

# Welcome



# Vision

To be the healthcare provider of choice serving Longview and the East Texas region.

## Shared Values

- Quality Healthcare
- Service to our Community
- Stakeholders, held in highest esteem

# Mission

Good Shepherd Medical Center is a not-for-profit community hospital dedicated to creating a healthier future for the residents of Longview and Northeast Texas. To ensure the continued well-being of the community, the Medical Center strives to provide quality, compassionate and comprehensive healthcare services to the whole person: body, mind and spirit.

Good Shepherd exists to care for all those who present themselves, whatever their need, regardless of race, creed or gender. The Medical Center provides health services to the medically underserved as far as resources provide, while maintaining the long-term integrity of service to the community.

# Mission

Like the shepherd, the Medical Center has come to symbolize one of the human spirit's most treasured resources - one's capacity to care.

- Good Shepherd Medical Center is a 425-bed regional referral facility and serves as the largest employer of Gregg County, providing care for over 18,370 admissions and performing over 10,483 inpatient and outpatient surgeries and 2,909 births
- In 2010, Good Shepherd Health System provided over \$177 million in uncompensated care. There is no local, state or federal tax support for this care.



Good Shepherd Health System is divided into numerous entities. Some of these include:

- Good Shepherd Medical Center
- Good Shepherd Medical Center – Linden
- Good Shepherd Medical Center – Marshall
- Good Shepherd Ambulatory Surgical Center
- GSHS Administrative Services Organization
- Good Shepherd Health Network
- Champion EMS

# Good Shepherd Leads the Way

- ◎ East Texas' first Level IIIa NICU
- ◎ Longview's only perinatal clinic
- ◎ Longview's only Level II Trauma Center
- ◎ Longview's first comprehensive digital Breast Center
- ◎ Institute for Healthy Living –Commitment to Wellness and Prevention

# Good Shepherd's Commitment to the Community

- ◎ As a not-for-profit health system, every dollar made is invested into the healthcare of the community
  - > New technology/equipment
  - > Facility improvements
  - > Additional services

# Service Excellence

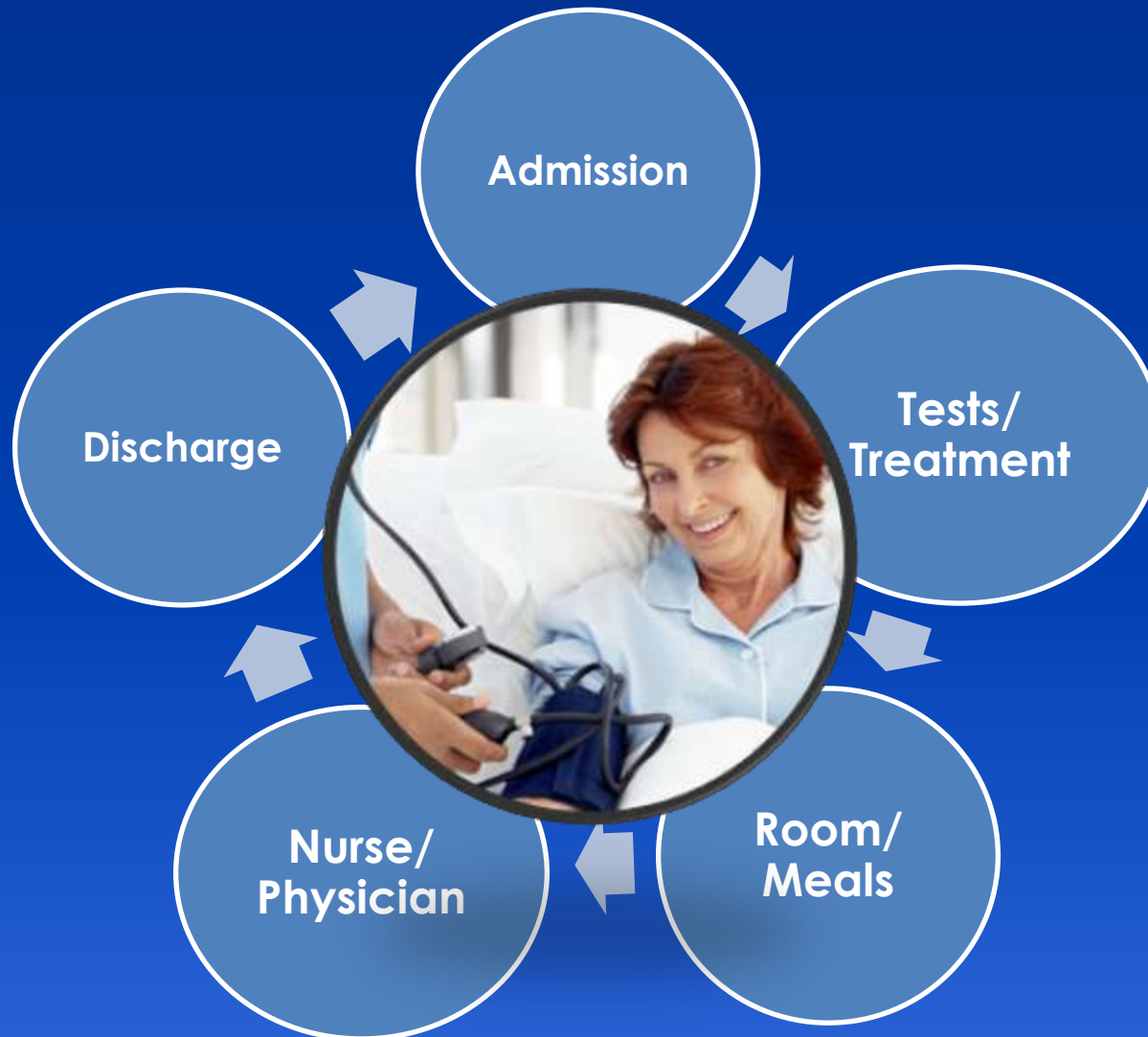


Aligning Quality, Safety and  
Service

# Why Focus on Service Excellence

- Health care is focusing on Service Excellence
- Patients have a choice in health care – service makes a difference in which hospital they choose
- Employees want to work for an organization where people are valued
- **Patients are our PURPOSE!**

# The Patient Experience



# What's important to our patients?

- ◉ Quality care?
- ◉ Cleanliness?
- ◉ Courtesy?
- ◉ Caring staff?
- ◉ Responsiveness
- ◉ Timeliness of Service?
- ◉ Communication with patients?
- ◉ Communication between caregivers?

# PROFESSIONAL BEHAVIOR

PROFESSIONAL BEHAVIOR



# Meet Customer Needs With Courtesy

Customers are not an interruption of our work, they are the reason for our being here

Treat everyone like they are the most important person at GSMC

Satisfy needs/Exceed expectations

Acknowledge problems

Respond quickly.

- Customers see, hear and can misinterpret our interactions with co-workers.
- Loud talking, excessive laughter, congregating in groups and teasing can be perceived as unprofessional behavior

# APPEARANCE



# LOOK THE PART!

Take pride in your personal appearance! You are part of a 75 year tradition of professionalism!  
Follow the dress code.  
Wear ID badge – ensure that it is VISIBLE and facing forward so you can be easily identified.  
Maintain good personal hygiene.  
Eat in designated areas – break rooms or cafeteria.  
Professional appearance sends a message to our customers about service.



# Facility Appearance

- ◎ Take pride in the facility – maintain a clean, litter-free work environment
- ◎ Do you pick up trash in the floor at home?
- ◎ Keep GSMC BEAUTIFUL, pick up litter and dispose of it properly
- ◎ What if you see a spill?
  - > Either clean it up or call to have it cleaned up.
  - > Wait in the area until it is cleaned up or signage is placed to identify the hazard to prevent a slip or fall.

# COMMUNICATION



# Communication

- Verbal and Non-verbal Messages
  - Deliver verbal messages with courtesy, clarity and compassion
  - Use easy-to-understand words; avoid medical terms, abbreviations, acronyms and slang
  - Non-verbal messages are delivered with our eyes, body and mannerisms

**Choose your words wisely when communicating!**

# Greetings & Introductions

- ◉ Introduce yourself to customers by telling them WHO YOU ARE and WHAT YOU DO!
- ◉ Address customers by name with appropriate titles
- ◉ Make eye contact
- ◉ Speak in a friendly, compassionate tone of voice
- ◉ SMILE

# Interactions with Customers

- ⦿ Avoid terms of endearment and baby talk
- ⦿ Say “please, thank you, sir and ma’am” when appropriate
- ⦿ Explain what you are doing to patients and visitors
- ⦿ Listen without interrupting

# Dirty Laundry

- ◎ Don't air dirty laundry with patients, families and visitors!
  - > Not about your personal life
  - > Not about hospital politics
  - > Not about your co-workers' personal life
  - > Not about conflicts between people



# Communicate Wait Times

- Our customers' time is valuable
- Our customers expect prompt service
  - When there are delays:
    - ✦ Keep customers informed
    - ✦ Keep customers comfortable
- Inform families about a procedure; when it will begin, how long it will take, etc. Update hourly.
- When possible, inform customers of delays prior to the appointment
- Let the customer decide whether to come later or schedule another appointment
- Thank customers for their patience

# Call Lights

- Call lights will be answered with compassion, care, courtesy and respect
- Respond timely...seconds seem like minutes, minutes like hours to someone who is waiting for a response!
- The call light is the “life line” for our patients, not an interruption in our busy day!
- Use the handset to respond when possible to preserve the patient’s privacy

# COMMITMENT TO CO-WORKERS



# Show your Commitment to Co-workers

- ⦿ Respect your fellow employee's time. Be considerate of last minute requests.
- ⦿ Return from breaks and meals on time
- ⦿ Be sensitive to the feelings of co-workers, don't chastise or embarrass colleagues in front of others
- ⦿ Conflict may exist among co-workers, professional courtesy is expected. Work together for the patient.
- ⦿ Be supportive of fellow employees. Help each other perform tasks and prevent

# PRIVACY AND RESPECT



## Respect privacy and modesty!

Lessen patient's anxiety by showing concern for privacy!  
Create a secure, trusting environment of care.  
Treat all patient information as confidential  
Limit discussion about a patient to what is necessary to meet needs.  
Do not discuss patients in public areas.



W O U L D Y O U F E E L I N F E R A B L E ?

# Knock Before Entering



# Privacy and Respect

- Close doors/curtains when obtaining information from customers
- Always knock before entering
- Privacy is a KEY word in patient satisfaction. Use it when describing your actions.
- Provide additional sheets or blankets for patients being transported.
- Respect their need for a quiet, healing atmosphere
- Respond quickly, respect a customer's time;

# Patients Have the Right of Way

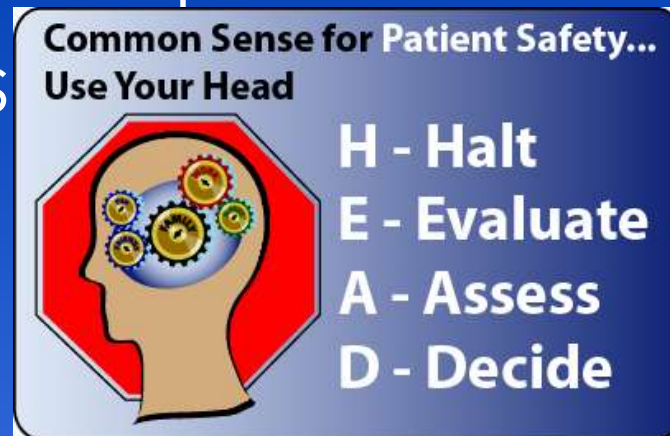
- Good elevator manners contribute to patient satisfaction.
- Hold the elevator door for others and make room for them.
- If a patient needs to be transported – exit the elevator.
- All social conversation ceases when a patient is being transported on the same elevator .
- Face wheelchairs toward the elevator door.
- Be sensitive to the aroma of foods in elevators with patients.
- Exit the elevator when transporting soiled equipment when patient or family member enters.

# SAFETY AWARENESS



# Use your HEAD!

- Know policies and procedures
- Don't take unnecessary chances
- Report hazards, accidents and incidents promptly.
- Correct hazards when possible
- Use personal protective equipment
- Prevent s



WE ARE

GOOD



SHEPHERD



**A patient's perception of quality of nursing care largely depends on the nurse's ability to meet the patient's needs.**

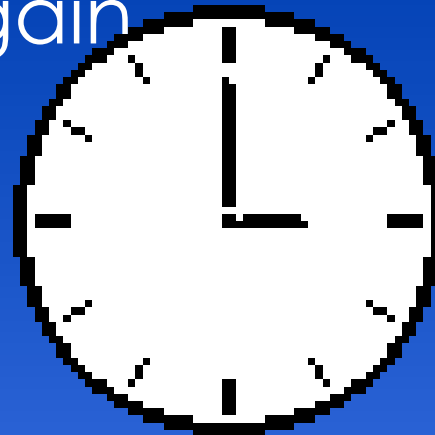
# Hourly Rounding

## Impact of Hourly Rounding

- Reduce call light use by 40%
- Reduce falls by 50%
- Reduce skin breakdown by 14%
- Increase patient satisfaction 12 mean points
- Increase employee satisfaction

# Before You Leave

- ◉ Ask, “Is there anything more I can do for you before I leave? I have the time.”
- ◉ Tell the patient that a member of the nursing staff (use names on the white board) will be back in the room in an hour to round again





# *Service Recovery*

*Opportunity 101*



# *Service Recovery*

**Service Recovery is about handling customer complaints effectively.**

**If you can convince people to complain, you have a chance to turn a dissatisfied customer into a satisfied customer.**

# *Service Recovery*

Customers complain when they do not get top notch service.

They know when they get it, and they certainly know when they don't. That's why we hear complaints.

# *Service Recovery*

*The customer may not  
always be right but they  
are always the customer.*

# Employee comments that are not acceptable...

- ⦿ “It isn’t my fault!”
- ⦿ “You’ll have to ....”
- ⦿ “That’s not my job!”
- ⦿ “You can’t possibly be right about this!”
- ⦿ “Our organization would **never** do that!”
- ⦿ “Why are you telling me this? I wasn’t there!”
- ⦿ “It’s the computer’s fault.”
- ⦿ “That’s not my department.”
- ⦿ “That’s against our policy and there’s nothing I can do about it.”

# ***Employee actions that are not acceptable...***

- Silence or non-responsiveness
- Moving slowly
- Chatting w/colleague while customer is waiting
- Pointing to direct a customer to a seat or location
- Acting tired, bored, or distracted
- Interrupting the customer
- Looking at your watch

# *Service Recovery Philosophy*

*If the customer complains to you, you are the right person to take charge of handling the complaint.*

# What is the process to address complaints?

## ◎ A.C.T.

- > Apologize with NO excuses
- > Correct the issue
- > Take action - Service Recovery Coupon

# Infection Prevention

# Basic Principles of Infection Prevention

- Infections cause by bacteria and viruses can be transmitted between patients & healthcare workers. To avoid infection comply with these practices:
  - > Hand hygiene – no artificial nails
  - > Care & cleaning of equipment
  - > Standard precautions and use of PPE
  - > Transmission based precautions (isolation)
  - > Immunizations
  - > Reporting needle sticks or blood/body fluid exposures

**Prevention is the key!!**

# Basic Principles of Infection Prevention

- ◎ Infection can be spread in the following ways:
  - > **Direct contact**: spread of infection or germs is person-to-person by direct touch or contact.
  - > **Indirect contact**: Spread of disease or germs is caused by the environment, or by equipment and medical devices that are not cleaned properly or become contaminated by improper handling.
  - > **Airborne Route**: Spread of disease by germs in the air.

# Standard Precautions

- Are intended to reinforce well established infection prevention principles such as hand hygiene
- Reduce the risk of spreading or acquiring bloodborne diseases such as HIV or Hepatitis B
- Apply to all patients and healthcare workers
- Food and drink should be in appropriate areas
- Use barriers to prevent transmission of germs (pathogens) from:
  - > Excretions (like stool)      -- Blood
  - > All body fluids                --non intact skin
  - > Secretions (except sweat    --mucous membranes (mouth, eyes)

# Standard Precautions

## ◎ Gloves

- > Wear prior to touching blood, body fluids, secretions, excretions, contaminated items, and when performing vascular access procedures (IV catheters)
- > Use clean gloves to touch mucous membranes and non-intact skin
- > Change gloves between tasks and remove promptly after procedures to prevent environmental contamination
- > Always perform hand hygiene before and after glove use

# Standard Precautions

## ◎ Face Protection

- > Wear mask & eye protection or face shield to protect mucous membranes of the eyes, nose & mouth from splashes or sprays of blood, body fluids, secretions or excretions

## ◎ Gowns

- > Wear gowns to protect skin & prevent soiling of clothes from blood, body fluids, secretions or excretions

# Standard Precautions

## ◎ Trash

- > Contain regular trash in a clear plastic bag
- > Use the red biohazard bag or other designated biohazard container for items that are soiled with blood, that cannot be emptied of blood (e.g. chest tube bottles or blood transfusion bags), or that are caked with blood that could flake off. When in doubt, use a red bag
- > A second bag/container is required if outside contamination of the first bag/container occurs
- > Trash is placed in special containers in designated soiled locations
- > Environmental Services will remove trash per procedure.

# Transmission-Based Isolation Precautions

- Transmission-Based Isolation Precautions are used for patients who have highly contagious diseases/conditions. In addition, these precautions can be used “empirically” based on signs/symptoms of disease before a firm diagnosis is made
  - > It is very important to be consistent with hand hygiene, use of gloves, care of the environment, and cleaning of equipment.
  - > Germicidal wipes are available for use on surfaces such as keyboards, stethoscopes, and electronic thermometers
- These additional precautions are necessary to interrupt the chain of transmission.

# Transmission-Based Isolation Precautions

## ◎ Airborne Isolation Precautions

- > Used for diseases that are transmitted through the air by tiny particles that can travel long distances on normal air currents.
- > Examples of airborne disease include tuberculosis (TB), rubella (measles), and varicella (chickenpox)
- > Patients who are suspected of or are diagnosed with these diseases are placed in a private, separately ventilated, negative pressure room

# Transmission-Based Isolation Precautions

## ⦿ Airborne Isolation Precautions (cont'd):

- > The door must be kept closed to maintain negative pressure (air in the room won't flow out)
- > Anyone entering the room must wear a N-95 respirator as respiratory protection. These are not regular surgical masks, but rather a fit-checked respirator required by CDC – annual fit testing and medical evaluation required
- > If the patient must be transported, place a surgical mask on the patient or provide tissues to cover cough
- > Supplies outside the room would include a posted Airborne Isolation sign, a box of small and regular sized N-95 respirator masks and germicidal wipes to disinfect small pieces of equipment coming out of the room

# Transmission-Based Isolation Precautions

## ◎ Droplet Isolation Precautions:

- > Used for diseases which are transmitted by large respiratory droplets
- > Coughing, talking and suctioning create these droplets. They are so large, they “rain down” (fall out of the air) within 2-3 feet of the patient
- > Examples of droplet spread diseases include the flu, meningitis caused by *Neisseria meningitidis*, Pertussis (whooping cough) and streptococcal respiratory disease
- > A private room is necessary
- > A negative pressure room is not indicated
- > Wear an isolation mask(ear loop) when entering the room
- > The patient should wear a surgical mask during transport and cover cough
- > Supplies outside the room would include a posted Droplet Isolation Precaution sign, a box of isolation masks (yellow ear loop masks) and germicidal wipes to be used to disinfect small pieces of equipment coming out of the room

# Transmission-Based Isolation Precautions

## ◎ Contact Isolation Precautions

- > Used for diseases/conditions which are transmitted by physical contact with the patient or the patient's environment
- > Examples of contact spread diseases or conditions include MRSA, VRE and RSV
- > A private room is necessary
- > Wear gloves when entering the room
- > Wear a gown when entering the room for contact with the patient or environmental surfaces/patient care equipment
- > Remove the gown and gloves before leaving the room and perform hand hygiene
- > Supplies outside the room would include a posted Contact Isolation Precaution sign, a cart to store the gowns, gloves and germicidal wipes to disinfect small pieces of equipment coming out of the room

# Transmission-Based Isolation Precautions

## ◎ Contact Special Isolation Precautions

- > Used with patients known or suspected to have *Clostridium difficile* (C. diff)
- > This organism is spread through contamination of the environment by C. diff spores or by unwashed hands of healthcare workers
- > A private room is necessary
- > Wear gloves when entering the room
- > Wear a gown when entering the room for contact with the patient or environmental surfaces/patient care equipment
- > Remove the gown and gloves before leaving the room and wash your hands with soap and water. Hand sanitizer does not kill C. diff spores

# Transmission-Based Isolation Precautions

## ◎ Contact Special Isolation Precautions (cont'd):

- > Environmental Services will clean these rooms with a special cleaning solution to help kill the spores
- > Supplies outside the room would include a posted Contact Special Isolation Precaution sign, a cart to store the gowns, gloves and germicidal wipes to disinfect small pieces of equipment coming out of the room
- > A reminder sign will be posted in the room at the door, to remind you to ***wash your hands with soap and water*** before you leave the room

# Transmission-Based Isolation Precautions

## ◎ Multi Drug Resistant Organisms (MDRO):

- > Several common germs or bacteria like Methicillin Resistant Staphylococcus Aureus (MRSA) and Vancomycin Resistant Enterococcus (VRE) have become resistant to many antibiotics. This means the usual antibiotics prescribed will not kill these germs and so they are called Multi-Drug Resistant Organisms (MDRO). While these germs should not cause an illness in healthcare workers, if a patient gets an infection from one of these resistant organisms, the doctor may not be able to cure the infection.
- > MDRO can be spread by direct contact from the hands of a healthcare worker to a patient. Contact Isolation precautions, when used correctly, will prevent the patient-to-patient spread of MDRO.