

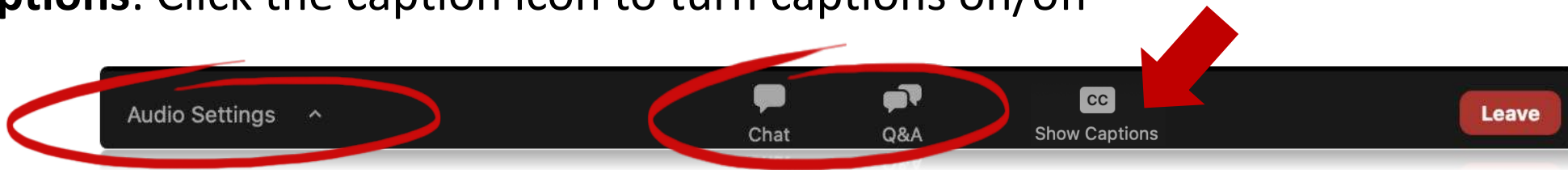


# Impact of Improving Quality of Care on Patient Experience in Emergency Department

July 6, 2023

# Housekeeping

- All participants are muted.
- **Audio Settings:** ability to select your speakers and adjust your volume.
- **Chat:** for sharing of ideas, interacting with speakers and attendees; not for promoting services and products. Make sure you choose '**Everyone**' in the dropdown in the chat box.
- **Q&A:** for submitting questions to review at the end of the webinar
- **Captions:** Click the caption icon to turn captions on/off



- Receive follow up email tomorrow with webinar slides, recording and link to survey.

# PX Continuing Education Credits

- This program is approved for 1 PXE.
- In order to obtain patient experience continuing education credit, participants must attend the program in its entirety and complete the evaluation within 30 days.
- The speakers do not have a relevant financial, professional, or personal relationship with a commercial interest producing health care goods/services related to this educational activity.
- No off-label use of products will be addressed during this educational activity.
- No products are available during this educational activity, which would indicate endorsement.

*This webinar is eligible for 1 patient experience continuing education (PXE) credit. Participants interested in receiving PXEs must complete the program survey within 30 days of attending the webinar. Participants can claim PXEs and print out PXE certificates through Patient Experience Institute. As an on demand webinar, it offers PXE for two (2) years from the live broadcast date.*





# FELLOW IN HUMAN EXPERIENCE

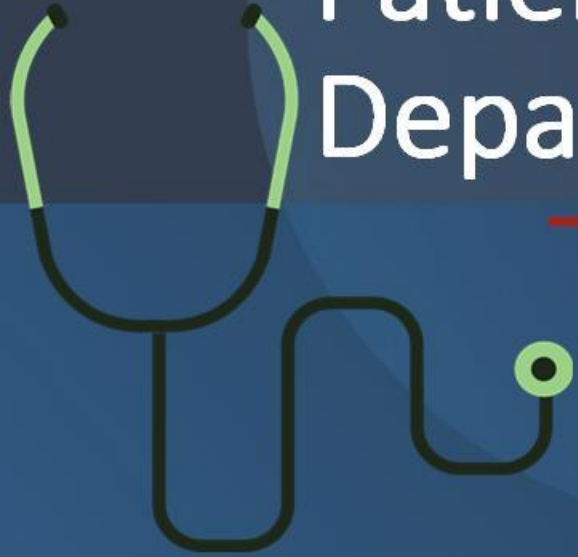
Distinguish yourself as a leading practitioner in the field of patient and human experience.

# Our Speaker



**Dr. Ahmed A. Abdelkawy, MQM, CPHQ, CHS, CPXP, FPCC, IHI Fellow**  
*Senior Consultant for Quality and Patient Experience*

# Impact of Improving Quality of Care on Patient experience in Emergency Department



# King Faisal Hospital Scope of Service (500 Bed Capacity)

*King Faisal Medical Complex -KFMC is the General hospital & trauma center in Taif city, so it has a large volume of patients.*

*Provides highly equipped ED covered services Physicians to cover 24 hours a day for 7 days a week.*

□ *Age group: Adult*



### Opportunity or Background:

- One of our strategic goal as Planetree certified organization is to monitor and follow up the patient experience measures in our hospital,
- Based on the Patient Experience Survey Report of Quarter 2 ,2022 we found drop in ED patient experience measures in these Domains: Arrival, Nurses , Physician & Personal Issues and increase in negative patient comments and complaints due to delay in ED journey.
- Increase complaints due to delay in care from patient perspective and increase DAMA rate in ED
- Also increase of non urgent cases % in ED which reflected on patient flow in ED and resulted in staff work overload.
- ED Indicator report shows decrease in compliance on MI thrombolytic therapy door to needle time on the month of July and significant decrease in compliance to sepsis bundle on the month of June 2022.

### Aim Statement:

The aim of this Project is to increase patient experience rate from 64% to 75% in the Emergency Department by the end of 2022.

### Key Measures:

Door to doctor	Less than 10 min	MOH program
Door to disposition	95%	MOH program
% of non urgent cases	Less than 33 %	MOH program
ED PX scores	75%	Best practice among MOH hospitals



# Find Opportunity



# Find Opportunity for Improvement

Data Source: Patient Experience Report (Press Ganey) Q2 (as of May) 2022 (baseline data)

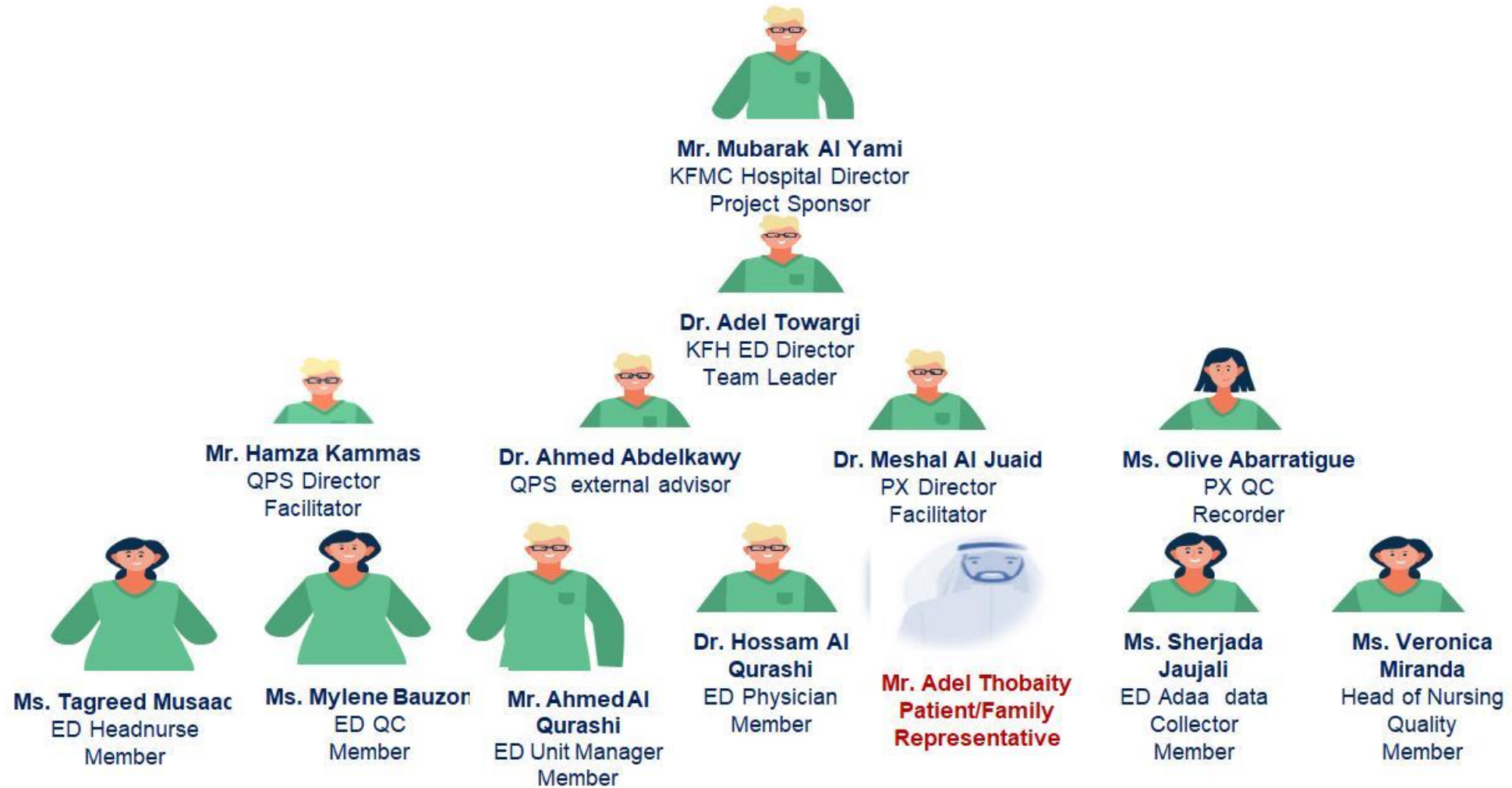


Domains	Q2 (may)	Q1	Diff
Arrival	51.12	61.3	-10.14
Nurses	67.5	73.6	-6.13
Physician	72.55	78.5	-5.91
Personal Issues	60.99	68.8	-7.84

# Organize Team



# Project Team



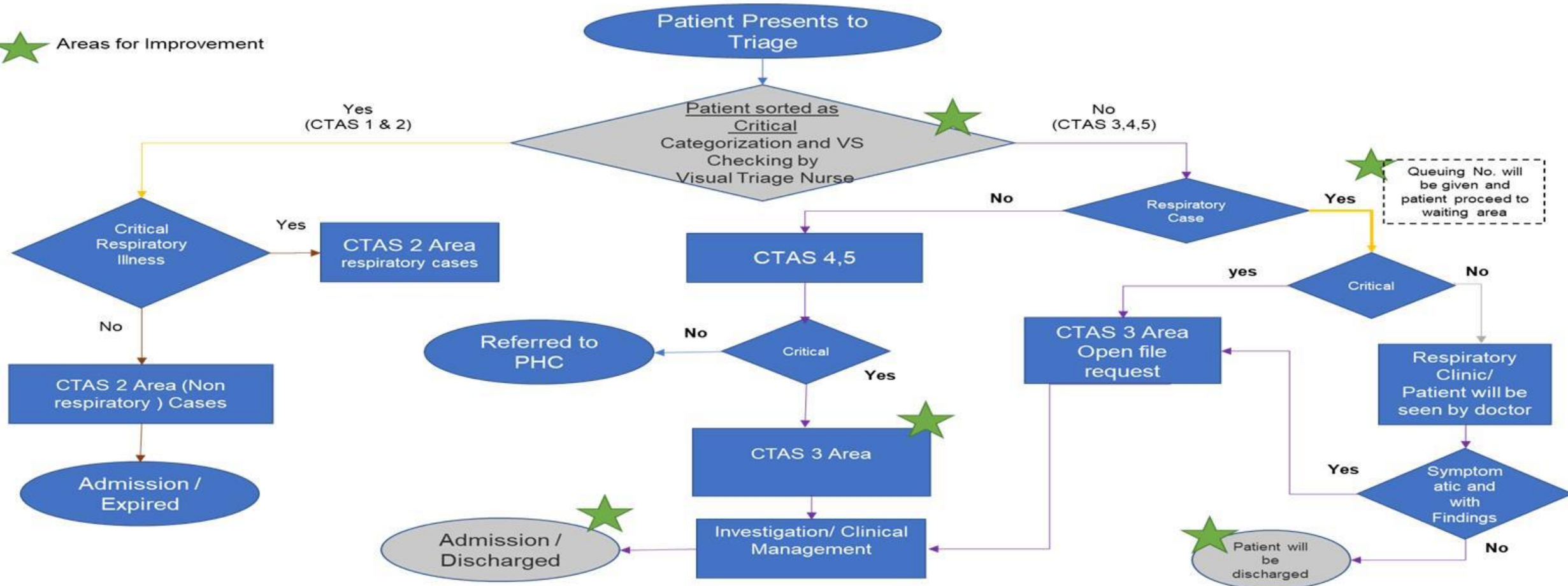
Dr.Ahmed A. Abdelkawy MQM , CPHQ, CHS, CPXP,FPCC,IHI Fellow

# Clarify The Process



# Current ED Process Mapping

★ Areas for Improvement



# Understand The Causes



# Understand The Process Variation

## Items related to defected Domains



Question	Domain	N-Size	Meanscore	Quarter 1, 2022	Δ
<b>Overall</b>		200	64.19	71.97	-7.78 ↓
Waiting time before staff noticed your arrival مدة الانتظار قبل انتباه الموظفين لوصولك	Arrival الوصول	206	56.06	68.39	-12.33 ↓
Comfort of the waiting area الراحة في منطقة الانتظار	Arrival الوصول	208	52.28	63.50	-11.22 ↓
Waiting time before you were brought to the treatment area مدة الانتظار قبل دخولك لمنطقة العلاج	Arrival الوصول	207	47.46	60.57	-13.11 ↓
Parking المواقف	Arrival الوصول	184	49.72	51.19	-1.47 ↓
Courtesy of the nurses اهتمام فريق التمريض	Nurses التمريض	196	66.58	74.39	-7.81 ↓
Degree to which the nurses took the time to listen to you إلى أي درجة حاول فريق التمريض الإصغاء إليك	Nurses التمريض	197	66.49	74.10	-7.61 ↓
Nurses' attention to your needs مراعاة فريق التمريض لاحتياجاتك	Nurses التمريض	200	64.37	70.80	-6.43 ↓
Nurses responses to your questions/concerns استجابة فريق التمريض للمخاوف والشكاوى التي أعربت عنها	Nurses التمريض	199	67.96	72.15	-4.19 ↓
Nurses' concern for your privacy مراعاة فريق التمريض لخصوصيتك	Nurses التمريض	198	71.33	76.65	-5.32 ↓

Arrival

Nurses

Report shows all items having decreased score as compared to previous quarter



# Understand The Process Variation

## Items related to defected Domains



### Physicians

### Personal Issues

Question	Domain	N-Size	Meanscore	Quarter 1, 2022	Δ
Courtesy of the doctor اهتمام الطبيب	Physician الطبيب	190	78.68	81.16	-2.48 ↓
Doctor's concern for your comfort while treating you حرص الطبيب على راحتك خلال علاجك	Physician الطبيب	191	69.63	76.65	-7.02 ↓
Degree to which the doctor took the time to listen to you مدى إصغاء الطبيب إليك	Physician الطبيب	194	73.71	80.50	-6.79 ↓
How well the doctors included you in decisions about your treatment مدى فهم الأطباء بإشراكك في القرارات الخاصة بعلاجك	Physician الطبيب	192	71.22	77.83	-6.61 ↓
Doctor's concern to keep you informed about your treatment حرص الطبيب بإطلاعك على تفاصيل علاجك	Physician الطبيب	193	71.24	76.33	-5.09 ↓
How well you were kept informed about delays مدى إخبارك بأي تأخير في الإجراءات	Personal Issues المسائل الشخصية	172	54.94	65.76	-10.82 ↓
How well your pain was controlled ما مدى السيطرة على شعورك بالألم	Personal Issues المسائل الشخصية	177	57.90	67.78	-9.88 ↓
Information you were given about caring for yourself at home (e.g., taking medications, getting follow-up medical care) (سبيل المثال: أخذ الدواء، الحصول على عناية طبية لاحقة)	Personal Issues المسائل الشخصية	171	70.90	73.03	-2.13 ↓

Report shows all items having decreased score as compared to previous quarter

# Identify the main causes

## Causes of Reduced Patient Experience Rate in ED King Faisal Hospital-Taif (KFH)

Brainstorming for the causes done by the team which involve patient representative



# Categorization of the causes

## Waiting time

- Ineffective ED triage system and unclear pathway
- Less efforts from the staff to inform patients about delays



## Patient comfort and convenience

- Unavailable parking spaces
- Uncomfortable waiting areas
- Ineffective pain management



## Behavior /communication skills

- Language barrier
- No enough time for nurse/doctor's patient interaction due to staff shortage
- Less compassion from the nurses
- Nurses feel less appreciated.

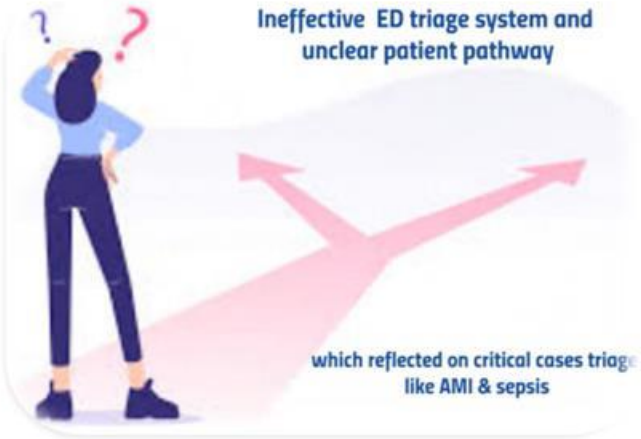


## Patient engagement efforts

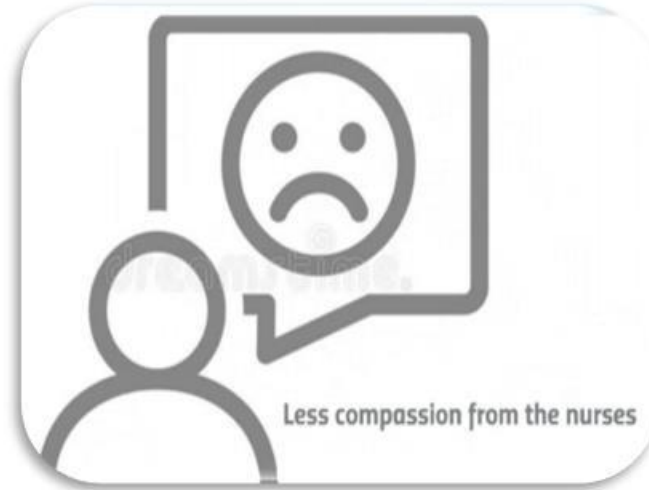
- Discharge instructions not clear
- Teach back methodology not fully practiced
- Lack of Doctors' orientation/ awareness regarding patient engagement practices & its importance



# Causes



# Causes



# Select Solutions



# Select Solutions

## Category

## Causes

## Suggested Solutions



**Behavior/Communication skills  
(Nurses and Doctors)**

- Language barrier
- No enough time for nurse/doctor -patient interaction due to work overload
- Less compassion from the nurses
- Nurses feel less appreciated

- Increase the manpower for nurses and doctors, thus increasing time for patient interaction
- To improve staff behavior and communication skills thru lectures, workshops and motivational activities and retreat program



**Patient's comfort and convenience**

- Unavailable parking spaces
- Uncomfortable waiting areas
- Ineffective pain management

- To rearrange patient waiting area
- Lectures / skills training on pain management for ED Doctors
- Adopt compassionate care program
- Utilization of Golf car in transporting patients from and to parking areas.



**Waiting Time**

- Ineffective ED triage system
- unclear patient pathway

- To reorganized triage process and patient pathway
- To increase ER beds, to accommodate more patients





**Patient Engagement Effort**

- Discharge instruction not clear
- Teach back methodology not fully practiced
- Doctor's poor decision-making skill in patients' management
- Doctors' poor orientation/awareness regarding patient engagement practices and its importance.



- Patient engagement and participation training programs
- Hourly rounding to patient which engages patient to their care

# Plan

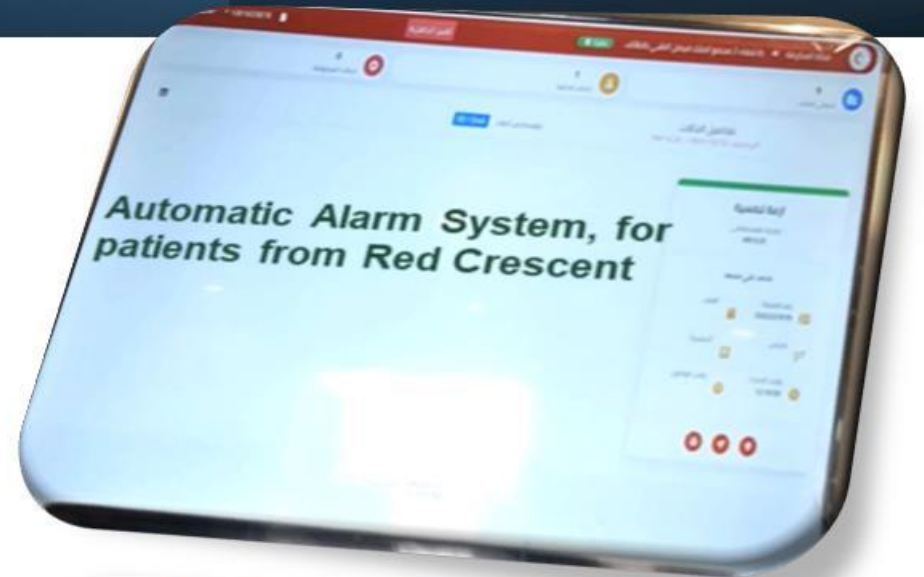
Domain	Significant Findings/Cause	Suggested Solution	Tasks	Responsible person	Timeline			
					W1	W2	W3	W4
Behavior/Communication skills (Nurses and Doctors) 	<ul style="list-style-type: none"> <li>Language barrier</li> <li>No enough time for nurse/doctor - patient interaction due to work overload</li> <li>Less compassion from the nurses</li> <li>Nurses feel less appreciated</li> <li>Less courtesy of Nurses</li> <li>Nurses less attention to patient needs</li> <li>Doctors less concern for patient's comfort while treating you</li> </ul>	Staff reorientation to PCC (Person Centered Care Standards) Adopt compassionate care program	To resume Nursing Quality Talks regarding PCC principles and standards.	ED Nursing QPS	→			
			Re orientation for Doctors regarding Person-centered Care Practices and Policies Activate staff retreat program	Medical Services/PX Director	→			
		Motivational activities for staff	Appreciation/ recognition programs for the staff	Hospital director ED head of department	→			
Patient's comfort and convenience 	Unavailable parking spaces	Utilization of Golf car in transporting patients from and to parking areas	To coordinate with golf care for patient transportation from parking to ED Availability of PX Staff assigned in ER, for immediate response to patients concerns	PX Director	→			
	Uncomfortable waiting areas	To rearrange patient waiting areas	Increase waiting areas and support with comfortable chairs Availability of PX Staff assigned in ER, for immediate response to patients concerns	ED director , PX director	→			
	Ineffective pain management	Relocation of procedure room Activate pain management training program	Increasing bed capacity of procedure room, to accommodate more patients like those for simple pain management procedures. Lectures / skills training on pain management for ED Doctors	ED Director	→			



# Plan

Domain	Significant Findings/Cause	Suggested Solution	Tasks	Responsible person	Timeline (June)			
					W1	W2	W3	W4
<b>Waiting Time</b> 	Ineffective ED triage system unclear patient pathway	<ul style="list-style-type: none"> <li>Modification in Triage System</li> <li>To reorganized triage process and patient pathway</li> <li>To increase ER beds, to accommodate more patients</li> </ul>	Relocation of VS area near the Triage counter, to facilitate immediate assessment, immediate decision whether patient will be accepted or referred to PHC.	ED Unit Manager	→			
			Trauma room beside triage counter (for immediate care to patients with simple trauma, like simple wound care or suturing.	ED Director	→			
			Relocation of procedure room, with increased bed capacity, to accommodate more patients who need simple procedures (no need to send patients inside Cat3, thus decreasing crowdedness)	ED Director	→			
		Enhance patient/community awareness regarding ED categorization	To create an educational or awareness video regarding ED triaging system, emphasizing the expected waiting time depending on patient category.	Patient Education Dep ED QC	→			
<b>Patient Engagement Effort</b> 	<ul style="list-style-type: none"> <li>Discharge instruction not clear</li> <li>Teach back methodology not fully practiced</li> <li>Doctor's poor decision-making skill in patients' management</li> <li>Doctors' poor orientation/awareness regarding patient engagement practices and its importance.</li> </ul>	Patient engagement and participation training programs	Activate training program for communication tools including ISBAR ,teach back and SDM	ED Director& PX director	→			
			Hourly rounding to patient which engages patient to their care	ED Director	→			

# Do



# Do

## Patient Educational And Awareness Materials

الطوارئ | وقت الانتظار

مجمع الملك فيصل الطبي بالطائف

### أولوية

#### دخول الحالات لقسم الطوارئ



- توقف القلب** توقف قلبي رئوي و تحتاج تدخل فوراً إلى الإنعاش
- حرجة جداً** انخفاض الضغط بصورة مهددة للحياة أو حوادث مميتة
- مستقرة** ارتفاع السكر والضغط او مرضى الاورام او القلب و العمليات
- مستقرة جداً** الصداع او الم الظهر او الزكام و الحرارة
- غير طارئة** فوات المواعيد او تأخرها و صرف الادوية

www.moh.gov.sa | 937 | SaudiMOH | MOHPortal | SaudiMOH | Saudi\_Moh



الطوارئ | وقت الانتظار

مجمع الملك فيصل الطبي بالطائف

### عزيزي المراجع

لا يوجد جدول للحالات ولا يمكن توقع عدد الحالات لان قسم الطواري يعمل على مدار الساعة ويستقبل كل الحالات

توجيهك للانتظار علامة جيدة بان حالتك مستقرة

خطورة الحالة تختلف عن تشخيص الحالة

هناك حالات تحتاج زمن أطول لعلاجهامثل الجلطات والحوادث وتوقف القلب

الزحام بسبب استقبال جميع الحالات



www.moh.gov.sa | 937 | SaudiMOH | MOHPortal | SaudiMOH | Saudi\_Moh

# Do

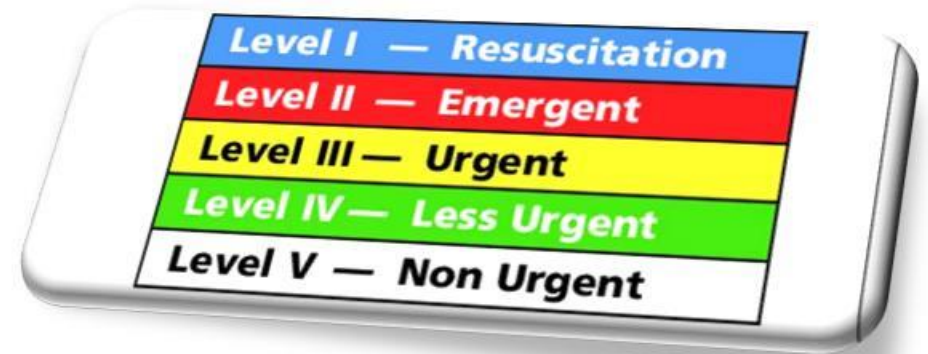


## Waiting area outside ED



# Do

- To create an educational or awareness video regarding ED triaging system, emphasizing the expected waiting time depending on patient category.



Canadian Triage and Acuity Scale

Discriminators used to establish the triage category of a visit

- Reasons for visiting the ED
- Vital signs
- 10-point patient-reported pain scale

CTAS scores	Recommended time to physician contact
1 Resuscitation	Immediate
2 Emergent	< 15 minutes
3 Urgent	30 minutes
4 Less urgent	60 minutes
5 Non-urgent	120 minutes

# Do

- Assigning additional waiting area for patients who are waiting to be shift inside Cat. 3



- Procedure room beside triage counter (for immediate care to patients with simple trauma, like simple wound care or suturing).

# Do

- Person Centered Care related Policy Orientation for the Doctors, emphasizing practices in improving patient/family engagement and teach back methodology.



# Do

- Person Centered Care related Policy Orientation for the Doctors, emphasizing practices in improving patient/family engagement and teach back methodology.



وزارة الصحة  
Ministry of Health

**PERSON CENTERED CARE PRACTICES (PCC)**

**What is Person Centered Care ?**

Providing care that is respectful of, and responsive to, individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions.

**• Patient preferred Practices •**

"YOU AND YOUR FAMILY HAS THE RIGHT TO BE INVOLVED IN YOUR PLAN OF CARE AND IN ANY DECISION MAKING, THIS WE ARE ENCOURAGING YOU TO PARTICIPATE, BE A PART OF THESE PRACTICES."

**1) Bedside shift Endorsement**

To include the patient and family as appropriate as active participants and contributors in the exchange of essential patient information between care team members.

**What to expect ?**

- You will feel more involved in your care
- Gives you and your family the opportunity to ask questions and clarify some concerns.
- Provides you a safer environment.
- You'll get to know who are your care providers.
- You will be able to communicate your own goal/choices/preferences.
- Your privacy will be considered thru out the process.

Advocate for own comfort level when discussion care

Clarify and correct

Ask question

Discuss your own goal to your provider.

Kindly inform your healthcare provider if you wish to participate during bedside shift reporting and in case you don't want to be awakened during sleeping. This information then will be reflected in your communication board.

**2) Access to your Medical Record Information**



You and your authorized family member has the right to access your real-time, in-progress personal health information during hospitalization.

You are encouraged to access this information, (eg. Laboratory results, x-rays result) with the assistance of your healthcare provider to provide you the necessary explanations in a manner that you can understand.

You as a patient as well as your family member has the right to receive any education that could help you manage your health.

Just inform your physician or anyone from your care team. Health education will be given in a manner that you can understand.

**3) Visitation**

Your family members/friends are allowed to visit you during your hospital stay, according to Hospital Visitation Policy. Rules for visitation must be followed and exceptions are considered outside visitation hours. Kindly approach our patient experience department for the permission card.

**We Care What Matters to You!!**

Your goal is our goal!

- It is your right to incorporate your own goal or personal preferences to your plan of care
- List your wishes in case of end of life/palliative care
- Talk to your Healthcare Provider and feel free to express your concerns
- Be part in decision making

**We personalize your care**

You have the right in your personal choices related to:

- Meal choices
- Sleeping time
- Bathing /personal grooming
- Appointment/Scheduling
- Personalize environment
- Spiritual /Cultural

**\*\* Discuss it with your healthcare provider.**

**Your own preferences are highly respected**



Your Health is our priority!  
Wishing and Praying for your fast recovery.

Kingdom of Saudi Arabia  
Contact: 920011167  
@kfmc\_t





وزارة الصحة  
Ministry of Health

**نحن نهتم بما يهمك !! هدفك هو هدفنا!**

من حلت دمج هدفك أو تفضيلاتك الشخصية في خطة الرعاية الخاصة بك، قائمة رايكيات في حالة نهاية الحياة / الرعاية الملطفة.

تحدث إلى مقدم الرعاية الصحية الخاص بك ولا تتردد في التعبير عن اهتماماتك.

كن جزءاً في صنع القرار

**نحن نقدم الرعاية الخاصة بك**

لديك الحق في اختيارك الشخصية المتعلقة بـ:

- اختيار الوجبات
- وقت النوم
- الاستحمام /العناية الشخصية
- جدولة المواعيد
- توفير البيئة الخاصة بك
- دعم النوادي الروحية وثقافية التي تناسبك
- ناقش مع مقدم الرعاية الصحية الخاص بك

**اختياراتك الخاصة تحظى باحترام كبير!**



هدفك هي اولويتنا! نتمنى لك شفاهة عاجلة

**2 الوصول إلى معلومات السجل الطبي الخاص بك**



\* بحق لك أنت وفرد أسرتك المعتمدين الوصول إلى معلوماتك الصحية الشخصية الجارية في الوقت الفعلي أثناء العمد في المستشفى.

\* نرحبكم على الوصول إلى هذه المعلومات التي تشمل: نتائج المختبر ونتائج الأشعة السينية بمساعدة مقدم الرعاية الصحية الخاص بك - لتزويد بالتفسيرات اللازمة بطريقة يمكنك فهمها.

نحن نشجعك على هذه المعلومات التي تشمل: نتائج المختبر ونتائج الأشعة السينية بمساعدة مقدم الرعاية الصحية الخاص بك - لتزويد بالتفسيرات اللازمة بطريقة يمكنك فهمها.

**3 التقييم والتقييم للتأهيل بجانب المريض**

نحن نشجعك على المشاركة في خطة الرعاية وفي المشاركة في أي قرار. ونحن نشجعك على المشاركة. تكون جزءاً من هذه الممارسات.

**4 التقييم والتقييم للتأهيل بجانب المريض**

نحن نشجعك على المشاركة في خطة الرعاية وفي المشاركة في أي قرار. ونحن نشجعك على المشاركة. تكون جزءاً من هذه الممارسات.

**5 التقييم والتقييم للتأهيل بجانب المريض**

نحن نشجعك على المشاركة في خطة الرعاية وفي المشاركة في أي قرار. ونحن نشجعك على المشاركة. تكون جزءاً من هذه الممارسات.

**ما هي الممارسات المرتكزة؟**

توفير الرعاية التي نلتزم ونستجيب لتطلعات المريض واحتياجاته وقيمته. ونضمن أن قيم المريض توجه جميع القرارات السريرية.

**• الممارسات المفضلة للمريض •**

\* أنت وملكك لدم الحق في المشاركة في خطة الرعاية وفي المشاركة في أي قرار. ونحن نشجعك على المشاركة. تكون جزءاً من هذه الممارسات.

**6 التقييم والتقييم للتأهيل بجانب المريض**

نحن نشجعك على المشاركة في خطة الرعاية وفي المشاركة في أي قرار. ونحن نشجعك على المشاركة. تكون جزءاً من هذه الممارسات.

Kingdom of Saudi Arabia  
Contact: 920011167  
@kfmc\_t



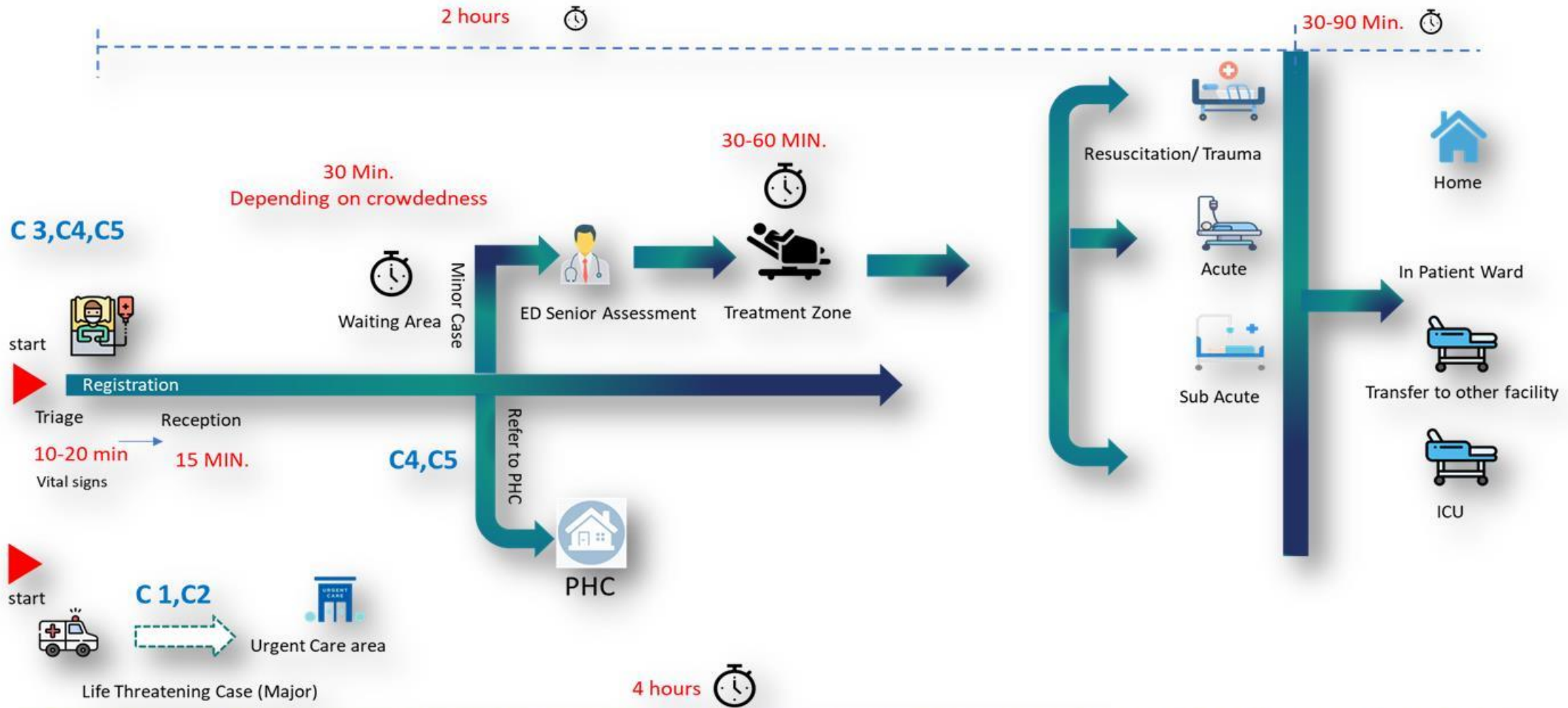
# Do



# Do



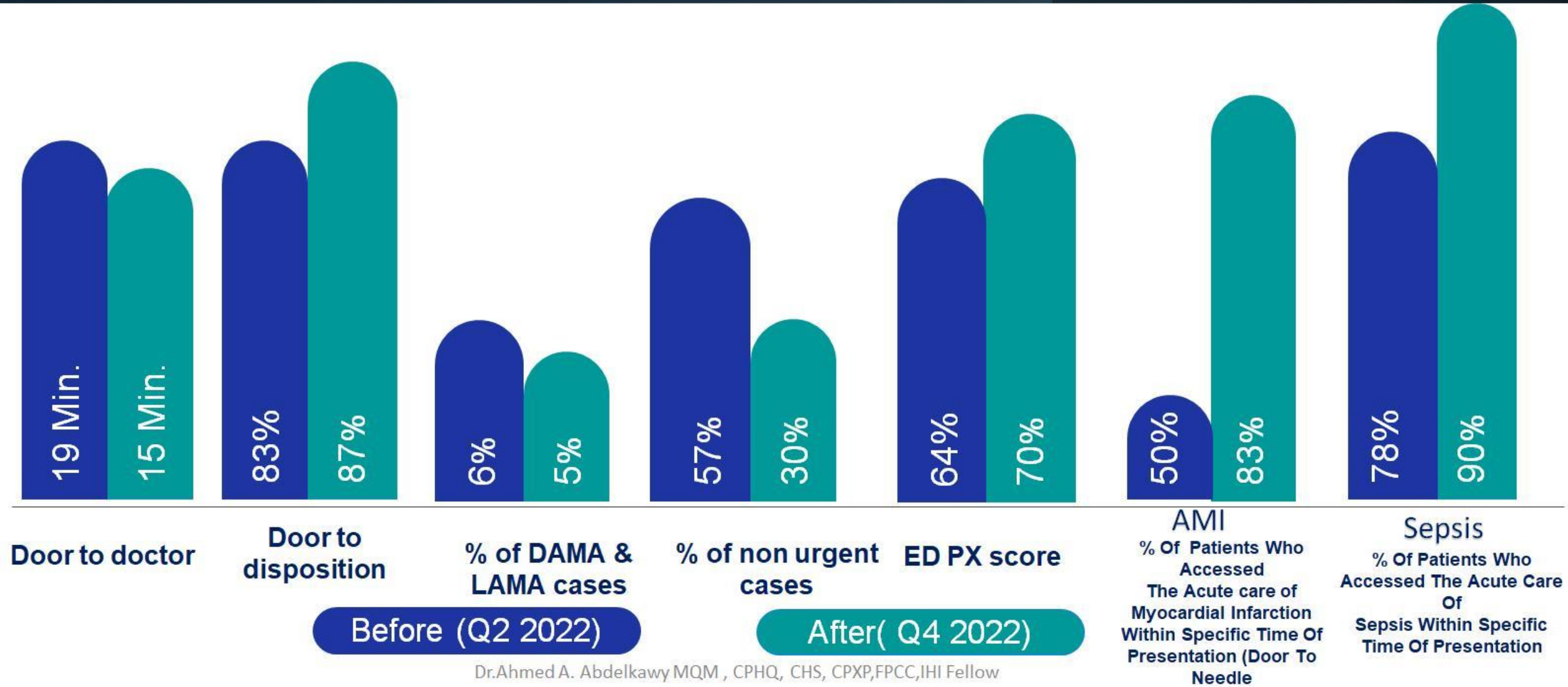
# MOH ED Patient Journey



# Check



# ED KPIs Measures



# Act



# Act



**Continuous monitoring of patient experience survey (Press Ganey) and ED Indicators**



**Regular rounds from the patient experience department.**

## Next Step



**Continuous monitoring of patient comments from Press Ganey and team members recognized by patients.**



**Regular rounds from the ED Head**



**Display of ED dashboard for transparency and awareness to patients and staff.**

# Lessons learned





# Lessons learned

01

**Display and distribution of patient materials**, data such as posters, and brochures in waiting rooms, exam rooms and throughout health system had impact on patient awareness and improve triaging system

02

**Using social media**, for patient awareness regarding the appropriate visits to ED department to decrease the rate of non-urgent cases

03

**The importance of partnerships**, between patient /families and healthcare providers improve patient communication and engagement.

04

**Collaboration:** Establishing strong relationships across organizations (as between KFMC and PHCs for handling non-urgent cases) was a key ingredient for successful collaboration.

05

Holding in-person **meetings with staff**, when possible, **leadership walk rounds, focus groups with staff and patients** improve engagement and patient experience.

06

Conducted **workshops and retreat programs on person centered care principles** had great effect on changing staff behavior and attitude and improve patient experience

Patients judge their experiences  
depending on how they are treated as  
persons and not how they are treated for  
their diseases

Fred Lee



*Congratulations!*

**FELLOW IN  
HUMAN EXPERIENCE**



# PX Continuing Education Credits

- This program is approved for 1 PXE
- In order to obtain PXE, participants must attend the program in its entirety and complete evaluation within 30 days.
- Use the PXE link at the end of the evaluation to claim PXE credit at the Patient Experience Institute's PXE Portal.

# Upcoming Events & Programs

## WEBINARS

July 11 | How Teamwork Improves Patient Experience in the Emergency Department

July 18 | Modern Strategies for Purposeful Rounding

July 25 | Storytelling and its Practical Influence

July 27 | Interconnectedness of the Human Experience: Building a Unified Vision for Healthcare Leadership

## CONNECTION CALLS/PX CHATS

July 12 | Volunteer Professionals Community Connection Call: Onboarding and Recruitment

July 19 | Ambulatory Care Community Connection Call – Effective Patient Experience Training in an Ambulatory Setting

July 31 | Patient Advocacy Community Connection Call: Protecting Mental Health

## PROGRAMS

July 13- August 3 | Foundations of Volunteer Management



Access our vast library  
of on demand patient  
experience webinars.

*Webinars are included in membership  
with the Institute.*



Thank you!