IMPROVING THE PATIENT EXPERIENCE (STRATEGICALLY)

While hotel-type amenities might temporarily “wow” patients, they won’t matter in the long run if you do not consistently deliver on three basics that can significantly relieve patients’ suffering and anxiety—while also enhancing HCAHPS scores, clinical outcomes, and revenues.

PATIENT PRIORITIES
Research is revealing that patients care the most about three essential aspects of healthcare delivery:

- **“I am confident in my healthcare provider.”**
  - % of patients blaming bad experiences on diagnostic or treatment errors
  - % of patients giving the hospital top rating
  - % of patients attributing positive moments to friendly staff

- **“I know my provider would never let me fall through the cracks.”**
  - % of patients among patients rating staff as “very good” at working together
  - % of consumers among patients rating staff as “good” at working together

- **“I feel truly respected and cared about.”**
  - % of consumers healthcare consumers
  - % of consumers retail consumers

1 kind nurse is all it takes to improve the care experience for a patient in pain.
Current research on patient experience translates into three back-to-basic strategies (see next page) that many healthcare providers probably already embrace. But what are the best ways to achieve these desired results? How can you determine what patient experience tactics are best to invest in given scarce time and dollars? One way is to identify tactics that promise to meet or exceed patient expectations while also improving quality and/or reducing costs.

REFERENCES
2 A J.D. Power and Associates study found that hospitals scoring in the top quartile in patient satisfaction have around two times the margins of those at the bottom. As reported in The Beryl Institute, Return on Service: The Financial Impact of Patient Experience, 2011.

Web Extra
Leadership commitment to improving the patient experience is cited by most experts as critical to success. Learn specific leadership tactics at hfma.org/leadership, Spring 2014 magazine.
**strategy 1**
Provide consistently reliable, evidence-based patient care

**tactic**: Evidence-based order sets
At Memorial Hermann, physicians can electronically access evidence-based order sets to manage patients with various conditions. Clinical decision support warns physicians when a treatment may pose a risk to the patient.

**tactic**: Same-day appointments
Patients who call Cleveland Clinic before 4 p.m. can be seen that same day. A triage process has improved efficiencies and helps staff determine what type of provider a patient needs to see (e.g., neurologist versus nurse).

**tactic**: Case management
Full-time population care coordinators at New Jersey-based Vanguard Medical Group, a patient-centered medical home, focus primarily on members who are considered the sickest 5 percent in the practice.

**tactic**: Short wait times
After eliminating triage in the ED and implementing bedside registration, St. Lucie Medical Center reduced average ED wait times (door to doctor) from 66 minutes to an average of about 12 minutes.

**tactic**: Dedicated nurse-to-patient time
At Twin Rivers Regional Medical Center, a nurse visits each patient right after admission. The nurse talks to the patient about his or her fears and concerns and provides comfort.

**tactic**: Interactive appointments
Boston Medical Center’s Centering Pregnancy approach gathers pregnant women together for group visits throughout pregnancy and early postpartum. The women receive checkups, participate in a facilitated discussion, and develop a support network.

**strategy 2**
Coordinate care across the continuum to ensure timely, efficient delivery of a patient’s care

**tactic**: Evidence-based order sets
At Memorial Hermann, physicians can electronically access evidence-based order sets to manage patients with various conditions. Clinical decision support warns physicians when a treatment may pose a risk to the patient.

**tactic**: Same-day appointments
Patients who call Cleveland Clinic before 4 p.m. can be seen that same day. A triage process has improved efficiencies and helps staff determine what type of provider a patient needs to see (e.g., neurologist versus nurse).

**tactic**: Case management
Full-time population care coordinators at New Jersey-based Vanguard Medical Group, a patient-centered medical home, focus primarily on members who are considered the sickest 5 percent in the practice.

**tactic**: Short wait times
After eliminating triage in the ED and implementing bedside registration, St. Lucie Medical Center reduced average ED wait times (door to doctor) from 66 minutes to an average of about 12 minutes.

**tactic**: Dedicated nurse-to-patient time
At Twin Rivers Regional Medical Center, a nurse visits each patient right after admission. The nurse talks to the patient about his or her fears and concerns and provides comfort.

**tactic**: Interactive appointments
Boston Medical Center’s Centering Pregnancy approach gathers pregnant women together for group visits throughout pregnancy and early postpartum. The women receive checkups, participate in a facilitated discussion, and develop a support network.

*For more details on these tactics, visit hfma.org/leadership, Spring 2014 magazine*