

HOSPITAL CHARACTERISTICS

FAXTON-ST. LUKE'S HEALTHCARE

- ▶ Utica, NY
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Faxton-St. Luke's is a not-for-profit system in upstate New York with services that include two campuses for inpatient and outpatient care and a long-term care facility. St. Luke's Memorial Hospital in nearby New Hartford, New York.

S.T.E.E.E.P.



SAFE

Admissions department employees collect detailed information on patients' medical histories, medications and primary care providers for use by their primary nurses.



EFFICIENT

Liaisons in each department are assigned to work directly with specific staff members in other departments to ensure effective internal operations.



PATIENT-CENTERED

Patients are assigned to one primary nurse from admission to discharge, and are regularly visited by support-services employees.

RELATIONSHIP-BASED CARE: BEYOND NURSING

The Problem

In 2004, Faxton Hospital and St. Luke's-Memorial Hospital merged. The leaders of the new system were concerned about integrating the clinical cultures of two formerly independent hospitals while improving staff morale. That year, only 2 percent of respondents to the com-

pany's employee satisfaction survey made positive remarks.

The Solution

Following admission, new patients are assigned to specific nurses to guide their journey from admission to discharge. The nurse then receives a card with detailed information about the patient—including medications, medical history and their primary care provider—that is collected at admission. Each primary nurse is responsible for coordinating the patients' needs with other areas of the system, and is expected to build relationships with the patient and their family. During their stay, patients are also visited by staffers from support services, who consult about their food preferences, temperature comfort and other issues.

The relationship-based care concept is also used to manage internal relationships. Liaisons from each department are assigned to work with specific staff members in other departments to coordinate everything from linen dispersal to pharmacy orders. Unit practice councils, elected by each department, meet monthly to share best practices. Regular, organization-wide meetings of all of the unit practice councils are held to discuss systemic challenges and opportunities.

Results

Positive remarks in the Faxton-St. Luke's employee satisfaction survey improved

from 2 percent of all respondents in 2004 to 55 percent of respondents in 2009. The percentage of negative remarks by respondents dropped from 70 percent in 2004 to 9 percent in 2009.

Background

At the time of the merger, CEO Scott Perra and other members of the executive leadership team committed to creating a new patient care delivery framework. Patricia Roach, RN, the incoming chief nursing officer, had recently read *Relationship-Based Care: A Model for Transforming Practice*, edited by Mary Kolouritis, and thought the concept had the potential to transform the system's clinical culture and improve employee satisfaction. Perra and Roach led a trip of the administrative team to a relationship-based care practicum that gave leaders a chance to learn about the concepts and discuss strategies for its implementation.

Typically, relationship-based care has been a strategy for nursing department operations. The Faxton-St. Luke's team decided the concept had the potential to transform all aspects of operation, from housekeeping to finance, and could be used to bolster both relationships with patients and connections between staff.

"There are two jobs at Faxton-St. Lukes—taking care of patients directly, or taking care

TEAM MEMBERS

Mary Beth Dowling, RN
Relationship-based care coordinator

Lori Morosco, RN
Telemetry Charge Nurse

Scott Perra
Chief Executive Officer

Patricia Roach, RN
Chief Nursing Officer

Kim Scheri, RN
Outpatient Infusion Unit

Anthony Scibelli
Vice President, Human Resources

of people who take care of patients directly,” Perra says.

Following the practicum, the system’s nursing department was initiated into the relationship-based care initiative with a training program known as a wave.

Each wave begins with a daylong in-service program consisting of talks from senior leadership and multi-media presentations on relationship-based care and cultural change. At the end of the day, staff members are given books and other materials on relationship-based care that they are expected to study over the next several months.

After nine months of training, each unit is required to make a presentation to senior leadership on how they plan to incorporate the principles of relationship-based care into their operations. Each unit then selects representatives for its unit practice council.

Currently, Faxton-St. Luke’s is completing its final wave of training, and the leadership team next plans to review which departments and units have effectively incorporated relationship-based into their daily operations and which areas need improvement, Perra says.

**Principles of
Performance
Excellence**

Perfect the Patient Experience

Relationship-based care theory is based on strengthening relationships between caregivers, patients and their families. At Faxton-St. Luke’s, that concept includes everyone a patient comes into contact with or is impacted by—from their primary nurse to the chef preparing their food. Lori Morosco, RN, a nurse in the hospital’s

telemetry charge department, says the emphasis on building personal connections relationship has been noticed by patients.

“You may not have a personal relationship with the primary nurse,” Morosco says. “Instead of saying, ‘Who is the primary nurse,’ it’s a question of, did you form a relationship with someone on the floor?”

Creation of High-Reliability Culture

Anthony Scibelli, vice president of human resources for Faxton-St. Luke’s, has driven an effort to transform the system’s hiring practices and rewards and recognition program to reflect relationship-based care principles.

Instead of emphasizing skill sets that can be taught after employees are hired, the human resources department now evaluates potential hires in interviews for behavioral cues and attitudes as well as competency in care standards. The employee rewards and recognitions program has also been redesigned to highlight leadership in work performance, as opposed to institutional stature. The change is reflected in the system’s Care 500 award, a peer-nominated honor that recognizes staff for caring for patients and coworkers.

“The relationship-based care model is that everyone’s a leader,” Scibelli says. “You don’t have to have a title. Now it’s whether you’re a role model in how you provide care. It could be clinical care, or it could be taking care of a coworker.”

Continual Improvement

Moving forward, Perra and other members of the leadership team hope the initiative will sustain an environment where all employees feel empowered to question practices and suggest improvements.

For example, a housekeeper recently approached the system's nutrition depart-

ment and asked why patients' food trays were being placed on dirty bedside tables, increasing the risk of spreading infectious diseases. The employee suggested that the housekeeping department sanitize the tables before the food services department delivers the trays. That practice has since been adopted throughout the organization, according to Matt Marchbanks,

director of nutrition and environmental services for Faxton-St. Luke's.

"A housekeeper came up with a best practice that could be used in every hospital in the country," Marchbank says. "If you're listening to those people, you will have a best practice organization."