

Building on a Culture of Excellence

Elevating Quality and Service to the Next Level at Hospital for Special Surgery

"Today is four weeks from the date of my surgery, and I wanted to tell you how pleased I was with the care I received at Hospital for Special Surgery. As a special note to my surgeon and anesthesiologists, I only have raves for the way they interacted with my family and treated me. From the intake through the surgical procedure to the nurse that took care of me in the PACU and the nursing staff on the floor, they all responded to my requests and needs in a friendly, professional and timely manner. The gentlemen who cleaned the room were also friendly and respectful. When my roommate was discharged, I was very impressed with the way his bed was cleaned. It appeared that every nut and bolt was washed."

– Letter from a patient, Dec. 28, 2009

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s those who work in hospitals know, it takes a lot of behind-the-scenes teamwork to elicit letters like the one at left.

Even with high volumes of the same kinds of procedures, keeping everything running smoothly is always a challenge. At Hospital for Special Surgery (HSS), a successful medical outcome is our top priority. Our entire organization is also dedicated to meeting the emotional needs of our patients and their families.

HSS is located in New York City and is a leader in musculoskeletal care, research and education. Patients with complex,

by Louis A. Shapiro, President and CEO
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severe and rare musculoskeletal injuries and diseases choose our hospital, even if this means traveling long distances and leaving behind their home-based support systems.

Patients come here because of our medical care and because we consistently rank at the top of quality and patient satisfaction surveys. We have been top ranked in the Northeast for orthopedics and rheumatology for 19 consecutive years, according to *U.S. News & World Report's* "America's Best Hospitals" issue. We also were the highest-rated hospital in New York City by *Consumer Reports* in 2009. And our 2009 Hospital Consumer Assessment of Healthcare Providers and Systems

(HCAHPS) scores were well above national averages in both overall hospital rating and patient willingness to recommend the hospital to friends and family who might also need our care.

When patients come here, they expect to receive the best in care, but they are often pleasantly surprised when we exceed expectations during their stay. Compassionate, caring and skilled is how I describe our service delivery philosophy, and these attributes are an integral part of our culture. Patients recognize that they are experiencing something unique here.



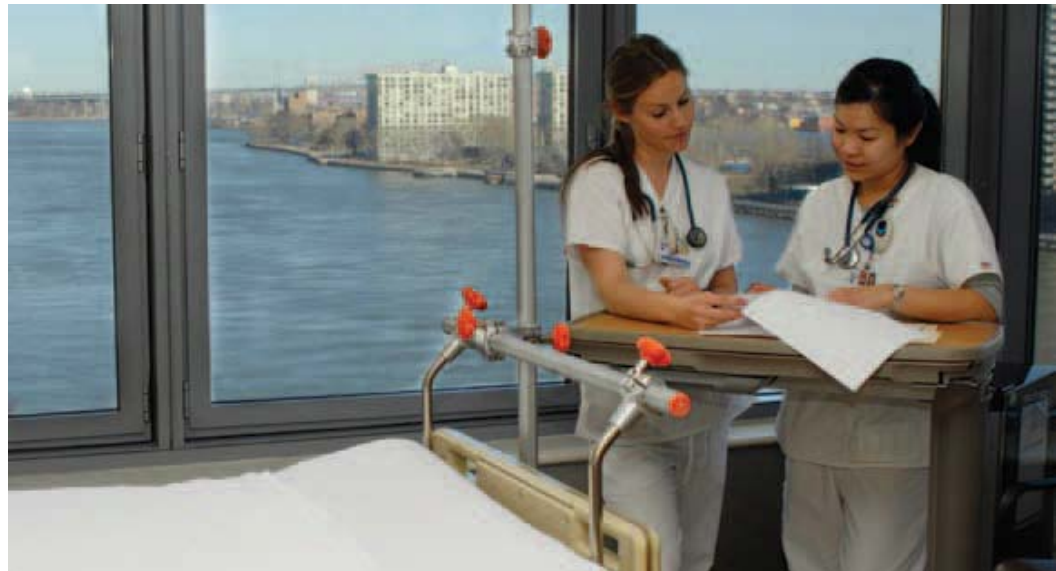
Our most recent Press Ganey report shows that almost 91% of HSS patients are likely to recommend the hospital, and we have been in the 99th percentile on that measure for six consecutive quarters. For overall rating of care, we have been above the 95th percentile for at least eight consecutive quarters.

Remarkably, HSS has improved its patient satisfaction scores during a period of intense growth. In the past three years, inpatient volume has increased by 30%. To meet this growing demand, we have made many improvements to enhance the patient experience, including renovating and expanding our Pain Management Center, pre-surgical screening area and lobby. We also embarked on a major construction project, which will add three new floors. And we've maintained our focus on patient satisfaction in collaboration with Press Ganey and through engagement among all 3,000 of our employees.

A Model for Improvement

When I became president and CEO in October 2006, I knew there would be a special challenge in implementing an improvement campaign because there was already such a strong sense of engagement among employees. So many of the employees had been here for so many years; there was an emotional bond to the institution. I felt a responsibility to build on this strength.

With a dedicated senior management team, I led an effort to create a strategic plan aimed at ensuring institutional alignment as the organization grew. The plan recognized the organization's unique mission and culture, emphasizing "people, quality, service, growth



After discharge, nurses review a patient's chart. Nurses at HSS focus on communication to provide quality care.

and economics." Our team analyzed all aspects of service delivery — including employee engagement, safety culture, nursing care and service excellence — with an eye toward continuing improvement across the organization. In fact, each employee is now evaluated according to strategic goals that encompass everything HSS does to provide service excellence. Frequently, these goals are measured by improvements in specific questions on the Press Ganey survey.

Employee Engagement

"I've never worked in a place where everybody is so friendly."

— Valerie Mrak, executive assistant

"There's always someone there for support, someone to go up to if you need help."

— Cortney Mahoney, RN, night-shift nurse

"What struck me most about the hours I spent at HSS was the consistently enthusiastic, respectful and polite attitude of your staff."

— Patient who underwent emergency hand surgery

Excellent patient care delivery is only possible with an engaged workforce. At HSS, Vice President of Human Resources and Service Excellence Bruce Slawitsky and I believe in a fairly simple principle: People should be excited about coming to work each day. If employees are engaged in their work and committed to the organization's mission, then patients are more likely to have an outstanding experience. This is easy to understand, but hard to implement and ensure in a sustainable way.

Employee engagement initiatives at HSS are developed and implemented through thoughtful planning and analysis by Slawitsky's team. Many initiatives were



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developed around the core goals of communication and employee support, enrichment and recognition.

However, it is also my job to help motivate all 3,000 HSS “family members” to provide service excellence. Because communication and transparency are so important, I meet every new employee at orientation, ask that they join me for breakfast at their three-month anniversary and encourage all staff to participate in town hall meetings.

Slawitsky and I facilitate a hospital-wide Employee Engagement Committee created with the sole mission of improving employee engagement. This committee — made up mostly of non-managers — discusses, plans and implements strategies for improving employee engagement. Slawitsky recently reported to our leadership group that the committee has been

instrumental in improving engagement and providing feedback on what is happening at the unit level. Among other things, the committee, through the work of organized sub-committees, has developed successful employee recognition programs and revised the orientation process for all employees.

The Employee Recognition Subcommittee of the Employee Engagement Committee has also developed many successful employee recognition programs in the hospital, including a popular “giving thanks” program in which employees send each other thank-you cards at Thanksgiving. I was pleased to learn that 3,000 cards were printed and distributed this year.

We are also focusing on leaders and managers. The Department of Organizational Learning and Development revised the leadership development program to include a new leadership

orientation process, developed new leadership competencies around themes of engagement, as well as a leadership training program around those competencies, and focused on action planning at the work group level to improve engagement.

Through these changes, managers have the opportunity to learn how to engage employees through listening, recognizing good work and providing growth and development opportunities. They are evaluated based on how well they adopt those practices.

Nursing has made some clear changes toward this goal, including creating a clinical ladder, in which each nurse has someone specific to go to for support, advice and training. In addition, a clinical nurse specialist position was created as a resource to the nursing staff. In charge of researching the most up-to-date evidence for nursing policies, this specialist looks for evidence-based practices and educates the nursing staff on all changes. In a field where clinical practice is constantly evolving, nurses feel supported when they know whom to turn to when they have questions.

Other departments have developed employee recognition programs unique to their needs. For example, JeMe Cioppa-Mosca, vice-president of rehabilitation, and her team have developed an employee recognition program based on Press Ganey comments. Names of employees who are recognized in positive patient comments are tallied, and those who are mentioned most are recognized at departmental meetings. To promote teamwork, comments recognizing the whole “team” are given the highest priority. In nursing,

the department votes on a "Nursing Staff Appreciation Award" every three months where a member of the nursing department support staff is honored and recognized by his/her peers.

While numerous, all of these efforts have been supported because we outlined them as a priority in our strategic plan. And employees are reporting higher levels of engagement. In an annual survey tool administered to all employees, we had dramatic improvement between 2007 and 2009. In this time, participation in the survey increased from 66% to 79%. The most recent 2009 survey revealed the highest employee engagement scores ever seen at HSS.

A Culture of Safety

"When employees care about patients, they care about keeping them safe."

— Michelle Horvath, assistant vice president of quality management

Safety is such a critical issue for us that we are always trying to ask patient care staff how we can work together even more toward higher standards. In February 2008, we administered the Press Ganey Safety Culture Survey for the first time. The survey was distributed to all 1,600 employees whose jobs affect patient safety.

While we did well in our 2008 survey, when the safety survey was re-administered 15 months later, the improvements were extraordinary. The overall mean score for the standard questions rose by 2.6 points, and nearly a

quarter (24.4%) of responses to standard questions were "most positive," the highest rating on the scale, compared to 20.3% in the previous survey.

Assistant Vice President of Quality Management Michelle Horvath attributes much of the hospital's improvement to its highly engaged staff. She helped to define her newly created position, and we all agreed that engaged employees are more likely to join quality improvement teams that work to provide patients with the safest and most efficient and effective care. In other words, there is a link between engagement and safety for patients.

Marion Hare, vice president of operations, supports our quality and culture of safety initiatives. These initiatives, which were implemented after the first Press Ganey Safety Culture Survey, were aimed at changing the culture by focusing on systems and processes, rather than the individual. They were designed by an interdisciplinary task force as a result of input from employees throughout the hospital. Because the survey measures employees' perception of safety, communication and buy-in are essential. Hare believes that involving employees ensures their commitment to a safer environment.

Under the leadership of Surgeon-in-Chief Thomas Sculco, MD, the Physician Advisory Committee for the Culture of Safety was formed. Members of this committee serve as role models for the other physicians on staff.

Because communication is key to creating a culture of safety, employees are encouraged to report good catches and near misses. In November 2009, an electronic occurrence reporting system was launched. This allows all levels of staff to communicate with leadership regarding errors, potential errors, systems problems and inefficiencies, so trends can be identified for system improvements.

Employees are recognized for reporting good catches/near misses, which supports employee engagement. For example, two MRI technologists were recently praised by name in the "Good Catch/Near Miss" section of the internal publication *Eye on Quality and Safety—Together, Moving Safety Forward*. These technologists stopped someone from wheeling a metal stretcher into the MRI area, which might have had disastrous consequences.

There are so many ways we look at safety, and the more eyes the better. We instituted Patient Safety Leadership WalkRounds as a forum for staff to observe and discuss safety-related concerns with senior leadership. Feedback is then provided to the staff regarding solutions to problems that are identified. For instance, during recent rounds, employees raised the concern that patients sometimes had to wait to receive needed medical equipment at discharge. As a result of the WalkRounds, the on-site supply vendor was contacted, and agreed to have an additional employee working on high-volume days. This has eliminated the wait time and

Patient Satisfaction Results at Hospital for Special Surgery

	4th Quarter 2007		4th Quarter 2008		4th Quarter 2009	
	Mean	Percentile	Mean	Percentile	Mean	Percentile
Inpatient Services						
Composite Score	86.1	76 th	86.1	74 th	87.6	88 th
Nursing Section	85.9	18 th	87.6	40 th	89.6	71 st
Overall Rating of Care	92.3	94 th	93.1	96 th	94.8	99 th
Likelihood to recommend	94.3	99 th	94.9	99 th	95.7	99 th

Note: The comparison group used for this chart is Magnet hospitals.

promoted safe discharge of patients, in addition to enhancing patient satisfaction and efficient patient flow.

Through communication, transparency, hard work and a committed work force, we have made remarkable strides in building a culture of safety in very little time.

Service Excellence

“In the five days I was at HSS, I interacted with 50 to 60 doctors, nurses and support staff. Everyone was very cheerful, attentive, responsive and competent... The HSS culture is far and away the best I have experienced.”

— Letter from a hip replacement patient received Oct. 27, 2009

Press Ganey scores, comments and patient letters are taken very seriously as indicators of service excellence.

Lisa Goldstein, the hospital’s executive vice president and chief operating officer, has been at HSS for 12 years and works closely with me. She reads two patient letters at the start of every management committee meeting, one praising the hospital and one from a less-satisfied patient. Every letter raising a concern is followed up by a phone call from our offices. Letters outlining complaints are considered an opportunity to learn and also an opportunity for service recovery. Lisa frequently cites examples from other service industries — retail, airlines, hotel — in her discussions on improvements. She says that everyone at HSS is focused on service. Even the materials management group has a mantra that “we live to serve others.”

A newly created director role at HSS helps us to focus on service excellence. Chao Wu, director of service excellence, leads a Service Excellence Council

meeting every month, in which department heads discuss the latest Press Ganey results and highlight department initiatives and best practices. This is also an opportunity for staff recognition, as employees and units who have made improvements in Press Ganey scores are publicly recognized and invited to present their results.

Press Ganey scores and comments are widely communicated to all levels of our staff through Wu’s efforts. The Nursing and Rehabilitation departments have a dashboard for Press Ganey results, color-coding trends in red, yellow and green. Results are also e-mailed to staff. Comments are analyzed and posted on the hospital’s Service Excellence intranet.

Both the Nursing and Rehabilitation departments also have internal committees to analyze Press Ganey scores and comments, suggesting and



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— *Louis A. Shapiro, president and CEO, Hospital for Special Surgery*

implementing improvements based on results. For instance, when Cioppa-Mosca received comments from inpatients stating that they would prefer to know in advance the time of their physical therapy appointments, the scheduling system was changed to accommodate that. Cioppa-Mosca and her team believe that this change improved service on many fronts: Patients feel good that they are being communicated with and given the information they want; nurses are able to schedule administration of pain medication to coincide with PT appointments and increase the efficacy of the drugs. It has helped the care team operate on the same page. Even housekeeping can run more efficiently, by scheduling when to make the patients’ beds while they are off to a physical therapy session.

Cioppa-Mosca sees this process as an excellent way to foster employee engagement through empowerment and open communication. When the inpatient team analyzes Press Ganey comments, it brings its own solutions to the table.

Nursing at HSS: A Case Study in Service Excellence

Our nursing staff was the first in Manhattan to earn the coveted Magnet status by the American Nurses Credentialing Center (in 2002), and we were the first hospital in New York State to achieve re-designation (in 2007) of that status. The nursing effort to improve patient satisfaction at HSS has been extraordinary.

Wu reports on the scores for this area and is pleased to share that nursing scores have really driven the

improvement in the organizational Press Ganey scores over the last two years. Since 2007, HSS has made a 3.5-point improvement in the nursing section and a 2.4-point improvement in the personal issues section of the survey. In response to “How well was your pain controlled?” HSS is now in the 99th percentile of Magnet-accredited hospitals. On “Promptness of response to call bell,” we have made a 5-point improvement since 2007.

Our nurses implemented change in a systematic, thoughtful way based on data with the goal of improving patient care to achieve better patient outcomes. Vice President of Patient Care and Chief Nursing Officer Stephanie Goldberg says that the nursing department made its most significant improvements as a direct result of the 2007 National

Database of Nursing Quality Indicators' nurse satisfaction survey. In that survey, many nurses could not articulate what the delivery of care model was at HSS, indicating that the existing care model was not well defined. At the same time, patient demographics were changing, with the hospital treating not only patients with orthopedic conditions, but patients with other medical problems as well. Our team wants to make sure that patients receive the best care no matter what.

With this goal in mind, Goldberg and the nursing leadership first conducted an intensive review of evidence-based practices to find a care model that made sense for the HSS population. She and her staff then developed a new model called Redesign of Care at the Bedside, which includes a clinical ladder designed to provide nurses at all levels with the support, training and career direction they need. Within this ladder, which helped us address patient needs, we were able to better support the interest in professional dedication that already existed among our nursing staff. All nurses are given an opportunity, based on experience and commitment to professional activities and education, to apply for advancement in the nursing clinical ladder program. Nurses can advance from clinical nurse 1 to clinical nurse 3 based on their experience.

Like everything we do at HSS, the model was designed in a collaborative way, through communication with nurses and the interdisciplinary team. Because the goal was to elevate the role of the nurse, and because leadership clearly communicated this goal, staff nurses were very supportive of the changes.

Specific items which we implemented included:

- Every hour nursing staff round on each patient, and ask, "Do you have any pain?," "Do you want to move or reposition?" and "Do you want to go to the bathroom now?" Not only do these questions respond to many Press Ganey questions in the nursing and personal issues sections of the survey, but they are proactive rather than reactive, often eliminating the need for patients to use the nurse call bell.
- Redesign of nursing stations. On two floors, large nursing units of 42 beds were broken down into smaller 20-22 bed units. A clinical nurse 3 is stationed in each of these units. The operating rooms were similarly redesigned for specific surgical services, with a clinical nurse 3 assigned to each service and responsible for coordination of patient care.

Press Ganey and nursing satisfaction scores went up dramatically as these plans were implemented. Patients and their families feel that the nurses are there for them. They feel that their personal issues are met, and that they are cared for. We plan to use these same nursing care strategies in our new inpatient units as construction is completed.

During this same time, additional steps were also taken to improve nursing satisfaction. The roles of all caregivers were redefined, and new education programs, orientation processes and governance structures were redesigned

to meet the needs of the delivery of care model. Participation in a governance structure is important because it gives nurses clinical decision-making authority in the care of their patients. This is a professional responsibility for nurses at all levels at HSS.

We found that as a result of these initiatives, nurses and patients became happier. National Database of Nursing Quality Indicators and Press Ganey scores increase together. This is not surprising. When you have an engaged work force, service and quality will improve.

Conclusion

Our institution has long had a culture of pride, with employees caring about each other and their patients. Our strategic plan has helped to support the culture in a comprehensive way. It is the culture of HSS to say "while we are very happy with our performance, we're never satisfied." We want to take our success, lock in our improvements and move on toward the next level of achievement.

With communication, transparency and a lot of hard work, we will continue to raise the bar on excellence in both quality and service.

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