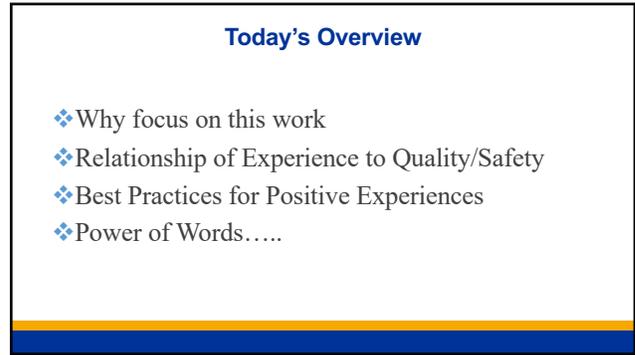


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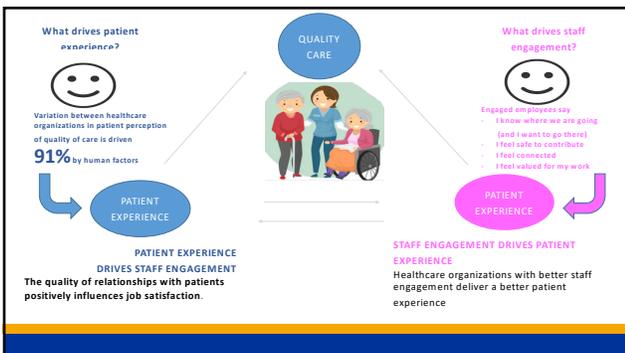
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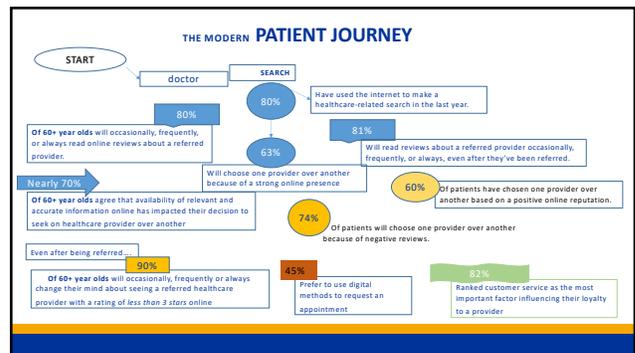
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5



6

## Caring .....

Quality includes a "Caring Relationship that facilitates health and healing"

(ANA, 2010, p.29)

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## Universal Expectations

**Know Me:** my care is a human interaction

**Respect Me:** my time and my need for information

**Hear Me:** involve me and communicate with me

**Show Me:** empathy and compassion in each encounter

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## Every Moment Matters



9

## Best Practices for Best Experiences

- \*Know Me..... My Name, My Preferences, My Care History and Today
- \*Caring Encounters.....
- \*Communications... pre, current, and post – it all matters
- \*Teamwork..... Singing from the Same Sheet of Music
- \*Access and Sensitivity to Time.....Do procedures and policies reflect this sensitivity ?

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## See Me/Know Me



Breast Surgery  
*(Meet Elizabeth)*

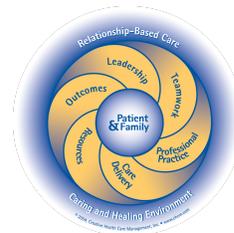
Diabetic  
*(45 years old, a mom, wife, sister)*

Repeat breast cancer patient  
*(Professor of music; violinist; gardener; mother of twins)*

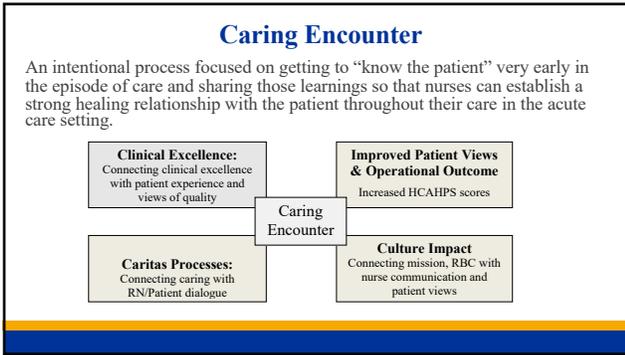
*(Hates needles, timid about her physical changes)*

11

## Relationship Based Care



12



13

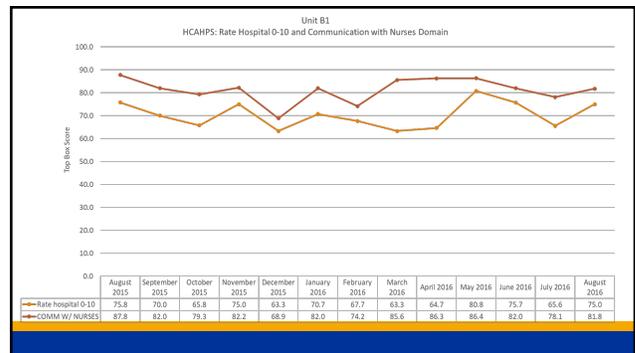
### Encounter Development and Process

- ❖ Questions for Conversation:
  - Preferred name
  - Important partner in care
  - Concerns or goals for this episode of care
- Learn the patient’s story
- Please remember that I.....
- Communication Preference
- Gesture of Caring for Comfort

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### Qualitative Data Review

- Four Focus Groups:
  - ❖ Patient Family Experience Council
  - ❖ Patient Advisory group
  - ❖ Post Encounter Patient Group
  - ❖ Nurse Feedback Group
  - ❖ Patient comments/CFS

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### Qualitative Findings/Themes

- ❖ Encounter/Relationship Important to Care and Healing
- ❖ Ability to “live” the learnings
- ❖ Skill set to build trust imperative
- ❖ Caring is demonstrated through words and behaviors
- ❖ Trust equates to safe
- ❖ Listening to my feelings important
- ❖ Addressing my anxiety matters
- ❖ Nurse confidence in process lacking for some
- ❖ Encounter must be intentional and authentic (Caring Moments, Watson)

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**“ The efficacy of care, the patient’s care experience depends on human connection”**

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### **Considerations for Planning**

- ❖ Measuring and understanding the impact of efforts to improve patient experience is a worthwhile investment
- ❖ The Caring Encounter process suggests the process has value
- ❖ Technology requires attention to the “Caring” in the encounter
- ❖ Knowing the patient has value; using those learnings a challenge
- ❖ Providing assessment of and skill training for communication critical
- ❖ Provider/Nurse interpersonal skills should not be assumed
- ❖ Patient stories and Provider/Nurse words have impact on decisions and outcomes

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**What you say has impact.....  
Patients want to be seen, heard and held**



<https://www.youtube.com/watch?v=2k7f8z8m8s4>  
<https://www.youtube.com/watch?v=2k7f8z8m8s4>  
<https://www.youtube.com/watch?v=2k7f8z8m8s4>

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