Perioperative Care Centre

Community Engagement Summary July 15, 2014

BACKGROUND

The Perioperative Care Centre at VGH is an open design unit. This is consistent with recovery and perioperative units within VCH. This model allows for nursing staff to have eyes and ears on all patients in the unit. In this environment, conversations between staff and patients as well as between staff can be easily heard by many patients in the unit. There is no quiet space that staff can go to have conversations between staff. The unit wants to ensure that patient care is of a high standard, and this includes ensuring confidentiality of patient information and minimizing or eliminating staff conversations that could negatively impact patients and could result in complaints about patient care.

COMMUNITY ENGAGEMENT PROCESS

Community Engagement (CE) was asked to support engagement of past patients of the PCC in order to inform the PCC unit of VGH, and by extension, recovery and perioperative units throughout VCH, on how to improve patient care and experience in this type of environment. CE contacted past patients via letter inviting them to participate in one on one interviews to share their experience. The intent was to understand the impact of staff conversation on patient care and experience. In addition, members of the Community Engagement Advisory Network were invited to participate in a focused discussion to develop messaging that could be provided to patients and family members prior to care in the unit. Patients that were interviewed were also asked to suggest messaging that would have been helpful to them and their family members prior to and during their stay in the PCC. Patients that were interviewed were also asked if they would be willing to participate in training sessions for staff, to relay their experiences and deepen the understanding of staff on the patient experience.

SUMMARY of PATIENT INTERVIEWS

This is a summary of feedback gathered from past patients, of the PCC, relating to navigation, the environment and support to patients. Messaging for the development of any materials has been included in the focus group summary.

Navigation support

- For persons that need to take the elevator from the lower level include signage to the left of the elevator (while facing the elevator) at a lower height
- In the elevator signage bold Admitting and lower the signage
- On level 1 move the standing signage nearer the info desk
- The script that Admitting staff gives for direction to PCC needs to be clearer or have them hand patients a little card with the directions
- Consider having a volunteer offer to accompany people from admitting to the PCC
- Consider making the signage or font larger for PCC if this is a highly frequented place
- On JP Level 1 the signage to inform what is on each floor is across from the elevators and should be beside the doors.
- Consider lowering signage if possible as in some places it is too high
- On level 2 the large double doors to access the hall to PCC have no handicap mechanism and are quite heavy



Environment and Culture

"I want to share that both at VGH and UBC the staff and my care was fantastic!"

"I had 3 separate experiences in PCC and each one was expeditious. The staff knew what they were doing and was very friendly. I felt well cared for"

"I was overwhelmed with the care and attention I received"

- When I got up to the desk and said my name, there was recognition and they welcomed me.
 I felt comforted to know I was expected.
- Allow for space in the waiting room for a wheelchair to 'park'. Remove at least 2 chairs.
- Everything was on schedule and even faster than anticipated.
- Staff had an easy style and gentle good humour. They never seemed stressed
- The environment and care in the PCC was excellent and attentive, I never felt ignored or left on my own.
- Even with the side curtains pulled I was able to hear conversations between nurses, physicians and patients.
- There were moments to lie there listening and I found the bustle and noise comforting to a degree.
- I recall hearing challenging conversations which I thought were handled very well.
- While there was clearly a wide variety of conversation, there wasn't gossip and there was no complaining. The conversations were appropriate.
- I like to ask a lot of questions and the nurses accommodated me and answered them.
- If staff is conversing then engage me in the conversation please.

Messaging to support patients

• It was not clearly communicated to me about the need to make arrangements for my

- partner to pick me up. Clearer messaging on this is needed.
- The need to use swabs was not clearly communicated to me as I now understand that you have to purchase them yourself. They did provide them as I did not know this.

FOCUS GROUP SUMMARY

The focus group, held with Community Engagement Advisory Network members, and the one to one interviews with past patients provided feedback on the importance of creating a culture and environment of professionalism and how to best message to patients and families on what to expect when they are in the PCC.

Environment and Culture

- Initial waiting room should not have any barriers; it is intimidating to be confronted with Plexiglas and barriers.
- Certain levels of noise can be very disconcerting to patients post op; they need calm and quiet
- personal conversations should be kept to a minimum in a workplace environment
- staff need to be professional at all times
- professional conversations should be kept respectful and considerate of patient privacy
- ask staff to consider other venues where they may feel, from their perspective, that personal conversations are not appropriate
- incorporate patient perspective in training and education or use role plays with staff so they can envision the patients experience
- It is important for staff to understand what patients feel and experience
- if the conversation was appropriate to include patients in conversations then staff should do so as this could reduce their anxiety.



 It is a place of recovery and healing so quiet is important, but having a nurse connect with you and hearing a calm, soothing voice is so welcome and reassuring.

"I was in UBC and had surgery and I agree the conversations do occur. I could hear myself being talked about at all times. You are doing nothing but looking around so you can hear what conversations are going on."

Messaging to support patients

- Explain to patients that this is an open room, you may hear conversations between health care providers
- Need to explain the reason why the PCC is designed as an open unit- this could reduce anxiety and limit complaints
- It is important to constantly talk to patients and reassure them. Tell them who you are, (staff). Tell the patient how long they have been in PCC and how much longer they will be there. Tell them if their family is waiting for them or is there to pick them up
- Staff could ask patients; are you feeling safe?
 Are you warm? Mix in the 'do you feel safe' questions with other questions as needed?
- Nursing staff should always introduce themselves to the patients
- It is important that staff assure patients they are there to care for them. to keep them safe and help them recover; patients need to hear this

Written messaging and signage

 Any messaging developed should include information about professional conduct and what patients should expect.

- Consider developing 2 messages one for patients/families and one for staff
- Have the message reflect a partnership approach not a monitoring of staff by patients but an approach of partnering together to keep the care safe and respectful
- In developing preparatory materials include information about the unit and why it is designed the way it is. State this is how it designed and it is best practice.
- Provide some messaging about how loved ones can come to the bedside.
- Don't focus on challenges of the space as this could imply that the design of PCC is reflective of a cutback in staffing so the design allows for less staff to care for more patients.
- Have messaging up on the walls of the PCC and the waiting room "Shhh patients are recovering/ healing"
- Messaging should include info about the physical needs of post -op patients for calm and quiet
- Messaging should take a variety of formats a paper hand out and a sign on the wall both to remind people that the PCC is a place of recovery
- Have a picture of the PCC on the signage and handout so people know what to expect
- Keep the messaging short and simple
- What to expect this is the PCC. This is what it looks like (picture). It is one large room because it is important for all staff to see and hear all patients at all times. It is important that it is as calm and as quiet as possible.
- For a handout make it 1/3 the size of an 8.5x11 sheet
- Have larger print size as this is important for older patients
- If possible can messaging be handed out in advance by the surgeon or available online during pre-admission call



- Is there a website for orientation for surgical prep or a You Tube video
- Could the messaging be emailed out to patients pre surgery
- In advance of arriving it would be good to have someone explain the environment of the PCC, an explanation for the layout and why it is the way it is; open with all eyes and ears on patients.
- Add information about privacy in messaging to inform patients and their family members to be aware of and respectful of the patient space.

Ongoing feedback mechanisms

- Offer options for patients to be able to offer input after their stay
- Patients are very unlikely to say something at point of care if they feel scared, anxious

Consider a quick survey on discharge from the PCC which include a few simple questions about their experience - maybe an iPad can be used (handed to them) to answer questions. However it was noted that patients may not feel able to answer immediately post discharge.

Suggested questions

- Do you feel the staff acted professionally? Yes/No.
 - Why or why not?
- 2. Did you feel safe? Yes/No. Why or why not?
- 3. Is there anything we could have done to improve your experience?

Suggested draft messaging

Welcome to the Perioperative Care Centre. The PCC is an open design care area. This means that all patients at all times are being watched and listened to by all the nursing staff. A picture of the PCC is on the back of this card.

The PCC is a place of recovery and healing and should be calm and quiet. Please help us keep it calm and quiet. If at any time you feel it is too loud or you feel concerned about privacy or feel unsafe please let the nurses know right away.

It is our privilege to care for you today.

Your Perioperative Care Centre Nurses

NEXT STEPS

The Perioperative Care Centre will use this feedback to inform improvements to patient care and health outcomes. The feedback will inform the development of messaging to better prepare and inform patients and family members on what to expect when in the PCC. This feedback will also be used for education and training with the PCC staff to enhance practice and improve the patient experience. Patients will be invited to speak with staff to relate their experiences allowing staff to understand and learn from the patient perspective. The PCC will work with maintenance to determine if the unit can undergo changes to help facilitate patient's needs related to signage and space. The PCC will work with the admitting department to ensure directions given to patients are clear and create a map that facilitates patients easily finding their way to PCC. Further work with Pre-Admission Clinic will ensure pre-op teaching is clear and concise.



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