

Voices of Experience: Patient and Family Advisors Rounding on Patients in the Hospital

The Problem

Hospital patients and their family members often feel vulnerable, confused, and unclear about how to communicate their concerns. When they are unable to express their needs, patients' dignity, respect, and ability to heal may be at risk. Our ability to both understand and effectively respond to patients' concerns calls for innovative strategies that go beyond traditional patient satisfaction surveys. Patient and Family Advisor Rounding is a model utilized at Dartmouth-Hitchcock Medical Center that we have adapted for a pilot project on Farr 3, Farr 6, and Farr 7. Advisor Rounders are former and current patients of BIDMC who receive special training for this volunteer opportunity.

Aim/Goal

To understand, address, and improve the patient experience by launching a pilot Advisor Rounding program that aims to:

- Offer patients and families a personalized means by which to share concerns, compliments, and suggestions.
- Allow the hospital to respond to feedback in real time.
- Increase provider awareness of the impacts of their words and actions on the patient experience.
- Identify areas for improvement.
- Inform provider training and education.
- Strengthen partnerships between patients, families, and providers.
- Advance the culture of patient and family-centered care.

The Team

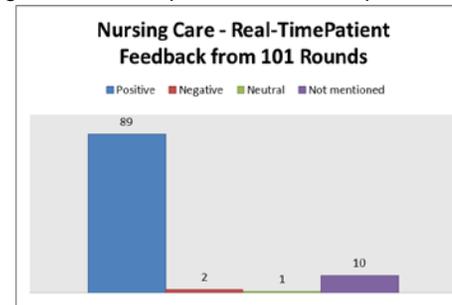
- Barbara Sarnoff Lee, LICSW, Social Work and Patient & Family Engagement
- Caroline Moore, MPH, Patient & Family Engagement
- Amber Moore, MD, Hospitalist, Instructor of Medicine, Harvard Medical School
- Advisors: Erica Dente, Jackie Giannakoulis, Randy Gonchar, Mal Malme, Kathy Moriarty, Matt Robert, Ashleigh Robert, Nicola Truppin, Stacey Whiteman
- Pilot Floor Nurse Leaders: Pamela Browall, RN, Farr 3; Donna Clarke, RN, Farr 7; Erin Conti, RN, Farr 3; Marjorie Serrano, RN, MS, Farr 6

The Interventions

- Trained advisors visit patients once per week for one hour on each pilot floor
- Advisors ask patients about their care experiences.
- Advisors document patient comments immediately after each visit in a database installed on an iPad.
- As needed, and with patient permission, concerns and compliments are communicated to appropriate staff members during rounds.
- Monthly de-identified summary reports are sent to nurse directors on pilot floors.

The Results/Progress to Date

Between November 2015 and February 2016, Advisors have visited with over 100 patients on three units. During each hour-long shift, an advisor rounds on an average of three patients, completes documentation for those visits, and debriefs with staff as needed. Overall, patients have offered overwhelmingly positive feedback about the care they have received from nursing staff, physicians, and other staff members including members of the environmental services team. Requests for immediate assistance with a concern have been rare, occurring in less than 10% of visits; requests have tended to relate to furnishings, equipment (phone, call button), or meals. Unit staff members have been accepting of advisor rounding and have valued the feedback and positive recognition. Patients have welcomed the visits and have thanked Advisors for taking the time to inquire about their experiences.



Lessons Learned

- Training of Advisors about what to expect and how to engage with patients effectively was critical to their readiness for visiting patients on their own.
- Nurse and Physician champions have been key to the buy-in and success of the Advisor Rounding pilot project.
- Despite concerns prior to launch about how to manage negative feedback, the team has found that real-time patient comments about care experiences have been overwhelmingly positive.

Next Steps/What Should Happen Next

- The team will strategize methods to improve collection and documentation of feedback in actionable terms to assist with improvement efforts.
- Additional Advisors will be trained, and additional nurse champions identified, to allow us to increase the number of sites and frequency of rounding.
- Data will be continually analyzed and utilized for staff training and to inform patient experience initiatives across the medical center.

For more information, contact:

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