

GOOD GOVERNANCE CASE STUDY

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Elevating Patient Experience:

Lessons Learned from High-Performing Organizations



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9685 Via Excelencia • Suite 100 • San Diego, CA 92126

Toll Free (877) 712-8778 • Fax (858) 909-0813

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Jona Raasch Chief Executive Officer

Regan Murphy General Manager

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Kathryn C. Peisert Managing Editor

Glenn Kramer Creative Director

Kayla Wagner Editor

Aliya Garza Assistant Editor



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Elevating Patient Experience:

Lessons Learned from High-Performing Organizations

Focusing on Patient-Centered Care

The patient-centered care movement is in full effect, and healthcare leaders' focus on patient satisfaction and its connection to quality continues to grow in importance. Providing the best patient experience is now expected and doing this well can be a competitive differentiator in the market, as it is an essential component for organizations developing a consumer-focused strategy. Patients are asking for more than ever before, including convenience, low costs, and high-quality care. In order to improve patient satisfaction and create loyalty among patients, leadership will have to go the extra mile to prove they are listening to patient needs and driving improvements within the organization.

Increasingly, financial incentives for hospitals and health systems are tied to the patient satisfaction metrics measured by the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey, which has provided an even greater reason for boards and senior leaders to be engaged in these efforts. The HCAHPS survey asks how patients rate the hospital overall and whether they would recommend the hospital to family and friends, and it documents hospital performance in various areas of patient-centered care:

- Nurse communication
- Physician communication
- Discharge information
- Pain management
- Communication about medications
- Cleanliness, quietness, and responsiveness of hospital staff



The Picker Institute, part of NRC Health (The Governance Institute's parent company), is at the forefront of patient-centered care and uses the HCAHPS and CG-CAHPS (Clinician and Group Consumer Assessment of Healthcare Providers and Systems) results to determine high performers in the United States and Canada. The Picker Institute identified hospitals and health systems with consistently high scores and conducted site visits to explore the ways hospitals achieve these outstanding results. This case study shares some examples of best practices based on the Picker Institute's findings, and explores steps the board can take to strategically plan for improvements in patient experience.

Lessons Learned from the Picker Institute

Being patient-centered means more than just focusing on improving HCAHPS scores. The patient perspective needs to be embedded in everything a healthcare organization does throughout the care journey. Below are proven best practices and examples from top performers in patient-centered care.

Live the vision and mission of the organization. When The Ottawa Hospital in Ottawa, Canada, started its journey to become a more patient-centric organization, leadership created a new vision: "to provide each patient with the world-class care, exceptional service, and compassion we would want for our loved ones." In order to bring this vision to life, the hospital started the "You're in my care" campaign. This campaign helped staff understand that everyone has a

role to play in providing care to patients, no matter if they are a nurse or a cook or a surgeon. Everything that takes place at the healthcare organization is integral to the well-being and experience of everyone who steps foot in the hospital. This gives employees a sense of pride for the work they do and promotes the need to work as a team to succeed. “You’re in my care” posters hang throughout the hospital and staff promote this message by making it known to patients and families that they are always there and available to get them the services they need.

Along with living the mission and vision, many high-performing organizations set clear core values for staff. At The Ottawa Hospital the core values of compassion, a commitment to quality, working together, and respect for the individual are the building blocks for its vision. The core values are the guiding principles applied when screening potential employees to ensure they demonstrate a willingness to play a part in reaching the vision and making a difference. New employees are then oriented on the vision, mission, and core values, as well as the overall culture. Staff also receive an annual performance appraisal where they are evaluated on performance in their role as well as how they live the organization’s values.

“The Ottawa Hospital’s vision puts patients at the center of all we do. The core values of compassion, a commitment to quality, working together, and respect for the individual are the building blocks of our vision to provide each patient with world-class care, exceptional service, and the compassion we would want for our loved ones.”

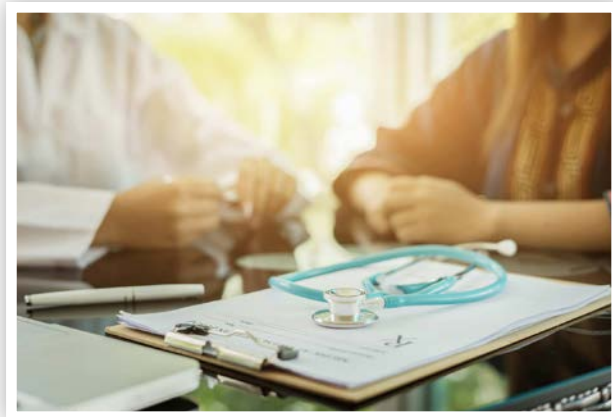
—Renee Legare, Executive Vice President, Human Resources, The Ottawa Hospital

Set a patient-centered mindset throughout the hospital/health system. High-performing healthcare organizations think of creative ways to set a patient-centric mindset among staff beyond the vision and mission. Bluewater Health in Canada focuses its efforts on patient and family-centered care through the concept of “Emily.” Emily represents the voice of the patient. She is every patient and family member Bluewater Health has cared for, is caring for, and will care for in the future. Her image, which is a visual composite of individual photos of patients, family members, and staff, is displayed throughout the hospitals, within corporate communications, and at meetings as a reminder that the patient is the focus of all decisions.

The concept of Emily is more than just asking what would be important to consider for the patient. It promotes questions at a deeper level within the organization such as: What questions would Emily ask? Why would this be important to Emily? Whether the board is strategically planning for the future, a nurse is spending extra time with a patient to make them more comfortable, or the physicians are meeting to discuss their patients, Emily is always top of mind.



Let the patient voice drive decisions. Many patient-focused hospitals and health systems ensure that the patient and family voice is always represented through developing groups dedicated to this initiative. PIH Health in California made “Patients First” their motto and to them this means that all patients are everyone’s patients. It has a Patients First Council that meets monthly and consists of members of the leadership team from varied patient care, ancillary, and service departments throughout the hospital. The committee is responsible for ensuring the Patients First vision aligns with the organization’s tenants of relationship-based care and the high-reliability path to zero harm. It also makes sure that processes and systems are designed specifically for patient and family needs.



Bluewater Health has Patient Experience Partners (PEPs) who are patients or family members of a patient that are involved in various initiatives and activities throughout the hospital. They talk with patients, join task teams for improvement projects, and are members of committees and patient programs. The PEP Council has meetings every month to share their opinions, address items for further improvement, and discuss what they are currently working on. Bluewater Health also has a full-time Patient Advocate who works with PEPs and is in charge of responding to patient and family issues, questions, suggestions, compliments, and complaints, and facilitating and teaching successful strategies for patient and family interactions.

Like PIH Health and Bluewater Health, South Shore Hospital in Massachusetts has a patient/family group called the Patient Family Advisory Council (PFAC). They even include a patient and/or family representative on almost all operational hospital committees. For example, the hospital’s quality council meets every two weeks to discuss ways to maintain and improve quality and safety at the hospital, and it includes the chief medical officer, vice president of quality, other top-level hospital leaders, and at least two patient advisors. Patients also participate in interviews when recruiting for senior leadership positions.

Ensure a strong commitment from leadership. At PIH Health, when asked why the overall rating score for the organization is so high, it was frequently repeated that it is because of leadership. The leadership team live and breathe the values of the organization and it is prevalent that the patient is the top priority.

Leadership drives changes throughout the organization that will benefit the patient. For example, when patients complained about the hospital being too loud, leadership started a project that is now embedded into the daily routine. Two times a day, between 2–4 p.m. and at 10 p.m. there is a quiet period where they reduce noise and dim the lights. PIH Health also made improvements such as quieter machines and no overhead pages. Staff often take time to think about small changes that will have an impact on patients. For example, volunteers play piano in the lobby and the shutters are left open in the room so patients being admitted see the view. At leadership retreats they take time to come up with ideas that will be of value to patients. Something as simple as putting in more outlets for charging devices makes a big difference for patients and families.

Set up smooth discharge processes and transitions to post-acute care. At Bryan Medical Center in Nebraska, bedside nurses take the lead in educating patients about their condition and how to care for themselves after discharge from the hospital. Educators with specialized expertise in many disciplines may offer additional education while the patient is hospitalized. Case managers are responsible for analyzing the patient’s existing support networks, determining what additional support may be needed after discharge, and arranging for support services. The discharge nurse checks to make sure the patient has all needed information, and that follow-up appointments have been scheduled. The discharge nurse also does a final review of key points about needed care before the patient walks out the door.

Many patients return home after leaving the hospital, but some go to skilled nursing facilities, rehabilitation, or assisted living. Bryan Medical Center has worked to improve communications among all the organizations involved in the continuum of care. The hospital has reached out to community providers to standardize communications during transitions to the next level of care. Working together, they’ve developed a transfer packet, a large envelope with a checklist on the front showing all the documents needed when the patient is transferred to a skilled nursing facility, inpatient rehab, assisted living, home healthcare, or other settings.

“We’ve talked a lot about patient perceptions of care. Everything may go perfectly until the last day. Then, if they have to wait five hours before they can leave, that leaves a bad impression.”

—Dawn Isaacs, RN, M.S.N., Nurse Manager, Surgical/Vascular Unit and Nursing Float Pool, Bryan Medical Center

Bluewater Health works closely with community partners and agencies to guarantee smooth care transitions and continuity of care. A team from Erie St. Clair Community Care Access Centre work with the nurses and staff to get patients extra services they qualify for and the resources they need for a smooth transition after they leave the hospital. If they are not eligible for needed services, they seek out services that are available in the community to make sure



no need goes unmet. This could include outreach to volunteer organizations like Red Cross or Meals on Wheels to provide outside services such as setting up a free ride to a doctor's appointment so they don't end up back in the hospital or finding someone who will bring them groceries or meals if they aren't able to do it on their own. It is all about creating a unique plan for each patient so that they have the necessary support in place. By providing these services, Bluewater Health can make sure patient requirements are fulfilled within the hospital and everything is aligned for them when they leave. This also helps patients remain in their homes or return to their homes as quickly as possible after being at the hospital.

Ensure a board commitment to quality. The Bryan Health and Bryan Medical Center Board of Trustees' commitment to quality deepened after a board retreat with a major focus on quality indicators, reducing harm, and all the quality measures hospitals submit to CMS. The Bryan Medical Center board has a quality/safety committee; there also is a quality oversight committee composed of the entire senior management team. Safety incidents are reported to the board at every meeting, and the board quality committee meets with members of the senior management team to review quality issues every other month.

Recently Bryan put together a graphic chart of all of the CMS measures, which leader is responsible for each cluster of measures, and which director or manager is responsible for specific quality programs. Responsibility is clearly defined, and data flows seamlessly to the board and throughout the organization.

“If the infection rate in our hospital is 0.02, then maybe we're in the top 5 percent in the country. But to the individual who got the infection, it was 100 percent. Our board members don't want to just see a graph. They want to discuss each occurrence of harm. What changes can we make to ensure that this doesn't happen to another patient? That's what we talk about.”

—John T. Woodrich, Chief Operating Officer, Bryan Medical Center

Create convenient services focused around the patient. Many of the organizations performing well in patient experience efforts have gone above and beyond to do little things that ultimately make a big difference to patients. Below are a few examples:

- **Fast-track appointments:** At its Vadnais Heights clinic, Entira Family Clinics in Minnesota set up a special “fast track” scheduling process for five specific acute conditions: sinus problems, rashes, and ear, throat, and urinary tract infections. These are designed as 15-minute appointments, focused on one problem, for well-defined conditions with non-controversial treatments, so they can be dealt with effectively during a short visit. Usually patients need to wait for about 20 minutes, and they are seen by any provider who has time to fit them into the schedule.
- **Translation services:** Bryan Health uses MARTTI (My Accessible Real Time Trusted Interpreter), a system that accesses medically trained interpreters through a video screen computer service. A provider simply dials into the system and requests an interpreter, who relays information while the patient watches the screen.
- **Patient portals:** Core Physicians in New Hampshire has a patient portal that plays an important role in responding quickly and efficiently to patient requests. It is a confidential, secure Web site that patients can use to communicate directly with medical and

administrative staff, request appointments, send messages, request prescription refills, or review their health history.

- **Customized educational materials:** Physicians at Texas Scottish Rite Hospital for Children often send patients home with educational materials that are particular to their condition so that they know what to expect. Educational materials are all developed in house, which means they are specific to the hospital's population, standardized and streamlined across the organization, and created with the pediatric patient in mind.

Key Board Takeaways

Steps toward a patient-centered culture include:

- Create a patient-centric mission and vision that drives everything at the organization.
- Develop clear core values that set a mindset among all staff that the patient is the top priority.
- Have a Patient and Family Advisory Council (or similar group) that continuously provides feedback and is involved in improvement efforts.
- Involve patients on committees and task forces to ensure their voice is always heard.
- Develop smart discharge processes and post-acute care partnerships that set patients up for success when they leave the hospital.
- Have a board-level commitment to quality efforts that includes a focus on patient experience and its relationship to quality.
- Make small improvements that have a big impact on patients (e.g., set up innovative services, offer conveniences, etc.).

The Board's Role in Strategically Planning for Improvements in Patient Experience

Set a patient-driven culture from the top. While the board may not be on the frontlines, that doesn't mean that it is not directly responsible for ensuring patients are satisfied with their care. Setting a patient-centric mindset among staff starts at the top with the board and senior leaders showing a strong commitment to the patient. The board should ensure the vision and mission of the organization speaks to patients, and that everyone is living this every day.

Ensure the patient voice is in the boardroom. The board must be in tune with the expectations of patients and family members in order to make smart decisions. The board should have a high-level overview of what is being said in patient satisfaction surveys, but it also needs to be hearing first-hand from patients and families about real experiences they've had. Many healthcare organizations invite patients to board meetings to present their stories and have board members do rounds in the hospital. In addition, patients can be extremely valuable to have on the board or committees, as appropriate. For example, having patients and family members serve as voting members on the quality committee can help change the nature of the discussions that take place.

Consider care beyond the hospital setting. Healthcare organizations are now being held responsible for what happens after the patient leaves the hospital. Having a robust discharge process and a solid post-acute care strategy will help reduce readmissions, improve quality, and reduce costs. Discharge processes need to be in place to ensure smooth transitions across hospital settings. Hospital and health system boards should be involved in developing and approving

a post-acute care strategy and ensuring that leadership is implementing this plan with staff. This strategy includes having partnerships with the right post-acute care entities in your market, including skilled nursing facilities, home health agencies, long-term acute care hospitals, and rehabilitation providers. The board plays an important role in ensuring the post-acute care strategy is sound and supports the long-term goals of the organization.

Think of new ways to create patient loyalty. Because today's patients expect more, it's important that boards are exploring various ways to improve patient experience through big and small ideas. This could include offering telemedicine, partnering with retail clinics, being transparent about the price of basic procedures, offering translation services, ramping up wellness programs, showing physician ratings on the Web site, or creating a more inviting hospital environment. This will be different for every organization based on its investment capabilities and the communities it serves, but it should always be a topic that is front and center in the boardroom.

