Bedford, Texas (April 15, 2011) – New research conducted by The Beryl Institute shows that while patient experience is a top priority for hospital executives, it is still largely undefined. This landmark study of more than 790 hospital executives examined the state of the patient experience in the nation’s hospitals and identified the greatest roadblocks to implementing change.

According to the research, patient experience is one of the top three priorities facing hospital executives over the next three years. Patient Experience/Patient Satisfaction was ranked number two (21 percent) behind Quality/Patient Safety (31 percent). Surprisingly, Cost Reduction was ranked number three at 9 percent.

Despite its importance, the majority of hospital executives (73 percent) do not have a formal definition for patient experience. As a result, they are addressing the issue tactically, with the top three priorities being:

- Noise Reduction
- Discharge Process and Instructions
- Patient Rounding

"Patient experience is on the radar of hospital executives, especially since Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scores will soon affect reimbursement," said Jason Wolf, executive director of The Beryl Institute. "However, the data shows that executives are still grappling with how to implement change within their organizations. While hospital executives state they have not yet defined the patient experience, we are hopeful they adopt The Beryl Institute’s definition to help shape their strategies for improvement."
The Beryl Institute defines the patient experience as the sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care.

Despite the challenges that hospitals have in wrapping their arms around the issue of patient experience, nearly two-thirds of respondents (61 percent) felt positive or very positive (25 percent) about their progress in addressing the issue. The most common structure for improving patient experience is a small committee (42 percent) that meets on a monthly basis.

“Half of the respondents identified the biggest roadblock to making change as the organization’s culture. That’s why cultural transformation plays such an important role in improving the patient experience,” said Paul Spiegelman, CEO of The Beryl Companies. “It’s all about the patient’s perspective. We will not be able to improve the patient experience until we begin taking an inside-out approach, rather than an outside-in approach.”

The study, conducted in collaboration with Catalyst Healthcare Research, reflects the opinions of respondents from all 50 states and the District of Columbia, with representation from independent hospitals (51 percent) and hospital groups/systems (49 percent), and urban (30 percent), suburban (29 percent) and rural (39 percent) hospitals. Participants were from not-for-profit (77 percent), for-profit (15 percent) and academic medical centers (4 percent). It was conducted online from March 7 – 23, 2011.

To learn more about this study, visit www.theberylinstitute.org.

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**About The Beryl Institute:**
The Beryl Institute serves as the professional home for stakeholders who recognize that the patient experience is an essential element in the execution and evaluation of health care 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 health care executives and patients.

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