Session 19
Who Owns HCAHPS Scores?
Creating Accountability for the Entire Patient Experience

Presented by:
Jared Jones
Who Owns HCAHPS Scores?

Creating Accountability for the Entire Patient Experience

Disclosure of Relevant Financial Relationships

The following faculty of this continuing education activity has no relevant financial relationships with commercial interests to disclose:
  - Jared Jones

Note: Use when none of the faculty have relevant financial relationships to disclose.
Faculty

• **Jared Jones**, Sr. Partner and Hospital Practice Leader at Partners In Leadership

Learning Objectives

• **Learning Objective 1**
  The learner will discover how to create a true patient centered culture and will recognize the impact of that organizational culture on sustainable change.

• **Learning Objective 2**
  The learner will be ready to apply the essential tools required to accelerate culture change and identify the patient experience checklist as a meaningful opportunity.
Agenda

- Hospitals all over the country have become laser focused on making continual, positive movements on the patient satisfaction dial.
- Hospital leaders who are struggling to fix the patient experience are typically also hospital leaders who are mistakenly focusing the change effort exclusively on strategy adjustments, without considering the significant impact that hospital culture is having on performance.
- There is a practical framework for balancing the change process by aligning organizational culture around delivering the right HCAHPS Scores.
- This session reveals how to effectively implement a culture transformation that will improve patient satisfaction, employee engagement and outcomes.

The Healthcare Reality

Strategy & Structure are important, but for sustained results, balance it with a Culture that supports it.
A Strategy-Culture Paradox

96% of hospital professionals believe culture has the most impact on HCAHPS scores, yet 74% focus on strategy.

When working to improve HCAHPS scores, where do we spend most of our time?

Which has the most impact on our HCAHPS scores?

Survey conducted by Partners In Leadership, 2015-2016

Activity vs. Results

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>RESULTS</th>
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<tbody>
<tr>
<td>Actions people take that lead to results.</td>
<td>The desired and undesired outcomes of taking actions.</td>
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Rounding: Activity vs. Results

Only 16% of hospital professionals feel that their rounding efforts are effective.

In our hospital’s culture, our leaders and staff view rounding as:

- **73%** An **ACTIVITY** with “check the box” mentality
- **27%** An **OPPORTUNITY** to create a meaningful interaction impacting the patient experience

Survey conducted by Partners In Leadership, 2015-2016

The Limitations of Just Doing the Job
The **Power** of Joint Accountability

HCAHPS Scores we’re not delivering but would if every employee was accountable for their delivery.

The Results Pyramid®
The Case for Culture Change

- The Results Pyramid® model applies to your entire hospital staff, not just the patients.
- Your staff’s beliefs are driving their actions which are producing the results you’re getting now.
- Strategy (Actions layer) alone is not enough to sustain higher HCAHPS scores.
- Forcing staff to execute a strategy is futile if they hold beliefs contrary to the actions being required of them. The belief always wins!
- Sustaining higher HCAHPS scores requires changing the way people think and act to achieve these desired results.

The PEX Results Pyramid®

- HCAHPS Scores
- Patient ACTIONS
- Patient BELIEFS
- Patient EXPERIENCES
Belief Bias™

5 Beliefs That Could Crush Your Strategy

1. I have to do everything on my list or my performance review will suffer.
2. Rounding won’t impact HCAHPS because our physicians aren’t engaged.
3. Staffing levels make it impossible for me to create the right patient experience.
4. HCAHPS aren’t my problem or concern. That’s for management to worry about.
5. Even if I work on improving rounding, my efforts won’t create enough change to matter.
R\(^1\)

Achieving R\(^2\)

2017 CONGRESS ON HEALTHCARE LEADERSHIP
A Shift in Desired Results Drives the Need for a Shift in Culture

Create Wow
I create extraordinary experiences for everyone, every time.

I Decide
I am trusted to be a difference maker and my voice matters.

Own It
I take accountability to be the solution.

Shatter Silos
I contribute to a team bigger than my department.

Simplify & Focus
I prioritize what matters most to deliver our Key Results.

Live Excellence
I bring my best and encourage others to shine.

Ask the Patient
I engage patients to know what’s most important to them.

Sample Flagship Hospital Cultural Beliefs®
Murphy’s Law
If anything can go wrong... *it will.*

O’Reilly’s Corollary
Murphy was an *optimist.*
The Blame Game – Early Roots

Traffic Accident Report

CHECK ONE: The accident was ☐ My fault ☒ Not my fault

EXPLANATION:

Coming home, I drove into the wrong house and collided with a tree I don’t have.
Traffic Accident Report

CHECK ONE:  The accident was ☐ My fault  ☑ Not my fault

EXPLANATION:

The indirect cause of this accident was a little guy in a small car with a big mouth.

Traffic Accident Report

CHECK ONE:  The accident was ☐ My fault  ☑ Not my fault

EXPLANATION:

The telephone pole was approaching fast. I was attempting to swerve out of its path when it struck my front.
Traffic Accident Report

CHECK ONE: The accident was □ My fault ☒ Not my fault

EXPLANATION:
The pedestrian had no idea which direction to go so I ran him over.

Traffic Accident Report

CHECK ONE: The accident was □ My fault ☒ Not my fault

EXPLANATION:
The guy was all over the road. I had to swerve a number of times before I hit him.
Traffic Accident Report

CHECK ONE:  The accident was □ My fault  ☑ Not my fault  

EXPLANATION:
I pulled away from the side of the road, glanced at my mother-in-law, and headed over the embankment.
Playing The Blame Game
The Steps To Accountability®

- SEE IT®
- OWN IT®
- SOLVE IT®
- DO IT®

The Change Management Model

Faculty Biography and Contact Info

In his role as Partner and Practice Leader for Partners In Leadership, Jared has consulted with leaders in some of the world’s most successful organizations in the world. He has extensive experience working in the healthcare industry and has helped non-profit, for profit, and governmental organizations.

His experience includes partnering and consulting specifically in hospitals, pharmaceutical teams, medical devices, healthcare information technology, and insurance organizations. Additionally, he is well regarded as an expert C-suite executive coach to hospital leadership teams, insurance leadership teams, pharmaceutical sales leadership teams, and medical device leadership teams of many of the largest organizations in the world.

Jared also actively participates in content authorship and curriculum development efforts for hospital clients, with an emphasis on transforming hospital culture to align with HCAHPS and CGHCAHPS strategies.

Partners In Leadership has authored four New York Times Best Selling Books and is largely recognized an industry leader in Change Management and Culture Transformation work.

Jared Jones
Jared.jones@partnersinleadership.com
508-641-2770

Bibliography

  http://cdn2.hubspot.net/hubfs/1821898/Resource_Downloads/Workplace_Accountability_Study-Exec_Summary.pdf?submissionGuid=744a9fc7-34c3-43c5-a8d2-a342c3c0528e

Additional Resources: