

The Patient Satisfaction Model

Produces Process-Oriented Excellence in Emergency Medicine

By Steve Okhravi, MD, MBA, CPE

July 17, 2012

One of the biggest challenges of an emergency department is how to improve patient satisfaction. It can hinder the hospital's reputation if negative. Alternately, if positive, a high rate of patient satisfaction can translate to higher staff morale. An overall high patient satisfaction rating supports and leads to (perpetuates) a better quality of patient care. Improvement in patient satisfaction also brings out a sense of pride for the staff that has worked so hard to achieve it. This can be achieved only with benchmarking best practices, improving staff customer service skills, promoting a healthy work environment, reducing complaints, providing prompt and safe care and reducing those left without being seen. There has to be a collaborative effort on all aspects of the above to achieve excellence in the emergency department.

Throughout the years, I have tested different methods and strategies as to how to improve patient satisfaction. Here are some methods that helped us to achieve high patient satisfaction in many of the emergency departments I had the privilege of holding leadership positions in:

Goal #1:

Improve Patient Satisfaction.

This has to be part of the improvement process and perhaps one of the final outcomes.

- Benchmark performance with best practices.
- Improve staff customer service skills. Institute Disney on stage/off stage strategy.
- Promote a healthy work environment and increase morale.
- Reduce complaints.
If you do the right thing; Address patient's concerns while trying to improve the process, the number of complaints *will* decrease.
- Provide prompt safe care.
- Reduce those *Left Without Being Seen* (LWBS).
The national benchmark is less than 2%. This can translate into how efficiently your department is operating and signals excellence in delivering quality care.

Goal #2:

Most importantly, to achieve Goal #1 is to build a cohesive, collaborative and capable team:

Develop solid partnerships with:

- Hospital Administration

- Medical Imaging
- Laboratory
- Registration
- Physicians
- Inpatient Units

Path to achieving Goal #1 + #2 mandates a dedicated Patient Satisfaction Strategy:

- Decreasing throughput time is equal to increased customer satisfaction. *Press Ganey*¹ has done extensive research and analysis to arrive at this conclusion.
- Implement Emergency Department (ED) best practices. Accepting variations in practices that are not part of the standard creates uncertainty in the care you deliver.
- Educate staff and improve work conditions. And, educate *why* this strategy is important.
- Listening and learning from others.

As part of our strategy, we had to adopt process changes:

- Charge Nurse Position: You need a navigator/coordinator to steer the ship other wise there would be too many chiefs and few Indians. Chaos will be prominent.
- Point-of-care testing helps to have a faster turnaround of lab results, which in turn improves throughput time.
- Bedside Triage: This strategy will help to expedite the care. Patients come in to see a provider when they are sick so treatment can start immediately; they'd rather wait for demographic information that can be obtained at the bedside.
- Promote a Healthy Environment.

This also requires embracing a culture change:

- Empowering everyone's ability and skills.
- Establishing Trust- Follow up with employees. They have to trust you are vested without secondary gain.
- Lead by example.
- Continuous feedback- Make sure employees are aware of progress and setbacks.
- Learn to thank and appreciate the staff.
- Reward successes and promote teamwork.

- Accountability.
Each person in their role has to be accountable and disciplined for the department to succeed.

Goal #3

Create a *Practice-wide Patient Focus*:

- How well was your pain controlled?
(Have a protocol not only to address the pain, but also a mechanism to reassess on a regular basis.)
- Chart review and elimination of practice variations.
(Practice Consistency, Accuracy and Documentation)
- How well did your nurse keep you informed of treatment?
- Did the Physician do a reevaluation prior to disposition?
- Did the Patient get call backs on daily basis?

Advocate Departmental Support:

- Nursing: admit to unit goal of 30 minutes, bed czar, managerial support, attending call back: If they don't come to see the patient within 30 minutes, patient will be sent to the floor with an expedited order.
- Primary care clinics: create opening slots for ED referrals.
- Patient registration: Standardize pre-registration and bedside registration.

Process Change Summary:

- Prompt care goal to be seen by provider in 15 minutes, disposition goal of 120 minutes.
- Interdepartmental meetings.
- Reinforce teamwork.
- Build relationships.
- Patient callbacks.

Benchmarks:

- Continue to grow volume by doing aggressive marketing.
- Continue to build relationships with other facilities to maximize the practice's referral capability.
- Stop outmigration and minimize transfers to other facilities.

Essential Strategy Overview:

- Process change is necessary for process improvement.
- Change in process is not always successful: Plan, Do, Check, Act.
- Organization support is critical to departmental success.
- Reinforcement is the key to compliance.
- Teamwork is the key to any success.
- Building relationships with your team members is an essential and integral part of the process.
- Reduce length of stay in the department.
This can be multi-factorial. You need to set turnaround time expectations.
- Optimize implementing quality care with evidence-based medicine and what is best for the patient.
- Listen and learn from others.
- Reduce morbidity and mortality.
- Compliance with core measures:
Studies show, hospitals that are compliant with core measures have improved mortality and morbidity.

In the final analysis, *Patient Satisfaction* is a self-fulfilling process of *excellence in emergency medicine*. Patients feel better, sooner, when they experience a high level of satisfaction in obtaining emergency medical care. The Patient Satisfaction Model practiced in the ER is just good medicine. And, everyone touched by this patient-centric process benefits from it.



Dr. Steve Okhravi, MD, MBA, CPE is the founder of Emergency Medical Care located at 200 Chambers Street, Tribeca, NYC. A 2nd facility has recently been added at 521 West 42nd Street in Midtown Manhattan. www.emcny.com

Dr. Okhravi deep credentials have made him the perfect candidate for creating and leading this novel Stand Alone ER facility--dedicated to the NYC communities that EMC serves. In his professional CV, you'll find an uncanny blend of healthcare practice, process and work flow savvy, along with exceptional hospital, ER and business management skills. Dr. Okhravi is also Certified as a SIX Sigma Black Belt. This convergence of skills formed EMCs best practices and Stand Alone ER healthcare knowledge based on *practical, progressive, efficient, and compassionate urgent care principles*.

1. <http://www.pressganey.com/index.aspx>