Responsiveness

During this hospital stay,

- after you pressed the call button, how often did you get help as soon as you wanted it?
- how often did you get help in getting to the bathroom or in using the bedpan as soon as you wanted it?

RESPONSES: ALWAYS, USUALLY, SOMETIMES, NEVER

CULTURE

Each patient defines responsiveness differently, and definitions are largely influenced by personal life experiences. Being in the role of patient can feel foreign, anxiety producing, and as if there is a loss of autonomy. It is important to recognize that staff responsiveness is not just about the time it takes to answer the call light but also about the time it takes to complete the patient or loved one's requests and how effectively the request was fulfilled. For instance, did the patient believe the staff went above and beyond expectations for timeliness and service delivery?

Often, staff think they were responsive because they responded as soon as they could or within a certain amount of time (e.g., under 5 minutes). However, the focus of HCAHPS is "as soon as you wanted", which is entirely dependent on the patient's judgment and is unique to each patient's expectations. Our experience has demonstrated that from the moment the patient presses the call button, they want help immediately. Many times, this level of responsiveness is unattainable. However, with effective communication, proactive care delivery, and empathy for the patient's urgency,

we can better communicate to set expectations for responding timely.

Staff Engagement & Action Planning

- Take the opportunity to share performance with responsiveness (% Top Box and Ranking)
- Ask staff about times they or a loved one have had to press the call button.
 What was their experience?
- Ask staff what patients need and expect
- Engage staff in building communication tools and behavioral standards to elevate care and service
- Share data on Hourly Rounding and patients' perceptions of responsiveness that are demonstrated to impact quality, safety, HCAHPS, and team member engagement
- Create accountability through patient rounding and sharing feedback



Responsiveness

- "During this hospital stay, how often did you get help, as soon as you wanted?"
- "During this hospital stay, how often did you get help, in getting to the bathroom or in using the bedpan as soon as you wanted?"

RESPONSES: ALWAYS, USUALLY, SOMETIMES, NEVER

Patient Perspective:

Our Perspective:

	At Admission	During Stay/Rounding	At Discharge
reate a Profound Memorable Experience			





Responsiveness

During this hospital stay, how often did you get help...

as soon as you wanted? | in getting to the bathroom or in using the bedpan as soon as you wanted it?

RESPONSES: ALWAYS, USUALLY, SOMETIMES, NEVER

USE THE BELOW WORKSHEET TO CREATE YOUR OWN CARES PROCESS MEASURES AND COMMUNICATION METHODS

PR	Confidence	Anticipate Needs	Respectful Communication	Engage in Care and Process	Say Thanks / Safe Transition
PROCESS					
COMMUI					
COMMUNICATION					







Empathy-based, high reliability set of behaviors designed to impact:

Culture > Performance > Outcomes

We understand that experiences are shaped by more than the words spoken and actions taken. Real encounters are complex and interactive, requiring planning and practice to achieve the best experience for both caregivers and their patients.

While healthcare began with scripted messages and moved to planned conversations, we now know that achieving safety, quality, and experience goals requires a comprehensive approach to providing care. That method must include not only how to deliver a message but also an understanding of the components for ensuring it is received.

CARES™ is a training tool designed to equip every team member in a healthcare organization with a common understanding and set of behaviors to deliver an exceptional patient experience. With a simple yet effective framework, CARES helps you to create an environment for delivering highly reliable patient experiences of care. CARES bundles best practices demonstrated to support the patient experience so that your participants are instructed in the Master Competency rather than in multiple, discrete initiatives. Whether you are concerned with realizing your vision or with applying a consistent approach across the organization, CARES offers both a cultural way of being and a robust, repeatable practice.

Ways to adopt Cares

- Through onsite coaching, Trainthe-Trainer, Virtual training with or without onsite coaching
- Delivered to Clinical Staff,
 Non-Clinical Staff, Providers
- **Settings** Acute, Emergency Department, Ambulatory Care





Not just another acronym









Confidence

When caregivers are more confident in the experience they are providing, patients perceive a better experience. Similarly, when we build patient confidence, they are more likely to ask relevant questions and participate in their care

- Can be built or destroyed in 7 seconds
- Not a conscious decision
- Highly influenced by non verbal communication



Anticipate Needs

With every encounter, caregivers have the opportunity to "walk in the slippers" of their patients. This approach means we have the empathy to ask about patients' needs and address both clinical and emotional components.

- Ask yourself "What would I want/need if I were this person?"
- What are their clinical and emotional needs?
- What is their level of health literacy?



Respectful Communication

93% of communication is received through tone of voice and body language. We understand communications skills and can either teach those skills or support your organization with acceleration of your preferred approach (e.g., AIDET, HEART).

- Kind, compassionate words
- Develop words and phrases to help communication
- Pay attention to how you look and sound



Engage in Care and **Process**

Engaging in care and process is highly interactive, and listening is a crucial component. Helping caregivers learn to narrate processes and explain the "why" enables them to provide care more effectively.

- Narrate care or process
- Listen well and answer questions
- Set expectations early and often
- Validate; have them teach back
- The more patients are engaged, the more they remember and become partners in care



Say Thanks / Safe Transition

We must remember that working with people in their most vulnerable times is a privilege. Sharing our gratitude or helping patients to the next stop in their journey lets them know we value and honor them.

- Show gratitude; encourage referrals and reviews
- Hand off to the next person by introducing the patient and managing up staff