

WEBINAR CHAT NOTES

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Future of Human Experience 2030: A Dynamic Framework for Healthcare

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Question: What fundamental action most resonates with you and/or what would you add to this effort?

denise durgin: From aspirational to active most resonates especially from the policy level

James Bergen: reframe consumerism and this us/them relationship. it is an 'us' relationship

Sonya Fleming: Partnering with patients

Courtney Bothwell: Address burdens of healthcare workers

Maribeth Graves: First, the health and well-being of our healthcare workers.

Melissa Retter: Moving upstream beyond illness to well-being as human beings, how we empower with exceptional healing experiences so people can get back to their life journeys.

Kelly O'Brien: addressing SDOH and creating equity for all in health care especially

Sara Frederick: To take action.... we have to stop talking about it and make it happen, like we've done over the past 45 days. We've now seen we can!

LEW: Advancing technology (we are so behind!) and engaging patients as partners

Sue Rice: Interoperability of healthcare records!

Joe Connell: Create a well articulated vision that will drive HX 2030

Stephanie: building resilience in order to draw people to the HC professions; humans caring for humans; listening to the needs of every player within the system

Heather Thompson: Real time data and decision analytics is critical to supporting the implementation of all of the other actions.

Stacy Laumann: Meeting patients where they are and changing workflows and working outside of the box to provide the experience they need.

Cathy Almost BCPSQC: Reaching out to collaborate or bringing together key players that affect health- social determinants, universities etc

susan Kruger: Creating a collaborative environment among team members, medical staff, patients and families

David Garrett: Increase transparency & reduce barriers to compassionate care

Stacy Colimore: enculturate patient experience into training and expectations of providers that is couched in the concept of individualizing approach to each patient

Angel Park: Understanding the communities our patients are coming from through observations and interactions.

Susan: knowing what medications cost before we prescribe them so folks don't have to choose between a med and their food

Marion Moore: Really moving from planning to reality

Deb Petrucelli: Executive leaders must understand what partnership with patients and families look like. Treating the whole person. Intentional kindness!!!!

Linda Biondini: Software that talks to each other to support the data that is needed to make intelligent decisions.

Karen Byrnes: Aspirational to active - we CAN make healthcare easier and more transparent for the patients!

Ellie Hubbard: Full transparency with patient family advisors so they give valuable feedback we may be scared to hear.

Steve Fry: Bring the care to the people, maximize IT with CHWs, address the problems in their zip codes,

Grace I.: Meeting patients where they are - effective communication

Marjorie Nelson: I like making our focus Human Experience as a new paradigm or extension of Patient Experience. We have not been successful in elevating patient experience without engaging and co-designing with care teams.

Nicole Kirchoffer: Support innovation and embrace technology.

Kennedy Hubbard: expanding beyond treating illness, taking care of each other on all levels including well being

Mendy Goonan: AI - feedback analytics, better driving us towards patient centered care

Cathy Almost BCPSQC: Public Engagement strategies- the patient experience being a part of collaboration not an after thought

Deb Petrucelli: Aspirational to action is key

Lyudmyla S. Feoktistova: Creating a clear vision of 2030 HX

Dawn: We have to start... We can't wait to "perfect" the actions, we need to start and course correct as we go. If we wait to perfect, we will never get started.

Susan: change our culture to one of really CARING on all levels for the patient

Mary Hoey .: collaboration across the continuum of care

Donna Salin: Back to basics - not allowing technology to get in the way of communication but to add dimensions to the experience.

Lori Moler: Shift from silos and transactions to relationships and transformations. Also, get the payors out of the drivers' seat.

Sue Rice: More time for clinical interactions. Dr's are way over scheduled!

Terrilyn Chambers: Increase transparency and address cultural disparities.

Jessica Rosa: Need to create a better support network for health care workers

Lauren M Cotter: Creating the opportunity for the physician to actually be a physician and add an assistant to do the technology

Bryanna Gallaway: Love "reinforcing the silver linings"!

Anna Ahrens: Meeting people where they are. So important, especially through the current crisis. My messaging has been how do we provide great patient/family experience through COVID-19. Acknowledging leaders/frontline are in different transition stages...

Lauren M Cotter: which will build trust

Jeanne L: redefining what working at the top of [professional] license

Susan: narrating care, knowing the patient's life story, building each other up, being empathic

Cathy Almost BCPSQC: Learnings from Covid19 and healthcare consultation during a pandemic- reflect and be better for the next time

Lori Moler: I have never seen our leaders more engaged, energize and creative than in the last six weeks.

Gloria Wilkinson: change top of practice to full scope of practice

Heather Thompson: Future plans and preparation for reoccurrence should include the patient AND the overall human experience, not only the scientific experience.

Wendy Huang: Not only about making the patient feel heard and humanized, but making sure that the patients and families see us as humans and trusting. Many in society still don't trust healthcare providers and listen more to family and media than their doctor

Becky Reisinger: We Will. video link: <https://youtu.be/izltkK3WE1c>

Terry Harrington: It's time to explore the full iceberg hiding under water

Mendy Goonan: LOVE these, where we go from here! Listening and acting on ALL voices (patients and caregivers)

Cathy Almost BCPSQC: Yes Wendy collaborators in their own care- the days of you shall...rather than what do you think - makes healthier people who have small bites of actions for improved health

Jessica Rosa: Love that #Westandtogether

Stacy Colimore: The shared vulnerability of our staff and patients has really level set the balance of power and pulled all together

Marcelo Alvarenga: We stand together

Marie Perillo: now more than ever, knowing something about the person behind the patient is the driving force behind that human care

Deb Petrucelli: United we stand

Alla Borsen: Together, We Can!!!

Gloria Wilkinson: we can so we do!

Dianna Seymour: Agree Marie- knowing that person drives human care / experience

Stephanie: Always appreciate your call to action and embracing of the community!

Jason Wolf: <https://pxjournal.org/journal/vol7/iss1/1/>

T H E B E R Y L
I N S T I T U T E

IRMA: People are amazing! We can learn so much from each other & gather strength from each other.

anne campbell 2: Integrated processes require a willingness to collaborate and share resources

Jason Wolf: Thank you all...incredible ideas.... know this is a conversation in action and we have much work now to do!!