The Beryl Institute Releases New White Paper on Improving the Patient Experience

Dallas, Texas (August 9, 2010) -- The Beryl Institute has published a new White Paper, Zeroing in on the Patient Experience: Views and Voices from the Frontlines, which takes a close look into the efforts of three patient experience leaders from different healthcare organizations. The White Paper covers what it takes to launch and sustain patient experience efforts and includes practical advice and tips for hospitals that want to begin to focus on improving the patient experience.

“Thanks to both regulatory pressures and market demands, hospitals are intensely focused on improving the patient experience,” says Jason Wolf, executive director of The Beryl Institute, which is exclusively focused on providing resources and research around patient experience. “The challenge is that there is no road map that explains how to do it.”

Beginning October 2012, the Centers for Medicare and Medicaid Services (CMS) will introduce a value-based purchasing (VBP) program that will link payment to clinical care (the CMS core measures) and selected hospital-acquired infection rates and patient experience scores, which are reflected through the Hospital Consumer Assessment of Healthcare Providers and Systems survey, known as HCAHPS. The patient experience element of the VBP program is proving to be enormously challenging for many hospitals, representing a significant drag on most hospitals’ VBP scores. Hospitals with low VBP scores stand to lose millions of Medicare reimbursement dollars.

What is the patient experience? “Obviously, the HCAHPS survey defines it one way, but other definitions equate it to the patient’s perceptions of the personal and virtual interactions, clinical interventions and physical environment associated with a given clinical episode, encompassing the time immediately before, during and after the patient is discharged home or to a non-acute setting,” says Wolf. The Beryl Institute defines the patient experience as the sum of all interactions, influenced by an organization’s culture, that shapes patient perceptions across the continuum of care.

He says the industry is focusing intently on patient experience now, but this work has roots that stretch back 20 years or so. In the early 1990s, a handful of hospitals across the nation began constructing luxury birthing rooms, offering five-star meals and renovating lobbies and hospital wings to look like hotels. Why? These changes certainly weren’t focused on improving the nursing care, or the doctors’ decision making. Their sole purpose was to address some of the emotional and comfort needs patients had. In other words, these efforts were designed to address patient experience.

“The early attempts to improve patient experience by creating a less intimidating atmosphere acknowledged that addressing the patient experience was the right thing to do,” says Wolf. “It still is, even if no one can fully gauge the impact of these efforts long term. Hospitals are struggling right now to determine the right formula for sustaining superior patient experience evaluations. It’s very difficult to create continuity with patient experience improvement efforts because every patient’s healthcare encounter is different. Even patients suffering from chronic conditions with fairly stable symptoms are likely to have substantially different experiences with each encounter. Healthcare is not like the fast food industry, which promises the same type of food experience every time, and your taste buds know what to expect. Improving the patient experience and creating consistency is hard.”

Wolf states that one point of confusion for the industry is the blurring of the lines between patient satisfaction and the patient experience. “Hospitals have been surveying patient satisfaction for years, but clearly, they are beginning to discover that patient experience is a different animal.”
He adds, “Most hospital administrators assumed that patient satisfaction equated to patient experience. In fact, an overall experience is much more than simply a survey score. With such regulatory acts as HCAHPS and the recent passage of the Patient Protection and Affordable Care Act, the government has begun to define patient experience in terms of very specific actions and interactions. Hospitals that traditionally scored as top performers when measuring patient satisfaction on internal surveys are recognizing that measuring patient experience is a much broader task and has tougher standards, all of which will soon have serious financial implications.”

“We believe sharing the work of patient experience leaders through our White Papers and our other education efforts will equip the industry to improve this important aspect of care,” says Wolf.

To access this White Paper and other Institute resources, visit www.thererylinstitute.net.

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About The Beryl Institute:

The Beryl Institute serves as a professional home for stakeholders who recognize that the patient experience is an essential element in the execution and evaluation of healthcare performance. The Institute is committed to improving the patient experience, by serving as a reliable resource for shared information and proven practices, a dynamic incubator of leading research and new ideas and an interactive connector of effective leaders and dedicated practitioners. The Institute is uniquely positioned to develop and publicize cutting-edge concepts focused on improving the patient experience, touching thousands of healthcare executives and patients.

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