

# The Caring Model™ A Practical Application to Improve Patient Satisfaction

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## Caring and Patient Satisfaction

- Patient satisfaction has become an important indicator of quality care and financial success for healthcare organizations.
- The Gallup surveys conclude the key to high patient satisfaction involves nurses.
- Press Ganey study of 1,007,612 patients from 545 hospitals identified interpersonal attributes, especially those of nurses, as closely associated with overall patient satisfaction.

## The Concept of Caring

- No universal definition of caring exists, but it is a fundamental value that guides nurses' decision making.
- Swanson: Caring is a nurturing way of relating to a valued other towards whom one feels a personal sense of commitment and responsibility.
- A nurses' interactive style during the caring episode is the skill that patients value most and is a focus of their satisfaction.

## Theories of Caring

- Watson: Nursing takes place within a human-to-human caring relationship that supports caring as the core of nursing practice. Caring is practiced interpersonally.
- Leininger: Caring is the essence and unifying intellectual and practical dimension of professional nursing.

## The Caring Model™

- Based on a synthesis of concepts and behaviors in the caring literature.
- A set of five uniquely defined nurse behaviors that patients identify as "caring":
  - Introduce yourself to patients and explain your role in their care that day.
  - Call the patient by his or her preferred name.
  - Sit at the bedside for at least 5 minutes per shift to plan and review the patients care.
  - Use touch, handshake or touch on the arm.
  - Use the mission, vision, and value statements in planning patient care.
- A training process that creates an emotional connection with the nurse.
- A "back to basics" orientation.

## Intervention

- Two-hour educational intervention.
- Nurses recall reasons for becoming a nurse.
- Nurses describe caring moments experienced.
- Nurses analyze differences in nurse and patient perceptions of caring.

- Nurses sign commitment to consistently use five caring behaviors with patients.
- Caring behaviors added to job description, evaluations, skills checklists and orientation.
- Two hour management training.
- Caring behaviors printed on name badge of all employees.
- Monthly shot-in-the-arm activities and nursing rounds.
- Inclusion of the caring behaviors in patient care documentation.

## Setting and Sample

- 49 bed acute care hospital.
- 87% of nursing staff participate.
- Pre-intervention survey of 72 randomly selected patients.
- Post-intervention survey of 75 randomly selected patients.

## Methodology

- Descriptive design to evaluate difference in patient satisfaction before and after implementing The Caring Model™.
- The Gallup phone survey of discharged patients.
- 4 point Likert scale to measure eight descriptive attributes of patient satisfaction.

## Results

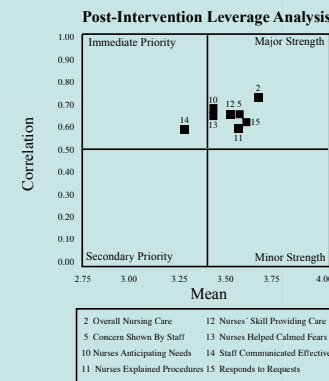
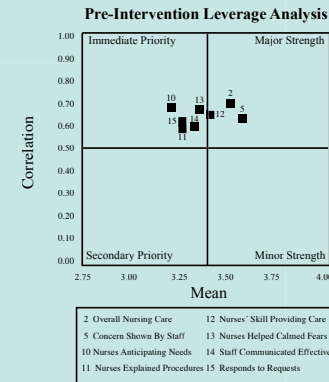
- Scores on two attributes of patient satisfaction improved significantly post intervention.

### Summary of Analysis of Variance Results for Two Significant Nurse Patient Attributes

Source	df	MS	F	P	N	M	SD
Question 10. Anticipate Needs							
Contrast 1	1	2.1644	4.57	.0333	74	3.256	.0799
Contrast 2	1	1.1209	2.37	.1249	74	3.418	.7998
Question 15. Responds to Requests							
Contrast 1	1	1.6899	3.55	.0605	75	3.280	.0796
Contrast 2	1	1.9200	4.03	.0455	75	3.520	.0796

Contrast 1 was 6 months pre-intervention compared with 3 months post intervention.  
 Contrast 2 was 6 months pre-intervention compared with 6 months post-intervention.  
 Df= degrees of freedom; MS= mean square; F= FValue; p= level of significance;  
 M=Mean; SD= standard deviation.

## Leverage analysis indicated significant movement of scores on four attributes within the first 3 months post-intervention



## Conclusion

- Nurse caring behaviors significantly impacted patient satisfaction results.

## Discussion

- The measurement of patient satisfaction has increased understanding of significance of patient expectations and perceptions of care.
- Behaviors and attitudes displayed by nurses represent the commitment of the organization to patient satisfaction.
- Nurse caring is the driving force of patient satisfaction and their likelihood in choosing an organization for care.

## Recommendations

- Frequent reminders on an ongoing basis that patients and families expect nurses to demonstrate caring behaviors.
- The Caring Model™ must remain an integral part of the strategic planning process and be incorporated into the infrastructure of the organization.
- The Caring Model™ education and training needs to be refined and developed to include all departments and services in the organization.
- Patient satisfaction outcome data must be shared with the employees, volunteers, physicians, and board members until results are owned by everyone in the organization.
- If nursing is to contribute to the economic success of the organization, unique nursing behaviors that advance patient satisfaction must be identified and evaluated.
- The organization needs to identify relationship between patient satisfaction and financial performance.
- The impact of the model on patient outcomes and adherence to treatment regimens need to be investigated.

## Post Script

- The original intervention was replicated in 4 hospitals in 1998 with similar results.
- Currently, numerous hospitals across the United States have implemented The Caring Model™ with positive results.
- The Caring Model™ has been adapted for interdisciplinary training.
- Management education and training has been formalized to include caring behaviors and interpersonal competencies.
- Research is ongoing regarding the success of the model, its implementation and continued maintenance.



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