Pediatric Collaboartive Executive Summary

NRC Health is committed to helping healthcare organizations illuminate and improve the moments that matter to pediatric patients, families, nurses, and physicians. In February, NRC Health hosted a Pediatric Collaborative at Phoenix Children's Hospital. Below is a recap of the highlights from the event which included patient experience experts, CEOs, CXOs, and physicians.

Building a Strong Brand through Culture: Defining, Protecting and Perpetuating

Texas Scottish Rite Hospital for Children

Kerry Wilder, Director, Quality & Performance & Stacie Bukowsky, Director, **Pharmacy Services**

Texas Scottish Rite Hospital for Children (TSRHC), an industry top performer on the physician communication composite, has a vibrant culture that embraces their core values of CARE RITE. The values are woven into all organizational aspects including orientation, behavioral expectations, peer-recognition and physician reward systems, and all interactions with patients, parents, and others.

Questions to determine if there is a strong alignment between the organization and its values:

- → Are our values, mission, and vision clearly stated?
- → Should we add, delete, or refine our core values?
- → Are our core values relevant today and for the future?
- → Do we have the right core values?
- → Do our values adequetly represent our brand?

TSRHC described using a didactic, interdisciplinary Pre-Op (Monday evening) and Post-Op (Friday morning) meetings to allow everyone a voice within an open, transparent and respectful forum. Upcoming patient cases are reviewed at the Monday meeting and a Grand Rounds format is used for the Friday meeting where the team discusses what worked, what didn't, and why?

The importance of communication is evident not only within internal meetings but also with families. To facilitate a sense of comfort, three questions during each physician-patient encounter are used:

Physician/Family Engagement

- → What, from your point of view, matters most?
- → What 3 things do you need before you leave?
- \rightarrow Do you need more time to think about "our" decision?

This deeper collaboration encourages shared decision making and frames the conversation around "we" versus "I". Prior to closing the encounter, the provider asks if there are any further questions. If not, the clinician further prompts: "If I were you, some things I might want to know..." or "If I were going through this, I would want to ask..." This helps the family to think through their questions proactively and gently addressing barriers/fears without feeling rushed.

Provider collaboration

"This deeper collaboration encourages shared decision making and frames the conversation around "we" versus "I". "

Driving Staff Engagement in the Emergency Department with Patient Experience

BalyorScott & White McLane Children's Hospital

Dr. Dominic Lucia, Medical Director & Attending Faculty

McLane Children's Hospital (MCH) has dramatically accelerated their improvement curve by raising the "Overall Rating" score by 15% postive points within one quarter. However, before achieving this improvement there were a lot of changes at MCH including becoming the only children's hospital during a system merger, an EMR conversion, Emergency Department (ED) volumes doubling, and their scores trending downward. In July 2016, the system adopted a goal to improve the overall ED experience. It was discovered that patient experience scores weren't consistently discussed in daily huddles. Dr. Lucia knew this needed changed to monitor, respond, and increase their results.

The improvement journey began by adopting consistency during the ED daily huddles. Huddles last five minutes and cover their Five Pilars: People, Quality/ Safety, Service, Finance, and Ideas. The CEO and CNO join one of the daily huddles each month to hear how things are going, ask questions, and ensure staff have the resources to perform successfully ("Gemba Walks").

MCH also formed an interdisciplinary TEAm to raise scores. The TEAm is similar to a tea bag in water. Members should be viewed by peers as leaders who disseminate information. All areas were represented (e.g., nurses, residents, respiratory therapists). The first meeting included role introductions and how each impacted the patient and family experience. Reviewing the comments report, everyone was surprised at the magnitude of positive feedback which helped build group alignment. The TEAm unified to create an ED Core Values Statement.

The Core Values Statement was posted on a white board for feedback before the TEAm determined the final statement. The ED Values statement became: "We strive to treat every child as if they were our own." Additionally, here were 7 core principles developed and shared with the department as part of the implementation. Today, the Core Values Statement is posted in breakrooms, patient and family waiting rooms, and patient care rooms. Everyone is accountable to upholding the Values with patients and families. Full transparency was important to the success. For the past 9 months, the TEAm has met monthly and sustained 10 points of their improvement using this approach.

1–7 Core Principles developed for the Core Values Statement 365 days per year everyone is accountable to upholding the core values.

The improvement journey

"Huddles last five minutes and cover their Five Pilars: People, Quality/ Safety, Service, Finance, and Ideas."

A responsibility to patients

"Today, the Core Values Statement is posted in breakrooms, patient and family waiting rooms, and patient care rooms. Everyone is accountable to upholding the Values with patients and families."

Human understanding

Generational Considerations for Understanding and Engaging Millennial Parents

NRC Health

Megan Charko, Program Manager for Pediatrics

The 75.4 million Millennials in the United States are a key market segment for hospitals. 39% without children lack a primary care provider and 11% lack a pediatrician. Once engaged, they are a more loyal generation which has the potential to drive an organization's market share.

Beyond the negative connotations, this generation has many positive attributes.

True Millennial Characteristics

→ Digital Natives

- → Strives for healthy lifestyles
- → Wants to participate in marketing
- → Seeks peer affirmation
- → Embracers of authentic cause marketing and aligns to brands with a purpose
- → Hooked on social media (similar to older generations using email at work).

Millennial parents use the online environment first when looking for a provider or a children's hospital and use social media for insight even before receiving a doctor's referral. Increasing the organization's social media presence is key for this generation. Millennial parents also utilize hospital websites with their highest priority items as payment/billing information and ratings/reviews from other patients and families. They want online access for booking children's appointments and medical records information. These elements are the first impressions that provide a positive experience before entering the four walls of a healthcare organization.

Once a provider or hospital is selected, this generation is looking for a personalized experience for their family to engage with them in both sick and well care by offering healthy living, child development, and parenting classes. Millennials identify with four competitive factors for hospitals--communication, environment, personality, and reputation. These parents are looking staff to have a smiling face, communicate at eye level with age-appropriate instruction, have bright colors on the walls, and a reputation for treating children congenially similar to when they speak with friends.

75.4 million Millennials in the United States 39% children of Millennials lacking a primary care provider

A personalized experience

"Millennials identify with four competitive factors for hospitals--communication, environment, personality, and reputation."

Understanding the Patient in Real-Time: Physician Feedback, Mentoring, and Development

Phoenix Children's Hospital

Dr. Steven Spalding, Chief Clinical Integration & Medical Officer

Dr. Steven Spalding, Chief Clinical Integration & Medical Officer at Phoenix Children's Hospital (PCH), highlighted their successes of using the NRC Health Real Time solution to drive transformation. Data rapidity and information transparency has accelerated their improvement. Dr. Spalding stated, "Transparency isn't easy in healthcare, we don't do well with it. We need to do it and do it fast."

PCH shares division/provider comparison reports quarterly and allows providers access to their Real Time results. Full transparency has enabled higher levels ofperformance and allows for peer comparisons. Early during adoption, leadership encouraged non-judgemental conversations to collectively unite around the patient's best interests and facilitated collaboration between peers and divisions. As a result, PCH saw their lower performers asking for help and wanting to improve.

PCH celebrates their top performers by listing their top quartile providers in physician breakrooms, patient waiting areas, and on Facebook. Leadership sends thank-you notes to the top quartile, demonstrating top-down support to make changes as a partnership. In 2016, a physician incentive program was added with a 2.5% bonus per provider if the division performance rose above the median. By year end 2016, 14 of 17 divisions achieved bonuses.

By PCH having the winning combination of executive support, rapid and transparent data, and patient experience data alignment with provider incentives, it produced an accelerated and sustainable gain of more than 8.5% positive points in their "Overall Rating of Providers".

Driving transformation

"Transparency isn't easy in healthcare, we don't do well with it. We need to do it and do it fast."

Celebrating top performers

"In 2016, a physician incentive program was added with a 2.5% bonus per provider if the division performance rose above the median. By year end 2016, 14 of 17 divisions achieved bonuses."

Join the Conversation

NRC is dedicated to the pursuit of shared learning and collaboration. Join the conversation at one of our upcoming events. Visit nrchealth.com/events



Pediatric Collaborative Presentation Roadmap for Organizations

Building a Strong Brand Through Culture: Defining, Protecting and Perpetuating	Driving Staff Engagement in the ED with Patient Experience Data
 Questions to assess organizational alignment with Core Values: → Are our values, mission, and vision clearly stated? → Are our core values relevant today and for the future? 	Patient Experience Team (Department level): Registration,Respiratory Therapist, Nurses, Residents, senior leadershiprepresentativeAgenda for the first Patient Experience Team (PET) Meeting:
 Do we have the right core values? Should we add, delete, or refine our core values? Do our values adequately represent our brand? 	 Read patient comments (good and bad). Discuss individual roles and relevance to patient (e.g. registration makes the first impression). Discuss the purpose of the TEAm.
 Physician Questions for Building Patient Engagement within the Encounter → What, from your point of view, matters most? → What 3 things do you need before you leave? → Do you need more time to think about our decision? 	 Discuss the purpose of the TEAM. Discuss how meeting information will be spread to colleagues. Review and discuss Data Trends from the past 12 months. Create a culture of awareness and recognition of what families are saying.
Generational Considerations for Understanding and Engaging Millennial Parents	Understanding the Patient in Real-Time: Physician Feedback, Mentoring, and Development
 Marketing to Millennials: "Digital natives", hooked on social media: Focus efforts online and especially on social media. Strive for healthy lifestyles: What healthy snacks are available? They desire marketing participation: Include in conversations. Reputation is key. Know your online presence and what's being said. 	 Transparency at All Levels: Data transparency helps create internal collaboration. Monthly: Provider Comparison Reports (with names) at departmental division meetings. Ouarterly: Division Comparison Reports in All-division Chief meetings Posting of top-quartile performers: Physician lounges, patient waiting rooms, and hospital Facebook page.
 Experience Facility: Provide distractions for the sick child and siblings. Use good communication: Listen, be respectful, and build rapport with the entire family. Have a strong family focus: Respite rooms, Classes (e.g. Parenting, Healthy Living). 	 Organizational Communication around Performance: Foster open and non-judgmental conversations around the data. → Celebrate top performers. → Have an open discussion with lower performers. Performance Incentives: Provider bonus is tied to division level performance.