



July 21, 2022

## NOTICE

The Board of Directors of the Kaweah Delta Health Care District dba Kaweah Health will meet in an open Patient Experience Committee meeting at 2:00PM on Thursday July 28, 2022 in the Kaweah Health Support Services Building, 520 West Mineral King Avenue, Human Resources Department Conference Room (1st floor), 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  
Mike Olmos, Secretary/Treasurer

A handwritten signature in black ink that reads "Cindy Moccio".

Cindy Moccio  
Board Clerk, Executive Assistant to CEO

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



## **KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS PATIENT EXPERIENCE COMMITTEE**

Thursday July 28, 2022

Kaweah Health Medical Center – Support Services Building  
520 W. Mineral King Avenue – 1<sup>st</sup> Floor Human Resources Conference Room

ATTENDING: Directors: David Francis (chair) & Ambar Rodriguez; Keri Noeske, Chief Nursing Officer and Acting CEO, Dianne Cox, Chief Human Resources Officer, Ed Largoza, RN, Director of Patient Experience, Steve Carstens, DO, Medical Director of Physician Engagement, George Ortega, Recording

1. **OPEN MEETING – 2:00PM**
2. **CALL TO ORDER** – *David Francis, Committee Chair*
3. **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 (Cindy Moccio 559-624-2330) or [cmoccio@kaweahhealth.org](mailto:cmoccio@kaweahhealth.org) to make arrangements to address the Board.
4. **PATIENT EXPERIENCE DATA** – Overview and discussion of patient experience goals and performance – *Ed Largoza, Director of Patient Experience*
  - 4.1. **Rehabilitation**
  - 4.2. **Home Health Consumer Assessment of Healthcare Providers & Systems (CAHPS)**
  - 4.3. **Hospice CAHPS; & In-Center Hemodialysis CAHPS**
  - 4.4. **Medical Practice - Clinics**
  - 4.5. **Emergency Department**
  - 4.6. **Hospital CAHPS with trended graphs & unit performance**
  - 4.7. **Positive Patient Comments – Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)**
  - 4.8. **Areas of Opportunity – HCAHPS**
5. **DEPARTMENT SPOTLIGHT (4 NORTH)** – *Amy Baker, Director of Renal Services; Rebekah Piche, 4 North Nurse Manager; Shane Reynolds, 4 North Assistant Nurse Manager*
6. **ADJOURN** – *David 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.*

# Patient Experience Board

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

July 2022

Providing World Class Service



[kaweahhealth.org](https://kaweahhealth.org)



# Rehab Performance & Goals: July-June 2022

REHABILITATION	# OF SURVEYS	PERFORMANCE	GOAL
	78	95.5% (75 <sup>nd</sup> )	94.7% (was 75 <sup>th</sup> )

	FY 2022	FY 2023
Mode	Mail	Real-Time: Text/Email/IVR (Interactive Voice Recording)
Number of Questions	44	12

Dimensions	Scale
<b>Provider Care &amp; Communication</b>	No / Yes somewhat / Yes mostly / <b>Yes definitely</b>
<b>Family Involvement</b>	No / Yes somewhat / Yes mostly / <b>Yes definitely</b>
<b>Cleanliness</b>	No / Yes somewhat / Yes mostly / <b>Yes definitely</b>
<b>Food Quality</b>	No / Yes somewhat / Yes mostly / <b>Yes definitely</b>
<b>Would Recommend</b>	0 Not at all likely, 1/2/3/4/5/6/7/8/9 <b>10</b> Extremely likely

# Home Health Performance & Goals: July-June 2022

HOME HEALTH CAHPS	# OF SURVEYS	PERFORMANCE	GOAL
	296	86.8% (50 <sup>th</sup> -75 <sup>th</sup> )	91% (90 <sup>th</sup> )

	FY 2022	FY 2023
Mode	Phone	Mail

Dimensions	Scale
Care of Patient	Never / Sometimes / Usually / <b>Always</b>
Communication	Never / Sometimes / Usually / <b>Always</b>
Specific Care Issues (Medicines, Home Set Up, Pain)	Never / Sometimes / Usually / <b>Always</b>
Overall Rating of Care	0 Worst home health care possible, 1/2/3/4/5/6/7/8/9 <b>10</b> Best home health care possible
Would Recommend	Definitely no / Probably no / Probably yes / <b>Definitely yes</b>

# Hospice CAHPS Performance & Goals

HOSPICE	# OF SURVEYS	PERFORMANCE	GOAL
Jan 2021-Feb 2022	158	<b>88.6% (&gt;90<sup>th</sup>)</b>	88% (90 <sup>th</sup> )

	FY 2022	FY 2023
Mode	Mail	Mail

Dimensions	Scale
Getting Help for Symptoms	Never / Sometimes / Usually / <b>Always</b>
Getting Hospice Care Training	<b>Yes, definitely</b> / Yes, somewhat / No
Getting Timely Care	Never / Sometimes / Usually / <b>Always</b>
Hospice Team Communication	Never / Sometimes / Usually / <b>Always</b>
Information Continuity	Never / Sometimes / Usually / <b>Always</b>
Providing Emotional Support	Too little / <b>Right amount</b> / Too much
Support for Religious and Spiritual Beliefs	Too little / <b>Right amount</b> / Too much
Treating Family Member with Respect	Never / Sometimes / Usually / <b>Always</b>
Understanding the Side Effects of Pain Medication	<b>Yes, definitely</b> / Yes, somewhat / No
Overall Rating of Care	0 Worst hospice care possible, 1/2/3/4/5/6/7/8/9 <b>10</b> Best hospice care possible
Would Recommend	Definitely no / Probably no / Probably yes / <b>Definitely yes</b>

# In-Center Hemodialysis CAHPS Performance & Goals

IN-CENTER HEMODIALYSIS	# OF SURVEYS	PERFORMANCE	GOAL
Oct 2021-Jan 2022	18	72.2% (70 <sup>th</sup> )	86.7% (90 <sup>th</sup> )

Dimensions	Scale
Rate dialysis center 0-10	0 Worst dialysis center possible, 1/2/3/4/5/6/7/8/9 10 Best dialysis center possible
Rate kidney doctors 0-10	0 Worst kidney doctors possible, 1/2/3/4/5/6/7/8/9 10 Best kidney doctors possible
Rate dialysis center staff 0-10	0 Worst dialysis center staff possible, 1/2/3/4/5/6/7/8/9 10 Best dialysis center staff possible
Nephrologists' Communication and Caring	Never / Sometimes / Usually / <b>Always</b>
Quality of Dialysis Center Care and Operations	Never / Sometimes / Usually / <b>Always</b>
Providing Information to Patients	Yes / No

*Will switch to NRC Health in January 2023. Will continue mail surveying.*

# Medical Practice - Clinics Performance & Goals

CLINIC PERFORMANCE	CLINIC & GROUP CAHPS (July – March 2022)		MED PRACTICE (April - June 2022)	
	# OF SURVEYS	PERFORMANCE (Goal 84%)	# OF SURVEYS	PERFORMANCE (Goal 81.4%)
All Clinics	1840	79.5%	12,490	77.0%
Lindsay Health	169	94.0%	604	85.8%
Woodlake Health	155	91.0%	255	80.4%
Exeter Health	329	83.0%	1797	76.4%
Dinuba Health	202	80.2%	383	72.5%
KHMG	302	78.5%	8855	77.0%
Tulare Health	175	75.4%	201	76.6%
Sequoia Health & Wellness	206	71.4%	395	69.7%

	FY 2022	FY 2023
Mode	Phone	Real-Time: Text/Email/IVR (Interactive Voice Recording)

# Emergency Department Performance & Goals

EMERGENCY DEPARTMENT	ED CAHPS (July – March 2022)		ED Survey (January - June 2022)	
	# OF SURVEYS	PERFORMANCE (Goal 70%)	# OF SURVEYS	PERFORMANCE (Goal 3.7/5.0)
	469	66.3%	1782	3.5

	FY 2022	FY 2023
Mode	Phone	Real-Time: Text/Email
Number of Questions	52	7

Dimensions	Scale
Included in care decisions	No / Yes, somewhat / Yes, mostly / Yes, strongly agree
Understood diagnosis and plan	No / Yes, somewhat / Yes, mostly / Yes, strongly agree
Trust provider	No / Yes, somewhat / Yes, mostly / Yes, strongly agree
Staff courteous	No / Yes, somewhat / Yes, mostly / Yes, strongly agree
Satisfied with experience	No / Yes, somewhat / Yes, mostly / Yes, strongly agree
Would recommonend	No / Yes, somewhat / Yes, mostly / Yes, strongly agree

# Hospital CAHPS Performance & Goals: July-March 2022

Hospital CAHPS	# of SURVEYS	Overall Rating (Goal 76.5%)	Nurse Communication (Goal 79%)	Doctor Communication (Goal 80%)
All Units	1291	<b>71.9% (50<sup>th</sup>-75<sup>th</sup>)</b>	<b>77.0%</b>	<b>77.2%</b>
MB – Labor & Delivery	157	<b>74.8%</b>	<b>82.3%</b>	<b>84.8%</b>
4 North	107	<b>74.6%</b>	<b>78.2%</b>	<b>75.2%</b>
3 South	64	<b>73.8%</b>	<b>73.7%</b>	<b>69.6%</b>
4 Tower	164	<b>72.9%</b>	<b>73.2%</b>	<b>78.4%</b>
2 South	147	<b>72.8%</b>	<b>77.8%</b>	<b>80.1%</b>
Broderick Pavilion	156	<b>72.5%</b>	<b>81.5%</b>	<b>82.3%</b>
2 North	182	<b>72.3%</b>	<b>73.5%</b>	<b>72.9%</b>
4 South	148	<b>63.1%</b>	<b>72.2%</b>	<b>72.1%</b>
3 North	84	<b>62.2%</b>	<b>75.8%</b>	<b>70.9%</b>

# Positive Patient Comments - HCAHPS

Nursing staff was amazing at all times. A nurse in labor in delivery names Ashley was extremely awesome to me and my family. She went above and beyond for me.

*-MB Patient*

Julie was one of my RN's. She was wonderful and very attentive. Tammy was one of my charge nurses and she went above and beyond to provide excellent care for me and my family.

*-2S Patient*

I've been in the hospital before, but this has been my BEST experience ever, the nurses and aids always were polite and nice. Thank you.

You're the heroes.

*-4S Patient*

Nurses Brooke and Tyler were excellent going above expectations. CNA Suzie was very attentive, cheerful and helpful 5 North has a great staff Brooke, Tyler and Suzie are great at their jobs made my stay a very positive experience.

*-5T Patient*

It could not have been any better. Dr. Tran and the medical staff were outstanding. Communication with everyone was clear and professional with compassion and gentle care all along the way.

They are the best. God bless them all.

*-2S Patient*

# Department Spotlight – 4 North



Director of Renal Services



4N Nurse Manager



4N Assistant Nurse Manager

# 4 North Patient Experience Results

## July 2021 – June 2022

4 North Performance		
Number of surveys=116		
Category	Performance	Goal
-> Nursing Communication	78.7%	79%
-> Doctor Communication	75.3%	80%
-> Responsiveness of Staff	<b>70.1%</b>	64%
-> Communication Medications	61.4%	62%
-> Cleanliness	<b>73.3%</b>	72%
-> Quietness	55.2%	61%
-> Discharge Instructions	<b>87.6%</b>	87%
-> Overall Rating	75.7%	76.5%
-> Would Recommend	<b>75.6%</b>	71%
-> Care Transition	43.8%	51%

# Department Spotlight – 4 North

## OUR LEADERSHIP STYLE

- Easily accessible and approachable for patient and staff concerns
- We model the behavior/attitude we'd like to see in them
  - A kind "hello" every morning
- We communicate, communicate and communicate some more
  - Talk about/post our expectations, goals (structure staff meetings on 5 pillars and focus on one thing for each) and celebrate wins in many different ways – daily communication, weekly updates, huddles and annual appraisals, post inspirational quotes on the computers
  - Putting face time in with staff – establishing a trusting relationship so they know what is important to us and then, hopefully it is important to them.

4 North/AHD Weekly Update		June 26 <sup>th</sup> – July 2 <sup>nd</sup> , 2022
<p><b>CBLs!</b></p> <p>RNs and LVNs! There were additional CBLs added to your to-do list in myNetLearning! For RNs and LVNs, there is <b>ANOTHER</b> suicide risk screening CBL – ED to Inpatient: <i>Streamlining the Initial Screening for Suicide Risk Patients</i>.</p> <p>LVNs, all med-surg LVNs are required to be competent in TB administration. On 7/29, LVNs were assigned a CBL (didactic) for TB intradermal competency. Lorie Campbell will round on dates indicated below and on the flyer to sign you off for competency.</p> <ul style="list-style-type: none"> <li>• 7/5</li> <li>• 7/14</li> <li>• 7/19</li> <li>• 7/28</li> <li>• 7/13</li> <li>• 7/18</li> <li>• 7/27</li> </ul> <p>*see attachment: ED to Inpatient Suicide Risk Screening Mandatory Flyer and LVN TB Intradermal Competency</p>	<p><b>THIS WEEK: Suicide GEMBA Takeaways</b></p> <p>This week, we had our first high risk suicide patient since Suicide GEMBA rounds was started. Here are some takeaways:</p> <ul style="list-style-type: none"> <li>• Any extra linens, gowns, and pillows need to be removed from the patient's room.</li> <li>• No outside food or drinks are allowed.</li> <li>• Visitors cannot bring bags/purses into the patient's room.</li> </ul> <p><b>NEW!</b> Environment checklists for moderate and high suicide risk patients are now in the black forms box located next to the printer. There is also a <i>RN instruction sheet</i>, which provides guidance on what the RN is to complete initially, during, and at time of discharge. These items are included in the suicide packet, which is created by the HUC.</p>	
<p><b>Nexiva Nutrition and Knowledge</b></p> <p>The organization will be rolling out with Nexiva peripheral IVs starting July 18<sup>th</sup>. BD nurses will be on-site to assist with the roll out until July 29<sup>th</sup>. RNs and LVNs are encouraged to attend one of five Nutrition and Knowledge sessions for product demonstration. See flyer for dates and times. Scan the QR code for a video demo tool!</p> <p>*see attachment: Nexiva Nutrition and Knowledge</p>	<p><b>COVID Reminders</b></p> <p>If you are having symptoms of COVID (sore throat, runny nose, fever) please do not come to work. Call Employee Health (555-624-2455) to get screened. If you're scheduled to test, please keep Belkah and/or Shane updated. EHS does not update leaders with test dates and results. It is the employee's responsibility.</p> <p>*see attachment: COVID-Screening</p>	<p><b>IVP Ativan System Kit</b></p> <p>If you are needing to retrieve IVP Ativan from the Pyxis, select the Ativan system kit, deselect the Ativan (leaving only the bag), and then go back into the patient's med profile to select the ordered Ativan. This will ensure that you are prompted to waste the amount that is not ordered. If you have questions, reach out to Shane!</p>
<p><b>Retention Committee-</b></p> <p>The retention committee continues to meet to develop new ways to keep our employees here at Kaweah Health. We have developed 97 strategies to work on. One of the amazing things about the Renal Division is we have many employees who have worked here for a very long time! What keeps you here at Kaweah Health? Use the QR Code below to provide feedback to me.</p> <p>Looking forward to your responses! Thank you!</p>	<p><b>Employee Spotlight</b></p> <p>This week, the Employee Spotlight is on: <b>Patrick Hernandez, RN</b>.</p> <p>"Patrick is a great team player for helping every time that a patient required extra care through the night."</p>	<p><b>Upcoming Dates</b></p> <p>7/5 AM/ASD LUNC Mtg @SSB-Copper Rm @0900</p> <p>7/14 AHD Staff Mtg @SSB-Copper Rm @1600</p>
<p><b>Words can't express my gratitude for everything you do each shift. I know it is not easy! I appreciate the care you provide to your patients no matter what the circumstances are. THANK YOU!</b></p>	<p><b>Patience Food Fridge</b></p> <p>Open containers and personal food items <b>cannot</b> be kept in the black refrigerator in the nutrition area. Please use our employee fridge – which was wiped down by our volunteer!</p>	

Build a **culture of gratitude**. It's the most underrated way to **build a strong team**.

**Nexiva Peripheral IV Conversion Coming Soon:**  
Starting July 18, BD RN trainers will be on every unit training all RN's and LVN's on how to use this new product. The training will take only a few minutes. The BD RN's will be here for two weeks on day shift and night shift. Scan the QR code below to watch a video about the new peripheral IV.

**Retention Committee-**  
The retention committee continues to meet to develop new ways to keep our employees here at Kaweah Health. We have developed 97 strategies to work on. One of the amazing things about the Renal Division is we have many employees who have worked here for a very long time! What keeps you here at Kaweah Health? Use the QR Code below to provide feedback to me.

Looking forward to your responses!  
Thank you!

Tell Me What You Think!  
Hover over the QR code with your cellphone camera to send me an email with suggestions or feedback.

**AWESOME TEAM YOU ROCK!**

# OUR LEADERSHIP STYLE

- Focus on different Patient Experience topic each month at the staff meeting. A lot of focus has been put on nursing communication. We keep the topics simple
  - narrate the care
  - non-verbal communication
  - discharge instructions
  - team rounds
  - white boards
  - greeting everyone with a smile
  - phone etiquette

# HAPPY EMPLOYEES = HAPPY PATIENTS

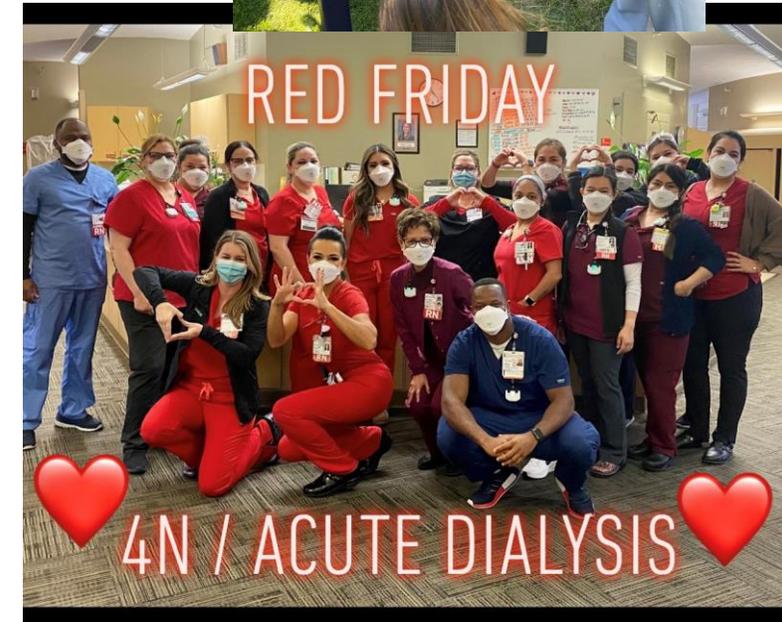
- **What keeps us happy in our roles?** (Bekah: autonomy, trust, support, healthy environment, the ability to make meaningful changes, making a difference)
- **How do we engage the staff and keep them happy?**
  - First, we hire the right people. We look for compassionate, kind people who's values are aligned with ours. We lay out our expectation of teamwork during the interview.
  - New staff: Big Bird Program, orientation check-ins, meet with the Director
  - Focus on recognition over the past couple years: EOTM, employee spotlight, huddle recognition, RN week, CNA week, Nephrology nurse's week, preceptor gifts, valentine's cards, holiday cards/gifts, celebrations for great quality outcomes (no CLABSI in a year, etc.), attendance awards
  - Try to insert a little FUN into the day



## Department Spotlight – 4 North

# Some things we've done for the staff

- 4N Games
- Ice Breakers at the start of every meeting
- Forward North! hiking group and encourage work/life balance



## Department Spotlight – 4 North

# Some things we've done for the staff

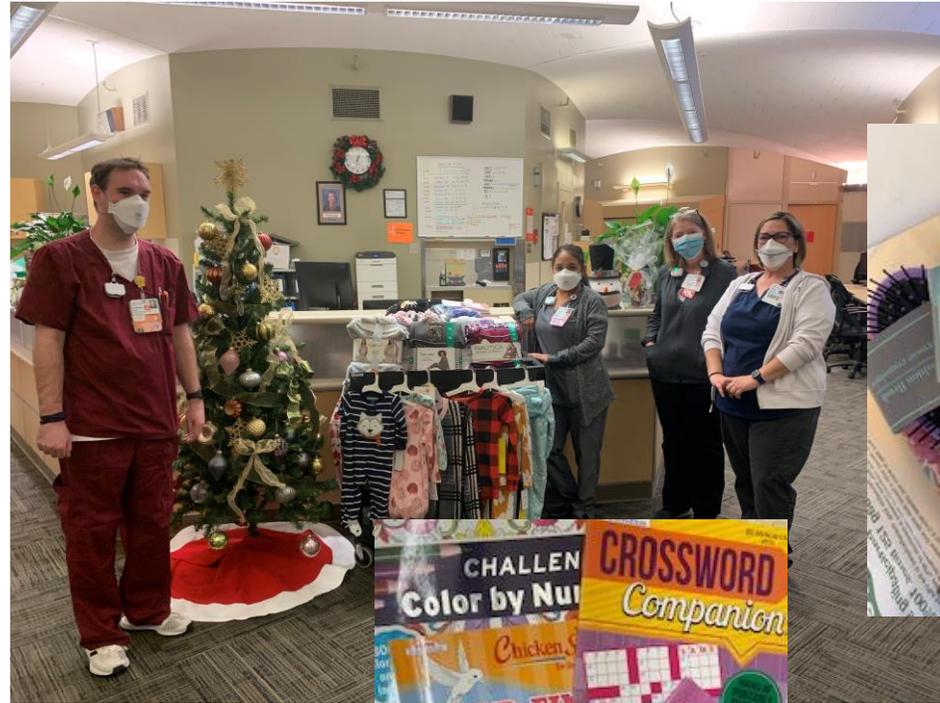
- Nephrology Nurse's Week
- 4N Specific Nurse Week Awards



## Department Spotlight – 4 North

# Some things we've done for our patients

- Busy box
- Brushes/hair ties
- Welcome folders
- Patient celebrations: birthdays, gifts during the holidays
- Card sent to all patients after discharge
- Team rounds
- White boards



# Plan for the future

- Continue to focus on Nursing Communication
- Leader education: Charge Nurse curriculum, ANNA conference
- Share what has been working with our fellow leaders

