# **ES Department of the Year 2010 Entry Instructions**

- Cut and paste the below entry questions into a Microsoft Word document.
- Complete the entire 2010 ES Department of the Year entry form, answering ALL 13 questions. Be sure to include all applicant contact information.
- Provide "before" and "after" data to validate successes and performance improvements achieved (e.g., baseline patient satisfaction scores on room cleanliness and scores for succeeding years to illustrate improvement).
- Each applicant must submit the following:

A Microsoft Word file of the completed entry emailed to rkehoe@healthforum.com.

Supporting documentation can be mailed to:

Bob Kehoe Health Facilities Management 155 N Wacker Dr., 4th Floor Chicago, IL 60606-1725

# **Entry Questions**

- Applicant Name: Diane Pennington & Rita Walker-Lewis
- Applicant Title: Director Integrated Support Services; Director Environmental Services
- Email dpennington@dh.org
- Phone
- Fax
- Facility/Organization Name: Doylestown Hospital
   Address: 595 W State Street
   City: Doylestown
- State: PA
   Zip: 18901
- Number of licensed beds: 247
- Facility cleanable square footage: 578,000
- Number of full-time equivalent employees in ES/housekeeping department: 60.12
- Credentials/certifications of applicant: CHESP; DHESP
- Are you an ASHES member? Yes
- Is there planned new construction for this facility? If yes, please specify.

Recently completed 150,000 sq ft ED and in-patient building and adjacent parking garage...(April 2010)

Currently, addition to the professional building for an expansion to the Cancer Center.

Please complete all 13 sections of the questionnaire below, providing a succinct but detailed answer to each question. Include baseline data to illustrate improvement metrics.

1. Please provide a summary of your environmental services department's major accomplishments and results in 2009 (e.g., employee satisfaction, departmental retention rate, department employee career path, internal customer satisfaction).

Doylestown Hospital is a 247 bed community hospital located in Doylestown, Pennsylvania just north of the Philadelphia metro area and known for providing outstanding care in its Heart Center and Cancer Center. The hospital also offers traditional medical & surgical services as well as obstetrics.

Doylestown Hospital's primary mission is to provide a "responsive healing environment" spanning the continuum of care. Doylestown is unique in its roots as a hospital founded by the Village Improvement Association (VIA) – a woman's organization.

The Environmental Services Department is a key component in delivering on the hospitals mission to provide a "responsive healing environment". The ES department is charged with cleaning and maintaining almost 578,000 square foot of cleanable space. The department operates with 73 associates for a total compliment of 60.12 FTE's, including 2 supervisors and a 3 person management team.

Doylestown partnered with Sodexo almost 10 years ago to provide for the management of the ES department while still maintaining all hourly associates on the hospital payroll and maintaining control of all supply chain purchase. This partnership has brought added value to the organization thru utilization of proven systems in daily operations, regulatory compliance, product testing, education programs, QI and service solutions. In addition, a behavior based hiring and training program has definitely had a positive impact on both patient and associate satisfaction resulting in a greatly improved patient experience.

<u>Patient Satisfaction</u> has shown dramatic increase over the past 2 years. An engaged workforce and a behavior based ES program have rocketed this departments patient satisfaction scores from the fair 50-60<sup>th</sup> percentile for cleanliness and courtesy to the 90<sup>th</sup> percentile for cleanliness and the 95<sup>th</sup> percentile in courtesy. HCAHPS scores for Bathroom Always Clean rose from a 66.3 to the current 79.1, a full 13 point jump over the past year.

Innovation is a key component to keeping the program fresh and bringing on new practices and programs that improve both operational efficiency and effectiveness. Innovations include: chemical free floor stripping, use of enclosed finish systems, automation of the data in the ES office, automated training systems, recordkeeping, QI program that is driven by PDA usage and newer techniques and technologies. Emerging technologies under current review include UV Germicidal light disinfection and HPV disinfection and their possible use in healthcare environments to reduce the risk of HAI's.

<u>Communication</u> improvements to the patient include one on one surveys while the patient is in the room, use of the Skylight patient communication system and the service request module( discussed under the technology question), the ES directors phone number posted and available in every patient room and an immediate attention to service recovery. Communication to the user departments, nurse units and senior leadership team is stressed and daily communications are apparent thru rounding, meeting attendance and electronic communication.

Associate Development is continuous and on-going. The use of an automated training tracking system has helped minimize recordkeeping while allowing easy access to training plans, competencies and QI initiatives for each associate. Associates are encouraged to develop in areas other than ES operations with several associates moving into the field of nursing or clinical practice. Hospital supervisors are given the opportunity to access on-line training programs and classroom training thru Sodexo University. One of our supervisors completed a 1 year pilot program for supervisor to manager development at no cost to the individual or hospital. Another supervisor has a mentor relationship and meets one day per week with the director to educate and prepare him for a future leader's role. In addition, an hourly associate has also been promoted to a manager position.

<u>Management Development</u> is on-going and managers are encouraged to develop their potential for future positions. Managers are also supported in their effort at CHESP certification and are encouraged to attend local GP ASHES programs and events.

<u>Associate Satisfaction</u> has improved with the introduction to behavior based training and hiring practices along with a continuing recognition program. Associates feel valued as a critical component to the care giver team.

<u>Community Stewardship</u> initiatives have also had a very positive effect on department operations and associate engagement. The ES team is charged with managing the Green Team initiatives, promoting recycling efforts, support of Adopt-a-highway and the hospital arboretum. In addition, they initiated a giving tree and collected over 500 pounds of canned goods for the local shelter. Associates have also participated in the ER associate campaign and assisted with many volunteer initiatives.

The ES department has faced number huge challenges in the past year and has excelled in their response to these challenges. Recently, the hospital opened a new ED and patient tower, with construction running behind and a deadline for opening that could not be moved, the associates worked long hours to prepare the building. 6 months prior to opening a small team of ES leaders established a timeline and strategy for completion of the project. Their strategy and plan looked at every aspect from hiring & training new associate to cleaning the building, establishing job flows, orienting associates, ordering supplies and all of the necessary components of an opening strategy. This plan was shared with senior leaders and used as a template for the entire hospitals move-in plan.

When it came time to open, the ES department had to work around contractors, flexing time schedules and timelines and often reclining areas 2 and 3 times... yet they still managed to not only meet the tight timelines for inspections but exceed the expectations of both the Board and Senior Leadership Team. During pre-opening week activities, the ES department would reclean the entire facility overnight managing to eradicate the mess caused by public tours, food, children's activities and thousands of community members touring the new facility. The ES department received public recognition from the Senior Team and the Board for the critical role they played in opening the new facility.

The Environmental Service Team at Doylestown Hospital is making a difference everyday in the lives of our patients, visitors and staff... always keeping in mind the hospital mission of providing a responsive healing environment. The ES Team understands and demonstrates daily the fact that... Patients are the heart of everything we do!

# 2. Please describe the specific educational and training programs your department deployed in 2009 to improve infection control and prevention activities within ES.

In 2009, the Environmental Services Department reinforced its strong partnership with the Infection Prevention Team to reduce HAI's with particular emphasis on reduction of HA C-dif. The ES & IP teams developed new tools and protocols for use in isolation rooms. They developed bi-lingual signage for each isolation type with visual cues for easy use by associates.

This team also redefined procedures for the Enhanced Precautions Isolation... a new isolation classification used to identify Cdif patients. Patients placed in Enhanced Precautions require a much stricter cleaning protocol for occupied rooms and total cleans including wall wash of discharge rooms. A system was developed to identify these rooms thru Bedtracking which minimized errors in room cleaning where signage had been removed. Turn times are tracked to validate that associates are taking the additional time to clean these enhanced precaution isolation rooms.

IP specialists also complete several in-service each year on general infection control, proper hand washing, use of PPE for isolation rooms, completed a visual competency on proper gown and glove removal and had one on one's with associates on the floors as they were rounding.

In addition, the ES leadership team provided many IP in-service throughout the year. These included isolation room cleaning, 7 step cleaning, use of PPE, and we reinforced the observational competency use. We increased observational competencies for cleaning from once per year to two times per year. These are documented in the computerized training records with follow-up action plans and reassessments as required to meet the stronger standard.

Improvements to new hire training include actual hands on training with a manager for isolation and 7 step cleaning before moving on to the actual floor training with a senior ES trainer. By holding all training in a patient room for new hires, we are reinforcing not only proper cleaning techniques but the effectiveness of our cleaning program... where rooms, once terminal cleaned, are safe for everyone!

On-going training programs for IP were enhanced this year with the implementation of the Black Light Survey/Inspection process. Demonstrations were conducted to show the ES associate how the system works... leaving a fluorescent marker on the contact surfaces prior to cleaning then going back with a black light to see if the surfaces were cleaned. Once demonstrations were completed, the process was implemented with each manager completing a minimum of 2 Black Light inspections per day. Once an inspection is completed, the associate is brought back into the room to see the effectiveness of their cleaning and to place emphasis on retraining as needed for missed areas. The inspections are then downloaded into a database that allows us to sort data based on the 24 touch points identified, data by month, quarter or YTD figures are also available. In addition, performance by housekeeper can be tracked to assess competency, identify training gaps, and trend performance. This tool has proven effective with improvements shown over baseline data.

Recently, a spike in HA C-dif for the 1<sup>st</sup> quarter of 2010 has caused us to revisit Infection Prevention strategies throughout the continuum of care. We have refocused our training energies on reinforcing cleaning practices, use of PPE, have taken on added responsibilities for cleaning IV pumps, convened a sub-committee to process map the entire patient stay and have analyzed data to identify gaps that may have led to unintentional transference of C-dif thru equipment rather than a reservoir in the patient room.

A new initiative, UV germicidal Light Disinfection, is in the planning stages for use in isolation terminal cleaning, regular terminal cleaning of patient rooms and the opportunity exists to add a cycle disinfection of OR's, portable equipment, work stations on wheels... the possibilities with this emerging technology have real potential for reducing HAI's in hospital environments.

Overall HAI performance data is illustrated below. Although we saw a significant decrease in HAI's, specifically MRSA and C-dif, there is still room for continuous improvement to meet the ultimate goal of zero HAI's.

Priority	Objectives/Goals	2008	Q1 09	Q2 09	Q3 09	Q4 09	YTD
	<0.38 infections per 1000 Patient Days	0.38	0.14	0.14	0	0.07	0.09
	<0.8 infections per 1000 Patient Days	0.97	0.70	0.43	0.86	0.51	0.62

3. Describe any significant productivity improvements your department has achieved during the past 12 months, emphasizing the role teamwork played in the gains. Please provide baseline data to illustrate improvement, (e.g., average room turn around time improved by X% without negative impact on quality; or, patient satisfaction scores on room cleanliness improved by X%).

Doylestown Hospital Environmental Services Department has had many operational metric improvements noted over the past year many of which are illustrated in detail throughout this submission form. Therefore, we will touch briefly on each category and the improvements noted:

Infection Prevention: Reduction of HAI's: Overall, the hospital has achieved a reduction in HAI's for C-dif of 27%. In addition, MRSA rates were reduced by 76%. These results were achieved thru a partnership between IP and ES with a focus on proper hand washing, use of PPE, isolation protocol, add-on responsibilities for ES equipment cleaning and better identification of Enhanced & contact precaution rooms thru BedTracking. Emphasis is on the team approach with IP and ES partnering in training of associates.

Patient Thru-Put: The ES department was charged with Chairing the new Patient Thru-Put Team to improve patient flow and improve instant bed alert response and protocols. The original process map formulated by a 3<sup>rd</sup> party consultant, showed that turn time from patient leaving the room until the room was entered clean by the housekeeper was 90 minutes. A process flow illustrated that the ES department was performing better than benchmark on both response time to the notification and actual cleaning time. We looked further and found that the main gap was in getting the dirty bed into the system. We identified all of the ways the bed could become dirty and focused on 3 major areas for improvement: notification from nursing when patient leaves room, notification from transport, and notification

from the ambulance company. After investigation and education, we initiated a process of instant notification that reduced turn time from 90+ minutes to 53 minutes over a 3 month period. Those numbers have sustained for 9 months.

<u>Patient Satisfaction/HCAHPS</u>: The ES department has spent considerable time implementing changes in the areas of patient satisfaction. Specific focus has been placed on the importance of behavioral based training, CARES training and hiring practices. The implementation of Evening turndown service and the service request module of the patient communication system have all combined to demonstrate significant improvements in Patient Sat and HCAHPS. An engaged workforce and a behavior based ES program have rocketed this departments patient satisfaction scores from the fair 50-60<sup>th</sup> percentile for cleanliness and courtesy to the 90<sup>th</sup> percentile for cleanliness and the 95<sup>th</sup> percentile in courtesy. HCAHPS scores for Bathroom Always Clean rose from a 66.3 to the current 79.1, a full 13 point jump over the past year.

4. How is your environmental services department using technology to improve efficiency and quality (include mention of systems such as PDAs, robotics, patient bed- and transport tracking systems, scheduling systems, RFID, etc.)?

The Environmental Services Department utilizes new and emerging technologies to monitor operations and provide service enhancements to improve operations.

<u>TRAKKAR:</u> an integrated management platform that utilizes computer technology and hand-held pocket PCs to engage staff members in driving quality enhancements for every area of the hospital. It provides labor optimization, tracks employees, their responsibilities, and their outcomes, provides automated access to full training and competency records for each staff member includes a full inspection module and provides quality reports and graphs to easily identify successes and opportunities for improvement. TRAKKAR allows greater collaboration with the patient care delivery teams as inspection processes ensure interdisciplinary communications.

TRAKKAR-Plus: is an enhancement to TRAKKAR which is a combined handheld/spreadsheet application for capturing inspection information (the handheld piece) and the spreadsheet piece for reporting Patient Satisfaction Surveys and Black Light Surveys. The Patient Survey provides a tool for instant service recovery and tracking patient satisfaction. The Black Light Survey allows for real time assessment of cleaning techniques and immediate retraining opportunities. In addition, it provides a series of graphs that provide a quick reference for compliance by each of the 24 high touch surfaces in the patient room.

BedTracking®: A recommended "best practice", helps expedite patient admissions, improve employee productivity and reduce the length of time dirty beds sit idle. Capitalizing on existing technology—the telephone system — environmental services employees can quickly enter and receive all necessary information through a quick & easy intelligent Interactive Voice Response (iIVR™) telephone request and pager alert system. Supervisors have immediate access to employee progress, bed status and productivity reports. This improved communication and information flow helps reduce the number of STAT cleaning requests, improves bed turnover and helps streamline patient flow. An additional enhancement that is specific to Doylestown, is the ability to track C-Dif room cleans and turn times. The C-dif room is entered as an Enhanced precautions room and the notification is sent out to the housekeeper, adding another measure of security and insuring that proper cleaning protocols are utilized.

<u>KRONOS</u>: An automated timekeeping and scheduling system that maximizes the user's ability to manage day to day operations. Its real time access to timekeeping, scheduling and attendance information improves efficiencies in managing the associate and effectively and efficiently managing resources.

Skylight ACCESS: implemented to support the ongoing endeavors to transform the patient experience and improve patient satisfaction. The system gives patients the ability to request housekeeping services, as well as order meals via an on-screen menu and access hospital information and education. Patients can pass the time with first-class entertainment by watching Hollywood movies on-demand along with local TV stations, listen to music, benefit from relaxation videos, play the latest video games, and access the internet and email. The Service Request module allows patients to request their room be cleaned, resupplied or to see a manager. This feature allows for real time service recovery. Patients click on their request and the request is immediately dispatched via pager & email to the appropriate department. The ES Department oversees and manages the Service Request functionality for all 6 user departments and will be installing the patient satisfaction survey tool in the near future. This technology was introduced to Doylestown Hospital by the ES management team.

<u>RFID</u>: Currently utilized throughout the facility for managing patient care equipment, this technology is being used to also track specialty beds... improving efficiency in locating needed equipment.

Service Response Center Weekly Dashboard: The Service Response Center is a central call center for ES, Food & Facilities taking service requests, work orders, set-ups, food orders etc for the entire facility. The SRC dashboard was created to analyze the data extracted from the telephone application server. Items monitored include: the number of calls entering the call center, % abandoned calls, average answer time, maximum answer time, maximum abandon time. The SRC dashboard has allowed our department to maximize the utilization of the call center staff, flex time and hours of staffing the center, improve dispatch times for completion of calls and provide a higher level of service to our patients & staff thru reduced answer time & reduced abandon time.

Operational Metrics Dashboard: The Operational Metrics Dashboard is a real time web based application for measuring and reporting metrics data within 3 operational categories: Staffing metrics, Patient Satisfaction/HCAHPS, Capacity management. Statistics and performance indicators are entered in both a weekly and monthly format. Graphs and trending data is available to measure our actual performance against both target and national benchmarks with %top quartile and % bottom quartile represented. This is a valuable tool that provides timely information to make adjustments to department operations, validate performance against benchmarks and provide real hard data for use in reports to Senior Management.

Emerging technologies for Infection Prevention: We are currently evaluating 2 new technologies for the use in infection prevention and HAI's: UV germicidal light disinfection and Hydrogen Peroxide Vapor disinfection. The potential use of this technology in reducing HAI's, with specific emphasis on C-dif, is being evaluated as part of an initiative for the Improving Systems Leadership Team(a physician, board, senior management committee). As part of the ISLT initiative, ES was asked to investigate and evaluate emerging technologies in disinfection of isolated patient rooms with the ultimate outcome of reducing HAI's throughout the organization. The team for this initiative is lead by the ES Director & Infection Preventionist with results and data reported back to ISLT. Current indications suggest that we will be moving forward with UV Germicidal Light Disinfection for all terminal cleaning of patient rooms, cycle cleaning of OR's & sub-acute procedure rooms, portable equipment including computers on wheels and all transport equipment.

<u>Boost technology:</u> The use of the Boost chemical free floor stripping machine has resulted in significant improvements in our floor care program. We are able to increase productivity of the associates and minimize disruptions to areas being stripped. Long gone are the complaints about air quality, chemical smells, slips, access to patient rooms, etc. Boost utilizes a chemical free floor finish removal system that removes ~80% of the finish thru the use of abrasive pads, pressure & agitation. Its unique rectangular pad design, allows for stripping all the way to the baseboard and the vacuum system means that floors are dried and ready for finish application. Used in combination with an enclosed back pack finish application system has resulted in a 50% increase in productivity for the floor team.

<u>Microfibers:</u> Doylestown Hospital was an early adopter of the microfiber system for patient room cleaning in 2003. We have since expanded the use of microfiber cloths and mops to the OR, office areas and most recently, this past year we expanded their use into the kitchen and Food Service areas. A color coded systems allows us to segregate items from the OR, patient rooms, general cleaning and kitchen operations, maximizing the use of microfibers while still maintaining a segregation of kitchen, OR and patient room cleaning cloths.

<u>Press Ganey On-Line:</u> The ES department utilizes Press Ganey on-line for instant access to real time patient satisfaction and HCAHPS data. We were the first department to access data on a daily and weekly basis to improve service delivery. Effectively utilizing this tool has allowed our department to analyze data, measure the impact of service changes, monitor associate performance and resolve issue before them become a problem.

In addition to the above listed programs, the ES department at Doylestown Hospital utilizes on a daily basis: Internal Portable phones, alpha numeric pagers for quick dispatch of calls and bed info, use of email, intranet, MediTech, automated internet based hiring system, electronic copies of all hospital policies & procedures, and has remained current on new technologies available for the ES department application.

5. Detail specific steps your team employed during 2009 to improve infection prevention efforts (describe programs such as initiatives to improve hand-washing compliance, in-service and training programs on proper cleaning and disinfection techniques, quality measurement for area cleaning and disinfection and

vendor training, programs to prevent the spread of specific organisms (e.g., C. diff, noro-virus, MRSA, etc.). Joint programs with your infection preventionist could also be included.

Infection Prevention initiatives and strategies are an integral part of the foundation to our program. The ES department works closely with IP to minimize the risks to patients, staff and visitors. We are represented on many initiatives or task forces that look for solutions to today's IP challenges. We are seen as part of the solution rather than the source of the problem.

ES team members have been part of nursing process flows to minimize exposures thru transference of organisms thru improper equipt cleaning and usage, on product review panels to review products used in patient areas, consulted on policy changes and are considered a valuable resource for technical expertise in environmental issues regarding IP.

Over the past year, ES has spearheaded an initiative and interest in emerging technologies such as UV germicidal light disinfection and its application to the hospital environment. We are the point persons for this ISLT initiative and will be implementing a pilot in the near future.

The ES department utilizes a combination of education programs and resources to promote infection prevention throughout the organization and to specifically educate department associates. IP specialist conducts several inservices and competencies with our staff each year, Vendors provide alternative education and training in proper use of chemicals and disinfectants. IP is constantly in the forefront of our training efforts, competency assessments and daily walk-thru's. Feedback to the associate in non-punitive and immediate always using positive reinforcement and stressing safety to the patient and themselves.

We work continuously with IP specialists to provide new innovations and best practices to ES IP. We have instituted a program for providing a small gift bag of hand sanitizer to the patient at admission to promote good hand hygiene by the patient and their family. In addition, we keep current on new programs and technologies and evaluate their application in our hospital.

In IP studies, ES associates are found to have the highest levels of compliance for hand washing protocols and PPE usage for isolation rooms. Many surveyors comment on how compliant the ES associates are for these critical components of the IP surveillance program.

The addition of Black Light Surveys allow us to validate the cleaning practice compliance of the ES associate. Real-time feedback is given to the associate and patients appreciate the double check system in their occupied patient room. In addition, the data is hardwired to the ISLT initiative on validating cleaning practices in isolated patient rooms.

6. Explain specific waste reduction and recycling initiatives your facility employed during 2009 (e.g., waste minimization; recycling; environmentally preferable purchasing; eliminating mercury; reducing pharmaceutical, hazardous and medical waste streams; vendor contracting to reduce packaging; etc.). Please include baseline data to illustrate year-over-year improvement and detail cost savings

In early 2008, Doylestown Hospital was a participant in the Green Hospital's Pilot Program. A 2 year program sponsored by HCIF (Healthcare Improvement Foundation), the PA DEP and the EPA. This program focused on several areas: environmental preferred purchasing, green buildings, red bag waste reduction/recycling & toxic waste reduction. The program intent was to develop baseline data in these areas and highlight best practices in each of the areas. Participating hospitals were selected from the South Eastern Pennsylvania/ Greater Philadelphia area. The Green Team was developed as a direct result of our participation in the Green Hospitals Pilot Project. We were able to see how other healthcare organizations had successfully implemented and integrated green programs into their hospital culture. The

achieved.



Environmental Services management team was designated as the contact for the Green Hospitals Project and as such, took stewardship for *The Greening of Doylestown Hospital*.

Doylestown Hospitals Green Team was started in June of 2008.

The mission... The Greening of Doylestown Hospital. It is a self-directed group of environmentally conscious individuals who collectively tackle the everyday challenges of greening today's hospital environment. The group is entirely volunteer! Our membership is an assortment of hospital volunteers, office assistants, housekeepers, food service workers, educators, radiology techs, nurses, pharmacists, and other hospital associates along with a few doctors and an administrator also in the mix. The team sponsor is the Director of Integrated Support Services (Director of Environmental Services) and lead by several individuals who chair special interest work teams.

The Green Teams, then, pick-up the ball and drive their results and team agendas. There are no rules, regulations... the only parameter are they must support the mission of the hospital and uphold the SERVE values of the organization.

The following is a synopsis of several of the teams, understanding, that their focus may change, and, teams are added and ended as we move thru their specific purpose.

# Recycling

This group is chaired by an hourly supervisor from the Environmental Services Department. Their main focus is on improving the communication and utilization of the recycling program.

The Recycle Team took on the monumental task of transitioning the standard sort recycling program to a single stream recycling program. Their purpose and focus was promoting the greening of Doylestown Hospital. Their plan was simple: think outside the box! Implement a new program with a fresh look that kept things fresh and simple. New green containers were acquired both thru vendor donation and purchase. Rubbermaid & Waste Management both assisted in finding collection container solutions that reflected the green theme. Communication was sent out, containers placed, old containers removed and education bits communicated. Containers were only emptied when they were full, everything went into one collection bin and the housekeeper could put everything into one transport container and then one compactor. Unlike the old program, it actually saved labor hours to implement this program. Results were amazing... our recycling numbers increased from 8% to a standard 25% of total waste within a 6 week period. Associates became engaged in the process, some offices went garbage free with only recycling containers used, not only did paper and cardboard volumes increase, but also, batteries, light bulbs rates increased. The team gets several calls every week asking about what can and cannot be recycled, repurposed or reduced. This program has truly engaged the workforce throughout the organization.

# Green Halloween

This groups main focus was to publicize the recycling program, educate the associates on green initiatives and red bag waste reduction, improve involvement in greening operations and finally to have fun and celebrate the great job we were doing as an organization.

On Halloween, a large meeting room was filled with vendors providing green product samples, food service highlighting sustainable food service and organics, our bio-diesel company giving away custom soap bars made from our waste fryer oil, sustainable housekeeping practices featuring microfiber cloths, chemical free stripping, low VOE floor finishes and other green practices that we utilize, a full display of waste segregation along with appropriate collection containers, a sign-up for Adopt-a-highway, a video showing single stream recycling and where it goes from here, etc. During the 2 hour fair, associates and visitors were given a bag to trick-or-treat all of the areas. Fabulous prizes, give-aways and food were had by all.

There were 3 very popular interactive areas:

- 1) A Can and Bottle recycling vending machine provided by Waste Management. Put in a recyclable can or bottle and collect a prize... kids and adults both loved this one!
- 2) A pledge signing... sign the 10 ways to reduce your environmental impact and receive a free reusable stadium cup with the hospital Live Healthy, Live Green logo.

3) Tote bags, t-shirts and reusable beverage cups were sold with all proceeds benefiting the hospital arboretum.

The fair received media attention and was great fun! Our only drawback that day, the Phillies World Series parade was our competition. Even so, 600 people attended our 2 hour Green Halloween.

# Adopt-a-Highway

This team formed to provide community support for sustainability. This group has completed the paperwork for and adopted a stretch of highway for 4 clean-ups per year. The DOT has posted our signs, training was completed and our first clean-up was held during Earth Week 2009. Again, someone had an idea and found a way to make it come to life!

# Earth Week Challenge

This team was charged with developing a meaningful week of Earth conservation related activities. Departments were challenged with coming up with ways to make a difference in their work environments. Departments came up with innovative programs for energy conservation, improved recycling, paper free initiatives and several offices took the garbage free challenge... making their department waste all recyclables and no waste.

Most successful, the Food Service Department... instituting a recycling program, cook to order concept(no more bulk food production), the addition of organics and allergy friendly foods, a focus on fresh, sustainable purchasing and finally a revamping of the disposables used in the Café... using more recyclable products and minimizing the use of Styrofoam.

# Personal Confidential Recycling Days

A new initiative in 2010, personal confidential papers that could be brought to work, shredded on sight then recycled. This 2 day event proved very popular with associates and volunteers with over 5000 pounds of confidential waste shredded and recycled during Earth Week.

The Doylestown Hospital Green Team has also created a web page, developed a logo and has focused on many other initiatives within the organization to promote the greening of Doylestown Hospital always with the purpose of reduce, reuse and recycle!

7. How has your department expanded its value to your organization (examples might include assuming greater responsibilities in areas such as managing transportation, grounds, valet services, improving patient throughput (room turns), improving patient satisfaction scores, implementing staff motivation or recognition programs, participating in patient translation services, staff training for English as a second language (ESL), use of an environmental services department dashboard for reporting, etc.)?

The Environmental Services Department is a valued partner of the caregiver team. Our focus has always been to improve the efficiency and efficacy of our operation while providing the best possible outcomes for the patients and staff that we serve. As part of that partnership, the Environmental Services team is actively involved in many initiatives throughout the organization and has been recognized for eliminating the visible barriers between services.

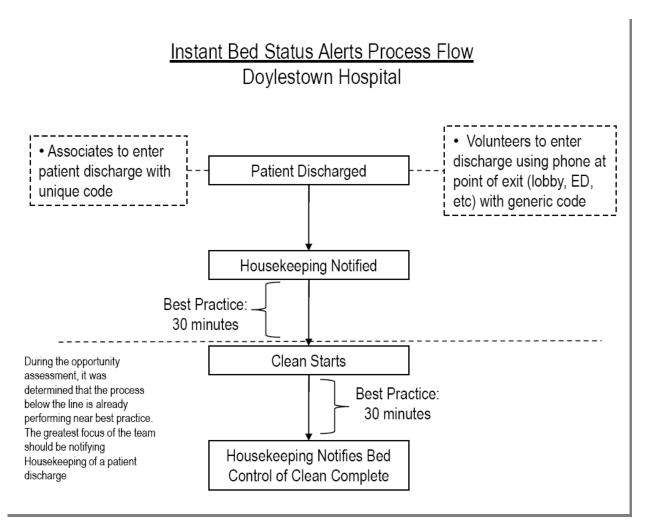
# Improving Patient Thru Put

The Environmental Services team has long been charged with the responsibility of effectively utilizing the Bed Tracking software to improve patient movement and decrease room turn time. Our operational metrics for patient turn time have always fallen within the best practice range of 60-70 minutes.

In early 2009, in anticipation of opening a new ED and patient floor, the hospital engaged H\*Works, a consultant firm charged with analyzing the patient flow process and assisting with optimizing patient flow. As a result, four cross disciplinary work teams were created to address each phase of the patient flow process and recommend practice changes to improve operational efficiency.

The Environmental Services team lead the Instant Bed Alert Team. Instant Bed Status Alerts attack communication delays by removing responsibility for reporting bed status changes from inpatient nurses. Rather than relying on phone calls from nursing staff, the practice hardwires communication through reliance on individuals immediately involved in the bed turnover process and use of a computer system as the information transfer vehicle. The system focused on improvements:

- Telephonic system that automatically pages the next available housekeeper to the room
- Limited use of the "stat bed" label except from certain individuals in specific situations
- Use of system information reports in performance improvement processes
- Minimizing the amount of time taken to input the dirty bed request



The Instant Bed Alert Team was the only team to successfully complete and maintain improvements within the original objectives of the project. Today, almost 1 year later, bed turn time has reduced to an average of 53 minutes from patient leaving the room until bed is clean and available for a new patient.

# **Providing Service Solutions:**

The Environmental Services Department is known as the "Go To" department at Doylestown Hospital. If you need something or don't know where to go with something or to get something, just call Environmental Services. Our department is known as the place to go for providing service solutions. As a result, we have expanded our operations to include the following:

- Daily clean-up of the grounds, parking lots, parking deck and entrances became our service when the facilities department could not recruit or fill the position. ES added this service to our department.
- Collection of Confidential Paper: when the volunteer office had to discontinue this service due to lack of
  volunteers, Environmental Services picked-up the service resulting in increased service levels and the added
  bonus of recycling the shred waste.
- Expansion of service levels and frequencies of cleaning in the new ER. As a part of the improving patient thru put initiative and to improve infection prevention practices thereby improving patient safety, the ES department was asked to redesign the service model for the new ER. Under the old model, a housekeeper cleaned the unit once daily, while the ER patient care tech (PCT) completed between case cleaning. The old model allowed for 84 hours of ES cleaning and policing per week. The new model, gave total responsibility to ES. With 40 individual patient rooms with their own enclosed bathrooms, ES was charged with the task of full between patient terminal cleaning of the patient rooms. The ES management team in combination with IS and a select group of housekeepers, designed the new model, implemented a bed notification and tracking system thru the use of BedTracking technology and now demonstrate a Best Practice for infection prevention in an emergency setting. ES now dedicates 336 hours per week to ER cleaning with an average of 750 additional ER room cleans and a turn time of 27 minutes per ER room.
- ER Linen Distribution to ambulance and transport teams became the responsibility of the ES department when Central Supply could not come up with an easy and cost effective solution to linen distribution and control in the emergency setting. Today, ES housekeepers deliver fresh linen packs to the transport crews while they are still admitting the patient. This has increased satisfaction of the transport teams who no longer have to wait for linen and has also helped decrease linen costs and control linen abuse.

### Focus on Patient Satisfaction:

The Environmental Services Department has made substantial improvements to patient satisfaction over the past 1.5 years. In early 2008, a leadership change resulted in a more dynamic patient driven leadership focus. Managers in the ES department were no longer satisfied with above the mean scores in cleanliness and courtesy.

A small work team discovered that the associates did not feel connected to the patient and did not demonstrate the behaviors that are required in a healthcare setting... our associates were not engaged and did not consistently exhibit excellent service standards. The next 2 years were spent actively engaging the associates to be a part of the care giver team, to become reconnected to the patient and the purpose of the organization and to engage in CARES behaviors that focus on Compassion, Accountability, Respect, Entheusasium, and Service.

Changing the entire culture of the department over a 2 year timeframe was no easy task. Behavior based hiring became the standard, all associates were retrained in their basic technical competencies, behavior based training was implemented: first came Focus on Service Spirit, a baseline for training a service associate. Next came, CARES training, a behavior based program that really allows the associate to connect with the patient/customer and drives patient satisfaction.

## New programs were implemented:

- Evening Turndown Service had an immediate impact on HCAHPS scores with a full 3 point jump in scores after the first full month.
- Patient Room Black Light inspections in both discharge & occupied patient rooms reinforced daily cleaning standards and provided one on one training and tracking of performance.
- Patient Satisfaction Surveys allow the ES supervisor & managers to engage the patients and their families in conversation uncovering any potential problems and facilitating service recovery. In one instance, the

manager was talking to the patient asking was there anything else the patient needed, the patient said that she had not been able to read the entire time she was here because she didn't have her eyeglasses. The manager pulled out a spare pair from her work pouch, cleaned them and gave them to the patient. The patient and her husband were very thankful and went out of their way to track down the manager and return the glasses upon discharge. These moments only happen when you have an engaged workforce... it starts at the top and travels down.

An engaged workforce and a behavior based ES program have rocketed this departments patient satisfaction scores from the fair 50-60<sup>th</sup> percentile for cleanliness and courtesy to the 90<sup>th</sup> percentile for cleanliness and the 95<sup>th</sup> percentile in courtesy. HCAHPS scores for Bathroom Always Clean rose from a 66.3 to the current 79.1, a full 13 point jump over the past year.

## **Employee Recognition**

The ES management team works continuously to recognize and reward the efforts of the ES associates. The following are just a few of the meaningful programs in place to recognize our associates for the difficult job that they do each day:

- Weekly Huddles... are conducted each week on each shift. This brief 10 minute meeting has an upbeat message that focuses on the associate and connecting to the patient. Anniversaries, birthdays, STAR awards are discussed and positive recognition given. Patient Sat scores are reviewed and patient comments read to the associates. A weekly Safety tip is discussed as we believe safety is critical to success. And finally, we discuss one aspect of the CARES behaviors asking for associates to tell a story that happened to them this week with a patient, customer or coworker. We remind them that it's the little things they do everyday that make a difference...
- Birthday Celebrations... once a month a birthday party is held in honor of those staff celebrating a birthday.
   While this may seem a small thing, it has big results. We had on associate who hadn't celebrated his birthday in over 15 years and was happy to enjoy the celebration with his coworkers.
- Hand written Thank-you notes... associates who go the extra mile, help out a co-worker, make a difference in a patient's day and exhibit other positive behaviors is sent a handwritten thank-you from a manager. There are no rules here... just thanks for a job well done by the associate!
- Employee Appreciation Day... celebrated the 3<sup>rd</sup> Wednesday of June, this is a day when the Integrated Services Management Team(ES, Food & Facilities) recognize the outstanding work of our associates. One associate from each department is recognized as the Unsung Hero, receiving a certificate and award. The managers cook the food, clean-up the event, plan the activities and provide door prizes and goodie bags, along with handwritten thank-yous personalized fro each associate. Each year there is a theme for our Party on the Patio and the CEO, COO and VP Patient Services attend and express their appreciation to the staff for another great year.
- Environmental Services Week... a week long celebration honoring the staff for the work that they do every day and the difference they make here at Doylestown Hospital. Daily activities and recognition occurs. This year, Volunteer Services provided a Philly Pretzel Break for the ES associates on one day, on another, the 4<sup>th</sup> floor Nurse Managers provided treats for the associates for all their work on the unit. Daily, our associates were honored and gifted by the units or departments that they clean... it was heartwarming to see the flowers, gifts and handwritten notes from all of these departments. The week culminated with a very special afternoon celebration: a full buffet, gift cards donated by our vendors as door prizes and the opportunity to socialize, talk to senior management and even meet the vendors. Yes, vendors are a big part of what we do and were invited to our celebration to meet the housekeepers... we even had some manufacturer's reps along with the local vendors.

## Diversity & Inclusion

The ES team at Doylestown Hospital was recently recognized by Sodexo as the 4<sup>th</sup> Quarter Champion of Diversity. This national award recognizes a facility for programs and initiatives that support diversity and inclusion in the

workforce. Doylestown Hospital received this award in Sept 2009 for its work in supporting a diverse workforce, implementing bi-lingual IP programs, community service and other positive behaviors.

# Community Stewardship

The ES department is actively involved in community stewardship, setting the standard for making a difference in the hospital and the community. Several of our recent initiatives include:

- The Tree of Warmth...providing warm holiday wishes to those in need! ...an annual holiday giving tree where decorations for our tree are donations of mittens, gloves, scarves, socks, coats for those in need. This year's beneficiary, A Woman's Place Shelter, received more than 500 items to supply clients at their shelter with warm items thru the winter.
- Food Drive... held in conjunction with the Employee Appreciation Day, associates donated over 550 pounds of canned goods for the Doylestown Free Clinic.
- Adopt-a-highway... providing guidance and support to this green initiative.
- Hospital Arboretum... providing support for the annual plant sale and garden clean-ups.

#### **Emergency Department Associate Campaign**

The ES department was very engaged in being a part of the Associate Campaign for the new Emergency Department. Our department realized an 80% participation rate and was recognized by the CEO for their generous giving... Our CEO commented that "Those who have the least to give... give the most". A very true statement regarding this ES department.

All of these programs have helped us engage our workforce, connecting them to our patient & customers and supporting the fundamental mission of Doylestown Hospital.

# 8. What programs did your team employ to improve patient safety during 2009 (examples might include efforts to reduce patient falls, etc.)?

The ES department is always focused on improving patient safety. Our programs are all patient centered and we provide a general orientation to safety, patient safety, recognizing signs of abuse, educating associates on the importance of visual clues to a patient at risk, signs of a stroke, emergency response and assistance and many other topics. Some of the specific initiatives are detailed below:

- <u>Collection of Confidential Paper</u>: when the volunteer office had to discontinue this service due to lack of
  volunteers, Environmental Services picked-up the service resulting in increased service levels and the added
  bonus of recycling the shred waste. Confidential paper is now secured at all times with the utmost assurance
  that HIPPA regulations are met.
- Expansion of service levels and frequencies of cleaning in the new ER. As a part of the improving patient thru put initiative and to improve infection prevention practices thereby improving patient safety, the ES department was asked to redesign the service model for the new ER. Under the old model, a housekeeper cleaned the unit once daily, while the ER patient care tech (PCT) completed between case cleaning. The old model allowed for 84 hours of ES cleaning and policing per week. The new model, gave total responsibility to ES. With 40 individual patient rooms with their own enclosed bathrooms, ES was charged with the task of full between patient terminal cleaning of the patient rooms. The ES management team in combination with IS and a select group of housekeepers, designed the new model, implemented a bed notification and tracking system thru the use of BedTracking technology and now demonstrate a Best Practice for infection prevention in an emergency setting. ES now dedicates 336 hours per week to ER cleaning with an average of 750 additional ER room cleans and a turn time of 27 minutes per ER room. The main benefit to patient safety is the minimization of risk for HAI's as each room is completely cleaned between patients.

- <u>Patient Room Black Light inspections</u> in both discharge & occupied patient rooms reinforced daily cleaning standards and provided a measure of validation of cleaning practices and effectiveness.
- <u>Infection Prevention: Reduction of HAI's</u>: Overall, the hospital has achieved a reduction in HAI's for C-dif of 27%. In addition, MRSA rates were reduced by 76%. These results were achieved thru a partnership between IP and ES with a focus on proper hand washing, use of PPE, isolation protocol, add-on responsibilities for ES equipment cleaning and better identification of Enhanced & contact precaution rooms thru BedTracking. Emphasis is on the team approach with IP and ES partnering in training of associates.
- Patient Thru-Put: The ES department was charged with Chairing the new Patient Thru-Put Team to improve patient flow and improve instant bed alert response and protocols. The original process map formulated by a 3<sup>rd</sup> party consultant, showed that turn time from patient leaving the room until the room was entered clean by the housekeeper was 90 minutes. A process flow illustrated that the ES department was performing better than benchmark on both response time to the notification and actual cleaning time. We looked further and found that the main gap was in getting the dirty bed into the system. We identified all of the ways the bed could become dirty and focused on 3 major areas for improvement: notification from nursing when patient leaves room, notification from transport, and notification from the ambulance company. After investigation and education, we initiated a process of instant notification that reduced turn time from 90+ minutes to 53 minutes over a 3 month period. Those numbers have sustained for 9 months. The faster a patient is placed into a bed the less likely that there will be patient safety concerns related to holding patients.
- Innovation in Floor care technologies: The use of Chemical Free stripping of floors and the new Boost technology assure that slip hazards are minimized, access to patients is less limited and air quality is no longer compromised. In addition, the use of enclosed floor finish system and urethane based finishes have each improved appearance, air quality, slip resistance and minimized the down time of patient rooms for floor maintenance.
- <u>Emerging technologies:</u> The investigation and planned implementation of UV germicidal light disinfection of terminal cleans and procedure areas, will improve kill rates, reduce HAI's from environmental surfaces, and will improve overall operational efficiencies as well as support patient safety initiatives.
- <u>Safety First Program:</u> The focus on overall safety reinforces the patient safety program and also the associate
  and visitor safety program. Associates are more aware of hazards around them and the impact risks have on
  everyone in the hospital environment.

# 9. What specific activities do you believe set your department apart from your peers at other hospitals? Please provide specific examples.)

The Environmental Services Department at Doylestown Hospital has spent the last 2 years on a journey that took a well run department, performing at acceptable levels and median percentiles to a top performer achieving the 90<sup>th</sup>+ percentile across both operational performance metrics and patient satisfaction metrics.

While the foundation of our ES program has always been technically strong, we have previously struggled with connecting the associate to the patient. The implementation of a Behavior Based program has really transformed our department and resulted in a total cultural transformation of our associates. Through behavior based hiring practices, Behaviors Boot Camp, CARES training and a true Focus on Service program we have established a firm connection between the ES associate & the patient and those we serve. This is best illustrated by the increase in both Press Ganey & HCAHPS scores: an engaged workforce and a behavior based ES program have rocketed this departments patient satisfaction scores from the fair 50-60<sup>th</sup> percentile for cleanliness and courtesy to the 90<sup>th</sup> percentile for cleanliness and the 95<sup>th</sup> percentile in courtesy. HCAHPS scores for Bathroom Always Clean rose from a 66.3 to the current 79.1, a full 13 point jump over the past year.

The department leadership team, both Sodexo managers and hospital supervisors, have dedicated the last 2 years to reinforcing behavioral standards, improving the monitoring & competency assessments, validating cleaning practices, listening to our customers and our associates, providing tools and new technologies to efficiently and effectively deliver service, engaging and developing relationships with user departments and nurse managers.

The department has dedicated a large amount of resources in developing associates, not only in their current role, but, also helping them acquire additional skills and education to move on in the organization. Former associates of the ES department can be found as PCT's in nursing, radiology techs, medical records associates, materials handlers, nurses and working in other clinical areas. In addition, several associates have completed management & supervisory development programs, on-line training, mentoring programs, presentation skills training and effective communication. Former hospital housekeepers and supervisors have been promoted to management positions with excellent career paths in their future. Many of our associates hired take advantage of the educational and mentoring opportunities available to them and are able to see ES as the entry point into the organization. We embrace these associates for they are the future of healthcare at Doylestown Hospital regardless of whether they make a career in ES or use it as a stepping stone to a different career path.

The ES department is known as being a provider of service solutions... we are regarded as a resource throughout the organization and are known for solving the most difficult operational problems with real life cost effective solutions. Our management team is highly regarded and is represented on most all interdisciplinary committees and IP initiatives. Our department is always viewed as a critical part of the solution rather than the source of a problem.

In addition, we are a strong force in *The Greening of Doylestown Hospital...* managing & directing the programs of the green team, spearheading the single stream recycling initiative, eliminating mercury from the campus, managing hazardous waste surveillance, overseeing the Green Roof project, among many other sidebar initiatives. Our green programs have received multiple awards and recognition from the EPA and Practice Green Health, as well as, local news media.

Finally, we value our partnership with our associates and spend a great amount of effort on positive reinforcement, associate recognition, individualized training programs and making sure that our associates are successful wherever they happen to be working. If an associate is not working out in a specific area, we work with that associate to find a better fit rather than looking at poor behavior as a disciplinary process, we look at it as an issue of fitting the right associate into the right place. Associates are a valued resource and if we hired them into the organization we want them to stay and feel appreciated and valued.

Our journey over the past 2 years has been about growth, cultural transformation and a return to the basics of our mission... to provide a responsive healing environment.

Back in February, the ES leadership team, realized that we had achieved the ultimate goal and had effected a real cultural transformation in the Environmental Services Department at Doylestown Hospital when we received special recognition from the associates for all of the effort in revitalizing our programs.

On Friday February 5th, the Sodexo management team was honored at a celebration event organized by the department associates. Attended by the department associates, our clients, and a large group of hospital managers, the event invitation read "Please join the Doylestown Hospital's Integrated Services as we salute our Sodexo managers and celebrate partnership and friendship."

The central theme to the event was "Bridges" with individual engraved "Bridge Builder" awards given to each Sodexo manager. I believe the award inscription says it all:

Without bridges, the best-built roads lead to nowhere, the most impressive visions remain invisible, and the best laid plans fail.

In life and in work, connection is everything. You built the bridges. Made the connections. Brought us on to success.

Thanks to you, we're going places.

The event was a class act from start to finish... with words from our clients and those we serve... many echoed the fact that this type of recognition had never occurred before at Doylestown for any department. The event even featured an elegant buffet catered by a local upscale restaurant. We all realized know how far this department had come for the associates to have spent almost 2 months planning the event and all of the details surrounding it...

This was quite the unusual event... one I've never experienced elsewhere...

I've known for some time what a special team we have here at Doylestown Hospital... and this event certainly reinforced that belief!

# 10. How do you and your department engage senior-level hospital management in the progress and successes your department is making?

The leadership team for the ES department actively engages the senior management team at Doylestown Hospital. Standing meetings are set for every 2 weeks with the Senior Administrator. One hour is set aside to discuss operations, performance improvements, review operational metrics and review any to do lists, performance plans or other tools.

In addition, the ES team is represented on many hospital committees & task forces. We are viewed as critical component to the success of the organization. Hourly associates represent the department on the Green Team, Chair recycling efforts, members of the ER Associate campaign, members of the new building opening team. Managers are active in EOC, Infection Prevention, ISLT initiatives, Patient Thru-Put initiatives, Community Relations Events, New Building task force, development & design team for new operations, in addition to other teams. ES managers meet with Nurse Managers daily and attend the Nurse Leadership meeting each month.

At each of these meetings, ES associates and managers have the ability to interact with Senior management, Board Members, Physicians and other healthcare professionals. The ES team plays an active role in process improvement, community stewardship and assist with many high profile activities that allow for positive interaction with the senior leaders of the organization.

Senior Leaders also attend meetings and celebrations. The Sr Admin and VP Patient Services have a standing invite to attend the Weekly Huddle. They participate in our annual Employee Appreciation Day, ES Week activities and many other events. It is common at Doylestown, to see the CEO or COO walking and talking to members of the ES team, both hourly and salaried. In fact, you'll often see our COO removing black marks in the hall with his shoe... after all, Housekeeping is everyone's job!

Never more true than here at Doylestown Hospital!

# 11. In addition to the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS), what tool does your organization use to measure patient satisfaction?

Doylestown Hospital utilizes Press Ganey to measure patient satisfaction. There are 2 questions used to measure patient satisfaction: Room Cleanliness and Courtesy of the person cleaning the room. Results are as illustrated in question 12...

In addition, our ES management team interacts with our patients, visitors and internal customers on a daily basis. They conduct rounds throughout the day, greet patients when inspecting rooms and have taken a proactive approach to service recovery for all of our customers.

Recently, Doylestown Hospital has installed Skylight... an interactive TV and patient communication device. Besides providing TV, movies & relaxation videos, Skylight provides the patient with the opportunity to request services thru the Service Request function. The request function sends out a real time alert via pager and email to the user department allowing us to address patient concerns and promote service recovery. In the next few months, the ES team will be activating the Patient Survey application, which will allow us to monitor patient satisfaction in real-time addressing opportunities for service recovery... before the patient leaves the hospital environment.

## 12. Based on the tool used in #11, please tell us your 2008 and 2009 national percentile ranking for:

O Cicarinitess of patient room.	0	Cleanliness (	of patient room
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Friendliness of housekeeper.\_\_\_\_\_

Cleanliness of the overall facility.

In addition, provide the HCAHPS scores for patients who reported that their room and bathroom were "Always" clean.

Press Ganey		2008	2009	2010
Room Cleanliness Ray	v score	84.1	84.6	86.4
Per	centile	69	75	90
Courtesy of the person cleaning the room: Raw score		87.0	87.5	90.2
Per	centile	51	60	95
HCAHPS		2008	2009	2010
Room and bathroom kept clean		66.3	66.6	79.1

The Environmental Services Department at Doylestown Hospital has worked continuously over the past 2.5 years to make substantial improvements in the area of Patient Satisfaction.

What you will notice is a flattening of scores in 2008 with real movement starting in May of 2009 to the current scores thru April of 2010. Significant improvement thru the end of 2009 sustaining and improving further thru the first 4 months of 2010.

Innovative approaches to improving patient satisfaction include:

### Employee Engagement/ Behavior Based Hiring & Training:

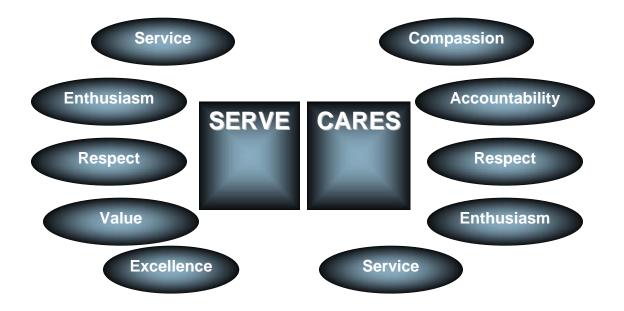
In the fall of 2008, the ES team made a concentrated effort of changing the culture of the Environmental Services Department from a task based department to a behavior based department. This was a fundamental shift in the entire management philosophy...

We started the journey by assessing the operation, our strengths, weaknesses and opportunities for improvement. We determined that the foundation for operations was technically very strong with defined programs, policies and procedures, but, an

opportunity existed to bring behavior based training to the associate's thereby driving patient satisfaction.

For new hires, we started screening for positive behaviors and an applicant's ability to connect with the mission of the hospital, the patients we serve and fellow associates. We no longer solely focused on their technical competencies and experience. We also followed-up by matching new associates with a mentor thru their training program.

New hire behavior based training focused on connecting the new associate to the SERVE values of the hospital and the CARES values of the department. A combination of video training and discussions were used to illustrate how these behaviors can positively impact the patient experience.



At the same time that the behavior based program for new hires were introduced, we held a Behaviors Boot Camp for the long term employees. Here we reintroduced the SERVE values and realigned them with the departments CARES values. Again, training content was a combination of video scenarios and real life discussion... always focusing on how these behaviors connect us to our patients, customers and each other every day.

### **Evening Turndown Service**

At the mention of the words Turndown Service, we start seeing images of a hotel with high standards of both cleanliness and service. It is these memories that the Environmental Services Team at Doylestown Hospital is replicating by implementing Turndown Service in a healthcare setting.

In April 2009, the concept of evening Turndown Service as an enhancement to the patient experience was introduced. The intent was to provide an upgraded level of service which allows for that personal "touch point" and a meaningful interaction between the environmental services associate and the patient and their family.

Each evening during visiting hours, a turndown specialist enters the patient room, greets the patient and family members and engages in a memorable dialogue with the patient as they set about tidying the patient room. A primary point of focus is the patient restroom. The turndown associate takes a few extra minutes to tidy the restroom and gathers any soiled linens and waste.

This extra attention helps our staff address the HCAHPS question: "Bathroom is always clean". By giving the patient some extra attention on bathroom cleanliness during turndown service, we have pointed out to the patient and their family that we are working to ALWAYS keep their bathroom clean. The turndown specialist closes by asking the patient if there is anything else they can do for the patient before they move onto the next room.

This 3-5 minute interaction has made a definite improvement here at Doylestown Hospital. Not only have we created another "touch point" of service, but, we have set the stage for a meaningful interaction with the patient and their family.

The results are evident: Press Ganey scores have increased by more than 2.3 full points in Cleanliness and 3.2 full points in Courtesy. HCAHPS have climbed by 13 points in the Bathroom always clean.

The message is clear... Turndown Service can have a meaningful impact on patient satisfaction leading to a memorable patient experience!

- 13. Please provide specific examples of how your environmental services department operationally manifests the Institute of Medicine (IOM) Six Aims for Improvement (equity, timeliness, effectiveness, efficiency, patient centeredness, and safety). Be specific and address each of the six areas from an environmental services/housekeeping operational perspective.
  - 1. Equity
  - 2. Timeliness
  - 3. Effectiveness
  - 4. Efficiency
  - 5. Patient centeredness
  - 6. Safety

# Equity:

The ES department focuses on insuring that associates have an equitable distribution of the workload. This is accomplished by an operations system designed to distribute assignments based on service level, frequencies and acuity. Work flows and assignments are then monitored daily and adjustments made to insure that no one associate is overwhelmed and that we have maximized our staff's productivity.

In addition, we handle all of our associates in an equal manner applying standardized rules for behavior, consistent work rules, competency evaluations and a systematic and random inspection program that ensures a consistent QI program.

## Timeliness:

The attention to timeliness and time constraints is a critical component of ES operations. Our ES department measures standards of cleaning, patient room turn time and utilizes other control processes to make sure that we are achieving best practice outcomes for time sensitive operations. We have made great strides in improving patient room turn time by effectively changing the workflow of the nursing staff and transporters to improve patient outcomes.

In addition, we are very timely in our feedback to associate performance, both positive and identifying service & performance gaps. We connect daily with those we serve both patients and staff members, with the ultimate goal of real-time service recovery.

## Effectiveness:

We measure our effectiveness on a continual basis utilizing different measures for different areas of service.

For Patient Thru Put, we have established baseline and best practice metrics and work continuously to show improvement in processes and patient flow. For Patient Satisfaction, we measure our effectiveness daily by completing daily patient surveys, monitoring Press Ganey and HCAHPS data and making operational changes based on results.

For Operations, we use cleaning checklists, competency training in key areas 2 times per year for every associate, Black Light Inspections allow us to validate cleaning practices and complete immediate retraining as needed at the time a service gap is discovered. We also measure our effectiveness thru daily and weekly rounding with key users,

department heads and nurse managers. Immediate feedback allows us to improve communication and service thereby increasing our effectiveness in operations.

# Efficiency:

Efficiency is a critical component to the ES operation. We must continually hone our efforts in support of improving operational efficiencies in both staffing and supply management.

Labor management is a critical component to efficiency since labor is the largest part of our department budgets. As volumes fluctuate, we must be able to adjust or shift our staffing as required. At Doylestown, we have found that cross training our staff in different areas and technical skills allows us to improve operations and quality. There is only a benefit to having a multi-skilled workforce that can work where and when needed.

Supply management is also critical to our success. Me must be stewards of our organizations financial resources and optimize the supply stream... managing waste, flexing inventories and searching for cost effective solutions to everyday challenges.

## Patient Centeredness:

The ES associate is a critical component in the caregiver cycle. Not only does the ES department keep the facility clean and looking good, they are charged with improving patient outcomes thru effective infection prevention efforts, timeliness of patient thru put, being the eyes for maintenance and work orders, retrieving equipment and many other functions. What do all of these things have in common... they are central to the patient experience and ES associates play a critical role in these duties.

In addition, ES associates have more direct patient contact per day with each patient than any other caregiver in the organization. Every day, our associates greet the patient in the morning and pull their trash, they return later in the day to thoroughly clean the patient room, they then do an afternoon check to see if the patient needs anything before they leave and finally another ES associate comes by in the evening to turndown their room. In total, our ES associates spend ~35 minutes each day interacting with each patient as they clean the room and attend to their duties. Often, they are the friendly face in the room and someone to whom the patient can connect. The ES associate is the face of Doylestown Hospital!

Our entire ES program is behavior based and places the patient at the center of everything that we do... always stressing how our actions impact the patient every day and teaching our associates how to meaningfully engage the patient. In Environmental Services, patients are the heart of everything we do!

#### Safety:

The ES department places a strong emphasis on safety... both for the patient, the staff and the ES associate. This is ingrained in all of our activities everyday!

The ES associate is taught from day 1 to think safety first and that all accidents are avoidable. Associates are instructed and must demonstrate competency in the following: back safety, ladder safety, chemical safety, slip & fall safety, fire safety, hazardous management, use of PPE, emergency response.

In addition, they are trained in Patient Safety: recognize fall risks, handle abduction codes, recognizing the signs of abuse, recognizing symptoms of a stroke, incident reporting, etc. Finally, they are trained in proper handling of confidential paper and materials.

To improve our focus on safety, our department has an established department safety committee that meets monthly. These associates act as a Safety Champion for the department, reporting work orders, safety concerns, injuries and other safety topics critical to the department.

Our associates are critical to the safety of the patient, visitor and the organization. Each year they complete competency training in all areas and then as required, be able to demonstrate competency. Positive Safety Associate behavior is continuously reinforced during daily tours, walk thru's and observations. Our associates are empowered

to correct poor safety behaviors in fellow associates and have been commended at Safety meetings for correcting behaviors of associates in other departments.

For questions or comments please contact Bob Kehoe at <a href="mailto:rkehoe@healthforum.com">rkehoe@healthforum.com</a>.