



## Magnet Improvement Planning Process Patient Experience Best Practices Tip Sheet

### Overview:

Patient Experience metrics are a required part of Nursing Sensitive Indicators (NSI's) to be submitted as evidence for our Magnet designation. In order to meet this requirement, we will need to submit evidence on four HCAHPS indicators:

- Nursing Respect and Courtesy
- Nursing Listening
- Nursing Explaining
- Pain Management

Improvement plans that address these indicators are also required as evidence for Magnet re-designation. The good news is that the best practices we are already working on are more than enough to help us reach our goals. Improvement plans can focus on ways to deepen or broaden use of these best practices.

### Improvement Planning Process:

1. Review your HCAHPS data and identify areas for improvement with the above selected indicators.
2. Conduct a performance analysis:
  - a. Comparison to benchmark – units need to be above the benchmark more than 50 percent of the time over 8 quarters.
  - b. Trend comparison – when setting goals, consider your trends over previous periods. Also note your high scores and low scores and any patterns over 8 quarters.
3. Identify strategies (action items) that can be effectively implemented to improve or sustain improvement – focus on best practices you are already working on.
4. Select timeframe for achieving benchmark indicators.

**Proven Best Practices: MGH already has a robust group of best practices that are likely to help you reach your goals. Consider your unit's work on the following. If your answer to a question is "NO," you might want to consider addressing that issue with a tactic or step in your improvement plan:**

#### 1. Discharge Phone Calls

- Do ARNs or assigned nurses call all patients discharged home within 72 hours?
- If yes, do they make two call attempts?
- Look at your connection rates – are there ways you could improve the rate by gathering contact information from patients as they are discharged?
- Do you review the monthly Discharge Call Report at your team meetings?
- Do you post the results on the Communication Board?

#### 2. Discharge Envelope and Patient Family Notebook

- Does your team give a Discharge Envelope and Patient Family Notebook to all patients admitted?
- Are patients informed of the purpose of the Discharge Envelope and Patient Family Notebook?

- Are patients and loved ones encouraged to write down their questions on the note pages provided in the Patient Family Notebook?
- Are these materials used by nurses and other clinicians during patient teaching?

### **3. Hourly Safety Rounding**

- Are hourly safety rounds being consistently done for every patient?
- Is the patient informed of the purpose of hourly safety rounding?
- Are nurses documenting rounds on the white boards when rounding?
- As the nurse director, do you periodically round to ensure that Hourly Safety Rounds are being done and that the applicable information is documented on the white boards?

### **4. Quiet Times**

- Is your unit conducting Quiet Times during daily and nightly designated times?
- Is signage posted at the entrance to the unit and hung in all patient rooms?
- Is an announcement made at the start of quiet times?
- Is there a cadre of champions for day and night shifts?
- Are families and visitors encouraged to observe Quiet Times?
- Are monthly unit Dashboards with quietness scores posted on your communication board?
- Are Quiet Times results discussed at team meetings?

### **5. Communication Boards**

- Is the Communication Board kept current and up-to-date?
- Are monthly unit results posted in a timely manner?
- Are results discussed in appropriate huddles or staff meetings?

### **6. White Boards**

- Are staff updating all information on the white boards?
- As the nurse director, do you perform leader rounds to ensure the white boards are current and complete?

### **7. Daily Huddles**

- At the start of each shift, does a leader from your unit have daily huddles to provide status updates and anticipated challenges?

#### **Resources:**

- The Service Team is available to assist with:
  - Data Interpretation and goal setting
  - Resources on best practices
    - Posters, cards, scripts, etc.
  - Training for staff
  - Assistance in preparing Patient Experience Improvement Plan