

Scenario Two: A Measure of Quality

The majority of hospitals conduct 'patient experience' surveys. You, in your leadership role, have been tasked with trending the results and sharing these with your teams. Some results are very positive however, a few common themes that emerge include:

- 1. Frontline staff not communicating effectively
- 2. Frontline staff not addressing concerns of the patient and family
- 3. Wait times are noted to be unacceptable despite being average in the province **You are tasked with creating an action plan to the address these concerns.**

1. Discuss the case in your group and identify the issue. *Scenario Three*

Understand what's happening in the units where there is an issue. Are shortcuts being taken, better understand the current state, compare units who are working well vs. those who aren't. Are different people entering this data? Was there a major change that happened in the hospital over the past few months (i.e. construction)

2. If we could improve the situation, what specifically would you like to improve?

Better understanding of current state for all issues. Create a culture to encourage improved hand hygiene compliance

3. How would we enact this improvement? (identify three key actions and consider what you will do, when, who will be engaged and how?)

3a) Action 1: What you will do?

Investigate what the patient concerns are - is there a link between that and the trends being reported

When?	Who will you engage?	How?
When the trend is noticed	PFAC HQO - standards Those who have incident reports	Review the stories behind the falls Meet with those who have had these issues (peer to peer conversation)

3b) Action 2: What you will do? Investigate the concerns with frontline staff - not just clinical, but beyond.



When? When the trend is noticed	Who will you engage?\ All levels of staff, all roles	How? Individual face to face Surveys Attend standing meetings	
3c) Action 3: What you will do? Create go-forward plan			
When? 30 days	Who will you engage? Patients Families Staff Senior leadership	How? Surveys and feedback from patients Training for staff including patients New staff orientation Examine the culture	
4. How will we measure success? 6 month checkback Check indicators Looping back with those who reported issues and seeing if there were any additional pieces after the time			

Thank you for lending your voice to the PACE Forum!