Sheffield Teaching Hospitals NHS

NHS Foundation Trust

Improving Patient and Customer Experience
Workshop 1

Your Name: Date:

Red Vanilla

Workshop Content

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3 hours 20 mins		

1.   Welcome and Aims

Welcome to the first of two half-day workshops designed to improve patient and customer experience within Sheffield Teaching Hospitals NHS Foundation Trust.

These workshops support the Trust's 2012-2017 Corporate Strategy "**Making a Difference**".

The workshops are designed to build on the results of patient and staff feedback including surveys, compliments and complaints.

What is the Overall Purpose of the Workshops?

The overall purpose of the workshops is to look at ways of improving patient and customer experience so that patients and customers have a ***positive experience*** of the Trust.

What are the Specific Aims of the Workshops?

There are 3 specific aims:

- To share examples of existing best practice in providing patient-centred services.

- To ensure that the people we serve are at the heart of all that we do (Patient First Trust Value)

- To improve patient perception and patient feedback about the care they receive.

Using the term "Customer"

For the purposes of this workshop we use the term "Customer" interchangeably with "Patient".

The clinician/patient relationship is very different and much more sophisticated than, for example, a "retail customer"/sales assistant relationship.

However applying some general principles of 'customer experience' within an NHS organisation can help improve patient experience.

We will also refer to 'Internal Customers' i.e individuals, teams and departments within the Trust who you provide a service to.

2.   Introducing Customer Experience

Customer experience can help us consider how patients feel about their time in hospital. Taking an 'internal' customer experience approach can also help improve the way individuals and teams work together to deliver a positive experience for patients and visitors.

Patient Experience: The experience of patients when accessing healthcare services based upon how they and their families feel about the care and support that they have received.

A patient's (and visitor's, colleague's, commissioning organisation's) customer experience is made up of three components:

Customer Experience

Clinical and Non-Clinical Services

Customer Expectations

Customer Care
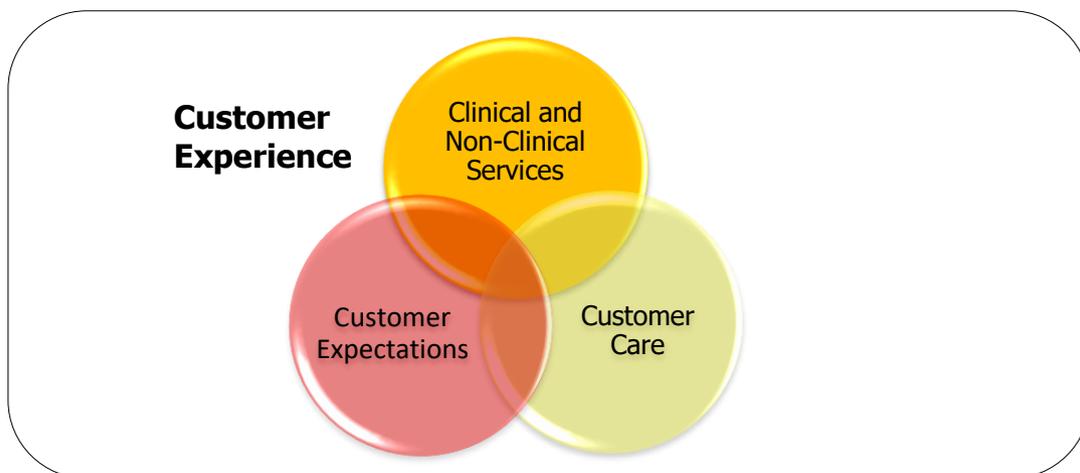
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Clinical and Non-Clinical Services – <u>What</u> you deliver

The delivery of clinical and non-clinical services. Being efficient, effective and accountable for our actions.   Measured in terms of speed, accuracy, efficacy, quantity and quality etc.

Customer Care – <u>How</u> you deliver

Being respectful, kind, fair, valuing diversity, profession, friendly, caring, attentive, personalised etc.

Customer Expectations

The expectations that the customer has about clinical and non-clinical services and customer care. Customer expectations are met, not met or exceeded.

2.1   Customer experience in practice.

This clip from the BBC's The Office shows the difference between customer service, customer care and customer expectations.

The clip is only 1 minute 15 seconds long. You can tell a lot about a customer's experience from just brief interactions.

Please answer the following 4 questions:

https://www.youtube.com/watch?v=2Z8pgV74_Hw

Q1	Customer Expectations What sort of experience is the customer expecting?

Q2	Service Out of 10 how would you rate the service provided and why?

Q3	Customer Care Out of 10 how would you rate the customer care provided?

Q4	Customer Experience What was the customer's overall experience?

If we can't cure a patient or make them better what can we do in terms of patient experience?

3.   How Standards Can Help

The Trust's Patient Partnership Department have 10 customer care promises which were developed in 2011.

The 10 customer care promises describe the standards expected of employees working in at the Royal Hallamshire Hospital and Northern General Hospital main Receptions.

The 10 promises were developed **before** PROUD but link in with PROUD

| Patient Partnership Department 10 Customer Promises	Working in groups, Please give an example of how you would meet 3 of these standards.
Proud • Be welcoming • Be informative • Be helpful	
Respect • Be respectful • Be understanding	
Ownership • Keep improving	
Unity • Work with others	
Deliver • Be professional • Be committed • Be proud of our environment	

4.   Your Role in Influencing Patient Experience

This section supports the Trust's PROUD value - Ownership:

Displays a can-do attitude taking responsibility for their own actions; both invites and acts on feedback received.

What is your role in influencing patient experience?

- In groups please draw the diagram below on a flipchart.

- Write down the factors within the Trust and MSK that contribute to patient experience.

- Place each factor in one of the three circles depending on whether you believe you have no control, some control or total control over that factor.
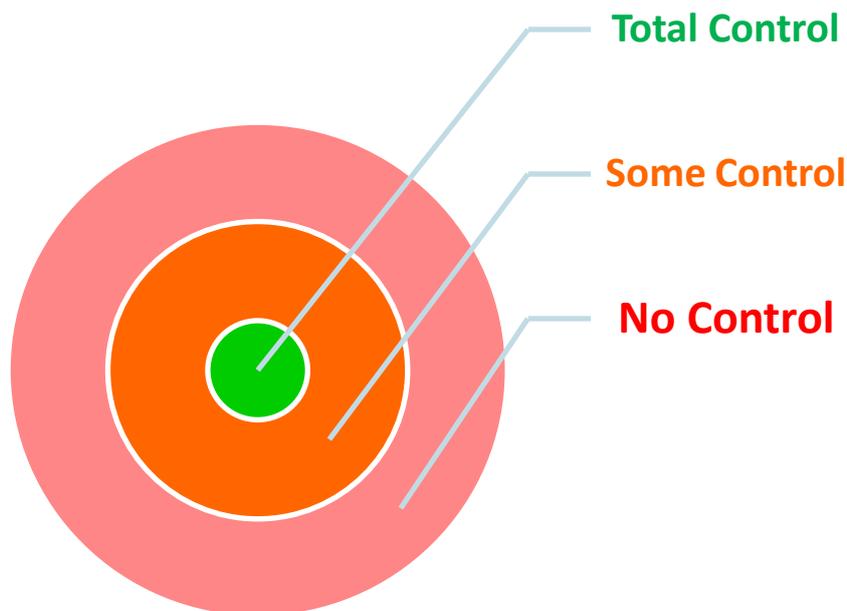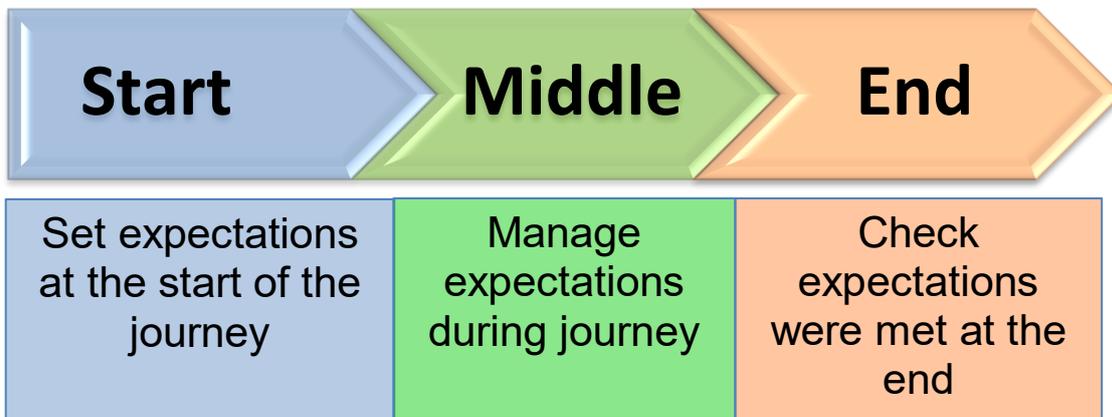

For factors that you have no or only some control over what actions can YOU take that would give you some degree of control?

Your Actions:

5.   The Customer Journey

A 'customer's journey' is a method of looking at a patient's or visitor's experience from start to end:

Start	Middle	End
Set expectations at the start of the journey	Manage expectations during journey	Check expectations were met at the end

- A customer's journey may be 'longer' than a clinical/care pathway.

- Patient experience begins at the start of their customer journey and the customer's journey starts **before** the patient arrives at hospital.

- Customer journeys may start, for example, with a referral from a local District General Hospital or a patient parking at the NGH before presenting themselves at A&E following an accident.

- A customer journey may end with the patient completing the Friends and Family Test when they are discharged.

- Patients' experience of hospital made be made up of lots of different journeys

The Friends and Family Test asks:

'How likely are you to recommend our ward/ department/service to friends and family if they needed similar care or treatment?'

Patients may be asked to answer the question by postcard, text or a telephone call.

5.   The Customer Journey

1. The <u>start</u> of the customer journey is where people's expectations are first created.

2. If people's expectations <u>are not managed</u>, they may be unrealistic and therefore cannot be met.

3. Unmet expectations can lead to poor patient and customer experience – even if the service and customer care are good.

4. <u>Managing </u>your patients' and your customers' <u>expectations early and effectively</u> can help provide a positive experience.

Managing Expectations and Complaints

5. When someone makes a formal complaint, managing expectations about the complaint process becomes very important as the complainant is already unhappy and dissatisfied.

Managing Expectations and Avoiding Conflict

6. Managing people's expectations gives people a feeling control, when people feel a lack of control, this causes stress which sometimes will lead to aggression and violence

However.....

It's not always <u>you</u> that manages your patients' / customers' expectations

Who else is involved in managing YOUR patients' or your customers' expectations?

Do you always give accurate information to other people's patients and customers?

5.1 Improving the Customer Journey

The **start of a customer journey** is particularly important for 2 distinct reasons:

1)   Patients' and customers' expectations are first set

2)   First impressions are formed and rapport is either built or destroyed

Under Promise and Over Deliver

One way to manage and to meet patients' and customer's expectations is to add an appropriate 'buffer' in case something takes longer than you expected.

This is known as: "Under Promise and Over Deliver".

If you are going to under promise and over deliver, it should be done ethically and with integrity.

Royal Hallamshire Hospital

Why might these phrases not manage expectations? How could they be improved?

5.1   Improving the Customer Journey

What can you and your team do to improve the patient or customer journey so that you manage people's expectations better?

The change or improvement could include any of the following:

- Signage
- Systems and processes
- Communicating expectations to patients
- Under Promise, Over Deliver
- Working together/sharing information.

Start of the Patient and Customer Journey

Middle of the Patient and Customer Journey

End of the Patient and Customer Journey

6.   Internal Customer Experience

Definition of "Internal Customer"

An internal customer is an individual, team or directorate who you provide a service to.

An internal customer approach means treating other teams and individuals you need to work with as customers themselves.

An internal customer approach also means considering how you might impact on another team's work, for example by failing to deliver a service on time or as they requested, by failing to accurately manage the expectations of their patients or customers.

Service Provider	Internal Customer
Pharmacy	Clinicians wanting to treat or discharge patients
Porters	Colleagues requesting a patient move
Radiology	Colleagues needing medical imaging to treat patients
Medical Records	Colleagues needing access to patient's medical records
Finance Directorate	Employees with payroll enquiries
IT Directorate	Employees with IT enquiries
HR	Managers with recruitment requests

A strong 'internal customer' culture may lead to a better experience for the patient.

Heavy workloads and pressure of work can be a barrier to treating others as internal customers.

Multi-disciplinary teams are an effective way of working together. An internal customer approach can be an effective way of looking at relationships within an MDT as well as relationships between the MDT and other parts of the Trust.

The Trust's values provide a useful guide to taking an ***internal customer*** approach when working with others.

The 10 Customer Promises and the Trust's Values shown on page 5 apply to internal customer experience, as well as patient experience.

6.1   Stop, Start, Continue

Stop, Start, Continue can be a useful tool for looking at ways to make changes and for giving feedback to others.

Please use the table below to consider changes in terms of internal customer service, internal customer care and managing internal customer expectations.

The stop start continue grid is available at www.redvanilla.co.uk/sth

	Us Actions that we can take that would help our internal customers deliver a better patient experience	**Others** Actions that we would like to ask others to take that would help us deliver a better patient experience
Stop Things to stop doing or do less of		
Start Things to start doing or do more of		
Continue Things to continue doing as they work well		

Putting things right when things go wrong

1. Take responsibility:

If something has gone wrong, or if the patient has a concern, it is your responsibility to ensure it is dealt with. If the problem is outside your control or your area of work, you are still responsible for reporting it to an appropriate member of staff for action.

2. Apologise gracefully:

A genuine apology for the problem the patient/family are having (or perceive they are having) won't fix the problem but it definitely can help to diffuse the situation. "I'm sorry" does work. An apology is important, even if you may not agree with the patient. The customer isn't always right, but they are always a customer and need to be treated with professional courtesy.

3. Actively empathise:

The patient/family want to know you understand how they are feeling. Understanding can go a long way towards smoothing things over. Phrases such as '…I fully appreciate how frustrating this must be for you and completely understand why you're upset…' will show the patient that you understand their feelings and situation.

4. Listen carefully:

Listening patiently can calm an angry or upset customer. Wait until they have finished being angry or upset and never interrupt or argue. Actively listen by using phrases like 'I see and 'of course'. When they have finished talking, summarise what you've heard and ask any questions to further clarify their problem or concern

5. Offer an explanation/solution:

Don't make people wait when things have gone wrong. Wherever possible sort the problem out there and then by offering an immediate explanation and solution. Don't make excuses. If an immediate explanation/solution isn't possible, at least give an idea of timescale for getting back to the customer. Manage their expectations by giving a realistic timescale and make sure you stick to it.

6. Put things right:

Service Recovery is not just fixing the problem, it's making sure it won't happen again. Most patients/families complain because they don't want the same thing to happen to others. Where it isn't within your power to make the change yourself, you may need to discuss the problem with your manager.

7. Give feedback:

Once you have decided on a solution to the problem, let the customer know. They will feel that their time wasn't wasted because they have made a difference.

Questions:

➢ In the example below how well do you think the situation was handled? Is there anything else any of the staff could have done?

➢ Can you think of ways of managing a situation where a long queue of patients is developing at a Reception desk in outpatients? What actions could be taken to prevent the situation becoming worse and to minimise patient frustration and concern?

➢

Example:

An elderly patient arrived at his outpatient clinic appointment. He had travelled from Barnsley and had got up a 6am in order to make sure he arrived in good time. He was breathless on arrival as he can't walk very well these days. It was a lot of trouble and very tiring for him to get to clinic.

On arrival the Receptionist informed him that the clinic had been cancelled but that unfortunately patients hadn't been informed. She wasn't sure how this had happened. The gentleman was very upset and said that this really was a blow to him not only because he had struggled to get there, but also because he was having increasing difficulties with his breathing and had been hoping to discuss this with the consultant today.

The Receptionist asked the patient to take a seat and, because she wasn't sure if there was anything she could do to help him, she went to find the nurse in charge of the clinic. The nurse decided to speak with another consultant in the same clinic to see if he would be able to see the gentleman. She explained the situation and the consultant agreed and, after reviewing the patient's notes, he saw the patient 20 minutes later.

The patient was extremely pleased that he was able to see a doctor, but also concerned as he didn't want this to happen again. The nurse said she would report the situation to the consultant to find out why patients had not been notified of the cancellation of his clinic.

The next day, the consultant wrote personally to every patient in the clinic, to apologise and to explain that the situation had been his fault as he had forgotten to notify the clerical staff of his other commitments that day so that the clinic could be cancelled. He took responsibility for the error and apologised He also put things right by assuring all of the patients that they would be given new appointments within 2 weeks.

Personally Making a Difference

At the start of the second workshop we will spend a few minutes asking you to feedback any changes you have made following the first workshop. These may include changes to your own behaviour, or changes to the environment where you work.

Actions I will take: