

Impact of leadership rounding on patient satisfaction with hospital at home

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INTRODUCTION

Topic

- Impact of leadership rounding on patient satisfaction with hospital at home (HAH)

Background

- VUMC has implemented a new HAH program that provides acute care services to patients to in their own home
- Assessing patient satisfaction with HAH is important to help refine program interventions and contribute to growth of the program
- Variables that impact patient satisfaction may differ between the home and hospital environment (Burl et al. 2006, Dubois & Santos-Gediman 2001, Goossens et al. 2013, Parker et al. 2002,)
- Leadership rounding in the hospital setting has been shown to improve patient satisfaction (Dajani, et al., 2021, Fennimore et al., 2019); however, there is no current literature on the impact of leadership rounding for patients receiving HAH care

Problem

- Overall patient satisfaction scores with HAH are lower (70%) than the target score (80%) based on 9 months of cumulative data
- The current patient satisfaction survey process at VUMC does not provide opportunity to gain further understanding of and/or mitigate for dissatisfiers prior to patient discharge

Aim

- Increase satisfaction with VUMC HAH program from 70% to 80% within two months of initiating a leadership rounding program

METHODS

- An electronic interview guide using open ended questions based on literature findings and program feedback was developed
- The nurse manager or charge nurse made telephonic calls to the patient and/or caregivers after day one of being admitted to the HAH program
- Interventions were applied immediately where able and/or escalated to the appropriate resource as needed
- Feedback and follow up was documented in the electronic rounding guide
- Trends from the data collection were identified and addressed at the program level where able
- Overall patient satisfaction with HAH was measured using Press Ganey survey results

RESULTS

Participants:

- 37 out of 48 patients admitted to the program participated in rounding
- Exclusion reasons included: patient transferred back to brick-and-mortar hospital (n=5), patient discharged prior to interview (n=5), and patient declined (n=1)

Findings:

- The top three reported satisfiers with HAH include: comfortable environment (n=26), staff (n=15), familiar environment (n=13).
- The top three reported challenges with HAH include: equipment/technology (n=14), medication administration (n=11), and caregiver burden (n=3)

Outcome:

Overall satisfaction with HAH increased from 70% to 82% within two months of initiating a leadership rounding program

FINDINGS

Figure A: Reported satisfiers with HAH

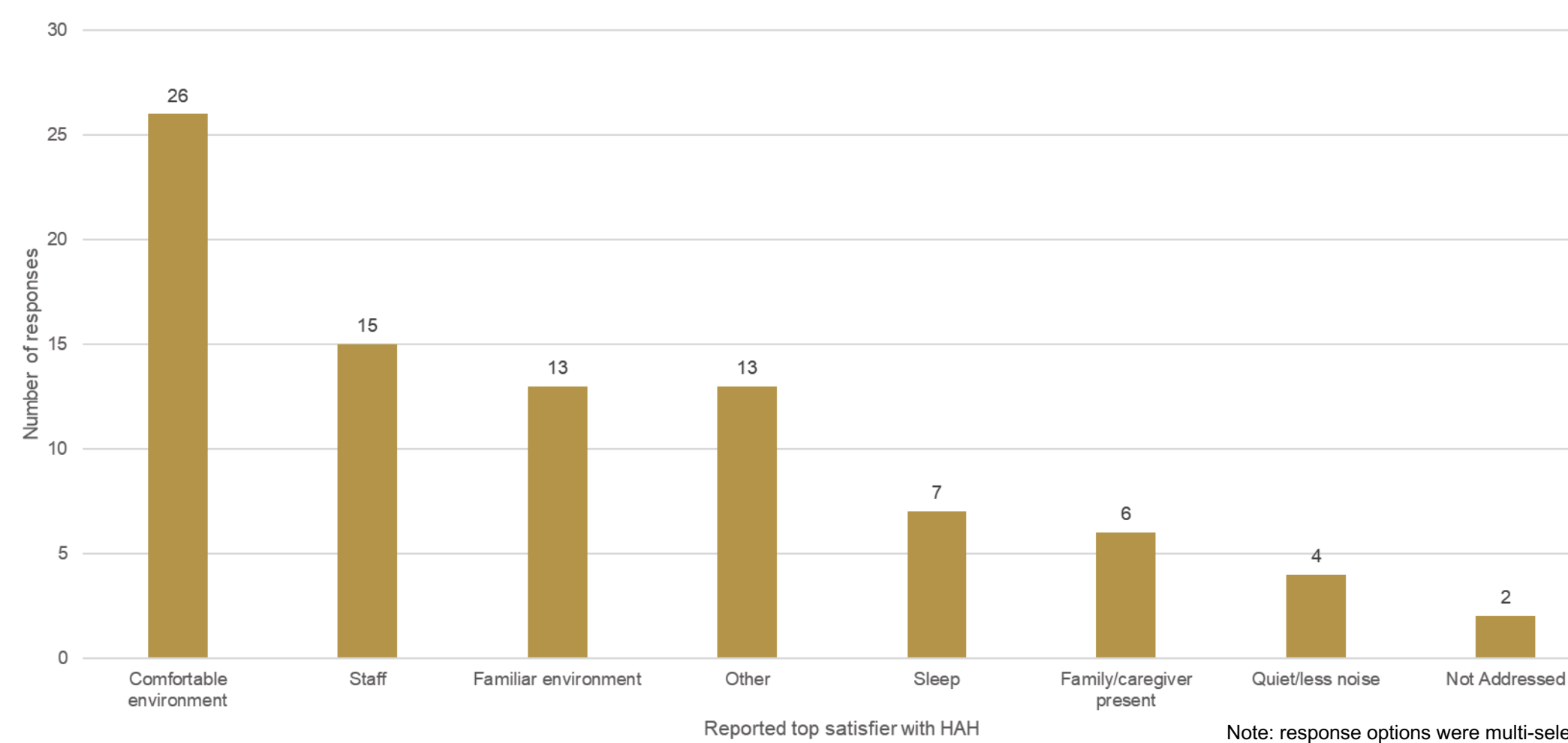
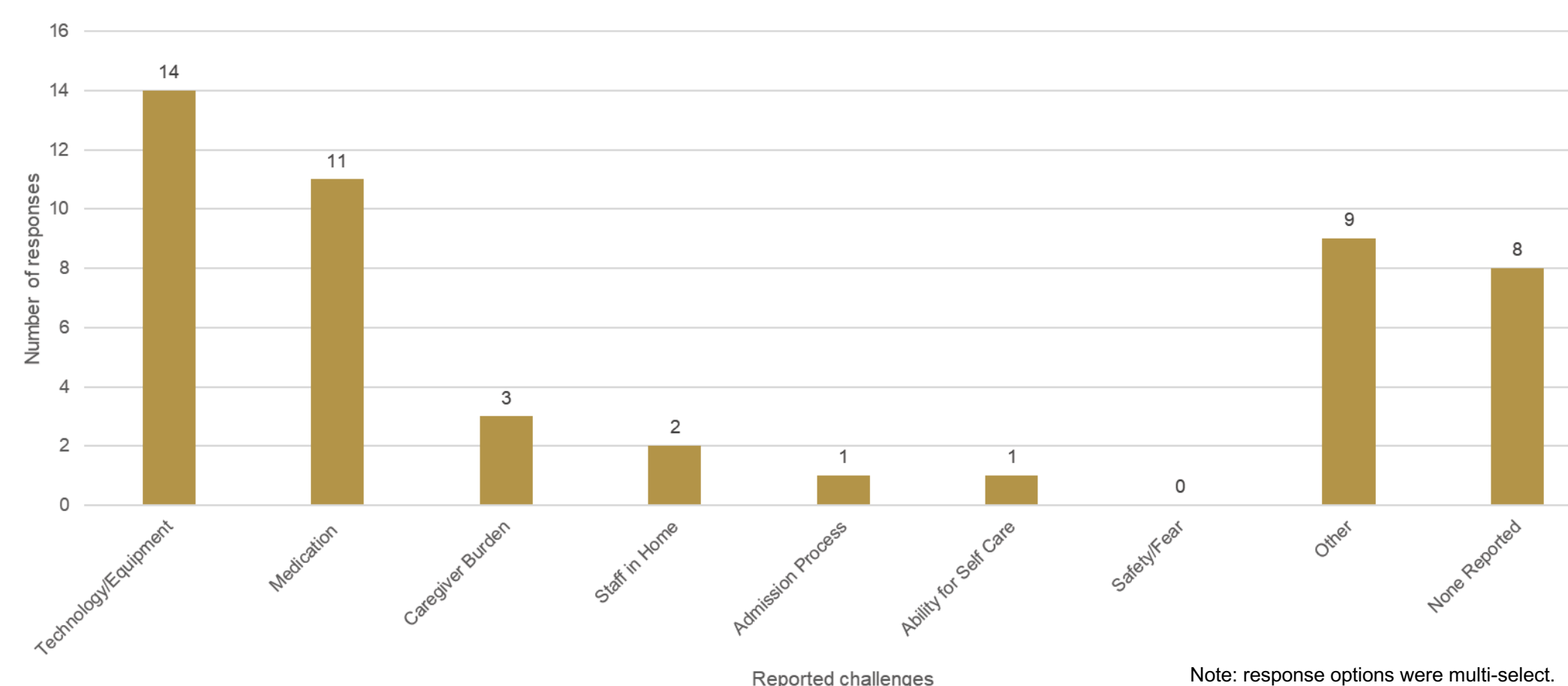
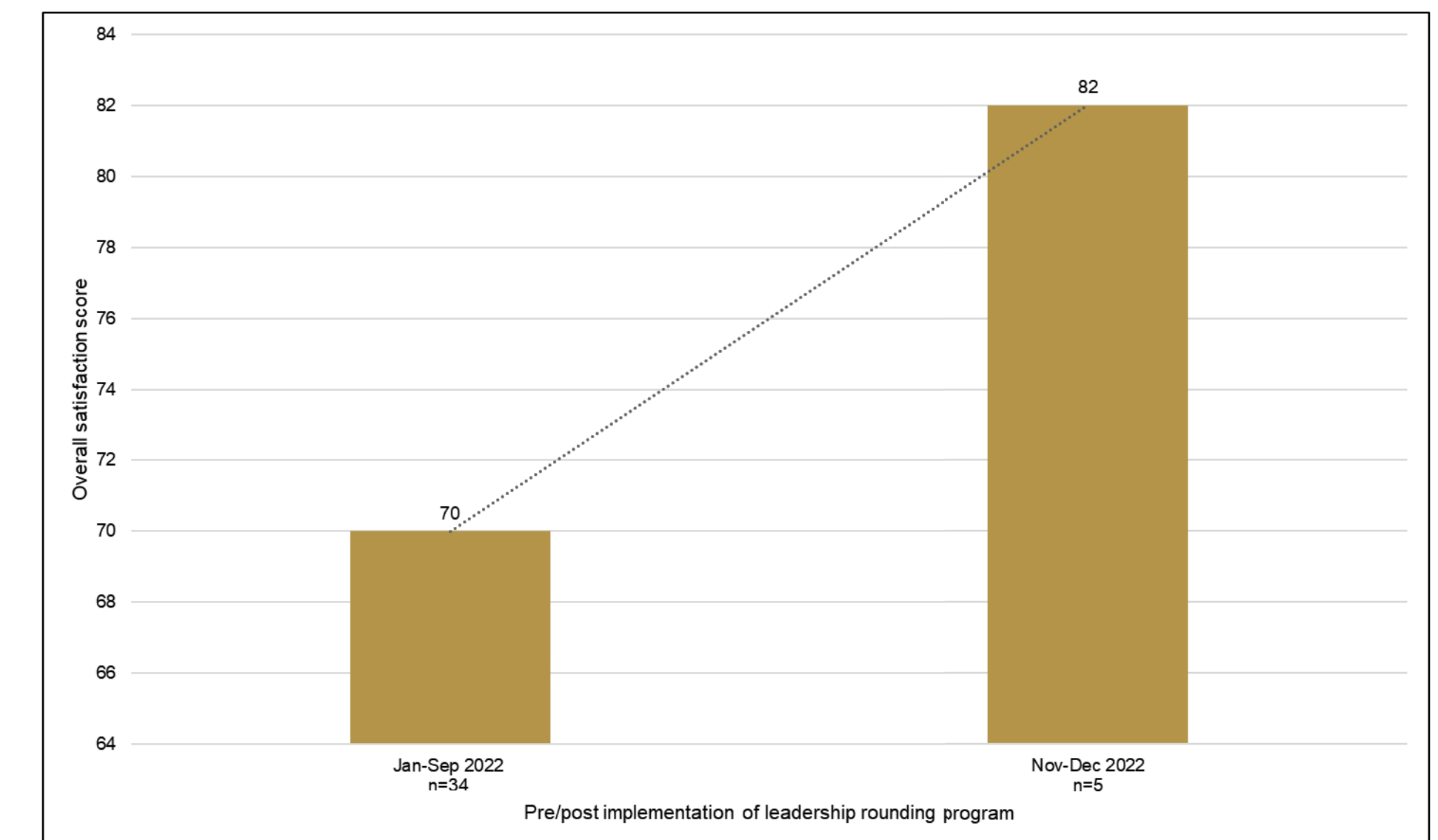


Figure B: Reported challenges with HAH



OUTCOMES

Figure C: Pre/Post Press Ganey Overall satisfaction with HAH scores.



IMPLICATIONS FOR PRACTICE

- Leadership rounding can be effective in improving satisfaction with hospital at home
- Identified trends with dissatisfiers can be leveraged by other programs to proactively apply mitigation strategies
- The rounding guide used in this program can be used to assess satisfaction with HAH in other programs/settings

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