

Bluenotes MENA 2018 conference

The Impact of the use of BLUE 360 on AUB (American University of Beirut) Medical Center

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I. Why Blue 360?

- AUBMC requirements
- Opting for Blue 360 Evaluations

II. Blue 360 implementation Steps

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Why Blue 360?

- Success of ICE using Blue across the university
- AUBMC approaches OIRA to look for a solution to evaluate all Medical Staff

AUBMC Requirements

- Tool where all Medical Staff Can evaluate Each Others.
- Tool that can provide valid analytical reports that can be used for Annual Appraisal and fuel competency development within all ranks of your organization.
- Tool that Can accommodate different Type of Surveys and can handle most complex 360 degree feedback use cases
- Tool with advanced integration capabilities with organization's HRIS, ERP, CRM, and other data sources
- Tool that centralize all evaluation process, dynamic, easy to monitor , and flexible when it comes to resetting submissions , changing raters assignments, etc...

BLUE 360

Solution Proposed

Blue 360 implementation Steps

- Running a pilot project using one department (OBGYN).
- Expanding the pilot project to include the rest of all AUBMC departments.
- Fall 2016-2017 , official launch of AUBMC Blue 360 Evaluations.

Challenges

- Lebanese have trust issues regarding anonymity and confidentiality of submitted surveys.
- Senior medical staff still do not accept the concept of being evaluated by other staff members (Nurses, secretaries etc...).

How to Overcome the Challenges?

- Proving the confidentiality and anonymity of submitted answers.
- Explaining the importance and benefits of evaluations especially for appraisal and staff developments.
- Presenting where and how surveys results will be used.

Technical Challenges

- Gathering all data and info needed for the BLUE 360 evaluations.
- Design and define relationship and the tree of ranking between evaluators and evaluated.
- Creating our data source and relationships files.
- Designing and creating reports.

Overcoming Technical Challenges

- New Database was creating to gather Data from outside AUB Banner Database and data on AUB banner.
- Created additional Reports on MS access, Argos (new reporting solutions) To report statistical Measures not provided and accommodated On Blue

Progress on AUBMC 360

- Running AUBMC 360 evaluations 3 years
- New features are Implemented every year On the technical Level and Reporting level

Sample Reports from AUBMC 360 evaluations

AUBMC Annual Evaluation of Medical Staff Behavior Survey Report for [REDACTED] MD - Academic Year 2017

Project I AUB Medical Center 360 Evaluations 2017

Project Audience 91
 Responses Received 48
 Response Ratio 52.75%

Report Comments

A standardized process for the annual evaluation of medical staff behavior was developed using a multi-source feedback (360-degree) questionnaire-based assessment method in compliance with AUBMC policy.

This 360-degree feedback is obtained from staff members working at the lower, same or higher levels of the organizational chart. Feedback on physicians behavior was solicited from the following four hospital staff categories:

- Direct Supervisor (Chair/Head of Division)
- Self-evaluation
- At least two other categories one of which is a non-physician, these include:
 - 1- MD: Residents/Fellows
 - 2- Non-MD: Registered Nurses/Technicians/Clinical Department Administrators etc....

The purpose of the survey is to assess the presence of a safe culture in the hospital and develop quality improvement processes to enhance it. A safe culture is characterized by full participation of all staff without fear of reprisal or marginalization. Safe culture also includes high respect between professional groups in which disruptive behaviors do not occur.

Medical staff members are models and mentors in creating a safe culture at the hospital; and feedback through surveys can support medical staff role models.

The survey results will be treated with the strictest confidentiality.

Please treat this report with the strictest confidentiality and do not share it with anyone.

Creation Date Thu, Jan 25, 2018



Response Rate Breakdown

Medical Staff: Faculty/Residents/Fellows /Medical Physicians /Psychology Interns
Hospital Staff: Nurses/Technicians/Assistants and other staff
Manager: Chairperson/Head of Division

Raters	Manager	Self-evaluation	Medical Staff	Hospital Staff	Total Raters
Responded	2	1	25	20	48
Invited	2	1	42	46	91
Response Ratio	100%	100%	59.52%	43.48%	52.75%

This section contains a breakdown of results to every question by rater group, including an overall average across all rater groups. The Division/Department and Institutional averages are also provided for comparison.

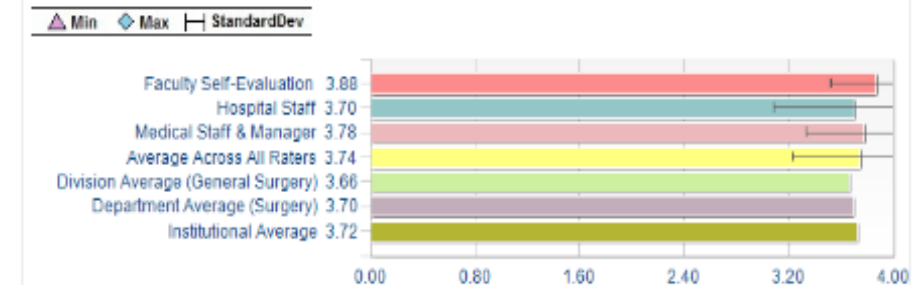
The first block (titled "Average of all questions"), is an overall average of all questions.

The scale corresponds to the following responses:

- 4 = Always
- 3 = Most of the time
- 2 = Sometimes
- 1 = Hardly ever
- 0 = Never

"Not observed" responses were excluded from the calculations.

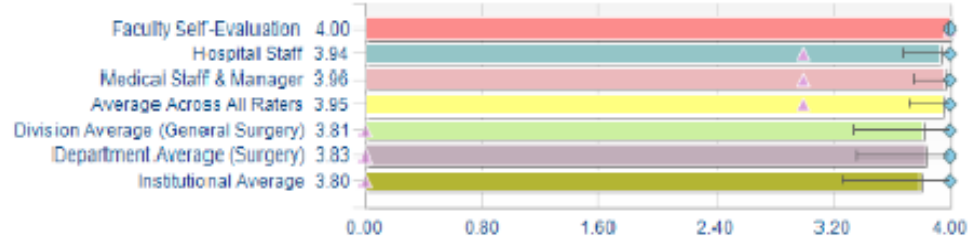
Average of all questions



1. Listens to patients and their families' concerns and responds to them thoroughly.



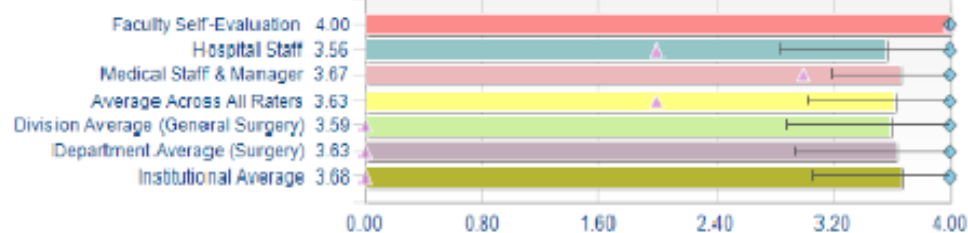
2. Treats patients with dignity irrespective of their religion, culture, sexual orientation, gender and financial abilities.



3. Respects patients' confidentiality (i.e. does not discuss confidential patient information in areas where others can overhear the conversation like hallways, elevators, coffee shops etc...)



4. Responds in timely fashion to calls regarding patient care.



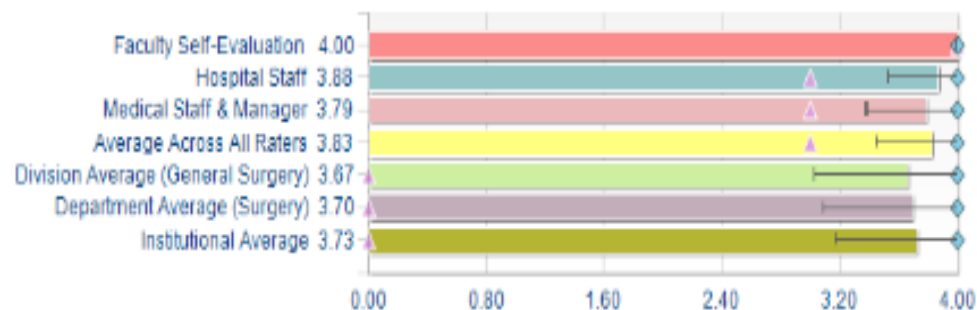
5. Arrives on time to scheduled appointments (i.e. clinic, OR, rounds, shift etc...)



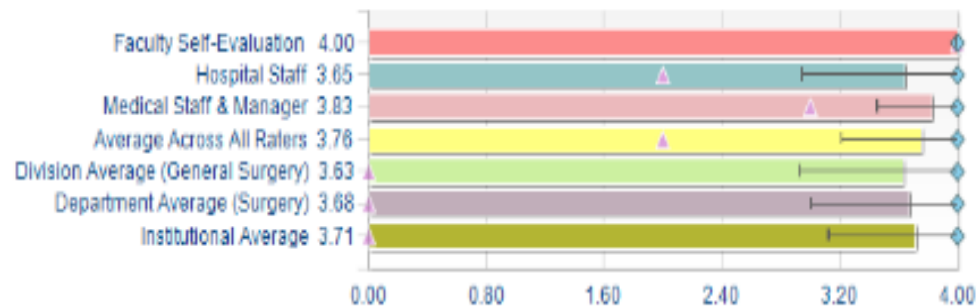
6. Open to the suggestions and concerns of healthcare workers' (both physician and non-physician health providers).



7. Takes time to explain to patients their medical condition, treatment options, methods utilized and outcomes.



8. Communicates directly and clearly with healthcare workers (both physician and non-physician health providers) about patient care.



	Respondents	Always	Most of the time	Sometimes	Hardly ever	Never	Mean	Median	SD
Listens to patients and their families' concerns and responds to them thoroughly.	40	32	7	1	0	0	3.78	4.00	0.48
Treats patients with dignity irrespective of their religion, culture, sexual orientation, gender and financial abilities.	41	39	2	0	0	0	3.95	4.00	0.22
Respects patients' confidentiality (i.e. does not discuss confidential patient information in areas where others can overhear the conversation like hallways, elevators, coffee shops etc...)	41	36	5	0	0	0	3.88	4.00	0.33
Responds in timely fashion to calls regarding patient care.	41	28	11	2	0	0	3.63	4.00	0.58
Arrives on time to scheduled appointments (i.e. clinic, OR, rounds, shift etc...).	42	27	14	0	1	0	3.60	4.00	0.63
Open to the suggestions and concerns of healthcare workers' (both physician and non-physician health providers).	42	28	10	4	0	0	3.57	4.00	0.67
Takes time to explain to patients their medical condition, treatment options, methods utilized and outcomes.	41	34	7	0	0	0	3.83	4.00	0.38
Communicates directly and clearly with healthcare workers (both physician and non-physician health providers) about patient care.	42	34	6	2	0	0	3.76	4.00	0.53

Gap Analysis

The gap is calculated as the difference between the Overall Average of an MD (for all questions) and the Overall Division Average (for all questions) according to the following formula:

Gap = Individual Average - Division Average

A positive gap means that the Overall Average of the MD is higher than the Division Average, the opposite being also true.

Average Across All Raters vs Division Average

Rank	Competency	Gap
1	AUBMC Evaluation of Medical Staff Behavior Form for All Hallal, MD	0.08

Question Ranking

Strengths (Highest Scores)

1	Treats patients with dignity irrespective of their religion, culture, sexual orientation, gender and financial abilities.	AUBMC Evaluation of Medical Staff Behavior Form for All Hallal, MD	3.95
2	Respects patients' confidentiality (i.e. does not discuss confidential patient information in areas where others can overhear the conversation like hallways, elevators, coffee shops etc...)	AUBMC Evaluation of Medical Staff Behavior Form for All Hallal, MD	3.88
3	Takes time to explain to patients their medical condition, treatment options, methods utilized and outcomes.	AUBMC Evaluation of Medical Staff Behavior Form for All Hallal, MD	3.83

Potential Areas for Improvement (Lowest Scores)

1	Open to the suggestions and concerns of healthcare workers' (both physician and non-physician health providers).	AUBMC Evaluation of Medical Staff Behavior Form for All Hallal, MD	3.56
2	Arrives on time to scheduled appointments (i.e. clinic, OR, rounds, shift etc...).	AUBMC Evaluation of Medical Staff Behavior Form for All Hallal, MD	3.61
3	Responds in timely fashion to calls regarding patient care.	AUBMC Evaluation of Medical Staff Behavior Form for All Hallal, MD	3.63

Comments (these can include general comments or specific examples of professional or unprofessional behavior exhibited by the evaluated physician):

Hospital Staff

Polite and always behaves in a professional way with patients and with his staff. we, as clinic assistants, always making race to offer help for him.

Medical Staff & Manager

very attentive and caring towards patients and residents
great mentor, he is very professional and demonstrates a real life example of the intricate balance between work and family
he shares his experience and thought process with the team he is working with and always tries to teach others from the mistakes he has seen before

He gets angry quite easily, but I really do appreciate his comments and lengthy speeches that he gives us. He's obviously concerned about the program and the residents .

Excellent patient care. But rarely ever listens to the residents point of view on different subject matter which should be expected more from a program director

What's Next?

1. Blue Evaluations for Progreen Online program .
2. Blue for Exit Survey + Integration with Clearance System
3. Blue for Alumni Survey
4. Blue for Graduate Survey

Thank You!