



March 7, 2024

NOTICE

The Board of Directors of the Kaweah Delta Health Care District will meet in an open Patient Experience Committee meeting at 4:00PM on Tuesday March 12, 2024, in the Kaweah Health Medical Center Executive Offices Conference Room – 305 W. Acequia Avenue – Acequia Wing, Visalia, CA.

All Kaweah Delta Health Care District regular board meeting and committee meeting notices and agendas are posted 72 hours prior to meetings (special meetings are posted 24 hours prior to meetings) in the Kaweah Health Medical Center, Mineral King Wing entry corridor between the Mineral King lobby and the Emergency Department waiting room.

The disclosable public records related to agendas are available for public inspection at Kaweah Health Medical Center – Acequia Wing, Executive Offices (Administration Department) {1st floor}, 400 West Mineral King Avenue, Visalia, CA and on the Kaweah Delta Health Care District web page <https://www.kaweahhealth.org>.

KAWEAH DELTA HEALTH CARE DISTRICT
David Francis, Secretary/Treasurer

A handwritten signature in black ink, appearing to read "Kelsie K. Davis".

Kelsie K. Davis
Board Clerk, Executive Assistant to CEO

DISTRIBUTION:
Governing Board
Legal Counsel
Executive Team
Chief of Staff

<http://www.kaweahhealth.org>



KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS PATIENT EXPERIENCE COMMITTEE

Kaweah Health Medical Center
305 W. Acequia Avenue, Executive Office Conference Room (1st Floor)

Tuesday, March 12, 2024

ATTENDING: Directors: Ambar Rodriguez & Mike Olmos; Gary Herbst, Chief Executive Officer; Keri Noeske, Chief Nursing Officer; Renee Lauck, Director of Imaging and Radiation Services; Amy Baker, Director of Renal Services; Kari Knudsen, Director of Post-Surgical Care; Emma Mozier, Director of Medical/Surgical; Deborah Volosin, Director of Community Engagement; Jennifer Cooper, Executive Assistant; Kelsie Davis, Recording

OPEN MEETING – 4:00PM

- 1. CALL TO ORDER –**
- 2. PUBLIC PARTICIPATION –** Members of the public may comment on agenda items before action is taken and after it is discussed by the Board. Each speaker will be allowed five minutes. Members of the public wishing to address the Board concerning items not on the agenda and within the jurisdictions of the Board are requested to identify themselves at this time. For those who are unable to attend the beginning of the Board meeting during the public participation segment but would like to address the Board, please contact the Board Clerk (Kelsie Davis 559-624-2330) or kedavis@kaweahhealth.org to make arrangements to address the Board.
- 3. PATIENT EXPERIENCE STATUS REPORTS –** Review of current scores, proposed action plans including timeline for proposed action and potential barriers to proposed action plans.
Renee Lauck, Director of Imaging and Radiation Services
Amy Baker, Director of Renal Services
Kari Knudsen, Director of Post-Surgical Care
Emma Mozier, Director of Medical/Surgical
- 4. STRATEGIC PLAN / PATIENT EXPERIENCE –** Review patient experience and community engagement.
Keri Noeske – Chief Nursing Officer, Deborah Volosin, Director of Community Engagement, Jennifer Cooper, Executive Assistant
- 5. ADJOURN –**

In compliance with the Americans with Disabilities Act, if you need special assistance to participate at this meeting, please contact the Board Clerk (559) 624-2330. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to the Kaweah Delta Health Care District Board of Directors meeting.

Mike Olmos – Zone I
Secretary/Treasurer

Lynn Havard Mirviss – Zone II
Vice President

Dean Levitan, MD –
Zone III
Board Member

David Francis – Zone IV
President

Ambar Rodriguez – Zone V
Board Member

MISSION: Health is our Passion. Excellence is our Focus. Compassion is our Promise.

Kaweah Health Imaging & Radiation Oncology

Patient Experience
March 4, 2024



kaweahhealth.org



PATIENT EXPERIENCE

Kaweah Health Health Imaging & Radiation Oncology Services

- Surveys are conducted through the National Research Company (NRC) for the Kaweah Health Diagnostic Center (KHDC), which include PET/CT and Cardiac Nuclear Medicine Services. Although noninvasive cardiology ultrasound is part of KHDC, this area is reported separately through Sequoia Cardiology leadership.
- Surveys at Kaweah Health Imaging & Breast Center (KHIBC) as well as SRCC radiation oncology are a manual process by having surveys available for all patients in these areas and staff handing patients surveys at the end of treatment at SRCC.
- Data analysis is completed internally for for KHIBC and SRCC
- Data is shared with leader and Chief Operating Officer of KHIBC and SRCC as well as sharing comments with staff at staff meetings.
- Benchmarks set through NRC are used for KHDC

KHDC, KHIBC, SRCC radiation Oncology Questions

NRC survey Kaweah Health Diagnostic Center PET/CT Cardiac Nuclear Medicine

- Was your check in helpful and courteous?
- Did your check in run smoothly?
- Was the facility clean?
- Were you given information prior to your appointment?
- Did you understand what was being scheduled?
- Would you recommend the facility?
- Were you told when you could expect results?
- Were you seen in a timely manner?

Kaweah Health Imaging & Breast Center Paper survey, ratings poor, satisfactory or very good

- Ease of scheduling initial appointment
- Professionalism and helpfulness of staff at sign in
- Length of time from sign in to registration
- Length of time from registration to exam
- Professionalism and helpfulness of Technologist/Nurse
- Professionalism and helpfulness of registration staff
- Professionalism and helpfulness of Physician
- Comfort and cleanliness of center
- Procedure explanation provided to you
- Support and encouragement provided to you by staff

SRCC Radiation Oncology Services

- Ease of scheduling initial appointment
- Professionalism and helpfulness of office staff
- Professionalism and helpfulness of nurses
- Professionalism and helpfulness of therapists
- Professionalism and helpfulness of LCSW or Dietitian
- Comfort and cleanliness of center
- Education provided to you
- Wait times for treatments
- Support and encouragement provided by staff



Human understanding

System Details | Location

QUESTION: NPS: Facility would recommend

Location	YTD	Last 3 Months	Last Month	n-size	Score	Bench mark	Gap
KHDC Nuclear Medicine	83.3	86.7	90.0	288	90.6	84.3	6.3
KHDC PET CT	84.3	87.0	83.3	501	89.6	84.3	5.3

	Check-in helpful and courteous	Check-in ran smoothly	Facility was clean	Given info prior to appt	Human Understanding	NPS: Facility would recommend	Told when to expect results	Were you seen timely manner
Grand Total	69.5 (n-size: 2,886)	75.0 (n-size: 2,820)	81.2 (n-size: 2,759)	59.9 (n-size: 2,883)	79.6 (n-size: 2,625)	84.6 (n-size: 2,579)	49.9 (n-size: 2,560)	68.0 (n-size: 2,844)
Kaweah Health Diagnostic Center	69.5 (n-size: 2,886)	75.0 (n-size: 2,820)	81.2 (n-size: 2,759)	59.9 (n-size: 2,883)	79.6 (n-size: 2,625)	84.6 (n-size: 2,579)	49.9 (n-size: 2,560)	68.0 (n-size: 2,844)
KHDC Non Invasive Cardiology	67.5 (n-size: 2,030)	73.2 (n-size: 1,977)	80.2 (n-size: 1,924)	56.1 (n-size: 2,019)	76.9 (n-size: 1,826)	82.2 (n-size: 1,790)	47.1 (n-size: 1,771)	65.6 (n-size: 1,996)
KHDC PET CT	73.8 (n-size: 549)	78.4 (n-size: 538)	83.8 (n-size: 532)	67.1 (n-size: 554)	85.6 (n-size: 507)	89.6 (n-size: 501)	53.9 (n-size: 497)	76.2 (n-size: 543)
KHDC Nuclear Medicine	75.6 (n-size: 307)	80.3 (n-size: 305)	82.8 (n-size: 303)	71.6 (n-size: 310)	86.0 (n-size: 292)	90.6 (n-size: 288)	60.3 (n-size: 292)	69.2 (n-size: 305)

SRCC	January - March 2023	April - June 2023	July - September 2023	October - December 2023
Ease of scheduling initial appt.	100%	100%	93%	100%
Education provided to you.	100%	100%	93%	100%
Support and encouragement provided by staff	100%	100%	100%	100%
			Did not hear back from Dietitian with appt. Video not relevant	
KHIBC	January - March 2023	April - June 2023	July - September 2023	October - December 2023
Ease of scheduling initial appt.	93%	96%	100%	90%
Education provided to you.	100%	100%	100%	100%
Support and encouragement provided by staff	100%	100%	100%	100%

PATIENT EXPERIENCE: NEXT STEPS

- ❖ Begin working on strategies to improve lower scoring areas through:
 - Working on lower scoring questions
 - Information given to patients (at times they can perceive what referring physician gives them as lacking)
 - timeliness of scheduling appointment. Have a new report coming out that will give us scheduling timelines
 - Information being shared with licensed staff about sharing when patient can expect results to be sent to the referring provider
- ❖ Continue to Monitor/Analyze results monthly
- ❖ Review positive comments with the team, encourage and support
- ❖ Review areas for improvement with the team



The pursuit of healthiness



Kaweah Health Medical Surgical

Patient Experience
March 12, 2024



kaweahhealth.org



Patient Experience

Medical-Surgical Inpatient units: 4S, 4N, 4T, 3S, 3N, BP, 2S, 2N

Inpatient units monitor the Net Promoter Score (NPS)- 'Would you recommend this hospital' as the primary benchmark metric of performance. NPS surveys are collected in real time by text, phone and email.

HCAHPS are also collected as required by CMS- these surveys are collected by mail, and the sample size tends to be low since return rate by mail is low.

Survey results are reviewed by Unit Leadership and Unit Based Council (UBC), improvement plans are implemented.

Net Promoter score Medical-Surgical Units



Medical Surgical - Net Promoter Score Fiscal Year to Date

Net Promoter Score (NPS)	Bench- mark	July 23	Aug 23	Sept 23	Oct 23	Nov 23	Dec 23	Jan 24	FYTD	FYTD <i>n</i> size
Broderick Pavilion- Net Promoter Score	83.2%	61.5	91.7	66.7	73.7	58.3	60	64.7	68.1	94
3North- Net Promoter Score	83.2%	42.9	46.9	41.4	53.6	65.5	47.6	44.4	49.2	185
4South- Net Promoter Score	83.2%	42.9	81	66.7	68	57.9	9.5	26.9	50	154
4North- Net Promoter Score	83.2%	50	70.6	30.8	77.8	87.5	21.4	60	54.3	94
4Tower- Net Promoter Score	83.2%	81	67.9	74.1	62.5	77.8	65.4	50	68.5	168
3South- Net Promoter Score	83.2%	69.2	27.3	63.6	35.7	61.1	54.2	15	47.9	146
2North- Net Promoter Score	83.2%	46.7	57.1	60	66.7	64	32.4	42.9	51.9	160
2South- Net Promoter Score	83.2%	80	-30	55.6	41.7	100	25	54.5	41.3	63
All Inpatient units- NPS	83.2%								58.6	1776

KEY

Within 10% of
goal/benchmark

>10% outside
goal/benchmark

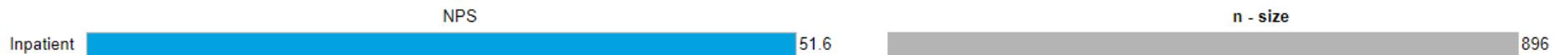
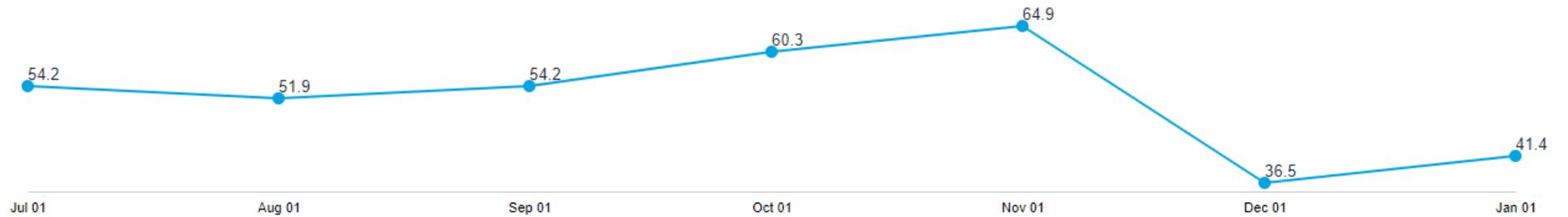
Outperforming/meeting
goal/benchmark



NPS FYTD Medical-Surgical combined score

NET PROMOTER SCORE

51.6 n-size: 896



HCAHPS FYTD- Medical-Surgical combined score

Organizational Goals

Nursing Communication- 79%

Physician Communication- 80%

Care Transitions- 55%

Responsiveness of Hospital Staff- 69%

Legend

 Outperforming/meeting benchmark

 Within 10% of benchmark

HCAHPS - Dimensions

Selected Period: 7/1/2023 - 1/31/2024

Previous Period: 12/1/2022 - 6/30/2023

Benchmark Quarter: Q4 2023

Start Date	End Date	Facility Name	Facility Group Name	Location Name	Location Group Name	Benchmark	Benchmark Quarter
7/1/2023	1/31/2024	Inpatient	Null	(Multiple values)	(All)	NRC Average	Q4 2023

Dimension	Previous Score	Current Score & Benchmark	Difference
Care Transitions	47.9%	53.0%  51.9% 	5.1%
Cleanliness / Quietness	64.1%	67.4%  63.6%	3.3%
Communication About Meds	64.7%	70.2%  60.8%	5.5%
Communication with Doctors	78.8%	79.9%  79.9% 	1.1%
Communication with Nurses	78.7%	80.7%  79.0% 	2.0%
Discharge Information	88.4%	88.7%  87.0%	0.3%
Overall Rating of Hospital	71.4%	72.3%  71.6%	0.9%
Responsiveness of Hospital Staff	64.7%	63.3%  62.7% 	-1.4%
Would Recommend Hospital	71.6%	74.6%  72.1% 14/28	3.0%

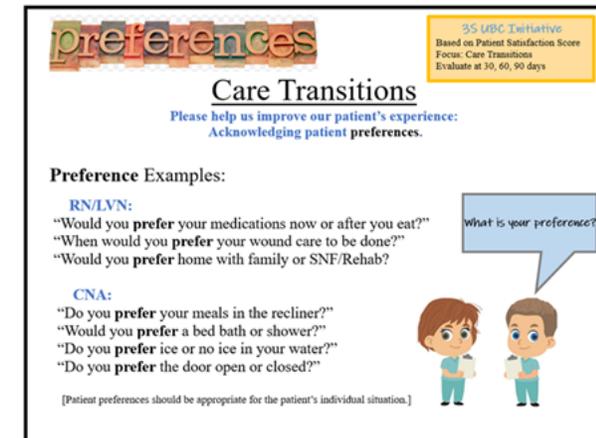
Current Initiatives

1. 3North- 30 Seconds to Impress- team members take an intentional pause before leaving the room to tidy up the patient's room
2. 4South- Welcome Folders and Medication Information Guides- Licensed Nurses review a welcome folder with new admissions and use a medication guide to focus conversations about newly ordered medications.
3. Broderick Pavilion- Room Round-Up- team members focus on room cleanliness
4. Multidisciplinary Rounds
5. Hourly Rounding



Current Initiatives

1. 2North- Quietness at night- Finding new ways to reduce noise at night
2. 2South- Improve cleanliness- Finding specific ways for each role to improve overall cleanliness on the unit and in the patient rooms.
3. 3South- Acknowledging patient preferences- Finding key phrases for each role to use when including the patient in their preferred ways to be included in care
4. House Supervisor Team- Putting into practice the techniques for thorough service recovery (Listen, Apologize, Solve, Thank, and added Ask: how do you feel, did we resolve your concern or have a plan?
5. Multidisciplinary Rounds
6. Hourly Rounding
7. All service recovery binders re-stocked and teams educated on how to use



Current Initiatives

1. 4North- Busy Box- to help reduce anxiety and provide resources for patient show have longer length of stays, we provide activities to keep patients occupied and provide some additional personal care items
2. 4Tower- Welcome Folders with Unit Introduction Letter- each patient will receive a welcome folder with introduction letter describing 4Tower, with unit leadership phone numbers
3. 4Tower- Safety Huddle- at the beginning of each shift the team will conduct a brief safety huddle to focus on patient safety and facilitate team communication
4. Multidisciplinary Rounds
5. Hourly Rounding



Patient Experience

Next Steps- All Medical- Surgical Units

1. Smile and Greet- reinvigorating initiative
2. NRC Compliments- sharing with staff as Kaweah Cares, weekly begins 3/1/24
3. NRC service alerts- timely response by leadership, begins 3/1/24
4. Lost Belongings alerts- prompt response by Administrative Assistant, begins 3/1/24
5. Human Understanding. Review of all Medical-Surgical units Priority Matrix for 1/1/23 to 12/31/23 reveals Human Understanding as the metric with the highest correlation to the net promoter score. The focus of our work this next year will center on the premise that *human connection is vital*.
 - Nursing Division Campaign: Time to Care: reducing inefficiencies in care to give clinical staff time back at the bedside, i.e. remove documentation barriers, reduce fetching, equipment barriers, etc.
 - Compassionate communication training
 - LAST training – Listen, Apologize, Solve, Thank

Daisy Award- patient recognition



The pursuit of healthiness

**Patient Experience
Board Committee
March 2024**





Kaweah Health Patient Experience Organization Goals

	GOAL	Q1			Q2			Q3			Q4			FY24 YTD
		July 2023	August 2023	September 2023	October 2023	November 2023	December 2023	January 2024	February 2024	March 2024	April 2024	May 2024	June 2024	
OVERALL - Net Promoter Scores														
Kaweah Health Overall - Net Promoter Score	83.2	78.6	77.2	77	76.4	78.4	76.7	80.4	82.2					78.4
Medical Clinics (Rural Health Clinics)		79.5	78.7	77.9	76.9	78.5	80	84.1	83.8					79.9
Inpatient Units		59.6	57.5	58.7	65	66.4	48.9	49	55.6					57.6
Specialty Clinics		85.2	79.7	82.8	77.7	83.9	79.9	84.9	87.3					82.7
Infusion Center		N/A	N/A	N/A	89.1	86.1	95.2	92.1	97.8					92.1
Diagnostic Center		90	84.5	81.4	83.2	87	86.3	82.6	88.3					85.4
Inpatient Rehabilitation		100	53.3	50	85.7	66.7	66.7	72.7	66.7					70.2
Outpatient Surgery		80.4	83.8	87.4	82.1	77	85.5	0	0					62.0
Outpatient Behavioral Health		76.5	83.5	69.3	80	63.6	78.8	77.1	71.2					75.0
HCAHPS														
Overall Hospital Rating	72	71.4	75	64.1	77.8	81	74	69.6						73.3
Would Recommend	71	68.8	70	63.2	76.9	84.5	77.8	72.2						73.3
Cleanliness														
HCAHPS Cleanliness (50th percentile)	66	60	63.4	69.1	71.8	73.9	71.3	73						68.9
Clinic Cleanliness - Consulting Specialty Clinics	81.8	84	79.4	84.6	79.2	85.3	85.3	82.2	77					82.1
Clinic Cleanliness - Medial Clinics	81.8	76	74.9	77	75.6	75	73.3	75.8	90.2					77.2
Communication and Transitions														
Nursing Communication (60th percentile)	79	77.5	79.9	73.8	86.7	88.8	85.2	86.2						82.6
Physician Communication (60th percentile)	80	82.2	79.5	83.2	81.1	83.6	80.9	82.5						81.9
Care Transitions (75th percentile)	55	49.9	60.2	39.6	56.6	50.7	52	48.3						51.0
Responsiveness of Hospital Staff (70th percentile)	69	71.1	65.4	69.6	78.1	65.8	70.5	72.4						70.4
KEY		Within 10% of goal/benchmark		>10% outside goal/benchmark		Outperforming/meeting goal/benchmark								

Project Updates

- Patient Stories
 - Provided to all leaders
 - Follow-up at 30 days- reminders for integration
 - Next Steps – integration of patient stories into meetings with patient care teams
 - Barrier – limited support for identifying and writing stories, challenging to keep up, will review with Patient Exp Steering Committee
 - Introduced sharing compliments through NRC platform to leaders

Project Updates

- Compassionate Communication Modules
 - Foundation Outline Complete – Org Development Team
 - Focusing on:
 - Empathy, Non-judgement, active listening
 - Identifying personal biases and assumptions
 - Barriers to showing compassion
 - Deepening Listening Skills
 - Compassionate Leadership (Already done in January Leader Learning module)
 - Practical Applications for Teams
 - Roll out in May (April has competing priorities, Feb and Mar to short a timeline for the Org Development workload)

Project Updates

- Wayfinding Improvements
 - New signage being developed – internal and external medical center
 - Labeling of parking lots to help with directions
 - Adding those parking lots with labels to Google Map directions
 - Visitor directions – adding signs and working with Pt Access staff on directions
 - Maintaining work on EVS and FNS projects
 - Re-evaluate with another survey in the spring after signage is complete

Project Updates

- Patient Experience
 - All surveying department will be participating in service alerts monitoring and calls back to patients by 3/1/24
 - All surveying areas presenting annually to Board Committee
 - Patient Experience Committee – begin drilling into reasons for lower scores based on NRC data, seek action plans as needed

Project Updates

- Next Projects
 - Service Recovery
 - Lost Belongings Prevention
 - Patient Navigation
 - Environment Enhancements
 - Engage Medical Staff – Physician Detractors focus

Foundations of Compassionate Communication

- Core Principles
 - Empathy, Non-Judgment, and Active Listening
 - Identifying Personal Biases and Assumptions
 - Kindness, compassion and support are part of the healing process
- Kaweah Care
 - "We care how we make others feel"
 - Compassion is our *superpower!*
 - Caring for our emotional needs, not just the physical need.
- Cleveland Clinic Video

Barriers to showing compassion

- Core Reasons
 - Emotional Exhaustion
 - Burnout
 - Time Constraints
 - Healthcare worker desensitization
 - Professional distance
 - Cultural and language barriers

Compassionate Listening

- Deepening Listening Skills
 - Listen to understand and not to respond
 - Listen to WHAT they say, rather than HOW they say it
 - Avoid assumptions: no one can read minds, so ask for an explanation
 - FACT: humans talk about 150 WPM, but listen at about 800 WPM
 - When we talk 93% involves tone and body language, and only 7% is what we actually say.

Conflict Resolution with Compassion (Leader Training)

- Compassionate Leadership
 - Leading with Empathy and Understanding
 - Creating a Compassionate Organizational Culture
 - Workplace Communication
 - Building Stronger Teams through Compassionate Interaction
 - Communicating Feedback with Sensitivity

Practical Application for Healthcare Workers (Nursing Training)

- Practical Ideas and Suggestions
 - We will all need healthcare in our lives, so NOW is our time that we paid forward
 - Commit to Sit - taking that extra time to sit with our patients, or coworkers, goes a long way to demonstrate that we care
 - Compassion towards each other – Patients are not always thankful, but we can showing gratitude and recognition to one another.
 - Psychological Safety - Having a supportive and environment, whether we're clinical or not, can show that our voices has heard and recognized
 - Compassion is at the heart of what we do in healthcare
 - Nursing school does not teach how to sit and listen to patients anymore, or how to rub a patient's back to show compassion.
 - Ken Schwartz Story