

A multi-method assessment of a simulation based program with emergency departments

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How many people will visit
the ED in their lifetime?

What will their
patient experience
be like?



- **1/3 of Israelis will attend the ED at least once.**
- **Many of them will state that they had bad experience.**
- **In 2015 MOH conducted an international survey assessing patient experience in 26 Emergency departments. Issues examined :**

- ☐ General satisfaction of the ED visit
- ☐ willingness to recommend the specific ED
- ☐ staff relationship of patients
- ☐ Knowledge and information giving
- ☐ Wait time
- ☐ Continuity of care
- ☐ Physical environment



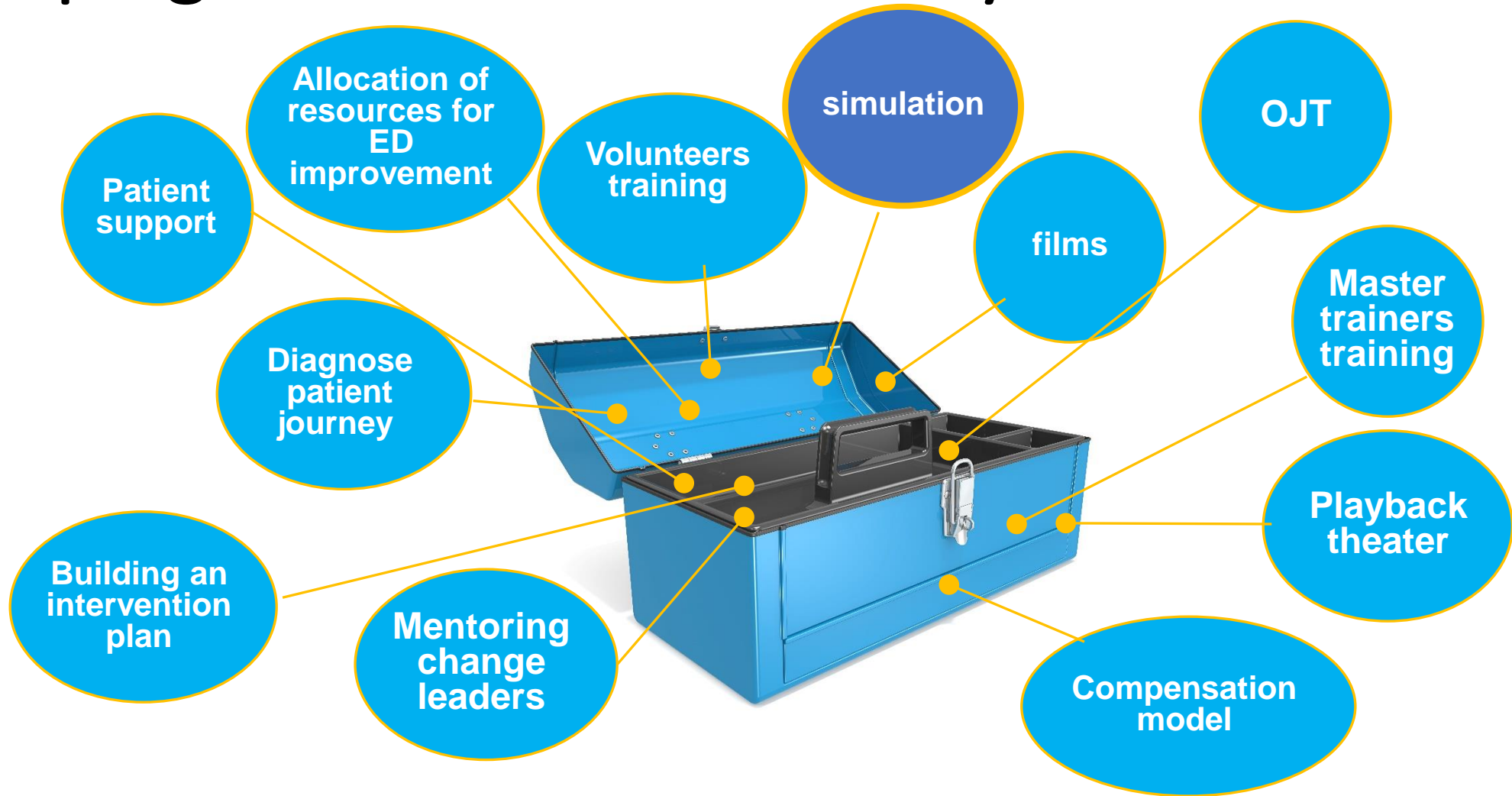
Is it really
that bad?

Survey outcomes

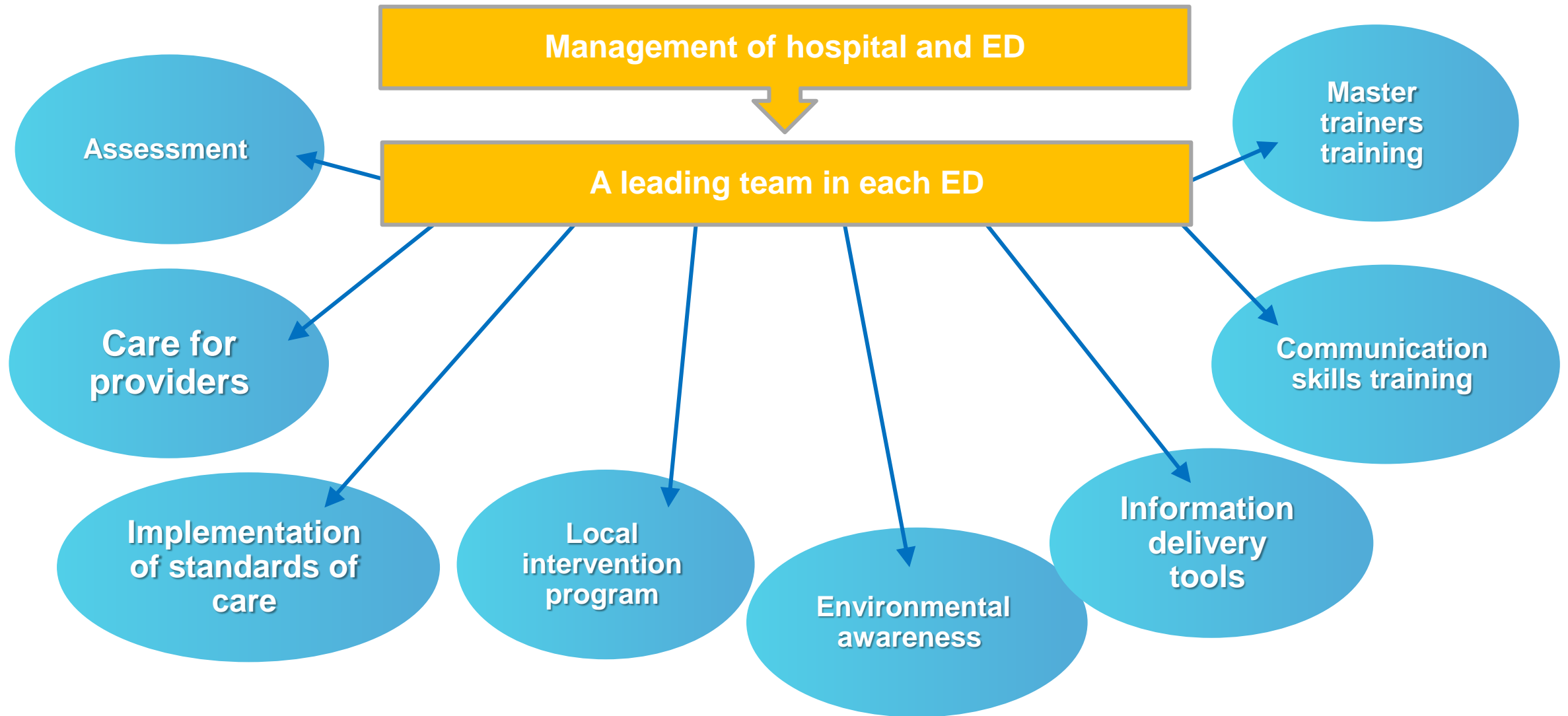
- Low general satisfaction
- 56% stated experience was somewhat satisfying.
- The challenges emerged from the survey motivated MOH to develop a National intervention program aiming to improve patient experience in Israeli ED.
- The vision of the program is to provide ED teams with tools to enhance providers' communication and coping skills.
- MSR - a National expert in medical simulation, was invited to develop a simulation based training program to ED teams, targeting communication skills and teamwork.
- The program was launched during in Fall of 2016.



Coping skills toolkit funded by MOH



A multicomponent simulation based intervention program – with MSR



Major areas of communication:

Empathy

Assertiveness

Information
disclosure

Apology

Trust

Respect

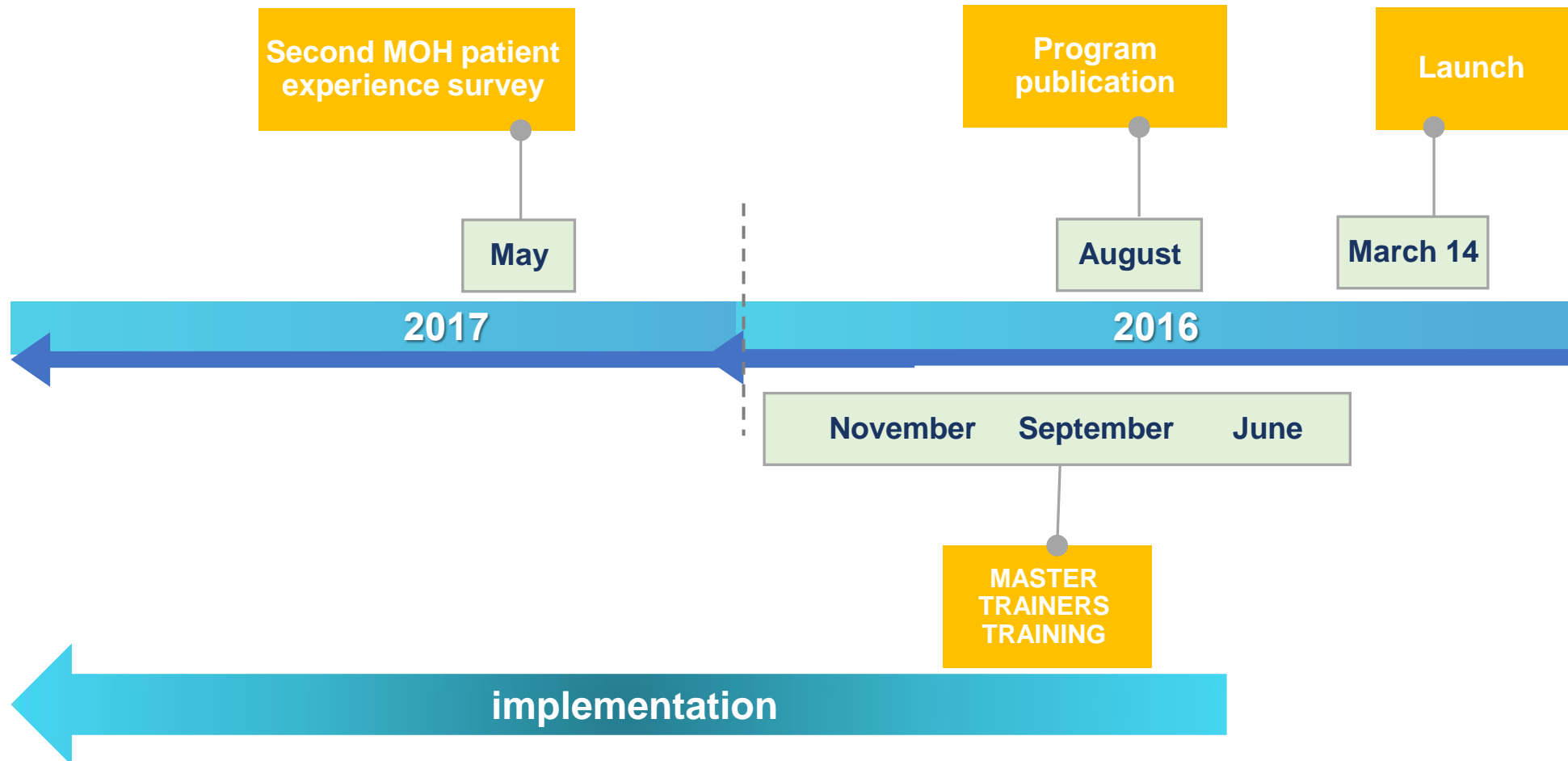
Pain Management



The process:

- Mapping the patient journey
- Developing intervention programs locally tailored for each ED
(to match specific needs: constraints, strengths and challenges)
- ED teams as patients: with actors as providers.
- Video based debriefing
- Video based discussion
- Understanding different domains of patient experience

Timeline



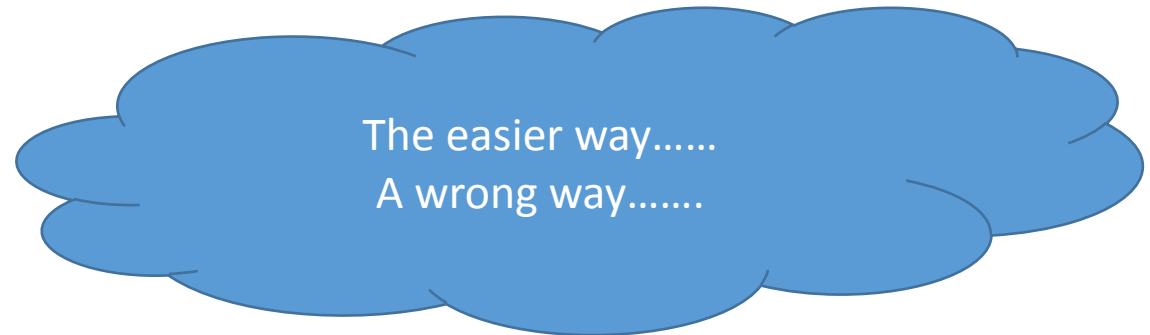
Research Goals:

Assessment of the impact of a multicomponent simulation based intervention program designed to improve patient and providers' experience in emergency departments

1. *Developing a comprehensive tool to measure the impact of the intervention*
2. Assessment of training components on the teams' approach to the patient experience at the ED
3. Comparison of perspectives: patient experience as depicted by patient, companion, physician, nurse.

Hypotheses:

- ED teams will improve their knowledge about patient preferences, improve communication skills with patients, team members, and companions.
- Patients and companions surveyed will assess ED team members who conducted training, higher than those who have not.



The easier way.....
A wrong way.....

Method : A kaleidoscope data collection

Aiming to capture a 360 perspective of the intervention impact:

- ☐ Observer/Researcher
- ☐ Patients
- ☐ Companions
- ☐ Physicians
- ☐ Nurses

Method: Parameters measured

- ☐ Knowledge and information disclosure
- ☐ Communication skills
- ☐ Demographics and background
- ☐ Waiting conditions
- ☐ Attitude towards patients
- ☐ Continuity of care

Methods: tools and design

- Structured questionnaires used by ED observer, and will be given to patients, companions, physicians and nurses at the ED
- Structured interviews and focus groups with participants
- Extracted patient information from the ED file
- Family physician and patient – post discharge surveys

Noa Zeltzer

Significance:

This pilot research will highlight skills and domains applicable for interventions at the ED, that will enhance patient experience.

Anticipated recommendations:

Development of an efficient research tool to track changes in team behavior after comprehensive training, can assist in the ongoing assessment of the largescale MOH project – Enhancing Patient experience at Ed's in Israel

References:

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THANKS !

