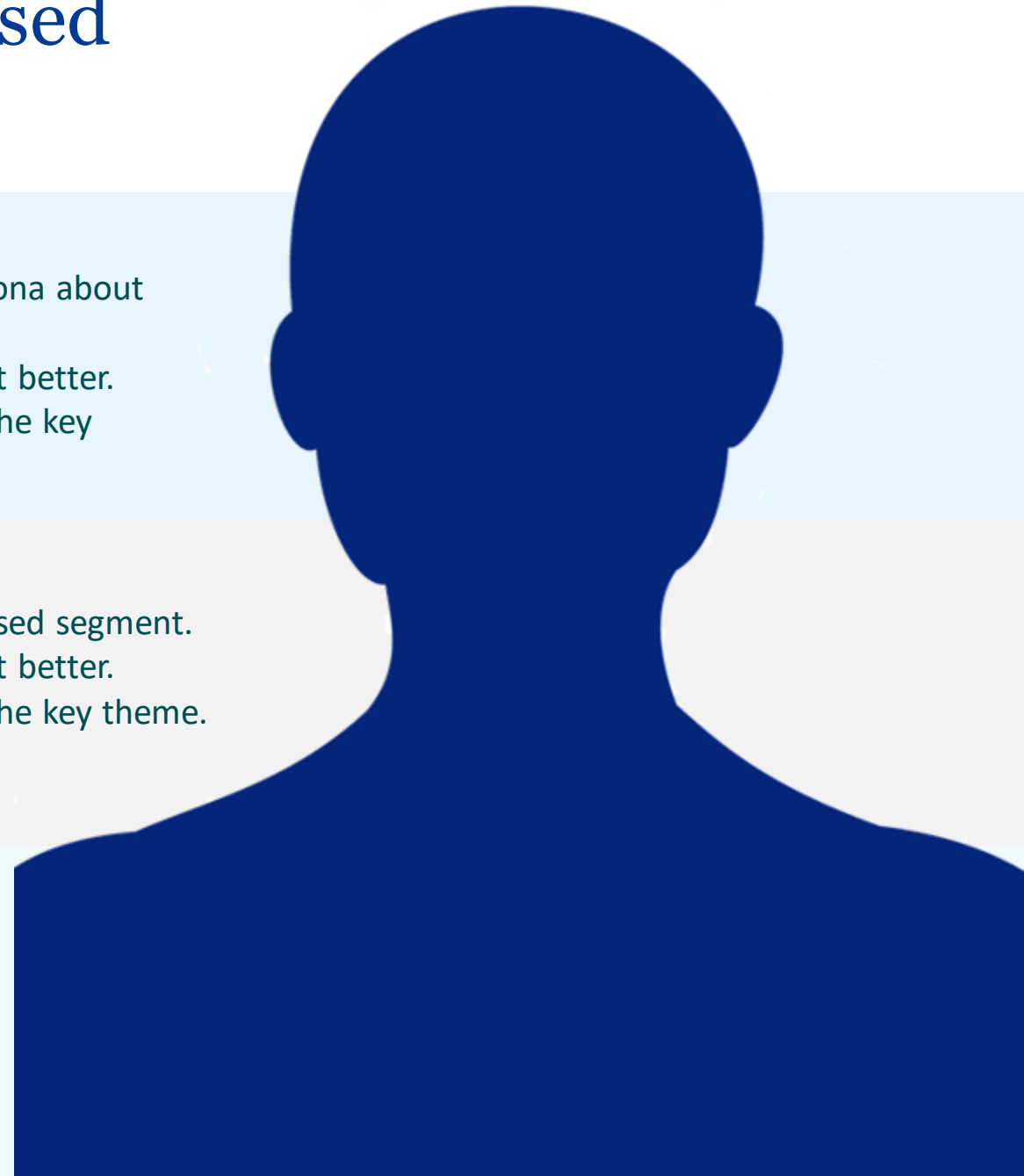
- Interview patients that share demographic attributes of focused persona about their experience regarding the key theme.
- Ask open-ended questions in order to understand the patient mindset better.
- Highlight top 3-5 takeaways from interviews with patients regarding the key theme.

From Patient and Family Advisory Councils :

- Consult with patient and family advisory councils relevant to the focused segment.
- Ask open-ended questions in order to understand the patient mindset better.
- Highlight top 3-5 takeaways from interviews with patients regarding the key theme.

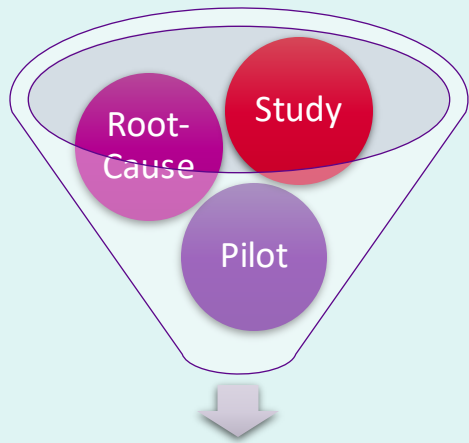
From Diversity, Equity and Inclusion Groups:

- Seek out constituencies and advocacy groups that focus on diversity, equity and inclusion and seek advice.
- Ask what other existing forums or studies could be leveraged.
- Capture top 3-5 takeaways

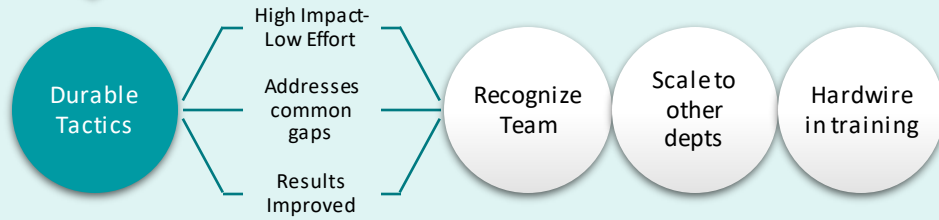


Key Tactics

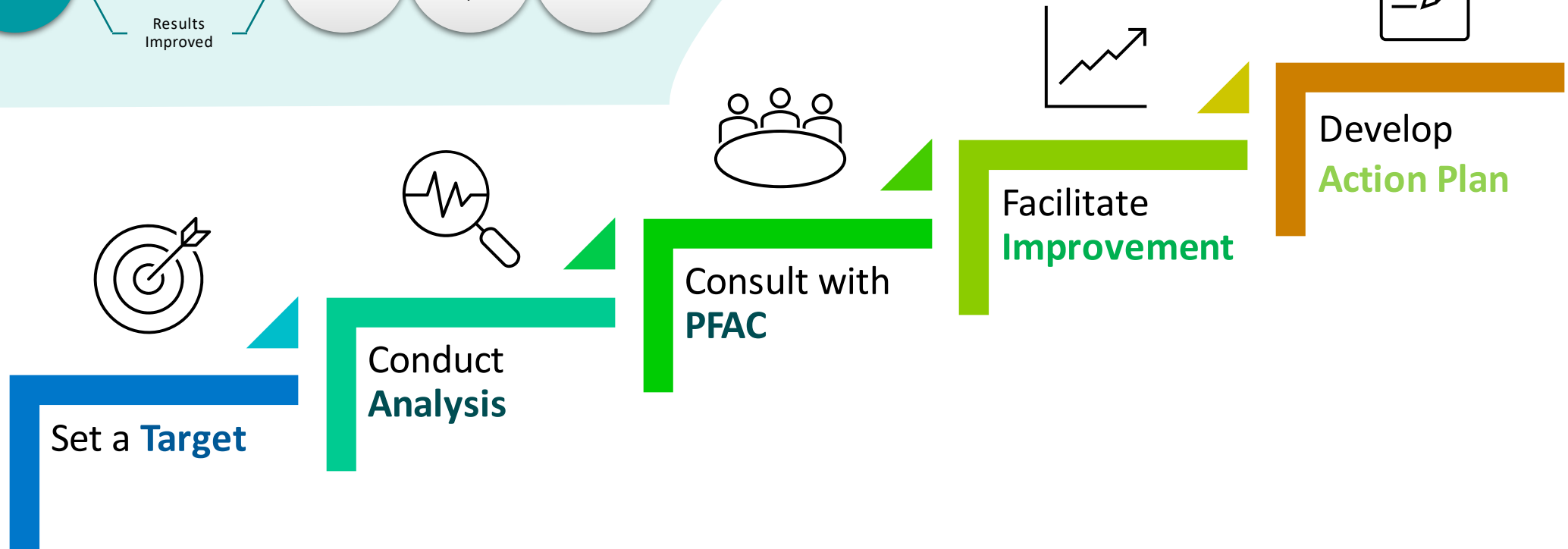




1. **Empower** local teams to drive change in their areas
2. **Measure** efficacy and scalability of local tactics
3. **Recognize** and scale tactics that work



Approach to Improvement



Focusing on high-impact/low effort tactics



Once tactics are identified, they should be plotted on an impact chart to prioritize the ones that will yield the greatest outcomes with the least effort.



Examples of Low-Effort Tactics

Care team treat with dignity & respect

Use 'Three Things About Me' cards to make personal connection and trigger small talk

Provide call light education and establish care team responsiveness standards

Use patient (preferred) name frequently when communicating

Proactively assist patient with bathroom needs when rounding after meals

Communication between staff

Bedside Rounding with both MD and RN present

Team names and roles verbalized and populated on whiteboard

Discharge checklist and Plan of Care on whiteboard

Bedside shift report with patient included and focal point

Physician Communication

Commit to Sitting versus Standing

Explain role of other providers during stay (ED, hospitalists and specialists)

Use teach-back: Have patient explain what they understand

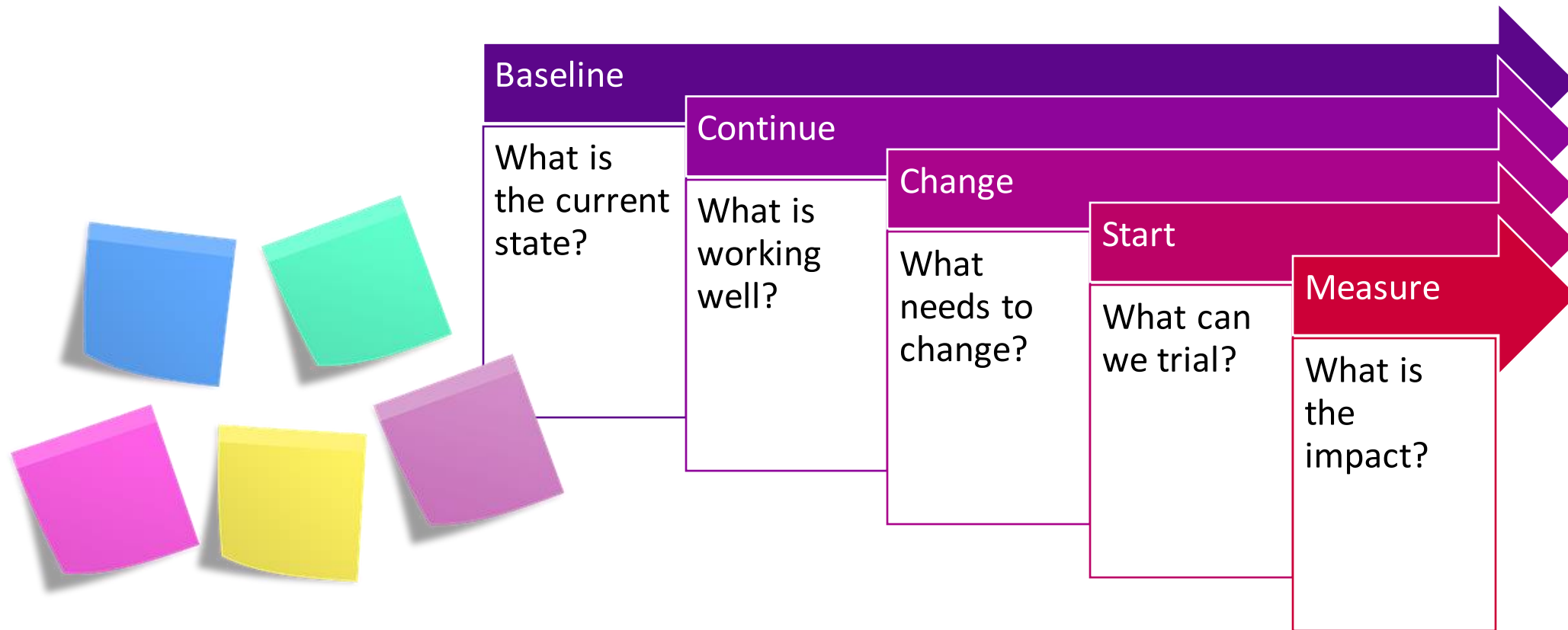
Ask 'What questions do you have?' not 'Do you have any questions?'



Action Planning & Change Management



Improvement Workout



Action Tracker

Tactic	Action Item	Owner	ETA	Status

Use this tool to manage the project action plan, ensure tactics are converted into action items, assigned responsible parties and due dates.





Service Excellence Workgroup Positive Feedback Toolkit

Jane Hayward
Manager, Office of Experience & Engagement
Newton-Wellesley Hospital

Background

In July 2020, Mass General Brigham institutions began capturing real-time feedback from our patients through the NRC Health surveying platform.

The MGB Patient Experience Leaders Committee created several subgroups to help us all learn how to manage the plethora of data and feedback we were now getting through our surveys, and to develop and hone best practices in patient experience.

The Service Excellence Workgroup (SEW) was established to help review and refine our Service Excellence training programs.

As COVID took its toll and our teams reeled from its impacts, and as providers began receiving their direct patient feedback, the SEW was pressed with a new charge:

How can we utilize all the positive feedback we are getting to keep our providers and our staff engaged and energized during these uniquely challenging times.



Toolkit Outline

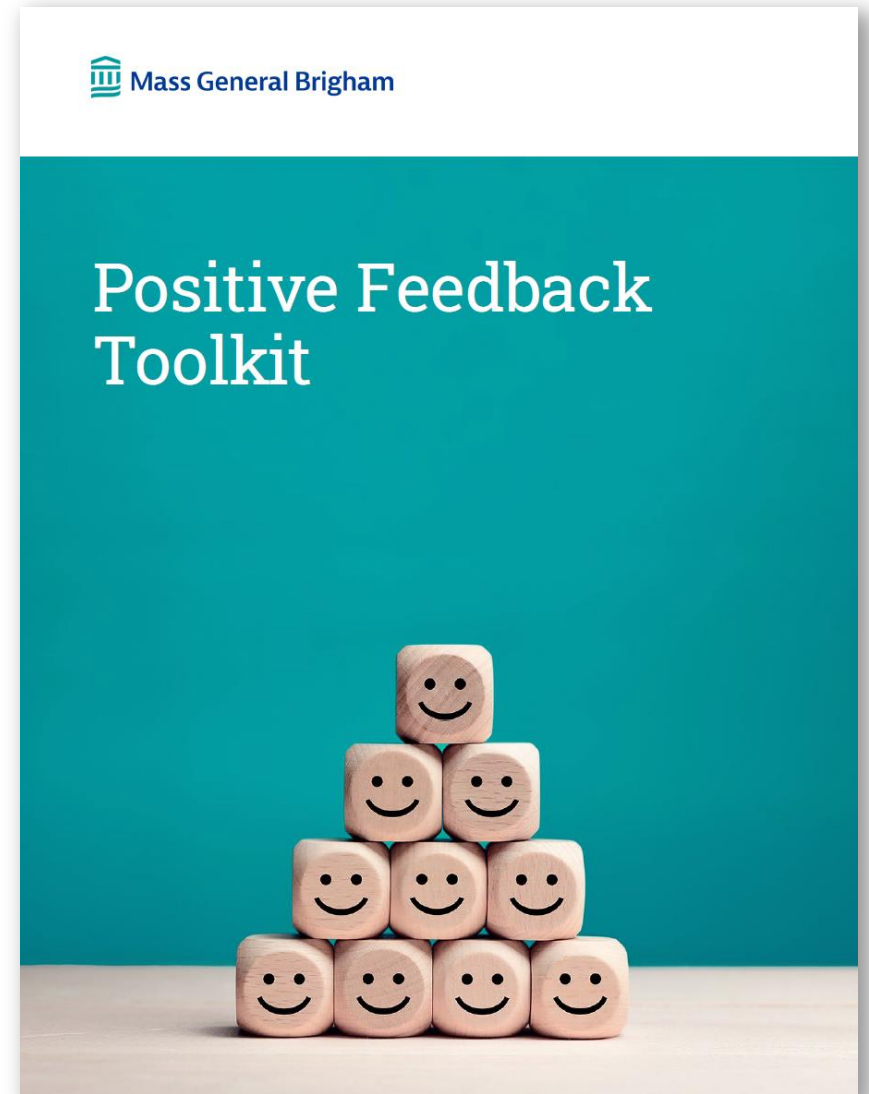
The power of positive feedback (the *why* behind the toolkit)

Making time for feedback

Ideas and best practices:

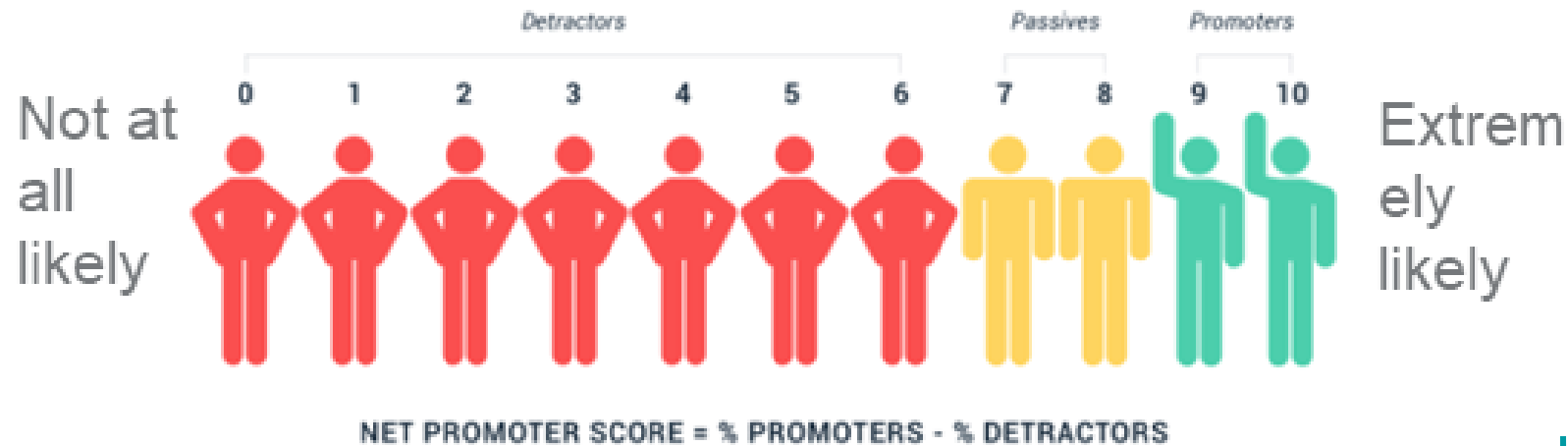
- Sharing feedback with individuals
- Sharing feedback with teams
- Sharing feedback with entity/hospital
- Sharing feedback with system

Additional readings



The Data and the Feedback

The key metric in our patient experience feedback is the question “How likely would you be to recommend this facility/service/provider.” This specially calculated metric is referred to as the “Net Promoter Score.”



Ignore the number, share the positive feedback.



The Power of Positive Feedback

The foundation of Service Excellence is rooted in our mission to help and to heal.

We want our work to have an impact and make a difference.

How do we know if it is? **Feedback.**



Positive feedback feeds our:

- intrinsic motivation
- pride
- sense of accomplishment
- sense of belonging
- engagement & productivity
- commitment
- empathy and compassion



The Power of Positive Feedback

In an organization focused on continuous improvement, we want to fix what's broken, and change what's not working well, so it's natural to be inclined to focus on the negative

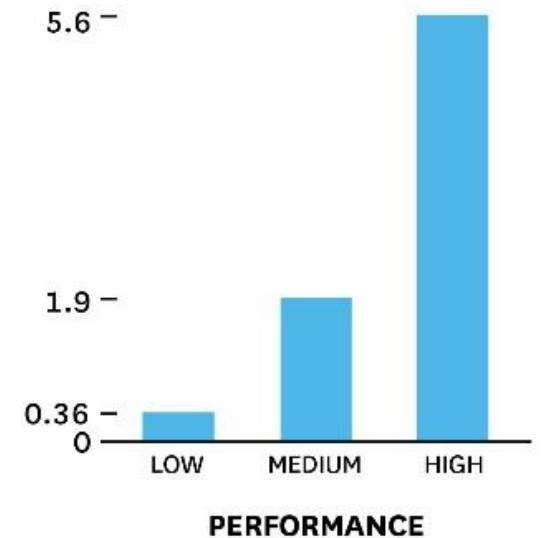
But...

Only positive feedback can motivate people to continue doing what they're doing well, and do it with more vigor, determination, and creativity.

- Harvard Business Review

A LITTLE CRITICISM GOES A LONG WAY

Top performing teams give each other more than five positive comments for every criticism.



SOURCE LOSADA & HEAPHY: THE ROLE OF POSITIVITY AND CONNECTIVITY IN THE PERFORMANCE OF BUSINESS TEAMS, 2004

HBR.ORG



Soliciting Feedback beyond NRC

Cooley Dickinson Hospital: Staff appreciation card program places thank you cards and collection boxes throughout all CDHC buildings and offices, and includes the cards in their VNA and Hospice patient welcome packets. A QR Code links to a virtual webform for submissions anytime, anywhere.

Newton-Wellesley Hospital: “Share your opinion” cards in lobbies, waiting areas

Mass Eye & Ear Infirmary: Gives a “thank you” card to patients that lists the full names of all staff who cared for patient along with a personal comment – sharing care team names can prompt patient to reach out with specific praise

Martha’s Vineyard Hospital: launched a new “Kind Words” RL Module to encourage staff to formally share positive feedback

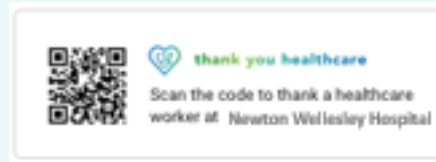


Bringing Thank You Healthcare to Newton-Wellesley Hospital

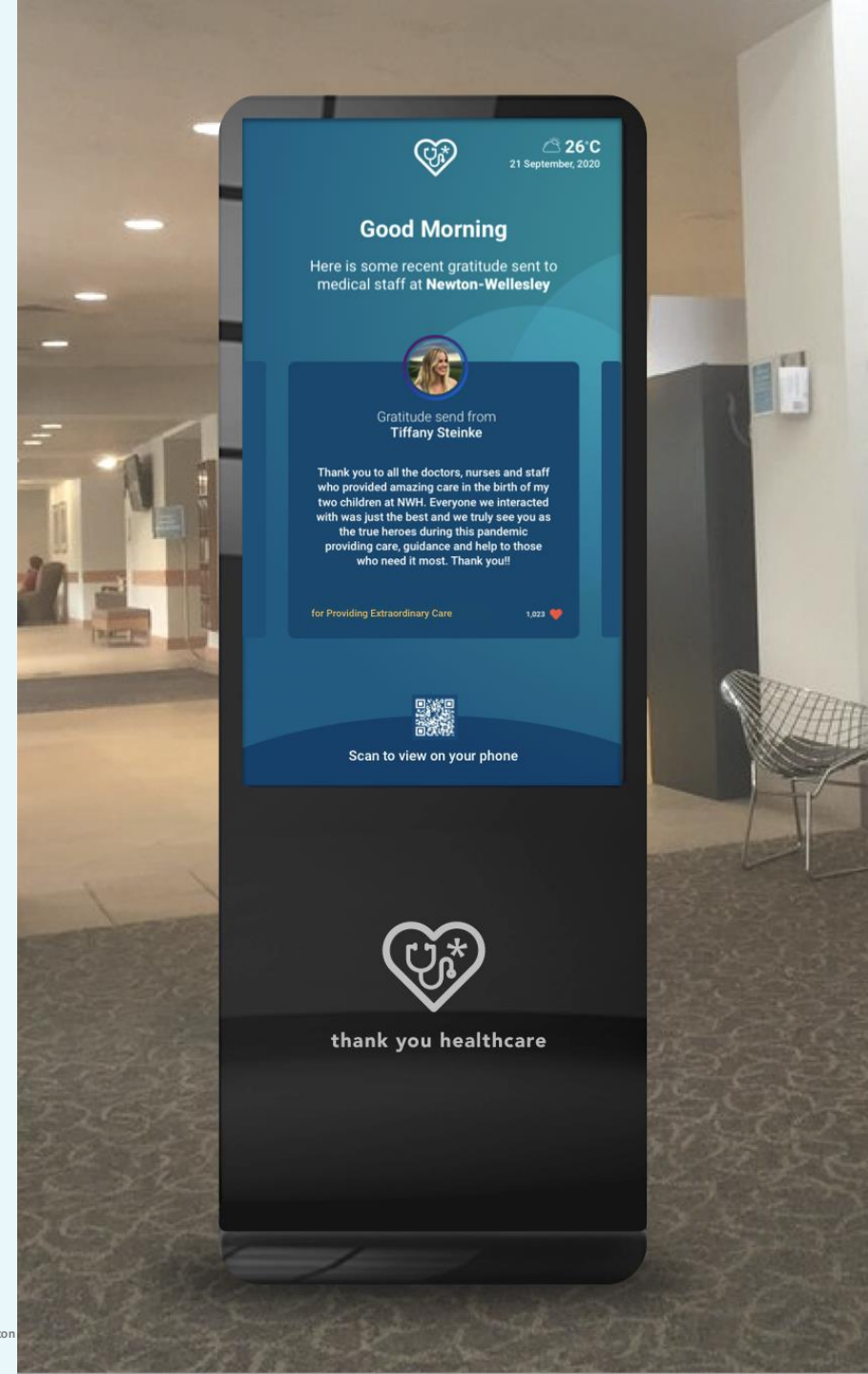
- Freestanding kiosk in Newton-Wellesley Hospital lobby or waiting room (or other higher traffic area)
- Kiosk would be touchless given COVID environment
- QR code on display will direct patient's and/or hospital visitor's cell phone to Newton Wellesley Hospital community page to submit recognition

Additional options and opportunities:

- Posters & cards around the hospital with QR code to expand awareness to visitors throughout the hospital (hallways, parking lot, check-out desks, even patient discharge forms with sticker with QR code)
- Share the best messages of gratitude and recognition to your staff on internal digital signage, internal newsletters, so all staff can continually see the level of appreciation for them.
- We can also work with you to showcase amazing stories on the site for external news stories, social, and PR to showcase the amazing team at Newton Wellesley Hospital.



<https://www.workhuman.com/thankyouhealthcare/>



Development tie-in opportunities

Development offices are uniquely positioned to solicit thanks from grateful patients.



Gift of Caring

A meaningful way to say *Thank You*

Every day at Cooley Dickinson Hospital, people experience caregiving that fills them with gratitude. Maybe a nurse's sense of humor made you laugh when you wanted to cry. Perhaps a doctor showed heartfelt concern not just to your husband, but to your entire family. Or maybe another care provider showed gentleness when handling your ailing family member.

A way to express your gratitude. If there's someone at Cooley Dickinson whom you'd especially like to thank, there's a way to publicly honor this person while also supporting the hospital.



When you make a Gift of Caring, a captioned photograph of your honoree will be displayed in the North Building lobby at the hospital. Your Gift of Caring supports everything from the hospital's programs and services to the latest medical technologies.

To make your gift, download and mail in this form or make your gift online here. You may also call the Cooley Dickinson Development Office at (413) 582-2255.

HONOR YOUR CAREGIVER NOW

RELATED INFORMATION

CDHC TRIBUTE & MEMORIAL GIVING

The Cooley Dickinson Hospital Healing Garden

Honor a Caregiver

Your physician expressed compassion during a difficult moment.

Your daughters nurse made her laugh when she was getting her first shot.

Your care team saved your life.

Honor care that you or a loved one received today by [following this link](#).

You may also [download the brochure](#) and mail your recognition to POX 329, Northampton, MA 01061

Cooley Dickinson Hospital's development office makes its donors' praise public and visible to its staff.



Making Time for Feedback

Make the Time

- Carve out and book time on your calendar each week to review NRC feedback comments from your area.
- Designate a time and place to regularly share positive feedback with your staff/teams/unit, whether that's in a daily huddle, a weekly staff meeting or monthly newsletter. Be consistent so your staff will know to anticipate the feedback.

Understand your goals

- How can this feedback work for you? Think about your goals for your area and your staff. What are your strategic priorities for the year? Leverage the voice of our patients to help to emphasize and reinforce the best traits you want to see in your staff to meet those goals.

Get organized

- Create folders for each of your employees and keep feedback that mentions them or their work area in these folders for handy access for one-on-ones and for performance reviews.
- Create a document for each of your strategic goals. Add relevant patient feedback you see that supports those goals, so you'll have them ready whenever you need to reinforce them with your team.



Sharing and celebrating
feedback with
individuals



Verbal share of positive feedback

Taking the time to thank an individual for their actions, whether recognized by you, or told to you by a patient or colleague, is a meaningful way to help an employee feel good about their work.

Tips:

- **Share with intent** – don't minimize the praise by conveying it as an after-thought to another conversation.
- **Share specifics** – let the recipient know what specific actions they did that garnered the praise rather than saying a generic "great job!" This reinforces specific positive behaviors and lets them know that people are paying attention to their efforts.
- **Give thanks** – let the recipient know how much you value their efforts and how proud you are of what they did.

I saw what you did.
I appreciate it.
It's important.
It makes me feel....



Email share of verbal feedback

Putting praise in writing helps to formalize it and gives it some permanence.

If you receive verbal praise for your staff, take the time to write it down and pass it along.

Creating a standard visual email template can help make receipt of a written note of praise and thanks more official.

Create the opportunity to magnify the praise by cc'ing managers and senior leaders who can then “pile on” their own recognition and thanks.



Sharing praise and thanks!

Dear _____,

I wanted to let you know about a lovely call I received last Friday afternoon from patient _____ came to Women's Imaging for a mammogram early in the morning and she said she'd been reflecting all day on what an excellent experience this was for her and she felt she had to reach out and share.

_____ was running late that morning and her anxiety level was high. You immediately diffused all the stress she was feeling. She said you were so positive and kind, so nice and authentic, and there was just something about the way you took care of her that really made a positive human connection for her. She appreciated how you asked her “if you're uncomfortable, let me know,” as well as your gentle touch when positioning her body for the exam.

_____ has been a long-time patient, and long-time fan, of Newton-Wellesley. She almost felt guilty about singling you out for praise, as she said everyone has always been terrific and kind.

I thank you, and your whole team, for helping make our patients' experiences so positive, and for helping to care for them both emotionally and physically. Your compassion makes us all so proud!

| Thank
| you |

Jane N. Hayward

Manager, Office of Experience & Engagement

Newton-Wellesley Hospital

2014 Washington Street, AR-117, Newton MA 02462

O 617-243-5052, F 617-243-5602

Patient Experience Line 617-243-6205



Email share of written feedback

When putting it in writing, it allows you to add your own commentary to demonstrate your pride in their work and actions.

Sharing praise and thanks!

Dear Dr. _____ and the Outpatient Surgery team,

I am happy to share with you a note of praise and thanks from a recent outpatient surgery patient. I hope you will share this message with your larger team so they can know how important their kindness and care are to our patients, and what a difference their compassion and competence makes!

| Thank |
| you |

Jane N. Hayward

Manager, Office of Experience & Engagement

Newton-Wellesley Hospital

2014 Washington Street, Newton MA 02462

T 617-243-5052, F 617-243-5602

Patient Experience Line 617-243-6205

nwh.org



I want to thank the entire team who worked with me for a surgical finger trigger release by Dr. _____. Although this is a minor surgery, I never felt unimportant. Each person I saw—and there were many—was highly competent, kind, and adept at making me feel safe and in good hands prior to surgery. They gave me their time and I never felt rushed or alone.

My experience was excellent, and I regret not being able to thank everyone who assisted. I can't say enough about the very patient-centered care I received. Newton-Wellesley Hospital has trained its staff to be a force for healing and in my mind, they stand out as one of the very top Boston area hospitals. If possible, please forward this message to my team at the Surgical Center. Many thanks.

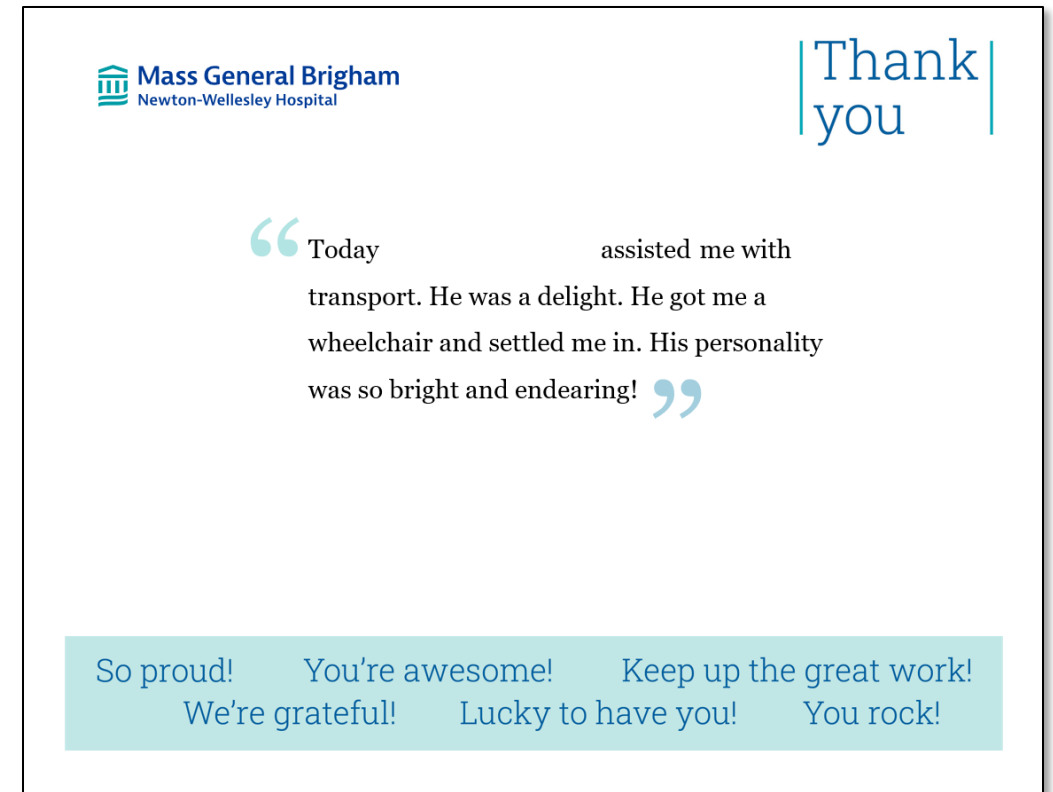


Certificates

Praise and thanks can be presented to an employee with a certificate, highlighting the comment.

Managers can present these to staff either alone or in team meetings, to amplify the message.

Certificates can be posted as a continuing reminder of the value of an employee's efforts.



This certificate example shows how NWH shares comments that come via “we want your opinion” cards posted in waiting areas.



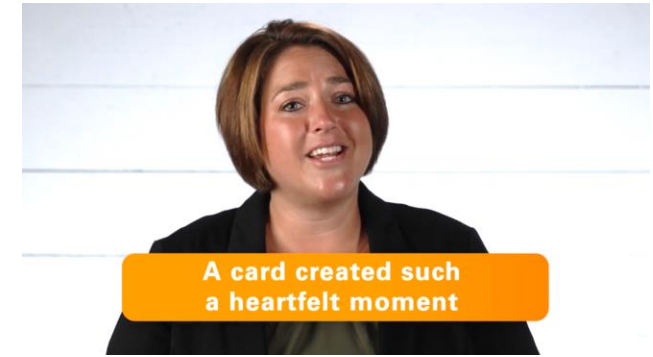
Hand-written Notes of Thanks and Praise from Managers Utilizing Patient Comments

Mention specific patient praise

Reinforce your pride in their work

Patient comments reconnect team members to purpose

A card creates a heartfelt moment and lingering memento



See NRC Insights video: [NRC > Resources > Improvement Library > Connecting With Teams Through Patient Feedback Series > Celebrating Individual Successes](#)



Employee/Manager one-on-ones and reviews

Incorporate patient feedback into employee one-on-ones and reviews

- Save and organize feedback by employee as part of your weekly comment review workflow
- Use feedback to highlight the employee's strengths
- Use feedback to reinforce your pride in their work
- Use feedback as an opportunity to reconnect to mission



Sharing and celebrating
feedback with teams



Team Meetings / Huddles

Share patient feedback regularly in team meetings and/or huddles.

Tips:

- Add it to your agenda as a regular, recurring feature and staff will look forward to it
- Make feedback both recognition and learning opportunity: Prepare commentary to frame the comment in advance to highlight key points, to call out individuals, and to encourage all team members to take pride and ownership of the praise
- Use feedback to strengthen team, rather than dividing it



Thank you for your dedication and unyielding commitment to serving our patients - especially during these challenging times. You make the difference!

Thank you!

IN THE WORDS OF OUR PATIENTS:

"The nurse and physician I saw couldn't have been more professional - they were good listeners and it was obvious they liked their work...they seemed to enjoy the interaction with patients."

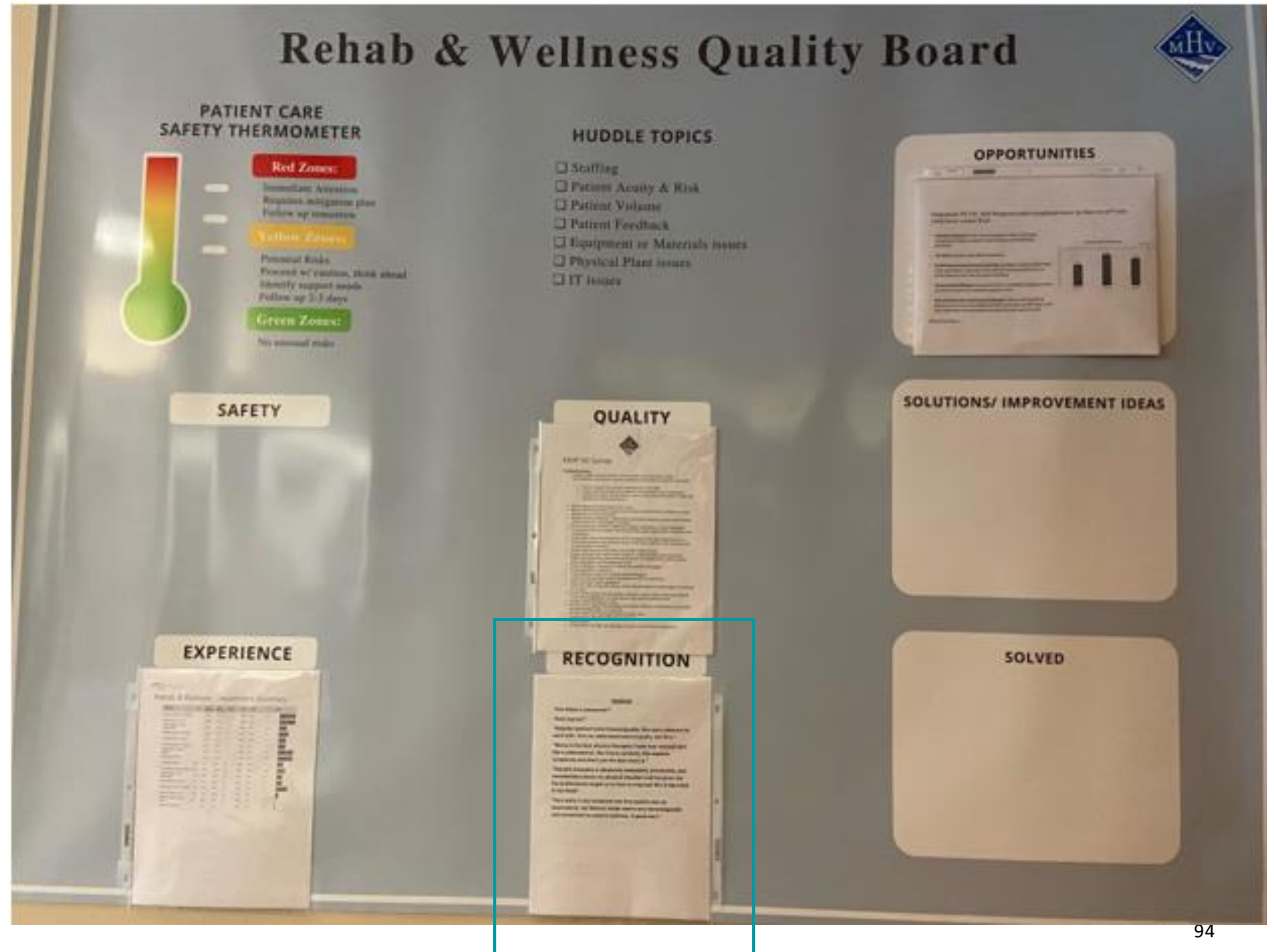
"I believe the entire team made a difference to my experience. Everyone was so kind and compassionate, and I am grateful. It made a huge difference to me - I was very nervous."

"The receptionist, scheduler, and technician were all very helpful with positive attitudes which makes a huge difference. They represented the world class MGH brand very well."

"The doctor made an effort to specifically ask about and address my daughter's worries and concerns. This bedside manner made all the difference in helping us both feel ready for and comfortable with the procedure. Thank you to the doctor and all of the excellent nurses!"

Wrap Feedback and Recognition into Your Quality Efforts

Martha's Vineyard Hospital incorporates positive quotes of recognition into its quality boards.



Wall of Praise

Identify an area in the office/on the unit to be your “praise” wall.

Decorate it in a way that it feels special and like a place you would want to go to when you need a pick-me-up.

Don’t let the wall stagnate! Keep fresh comments coming and rotate the feedback.



Here are what patients are saying about their experience at SHC:

Positive (+)

- “I had a great experience with Dr Roy, Tom, Amanda, Bridget and the entire OT and PT department. Also, all the nurses and cna's were wonderful. Two nurses Kate and Elyssa were very kind and compassionate during my stay. I'm on the road to recovery. Thank you everyone!!!!”
- “Everyone was excellent and the food surprisingly good. A special shout out to Gary.”
- “I appreciate everything that everyone did and for all the therapy and helping my recovery. The food was great. Everybody was very nice, attentive and I will miss a bunch of you. Oh my goodness, thank you all very, very much.”
- “Everyone was really helpful, caring and considerate.”

Negative (-)

- “I represented my sister as health care proxy during her stay at Spaulding. I am frustrated by the lack of respect for personal property and lost items. Purse, clothing, shoes, eyeglasses have not been accounted for.”

Here are tips ALL staff can use to help improve the patient experience:

- **Listen Attentively:** Body language and facial expression reveal our attitudes and intentions.
- **Express Empathy:** Acknowledge patients’ feelings and emotions, try to imagine the situation from the patients’ point of view.
- **Sincere Apologies:** When things don’t go as planned or mistakes are made offering apologies de-escalate a situation and demonstrate action.



Spaulding Rehabilitation in Cambridge uses their “fishbowl” space to post both positive and negative comments plus cards and letters

Word Clouds

Gather key words from positive comments for unit.

Word Cloud Generators:
wordart.com

Add framework around word cloud indicating unit and hospital and generate a printable PDF.

Send PDF to print vendor to create poster-sized version for units

What our patients are saying about...
Usen 4

Mass General Brigham
Newton-Wellesley Hospital

Celebrating Patient Experience Week, 2021



Sharing and celebrating
feedback at the
entity/hospital level



Broadcast emails

Create a standing feature in your entity-wide newsletter to share positive patient feedback.

From: MVH Things To Know <thingstoknowmvh@PARTNERS.ORG>
Sent: Thursday, October 14, 2021 6:59 PM
Subject: Things to Know - October 14



October 14, 2021

Patient Experience Spotlight

Check out how our NPS score is trending over the last 4 weeks! We've received **1,123 responses** over this period of time.

The Net Promoter Score (NPS) represents the likelihood of a patient to recommend our facility to family and friends.

NET PROMOTER SCORE

81.7 n=1,123



Patient Experience Feedback

[ICU Team] *"Other than the fact that I was experiencing an emergency medical episode, my experience at MVH was wonderful!! The kindness and attention I received were nothing short of astounding compared to me experiences in the past at other facilities. The medical care was thorough and I feel strong and ready to live my life!! Also, I am attuned to warning signs of a similar episode in the future. BRAVO!!!!!"*

[Acute Care Team] *"I was treated with respect. I felt I was in confident hands."*

[Infusion Team] *"All staff members are professional, caring knowledgeable and attentive. The nurses and nurse practitioner are excellent communicators and listeners, making a difficult experience nearly pleasurable."*

- Important: COVID-19 Vaccine Compliance
- Annual Education- Deadline Extended to January 3
- Joint Commission Practice Tips: Patient Identification
- Nominate a Colleague or a Team for a Pillars of Excellence Award!
- Congratulations Dr. Avinash Kambadakone
- Patient Experience Spotlight
- Learn About Degree and Certificate Programs

4 weeks! We've received **1,123 responses** over this period of time.

of a patient to recommend our facility to family and friends.



g an emergency medical episode, my experience at MVH was wonderful!! The of astounding compared to me experiences in the past at other facilities. The y to live my life!! Also, I am attuned to warning signs of a similar episode in the

was in confident hands."

aring knowledgeable and attentive. The nurses and nurse practitioner are ult experience nearly pleasurable."



Martha's Vineyard Hospital includes a Patient Experience Spotlight section in it's weekly "Things to Know" broadcast email.

Newsletters

Newsletters provide an opportunity to inform, celebrate and reflect on the impact of our initiatives

Incorporate positive patient feedback into newsletter spotlights to celebrate accomplishments and reinforce their value for those who worked hard to bring the initiative to life and encourage a sense of pride and team.



Making Rounds

News from the Newton-Wellesley Medical Group

Vaccine Clinic Updates

The State has allowed us to again supply dose 1 vaccines at the Tripadvisor site, and has given us a commitment for doses through April 7.

We invite staff, in any role, to volunteer in the Vaccine Clinic. Over 500 employees have signed up so far, but we still have many slots to fill for this upcoming week. Email NWHTAStaffing@partnershealthcare.onmicrosoft.com to be added to the distribution list to sign up for shifts. We guarantee it will be a great experience!

We would also like to extend a big thank you to _____ and _____ for their tremendous work to successfully launch the Clinic!

What Our Patients are Saying About the Vaccine Clinic:

"I was blown away by logistics. Everything was so well organized and smooth. A really pleasant experience that exceeded my expectations. I am really grateful for the organizers and the staff that made this possible. Thank you!"

"The staff was/is awesome. I am so grateful for them coming into work day after day amidst what is going on. Thank you."

"Super organized, quick, and efficient. A tremendous amount of thought and care was clearly put into making the process as simple and convenient as possible - starting from the signs leading you to free parking. I am truly grateful for every staff member and organizer that is a part of this effort. Thank you!"

SHC Patient Experience Newsletter

Sponsored by the SHC Patient Experience Committee

Find your strength.

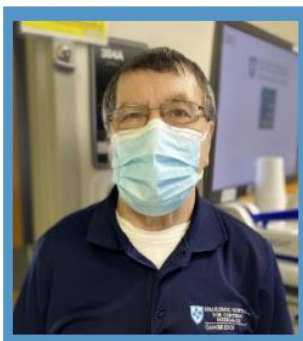


Find your strength.

DEPARTMENT SPOTLIGHT: ENVIRONMENTAL SERVICES

In this Winter edition of the Patient Experience newsletter, we want to recognize the environmental services (EVS) staff for the important work they do to keep Spaulding Cambridge a clean and safe place. We greatly appreciate all their hard work and

dedication during these uncertain times, and we would like to take the opportunity to express our gratitude. Throughout this newsletter, we have shared comments and feedback from our staff and patients.



" is always positive and is always there for you when you need help. There are numerous times when she has stopped what she was working on to assist with a clean-up or address a house keeping related issue. also helps on the 3rd floor by assisting staff with getting supplies/linens regarding patient care. Staff and patients throughout 3W value her energy and positivity." - 3 West staff



"I enjoy talking about non-medical stuff with the people who clean my room each day." - 2 West patient

" and do an excellent job with all of the room changes. They even helped move some of the patient's belongings with us while she was at HD. They are consistently checking in with us about admissions and discharges and being proactive in their work. Not to mention they are consistently friendly as heck!" - 2 South staff



" is always friendly, saying hello to everyone, which has been very much appreciated during these past months." - 3rd Floor staff

DEPARTMENT SPOTLIGHT: ENVIRONMENTAL SERVICES



"The housekeeping staff always very friendly and willing to help set up rooms for admissions. the bed guy is especially helpful when we need to switch beds out. He's always willing to educate staff about different types of mattresses and quickly come to fix beds when they break. is extremely friendly. He frequently brings Tessie into the 4south break room to ensure that it is clean for staff." -4 South staff

"Most of our patients look forward to seeing their housekeeper each day and our housekeeping staff look forward to seeing their patients as well." - 2 West staff

"The housekeeping staff are seen as part of the team, offering additional eyes and ears at bedside." - 2 West staff



We always know when and are on the floor everything will be under control even if it is tight window between discharge and admission, this team always makes sure the room is ready. - 3 West staff

I want to take this opportunity to express the appreciation I feel working with . They both will go above and beyond with their duties; the unit is always clean and organized. They are always happy and when you ask them for something they will get it done for you as soon as they can. - 3 South staff



Thank You EVS Team!

Daily Safety Huddles

Share patient feedback as part of the Daily Safety Huddle (DaSH).

Include commentary to frame the “lesson” in the comment.

Share the feedback to the teams/units where the comment came from so it can be circulated beyond the walls of the DaSH participants.

Remind DaSH participants to share the learning message to their staff.

Feedback from Our Patients

brought to you by the Office of Experience & Engagement
[8/11/21 DaSH Comment](#) | Patient Location: 6 West

I am happy to share a comment from a patient who recognized us for our exemplary demonstration of the E in our AIDET principles:

My experience at Newton Wellesley was extremely good! From when I entered the ER to when I was released, the care I received was excellent. Everyone I came into contact with went out of their way to explain what was going on, as well as the tests I was scheduled to take. They made sure I knew what to expect and helped me feel comfortable. The treatment I received was top notch! My thanks to everyone!

This comment goes to show that when we take the time to explain what is happening and what’s to come, our patients really recognize they are getting excellent care. Please remind your staff today to verbalize what they are doing in real time and explain what’s to come, so we can continue to receive positive feedback like this.



Town Halls

Share positive feedback as a regular feature in town halls.

Sharing this feedback from the President or other senior leaders reinforces our mission and values.

A culture that promotes praise and recognition must be reinforced from the top.

One of the fundamental roles of leadership is to create and maintain a culture that reinforces the company's core values, encourages employees to do the right thing, and helps drive the company's long-term strategy.

- *KPMG*

[Driving corporate culture from the top \(assets.kpmg\)](#)



Intranet/Internet


Create a positive feedback section on the intranet or internet, updating it regularly with fresh comments to keep staff coming back



PATIENTS AND VISITORS | PROGRAMS AND SERVICES | ABOUT BWFH

Patient Testimonials

In their own words, our patients tell us how much you care



Letters from our Patients and their Families

BWFH staff and employees often receive heartfelt thank you notes from the patients and families they serve. The letters below are devoted to featuring those special letters from patients and family members who have benefitted from the incredible compassion and expert skill of our superb staff.

Dear Brigham and Women's Faulkner Hospital,

Everyone that I was in contact with, the front desk, mammogram and ultrasound techs, doctors, were all exceptionally pleasant. They made me feel comfortable and were incredibly kind and warm. That is exactly what I hope for in healthcare, and not always is what I have experienced. This was a standout team and I hope they each are given the credit they deserve for their professionalism and kindness.

Celebration Weeks

[Check out some recent incredible feedback NWH has received from our patients - and thank you to our colleagues for providing such an outstanding patient experience!](#)

Stay tuned in to healthcare “celebration weeks” and opportunities to highlight related positive patient feedback

Slideshow of positive patient comments posted to intranet

Mass General Brigham
Newton-Wellesley Hospital


Celebrating Hospital Week and Nurses Week

Through our patients' voices, we celebrate our special community of committed professionals caring for our community and each other!


Hospital Week and Nurses Week, May 8-14, 2022

1 of 49


“Everyone at the Cancer Center is friendly, caring, knowledgeable and helpful ALL the time!!! The nurses always make me feel so much better when I come in about everything in my life. That’s the only good part about having cancer is that you get to go to the cancer center where you immediately feel beautiful and cared for.”

 Cancer Center

“The nursing care and attention was superb. Nurses were so attentive and quick to respond and they always address my needs perfectly. I was very impressed by the spirit of friendship and collaboration that they showed with patients as well as with each other.”

 3 West

“I would like to thank everyone who was involved in my care, from those who drove the ambulance, to those who treated me in the hospital and those who dropped me back. Every single person’s contribution counted in saving my life.”

 Emergency Department

Sharing and celebrating
feedback at the system
level



SNAPS program

[Home -The Pulse -
Mass General
Brigham](#)



[News & Updates](#)

[Send a Snap](#)

[Daily Broadcast Emails](#)



"Snaps" is an employee recognition tool for employees at Mass General Brigham. People do great work here every day, let's share it. Tag the person you're recognizing by entering '@' followed immediately by the person's first name, last name (select the name in the menu that will appear as you type).

Share a thought...



said 6 days ago



I would like to send a big THANK YOU and AWESOME WORK! ALLWAYS! to my team at RCO Coding

You guys ROCK! All the time!

Thank you!

1 Like Reply

1 comments

Thank you! I agree, we have an awesome team and an awesome Manager. 😊

Replied 5 days ago

Like Reply



Patient stories



Dayanara's story

A team-based approach leads to greater confidence for girl with Down syndrome

[Read more about Dayanara](#) →



Jack's story

Treating retinitis pigmentosa with ocular gene therapy

[Read more about Jack](#) →

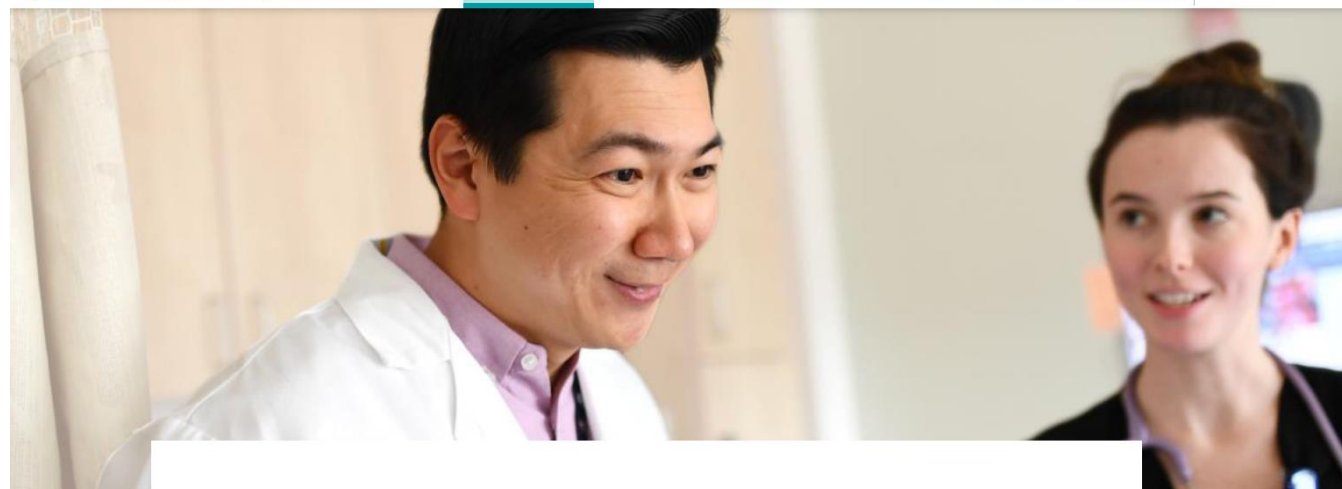


Morgan's story

Paralympic swimmer goes for gold after innovative amputations

[Read more about Morgan](#) →





Mission & Vision

At Mass General Brigham, our patients come first.

Mass General Brigham is committed to serving the community. We are dedicated to enhancing patient care, to teaching and research, and to taking a leadership role as an integrated health care system. We recognize that increasing value and continuously improving quality are essential to maintaining excellence.

Patient care

From routine care to the most complex cases, we offer comprehensive, full-circle clinical care to our patients, starting and ending at home.

Research and discovery

Because we are built on a legacy of medical discovery, our researchers push the boundaries of knowledge and advance medicine in new and innovative ways.

Teaching

We have over 100 accredited physician residency and fellowship programs, and over 2,000 trainees preparing to be the healers of tomorrow.

Community

We have five licensed and 15 affiliated community health centers. In 2018, we invested \$205 million in community benefits, which includes investments in our licensed health centers, programs to respond to needs identified in our [community health needs assessments](#), and our system's commitment to the Health Safety Net program. We have diverse community partnerships to support our local residents.

Alignment with our Mission

We can strengthen that sense of pride we all feel in ourselves, our teams, our organizations and our system when we understand the impact we have.

And that understanding is enhanced through the voices of our patients and one another and through the power of sharing our positive feedback.





Mass General Brigham