The Problem
While a blood draw may be routine for hospital and laboratory professionals, for many patients this procedure may elicit anxiety and fear. Many people find this process uncomfortable and a significant number of people are afraid of needles.

A study completed by France et al (2015) revealed that fear of blood drawing procedures as well as actual blood draw times were significant predictors of potential complications associated with the procedure, including but not limited to vasovagal reactions. These reactions in turn pose a potential risk for patient injury and harm. The study further demonstrated that patients with a high level of anxiety were six times more likely to experience a vasovagal reaction as opposed to patients with a low fear level.

As a result of this anxiety and fear, patients may frequently perceive the care they receive in an Outpatient Lab setting in an unfavorable light. For most patients, the only interaction they may remember is when a phlebotomist sticks them with a needle. During CY 2015, the Outpatient Lab drawing station’s patient experience scores were unfavorable, with < 72% of patient surveys reflecting an optimal (Top Box) experience.

Aim/Goal
Develop interventions and implement patient perception of care best practices to improve patient experience Top Box Scores from 71.5% in FY 15 to ≥80% in FY 16.

The Interventions
• Extensive staff education on a patient’s perception of care and how it is driven by what patient’s see, hear and feel throughout the entire experience.
• Developed and implemented scripts for interactions with patients.
• Adoption of AIDET as a framework to apply key words at key times. AIDET is a simple acronym that is known to be an effective tool to communicate with people who are often nervous. It is one of the Studer Group’s Must Haves™ for hardwiring excellence.

Decreased + Increased = Improved Clinical Outcomes & Anxiety Compliance Patient Experience

• Staff subcommittee developed a campaign to hardwire AIDET, “The Twelve Days of AIDET.”
• Daily, as part of the morning staff huddle, staff selected a different AIDET element to improve patient/staff interactions.
• Each time a co-worker heard a fellow employee using the “AIDET tool of the day,” their name was entered into a daily draw for a small prize.
• At the end of the twelve days there was a Grand Prize winner.

Progress to Date

Lessons Learned
• Performance vulnerable to staffing changes and ongoing education
• Variance in process in the laboratory affects patient experience outcome
• Constant auditing and vigilance is required to drive outcomes

Next Steps
• Ongoing education
• Development of an idea board to sustain momentum
• Ongoing auditing

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