Integration of Caring Science Research across Settings and Implications for Practice

STTI 26th Research Congress: San Juan, Puerto Rico
July 26, 2015

Presented by:
John Nelson, PhD, MS, RN, Healthcare Environment
Jayne Felgen, MA, RN, Creative Health Care Management
Agenda

• HCAHPS and Falls
• Pause and Flow
• Models of Caring
• Collaborative Interpretation
• Implications for Further Inquiry
HCAHPS

• Results
  – 223 patients responded to HCAHPS
  – Factor analysis revealed 1 factor

<table>
<thead>
<tr>
<th>HCAHPS Item</th>
<th>Loading</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregivers did everything possible to help me cope with my pain.</td>
<td>.900</td>
</tr>
<tr>
<td>Nurses listened carefully to me.</td>
<td>.845</td>
</tr>
<tr>
<td>During this hospital stay, my pain was well controlled.</td>
<td>.832</td>
</tr>
<tr>
<td>Caregivers talked to me about help I might need when leaving the hospital.</td>
<td>.774</td>
</tr>
<tr>
<td>Caregivers described possible side effects in a way I could understand.</td>
<td>.696</td>
</tr>
</tbody>
</table>
• Results
HCAHPS

• Interview Results
  – Key Finding 1: A single act of inattentiveness prompted the low score
  – Key Finding 2: Could not get staff to respond
HCAHPS

• Interview Results
  – Key Finding 3: Poor empathy/caring of staff
  – Key finding 4: Communication
  – Key finding 5: Clean bathroom
HCAHPS

• Key points of secondary analysis:
  – **Careful listening** had a positive impact on pain control scores
  – **Higher education** had a negative impact on listening and pain scores
HCAHPS

• Key points of secondary analysis:
  – **Overall health** positively impacted scores for listening, pain control and medication education
  – **Payor group 1** had a negative impact on scores for medication education and discharge instructions
HCAHPS

• Key points of secondary analysis:
  – **Race**, negatively impacted:
    • listened to scores (being Indian or Black),
    • medication education (White) and
    • discharge instruction scores (White or Asian)
  – **Race**, positively impacted:
    • discharge instructions (Latino)
HCAHPS

• Key points of secondary analysis:
  – **Age** negatively impacted scores for medication education and discharge instructions
Patient Falls

• Results

Model: USA, HFW
(explain 5.1% variance)
Patient Falls

• Results

Model: USA, SJHMC
(explain 4.6% variance)
Patient Falls

• Next steps
  – Henry Ford doing secondary analysis on complete data set extracted from EMR
  – St. Joseph using Kindles and training in knowledge management to improve data and analysis
Pause and Flow

• Themes Causing Pause in Care Delivery
  – Physical Environment
  – Redirection
  – Medication Administration Interruption
  – Need to leave the unit
  – Phone Calls
Pause and Flow

• Next Steps
  – Prioritize identified themes
  – Develop interventions
  – Design implementation processes for change
  – Continue to monitor, measure & revise processes
Results, What Felt Caring?

- Nothing
- General comments of good and/or compassionate care
- "Caring" staff
- "Wonderful, excellent, superb, fantastic, tremendous, outstanding, great or brilliant" care
- Attention paid to me
- Everything
- We were kind
- Emotional comfort
- Communicated
- Specific act
- Addressed my comfort
- Showed interest in me
- Attitude
- Took care of my family
- Miscellaneous
- Addressed my pain
- Intentional and/or personal greeting
- Conversation and/or relationship with staff
- Helped me wash up
- Listened
- Understanding staff
- Teamwork
- High standard of care


Jan-Mar, 2015
Apr-Jun, 2015
Results, What Did Not Feel Caring?

What happened today that did not feel like compassion?

- Nothing
- Had to wait too long
- Miscellaneous
- Rude behavior of staff
- Lack of communication
- Lack of privacy
- Lack of compassion

Percent
Relationship Based Care (RBC)
Collaborative Interpretation & Implication for Further Inquiry
Contact Information:

John W. Nelson
888 West County Road D., #300
New Brighton, MN 55112
651-633-6519 (office phone)
jn@hcenvironment.com
Thank you for listening!