



May 23, 2022

## 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 Thursday June 02, 2022 in the Support Services Building Emerald Conference Room, 520 W. Mineral King Ave, 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 Delta 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.kawahhealth.org>.

KAWEAH DELTA HEALTH CARE DISTRICT  
Mike Olmos, Secretary/Treasurer

A handwritten signature in black ink that reads "Cindy Moccio". The signature is written in a cursive, flowing style.

Cindy Moccio  
Board Clerk, Executive Assistant to CEO

DISTRIBUTION:  
Governing Board  
Legal Counsel  
Executive Team  
Chief of Staff  
<http://www.kawahdelta.org>

# **PATIENT EXPERIENCE Agenda Open 6.2.22**

# **KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS**

## **PATIENT EXPERIENCE**

Thursday, June 2, 2022 - 4:00PM

Support Services Building Emerald Conference Room  
520 W. Mineral King Ave, Visalia, CA 93291

ATTENDING: Board Members; Dave Francis (Chair), Ambar Rodriguez; Gary Herbst, CEO; Dianne Cox, VP Chief of Human Resources; Ed Largoza, RN Director of Patient Experience; Keri Noeske, VP of Nursing; Steve Carstens, Medical Director of Physician Engagement and George Ortega, Recording.

### **OPEN MEETING – 4:00PM**

**CALL TO ORDER** – *Dave Francis, Committee Chair*

**PUBLIC / MEDICAL STAFF PARTICIPATION** – Members of the public wishing to address the Committee concerning items not on the agenda and within the subject matter jurisdiction of the Committee may step forward and are requested to identify themselves at this time. Members of the public or the medical staff may comment on agenda items after the item has been discussed by the Committee but before a Committee recommendation is decided. In either case, each speaker will be allowed five minutes.

1. **[Patient Experience Data: Fiscal Year 2022 \(July – March 2022\)](#)** – *Ed Largoza, Director of Patient Experience*

- 1.1. **Rehabilitation, Home Health CAHPS, Emergency Department, Clinician & Group CAHPS**
- 1.2. **Hospice CAHPS; & In-Center Hemodialysis CAHPS**
- 1.3. **Hospital CAHPS with trended graphs & unit performance**
- 1.4. **Positive Patient Comments - HCAHPS**
- 1.5. **Areas of Opportunity - HCAHPS**

2. **Patient & Community Experience Strategic Plan Updates**

- 2.1. **World-class Service** – *Ed Largoza, Director of Patient Experience*
- 2.2. **Physician Communication & Engagement** – *Dr. Steve Carstens, DO,*
- 2.3. **Nursing Communication**– *Keri Noeske, VP of Nursing*
- 2.4. **Enhancements of Systems and Environment** – *Ed Largoza, Director of Patient Experience*

3. **Adjourn Closed Meeting** – *Dave Francis, Committee Chair*

*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.*

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*Mike Olmos – Zone I*  
Secretary/Treasurer

*Lynn Havard Mirviss – Zone II*  
Vice President

*Garth Gipson – 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.**

## **PX Board Committee - June 2022**

# Patient Experience Board

*Delivering excellent care that is consistent,  
coordinated, and compassionate.*

June 2022

Providing World Class Service



[kawahhealth.org](https://www.kawahhealth.org)



# Rehab, Home Health, ED, CG Performance & Goals: July-March 2022

REHABILITATION	# OF SURVEYS	PERFORMANCE	GOAL
	60	94.6% (62 <sup>nd</sup> )	94.7% (was 75 <sup>th</sup> )
HOME HEALTH CAHPS	# OF SURVEYS	PERFORMANCE	GOAL
	250	86.0% (50 <sup>th</sup> -75 <sup>th</sup> ) [97.2% - 8s, 9s & 10s]	91% (90 <sup>th</sup> )
EMERGENCY DEPARTMENT	# OF SURVEYS	PERFORMANCE	GOAL
	469	66.3% (<50 <sup>th</sup> ) [80.0% - 8s, 9s & 10s]	70% (50 <sup>th</sup> )
CLINIC & GROUP CAHPS	# OF SURVEYS	PERFORMANCE	GOAL
	1789	79.5% (<50 <sup>th</sup> ) [92.3% - 8s, 9s & 10s]	84% (50 <sup>th</sup> )
Lindsay Rural Health	169	94.0%	
Woodlake Rural Health	155	91.0%	

## Hospice / ICH CAHPS Performance & Goals

HOSPICE	# OF SURVEYS	PERFORMANCE	GOAL
Jan 2021-Nov 2021	126	90.5% (>90 <sup>th</sup> )	88% (90 <sup>th</sup> )

IN-CENTER HEMODIALYSIS	# OF SURVEYS	PERFORMANCE	GOAL
Oct 2021-Jan 2022	18	72.2% (57 <sup>th</sup> )	86.7% (90 <sup>th</sup> )

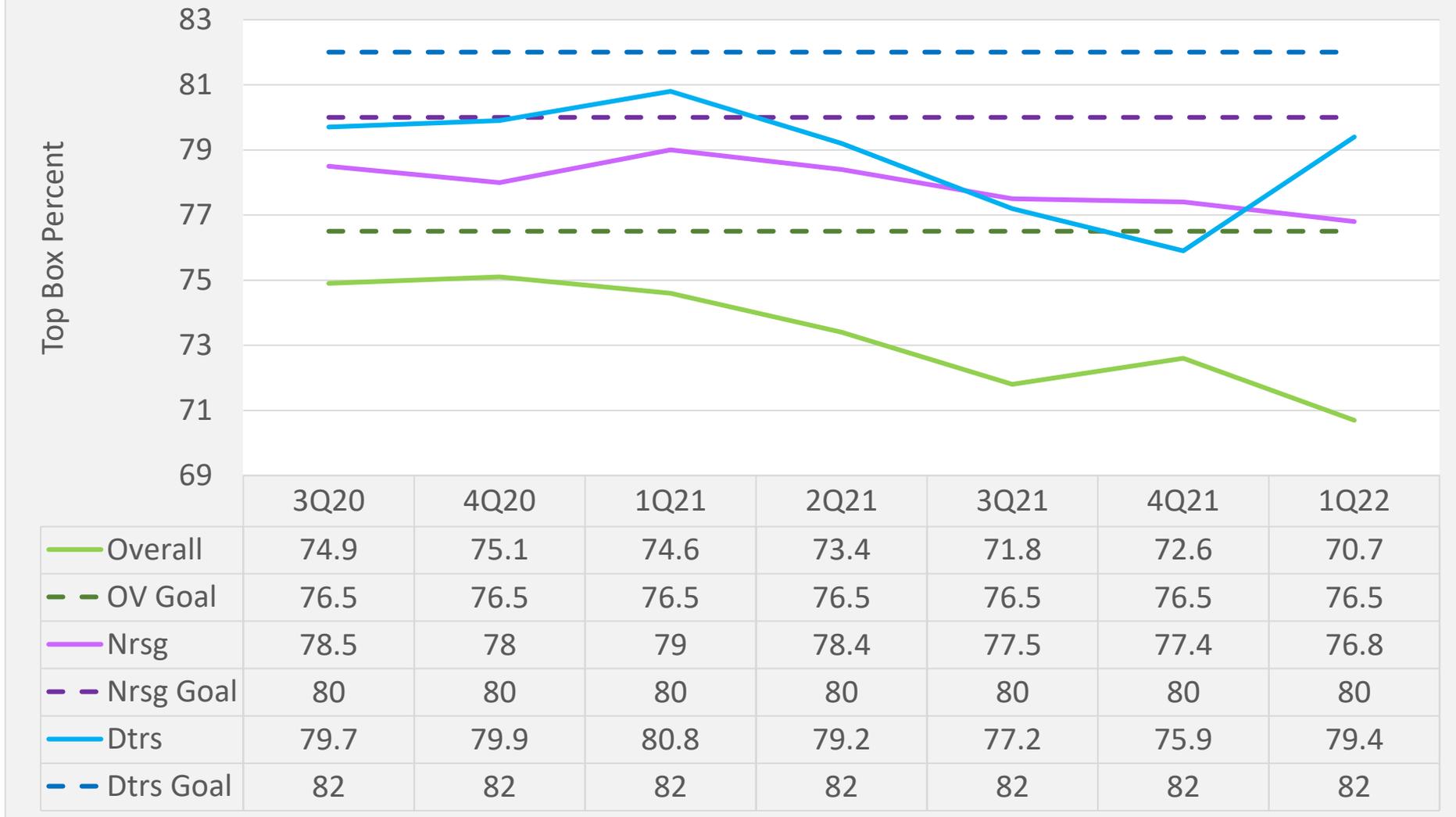
# Hospital CAHPS Performance & Goals: July-March 2022

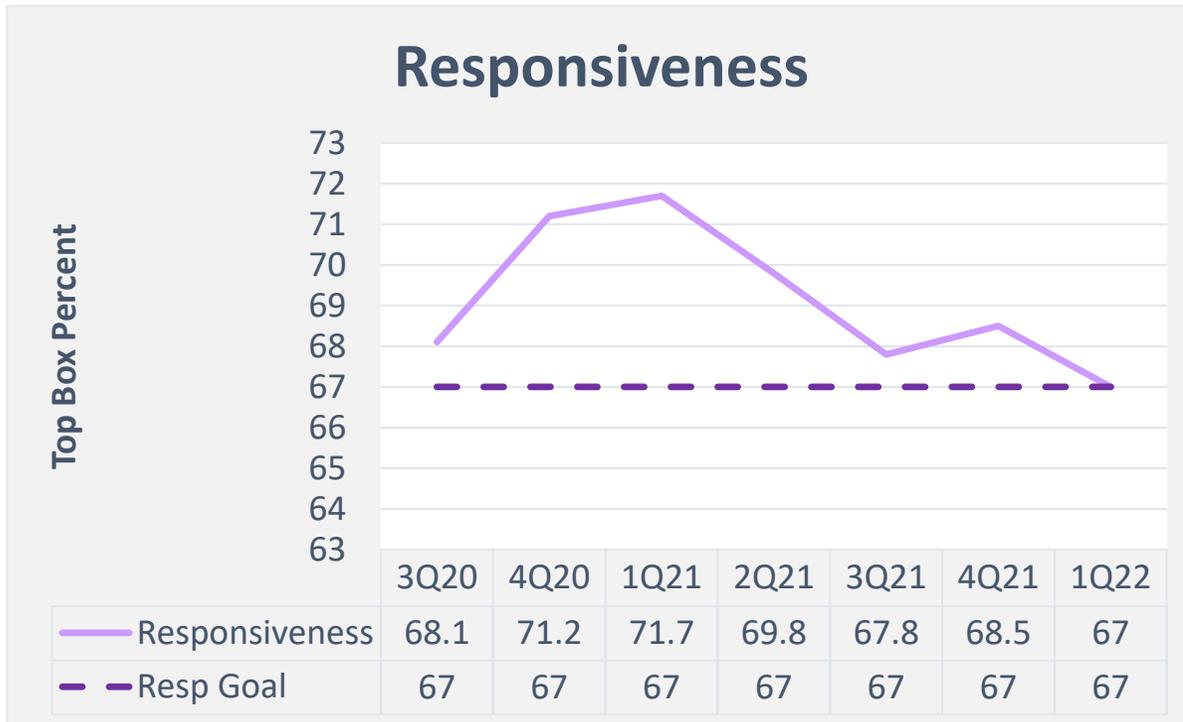
Hospital CAHPS	# OF SURVEYS	PERFORMANCE	GOAL
	1235	<b>71.5% (50<sup>th</sup>-75<sup>th</sup>)</b>	76.5% (68 <sup>th</sup> )

*No units above goal*

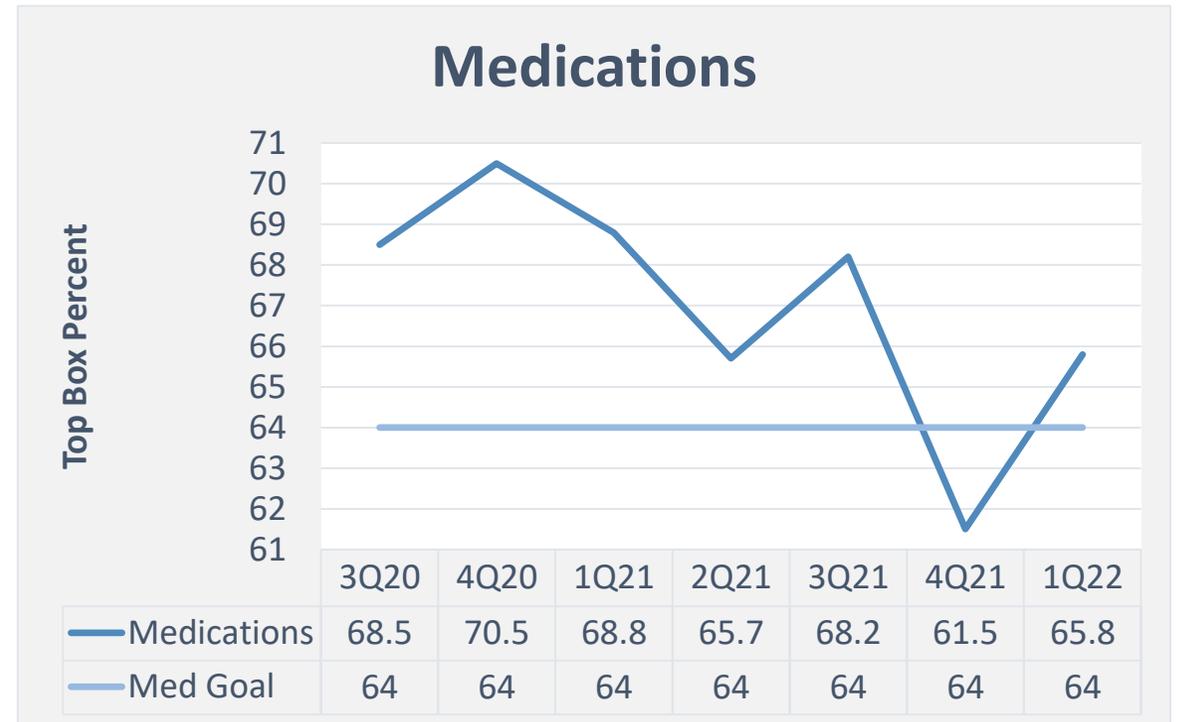
Domain	PERFORMANCE	GOAL
Physician Communication	<b>77.2%</b>	82.0% (50 <sup>th</sup> )
Nursing Communication	<b>76.9%</b>	80.0% (50 <sup>th</sup> )

## Overall Rating & Communication

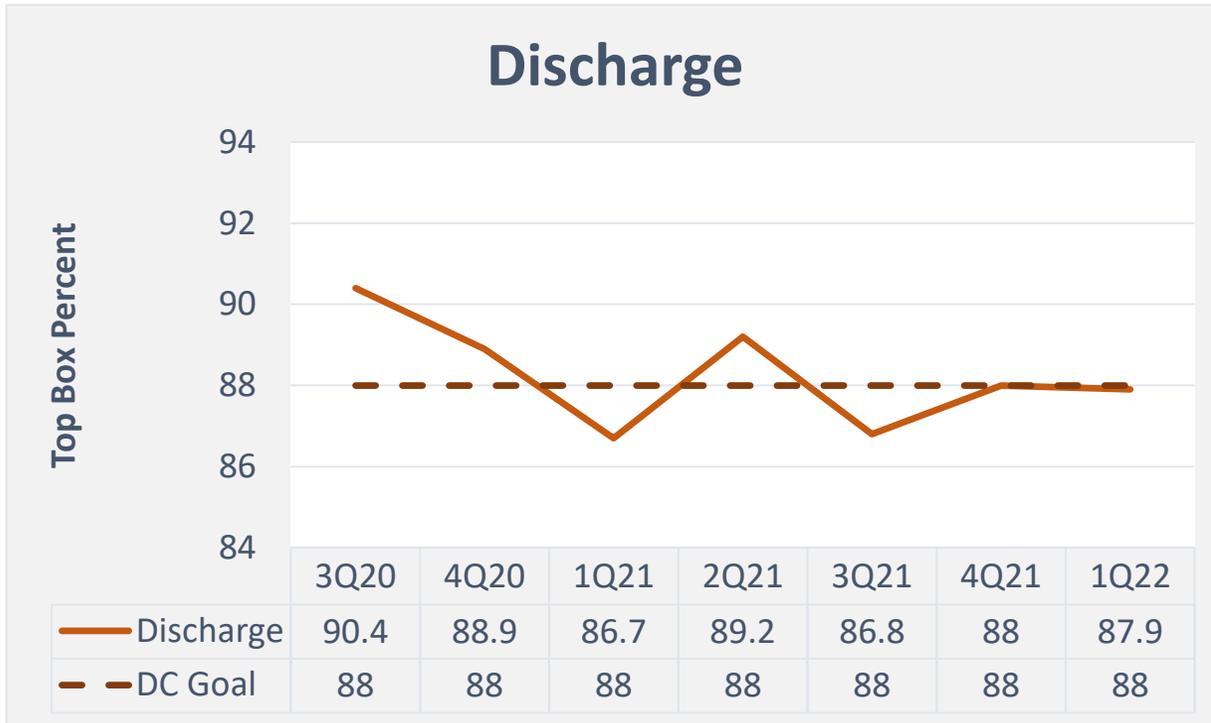




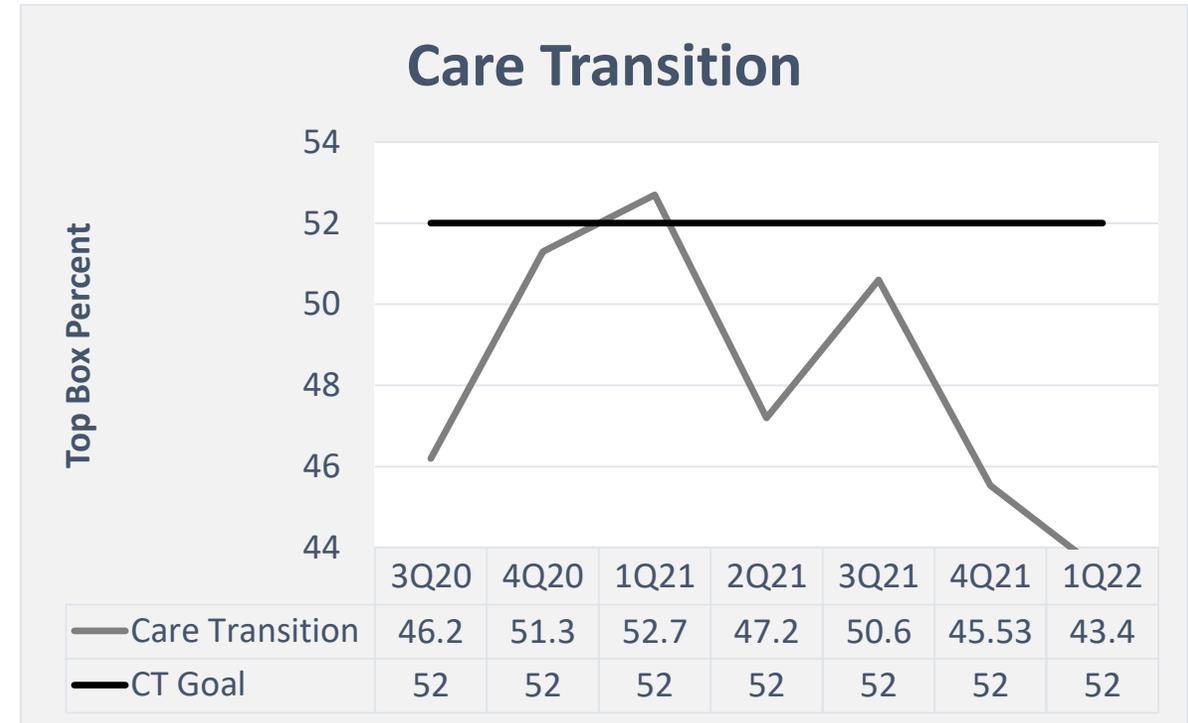
*Best Practice: Purposeful Patient Rounding*



*Best Practice: Medicine Guide*



*Best Practice: Engage Family Caregivers*



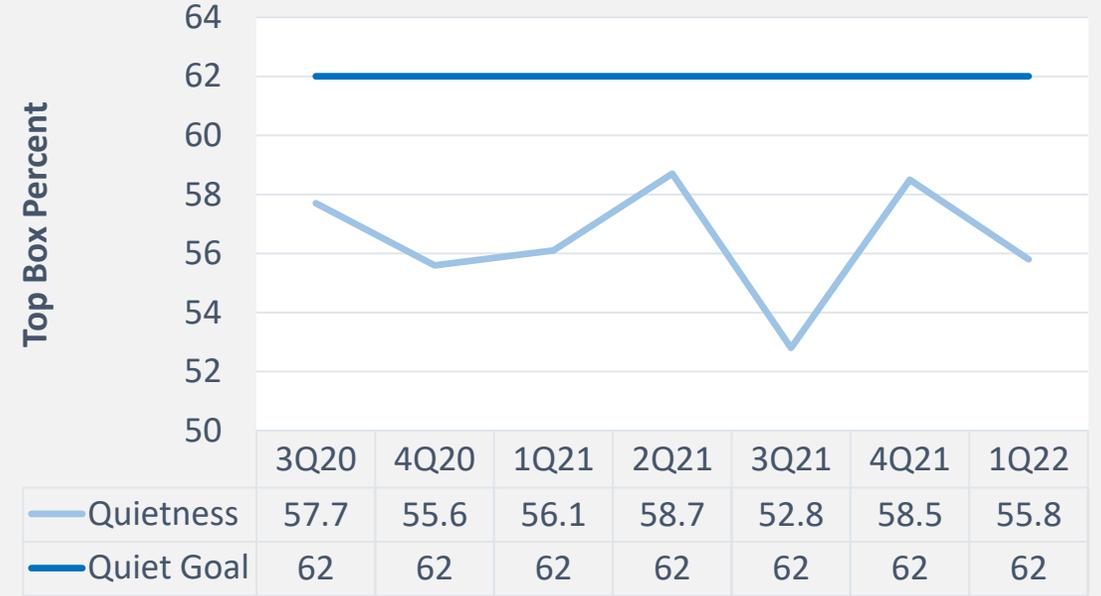
*Best Practice: Care Transition Calls*

## Cleanliness



*Best Practice: Create a culture where everyone contributes to keeping environment clean*

## Quietness



*Best Practice: Create 'Quiet Times' on the Units*

# Positive Patient Comments - HCAHPS

1. PATIENT STATED THAT SHE APPRECIATES THE NURSES AND THEIR HARD WORK. THEY MADE HER FEEL COMFORTABLE. THEY ALSO WATCHED OVER HER. VERY WELL TAKEN CARE OF. THE PATIENT STATED THAT SHE DID NOT HAVE ANY PROBLEMS WHAT SO OVER. THE PATIENT STATED THAT THEY ARE VERY THANKFUL.
2. THE PATIENT STATED HE APPRECIATES THE STAFF. HE CAME IN FOR A REGULAR PROCEDURE AND ENDED UP GETTING CPR, THEY RESUSCITATED HIM AND HE APPRECIATES IT.
3. THE PATIENT STATED KAWEAH HEALTH IS A 5 PLUS STAR HOSPITAL AND SHE WOULD RECOMMEND IT TO ANYONE AND EVERYONE.THE PATIENT ALSO STATED SHE HAD A GREAT EXPERIENCE FROM ALL STAFF.
4. THE PATIENT STATED THE NURSES WERE LIKE ANGELS. THEY RESPONDED TO YOU WITH SUCH KINDNESS YOU ACTUALLY FELT LOVED.

# Areas of Opportunity - HCAHPS

## A. Process:

- Long waits in ED
- Slow discharge process

## B. Communication: Discharge information unclear

## C. Care:

- Rude staff
- Need more attention to pain, toileting, & hygiene

## D. Environment:

- Uncomfortable beds
- More food choices and flavor
- Cleanliness

# World-Class Service

## Update

### 3. World-Class Vision & Service Standards

- a) Train leaders and team on World-Class definition and Kaweah Care Service Standards
- b) Relaunch Patient & Family Advisory Council
- c) Relaunch Patient Navigators in the Emergency Department

### 2. Meeting with Executive Team

- a) Electronic health record modifications for better coordination
- b) Increase patient experience training of areas outside of downtown campus
- c) Hardwire processes to catch issues in real-time
- d) Improve customer navigation of the system
- e) Align outpatient services to improve efficiency/experience
- f) Create greater synergy with KHMG
- g) Assess best practices to enhance patient flow and throughput
- h) Review Emergency Department opportunities
- i) Discuss ideas to address external wayfinding

### 3. Patient Surveying

- a) Medical Practice surveys – quicker returns, greater volume of feedback, & more specific comments.
- b) CAHPS surveying moved to mailed paper surveys.

# Physician Communication & Engagement

## Goals & Objectives

Objectives & Data	Baseline	Goal - % of Always	July-March
HCAHPS Doctor Communication	79.6%	82.0%	<b>77.2%</b>

## Update

1. Patient Experience Simulation – Scripting to improve patient/staff interactions
2. Pilot ‘Sit for a bit’ program
3. Review vendor offerings for physician training on improving communication with patients
4. Provide Patient Experience Dashboard to Medical Executive Committee
5. Build relationships through gatherings & events
6. Increase physician recognition
7. Launch a provider newsletter
8. Update physician lounge

# Nurse Communication

## Goals & Objectives

Objectives & Data	Baseline	Goal - % of Always	July-March
HCAHPS Nurse Communication	79.6%	80.0%	<b>76.9%</b>

## Update

1. Use of Communication White Boards
2. Leaders Rounding On Patients
3. Bedside (Team) Rounds
4. Employee Rounds – 1:1 Leader with Employee
5. Role Specific Training – Back to Basics

# Communication Whiteboards

DATE  
FECHA

SUN DOM MON LUN TUE MAR WED MIE THU JUE FRI VIE SAT SÁB

## WELCOME TO 5 TOWER

BIENVENIDOS A LA TORRE 5

OUR GOAL IS TO PROVIDE WORLD-CLASS CARE!  
NUESTRO OBJETIVO ES PROPVEER CUIDADO DE CLASE DE MUNDO!

ROOM #  
# DE CUARTO

# 217B

### MY CARE TEAM

MI EQUIPO DE CUIDADO

Doctor(s)  
Doctor(es)

Nurse  
Enfermera(s)

Nurse Assistant  
Enfermera(s) Asistente

Charge Nurse  
Enfermera(s) a Cargo

Nurse Manager  
Gerentes de los Enfermeros

Other Team Members  
Otros Miembros del Equipo

### ABOUT ME

ACERCA DE MI

Please Call Me

Preferred Language

Interpreter Request YES / SI NO / NO

Diet

### MY CONCERNS & QUESTIONS

MIS PREOCUPACIONES Y PREGUNTAS POR HOY SON...

OR TODAY ARE.....

### OUR GOALS FOR TODAY ARE...

NUESTRAS METAS DE HOY SON...

### MY SUPPORT PERSON

MI PERSONA DE APOYO

Name  
Nombre

Phone #  
# de Teléfono

### SAFETY PRECAUTIONS

PRECAUCIONES DE SEGURIDAD

### MY DISCHARGE PREFERENCES & NEEDS

MIS PREFERENCIAS Y NECESIDADES DURANTE LA ALTA HOSPITALARIA

### MY PAIN MANAGEMENT

MI MANEJO DEL DOLOR

MY ACCEPTABLE PAIN SCORE  
MI CIFRA ACEPTABLE DE DOLOR

MY CURRENT PAIN SCORE  
MI CIFRA DE DOLOR AHORA

NEXT DOSE AVAILABLE  
PRÓXIMA DOSIS DISPONIBLE

### MY MOBILITY

MI MOVILIDAD

Independent  
Independiente

Stand By  
A su Lado

1 Person  
1 Persona

2 Person  
2 Personas

Max Assist  
Asistencia Máxima

### MY ACTIVITY

MI ACTIVIDAD

#### DEVICES

Dispositivo

Up in Chair  
En la Silla

Go for Walk  
Vaya a Caminar

Do You Have Help at Home? YES / SI NO / NO

Tiene Ayuda en su Casa?

ANTICIPATED DATE / TIME  
FECHA / HORA ANTICIPADA



USE YOUR CALL LIGHT  
USE SU BOTÓN DE LUZ PARA LLAMAR

## PLEASE CALL

POR FAVOR, LLÁMENOS

# DON'T FALL

¡NO SE CAIGA!

PAIN RATING SCALE 0-10 ESCALA DE DOLOR

0 1 2 3 4 5 6 7 8 9 10

No Pain Sin Dolor Mild Leve Moderate Moderado Severe Severo Worst Pain Imaginable El Peor Dolor Imaginable

### MY PERSONAL CARE

MI CUIDADO PERSONAL

Shower  
Baño en Regadera

Linens  
Sábanas

Bath / Wipes  
Baño / Toallas Húmedas

Oral Care  
Cuidado Bucal

# Leaders Rounding – Purpose & Questions

***Purpose: To ensure comfort, safety, and satisfaction. Keep patients informed, manage up staff skill sets and harvest reward and recognition for what's going well.***



[Leadership Rounding at Cleveland Clinic Video](#)

- 1 On a scale of 1-10, (1 being Poor and 10 being Excellent) how has your stay been?

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- 2 Is there a member of our team that I can **recognize** for providing you with **world-class** care?  
IF YES, ASK:  
What did they do that made them stand out?

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- 3 Is there anything we could have done or can do to make your visit better?

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- 4 Thank you for your time and feedback.  
Before I go, is there anything I can help you with?

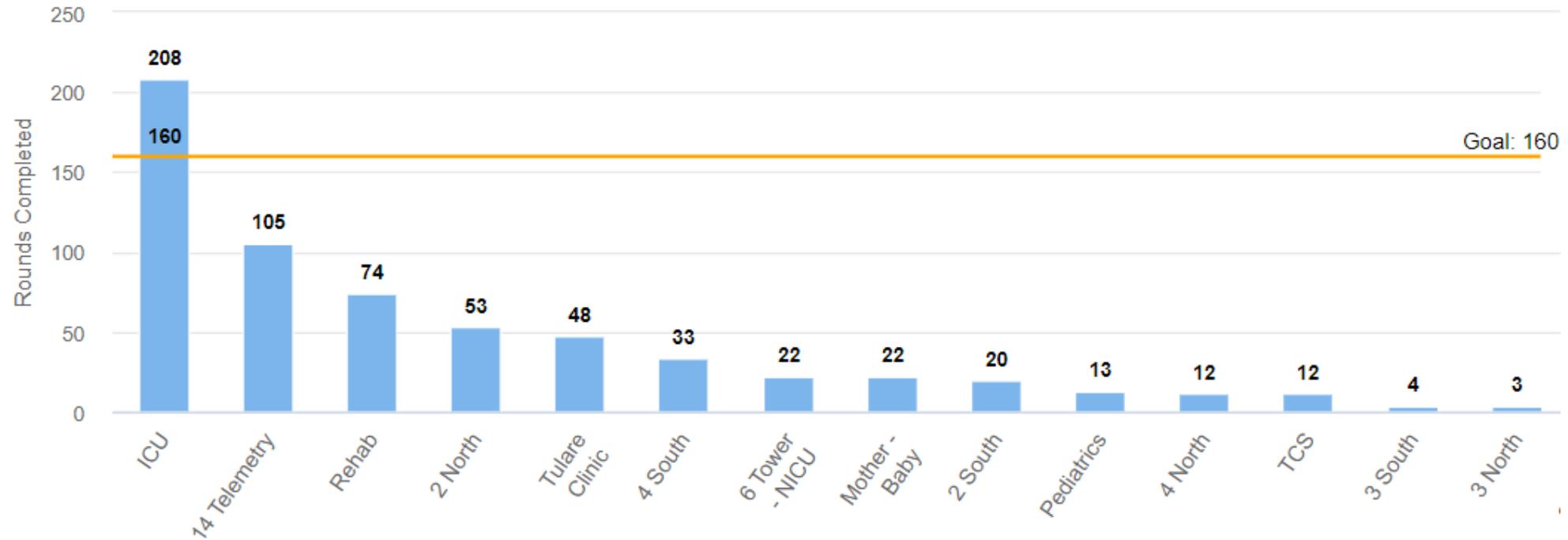
# Leaders Rounding on Patients - Performance

Goal of 40 every 30 days

Results from  Show  for

## Rounds Completed by Location

Results updated every 5 minutes



# Leaders Rounding on Patients - Comments

- My nurses **Crystal** and **Alyssa** were both wonderful. Crystal was very good at not just explaining things, but doing it in a way that I could actually understand. She took the time to answer any questions I had and wanted to make sure that I understood what was going on. Alyssa was very similar. She did such a good job at updating in the moment and anything that I had questions on or request she followed up with right away. I loved having both of these nurses. They gave excellent care. – *4 South Patient*
- **Christian** he is a good one. I can tell he is going to be really great, he already is. The girls (Certified Nursing Assistants) taking care of me today (**Kendra** and **Marilyn**) they take real good care of me and answer right away and they come in here so nice. **Tiffany** too, she is just so sweet, I want to take her back home with me. she came in here and was so nice, she talks to me and made me laugh. – *3 North Patient*
- **Heidi** was a wonderful nurse and was on top of everything. I felt calm and comfortable under Heidi's care during my hemorrhage. She was very helpful and explained everything and the situation. – *Mother Baby Patient*
- **Jessica, Carmela, Grace, Silvia, Brian, and Stephen.** Everyone has been so gentle and kind, and patient. Her pain control has been great and she was scared that she would be left in more pain.– *Broderick Pavilion Patient*

# Leaders Rounding on Patients – Opportunities

A. Process: Long waits in Emergency Department

B. Communication:

- Listen more
- Don't ignore
- Don't be rushed

C. Care:

- More attentive & coordinated

D. Environment:

- Need comfortable beds
- Quieter
- Improve food choices & quality

# Enhancements of Systems – Managing Belongings

Goals & Objectives			
Data	Baseline	Goal	July-April
Lost Belongings	196	147 (25% reduction)	92

- ## Update
1. Developed role specific standards
  2. Implement technology (low cost, low demand on IS resources, increase efficiency, enhanced coordination, low demand on frontline staff)
  3. Update documentation in electronic health record
  4. Evaluate 24/7 department to oversee Lost & Found

# Enhancements of Systems – Feedback from Employee Ambassadors

## Update

1. Need Emergency Department & unit hostesses
2. Puzzle books, magazines, books, snacks, coffee needed
3. Better TVs and channels
4. Rooms need phone charging stations
5. Need hospital mascot



# Enhancements of Systems – Environment & Technology

## Update

1. Create a 'Comfort Cart' - June 2022
2. Evaluating videos to enhance patient education
3. Complete internal wayfinding
4. Adding trash receptacles to the downtown campus
5. Launch Well Health (two-way texting) - July 2022

