The Beryl Institute is the global community of practice dedicated to improving the patient experience through collaboration and shared knowledge. We define the patient experience as the sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care.

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Over 55,000 members and guests representing over 80 countries around the world have joined the patient experience movement by accessing The Beryl Institute’s resources and connections to guide improvements in their organizations.

As we look to 2019 and have seen in patient experience efforts around the globe, a central priority has emerged, one focused on taking care of not just those we serve in healthcare, but the people serving as well. The state of patient experience is about much more than what we have or will do, to what we are and what we can become.

In an environment where we clearly base all work on human beings caring for human beings we are ultimately addressing and impacting the human experience in our midst. For this reason, we believe at The Beryl Institute as we remain committed to patient experience we must address the reality of the human experience that is central to healthcare overall.

The state of patient experience is strong, your efforts and commitment are true and the possibilities of all we can accomplish as a result are yet to be realized. That makes this perhaps one of the most exciting times to be committed to this work. We look forward to traveling the next steps of this journey with each of you and we thank you for your continued engagement and support.

-The Beryl Institute Team-
# Table of Contents

- Introducing the Experience Framework .......................................................... 6
- Community Profile ....................................................................................... 8
- Connections ............................................................................................... 9
- Resources .................................................................................................... 13
- Learning ...................................................................................................... 19
- Supporting Partners .................................................................................... 26
September 2018 marked the eighth anniversary as a membership community and a growing global community of practice. On our journey we have been dedicated to building a network of committed professionals, practitioners, innovators, patients and family members and partners. That network, through its commitment to sharing wildly, has helped shape a framework for what represents the human experience in healthcare and clarify eight strategic lenses through which organizations can engage all voices in ensuing the best in experience for all.

This growing body of knowledge and collective understanding established through research and experience and the content it has produced called for a means to better codify, digest and access the information that will support everyone on this shared experience journey. The idea was a simple one, to establish a framework through which we could individually, organizationally and collectively understand where we are, identify the opportunities we have and then connect to the resources and solutions that will help us continue on the road to experience excellence.

Through conversations with a broad range of community members over the last year, this idea evolved from an experience landscape that could be used to define the work, to an experience framework, represented by an integrated set of lenses that influence experience. It offers an actionable means to engage deeper in experience improvement and excellence.

An experience framework helps us in three critical ways.

- Provides clarity in the strategic areas of focus
- Provides a means to identify strengths and opportunities
- Provides a practical application where knowledge, resources and solutions can be aligned
Through this common framework we can create more efficient connection of needs to knowledge, strategies to resources and opportunities to solutions and expand our collective global dialogue through a common structure for focus and action.

With that recognized opportunity and an understanding of the roots and motivation for this endeavor I’d like to introduce you to the eight strategic lenses of the experience framework. In framing this introduction, it is important to stress that through the community input that shaped the framework we underline that all voices are critical and matter in the experience conversation.

The framework (Figure 1) is built on eight strategic lenses all of which address some aspect of what impacts and influences experience. Each of the eight lenses is also accompanied by a statement of “why”, rather than a definition. Our intention was not to create a static model of commonly accepted definitions, but rather to introduce eight active lenses and the considerations for why they require our focus in any experience effort. The eight lenses and their why statements follow:

- **Culture & Leadership**: The foundation of any successful experience effort is set on who an organization is, its purpose and values, and how it is led.

- **Infrastructure & Governance**: Effective experience efforts require both the right structures and processes by which to operate and communicate and the formal guidance in place to ensure sustained strategic focus.

- **Patient, Family & Community Engagement**: Central to any experience effort are the voices of, contributions from and partnerships with those receiving care and the community served.

- **Staff & Provider Engagement**: Caring for those delivering and supporting the delivery of care and reaffirming a connection to meaning and purpose is fundamental to the successful realization of a positive experience.

- **Environment & Hospitality**: The space in which a healthcare experience is delivered and the practices implemented to ensure a positive, comfortable and compassionate encounter must be part of every effort.

- **Innovation & Technology**: As a focus on experience expands, it requires new ways of thinking and doing and the technologies and tools to ensure efficiencies, expand capacities and extend boundaries of care.

- **Policy & Measurement**: Experience is driven and influenced by external factors and systemic and financial realities and requires accepted and understood metrics to effectively measure outcomes and drive action.

- **Quality & Clinical Excellence**: Experience encompasses all an individual encounters and the expectations they have for safe, quality, reliable, and effective care focused on positively impacting health and well-being.

With the introduction of the experience framework, we want to reinforce the active nature of this work. We already have research efforts underway to further validate the framework and its application in certain care settings as well as will soon be releasing a report and follow-up research on influence factors of experience related to the strategic lenses.

The release of this framework is not simply a call for action and a hope for a response, but rather this is a move to action in itself. When we align as a community around what is fundamental to experience success and support one another in both what is needed to succeed and in helping others to understand what this work truly encompasses, then we can truly call ourselves a movement.

The experience journey we have been on as a community has led us to this point where we can stand together in providing a formal frame to understand our opportunities and guide our actions. It is now up to each of us to determine how we will apply these ideas to support our own efforts, to positively impact those we care for and the communities we serve and how we can all continue to contribute to this global conversation on experience that is fundamentally changing healthcare for the better. Thank you to you all for your partnership and collaboration on this journey.
Community Profile

Our community continued to grow with over 55,000 members and guests representing over 80 countries accessing resources and connections to guide improvements in their organizations. We were excited to welcome 39 new organizational members in 2018.

### Community Members

- Adventist Health System
- Asante Health System
- Ascension St. John Hospital
- Blessing Health System
- Bluewater Health
- Cameron Memorial Community Hospital
- Carle Hospital
- Cass Regional Medical Center
- Connecticut Children’s Medical Center
- Copper Ridge Surgery Center
- Curbell Medical
- Dana-Farber Cancer Institute
- DaVita Valley Health System
- Dayton VA Medical Center
- DTA Associates, Inc.
- Duke University Health System
- Elsevier
- Fondation Hopale
- Hampton VA Medical Center
- Harris Health System
- Holy Name Medical Center
- HydraCor
- Institut français de l’expérience patient
- Kaiser Permanente
- Kelsey-Seybold Clinic
- Maury Regional Medical Center
- Metro Community Provider Network
- Ministry of National Guard-Health Affairs
- PrairieCare
- Self Regional Healthcare
- Siemens Healthineers
- SONIFI Health
- Southern Arizona VA Medical Center
- St. Joseph’s Healthcare System
- Suburban Health Organization
- SurePeople
- VA New England Healthcare System
- Valley Medical Center
- Vocera

#### Organization Type

- Hospital - 45%
- Health System - 31%
- Academic Medical Center - 9%
- Solution Provider - 7%
- Non-Hospital Healthcare - 5%
- Other - 3%

#### Job Function

- Patient Experience - 40%
- Executive Leadership - 16%
- Patient/Family Advocacy - 12%
- Physician/Nurse Leadership - 11%
- HR/Organizational Development - 6%
- Operations - 4%
- Marketing/Community Outreach - 2%
- Other - 2%
Connections

This year continued to provide a variety of in-person and virtual connections for the community to engage and network with others, share ideas on how to improve the patient experience and gain perspectives from other likeminded individuals.

To support engaging more patients and family members in the overall patient experience conversation, we were excited to offer five scholarships to Patient Experience Conference 2018 for patients and family members actively engaged in improving healthcare as well as to all members of our Global Patient and Family Advisory Council.

Held April 16-18 at Hyatt Regency in Chicago, Illinois, PX2018 provided additional networking opportunities for participants through add-on options such as a hospital tour at The University of Chicago Medicine and a city bus tour of Chicago’s greatest landmarks. Also new this year, the Nurse Executive Council held its first in person meeting at PX2018 bringing together nurse leaders from across North America.

PX2018 speakers comprised the voices of patients, families, caregivers, hospital executives, physicians, consultants, nurses and industry leaders sharing proven practices, innovations and strategies. To help participants choose sessions specific to their learning needs, breakout sessions were categorized in the related content areas:

- Communication Skills
- Cultural Competence & Diversity
- Culture & Leadership
- Employee Engagement
- Environment
- Global Perspectives
- Metrics & Measurement
- Patient & Family Engagement/Partnerships
- Patient Advocacy
- Patient Experience Strategy
- Physician Engagement
- Policy & Regulatory Issues
- Process Improvement
- Technology

55 Breakout Sessions
28 e-Poster Presentations
4 Plenary Sessions
3 Pre-conference Workshops
1137 Participants
2018 Year In Review

PX Connect

We were excited to see our online community PX Connect continue to provide an opportunity for members to exchange ideas, share resources and connect with one another. In 2018, we expanded the discussion by adding Care Setting Communities and the PX 2018 Conference Community. Members engaged in close to 700 conversations with over 2,500 postings.

Popular discussion topics included:

- Wording Around ED Wait Time
- PX Week Ideas
- Patient Advocate Productivity
- Complaints on Social Media
- PX Summary Presentations
- Contact Patients Regarding Survey Comments
- Moving from HCAHPS Paper Survey to Phone Survey
- Justifying Low Sample Size to Physicians
- Care Transitions
- Service Recovery

Regional PX Pop-Ups

Designed to facilitate networking opportunities and build the local patient experience community, these lunch and learn events provide members and guests the opportunity to further network with colleagues in their region and engage in facilitated discussion to share ideas, hear successful strategies and learn from other challenges on patient experience improvement.

2018 included a total of 267 participants across four PX Pop-Up locations:

- Houston, TX – MD Anderson Cancer Center
- New York, NY – NewYork-Presbyterian
- Berkeley, CA – Kaiser Permanente
- Tampa, FL – Tampa General Hospital
The PX Policy Forum entered 2018 with great momentum and began to refine its efforts and outreach. It came out of the gate with a January statement on the CHIP program, sharing, “The delay in extending CHIP undermines the fundamental tenet of healthcare as human beings caring for human beings.” The PXPF then reconvened around a couple core meetings including the in-person annual meeting in association with Patient Experience Conference 2018.

At the meeting in Chicago, PXPF’s six initial workgroups reported on their efforts and the group conducted a prioritization exercise categorizing the current work into items that were “ready for launch” and those that were “in the pipeline” for future work. The focus of effort landed on the topic working to influence and improve patient experience measurement. This workgroup had developed a list of priorities and had scheduled a meeting to discuss them with the Centers for Medicare & Medicaid Services (CMS) in May.

The invitation to meet with and provide collective insights to the team at CMA was a big step for PXPF this year. A delegation of PXPF Board members met with leaders from CMS in Baltimore to discuss a myriad of issues related to how patient experience is measured and publicly reported, including the use of CAHPS (Consumer Assessment of Healthcare Providers and Systems) surveys. At the meeting, ideas for continued dialogue were shared and PXPF remains in communication with CMS to continue the conversation and provide further input moving forward.

The group is also working to elevate the dual critical perspectives on measurement and its impact on healthcare efforts from the two perspective of those providing care and the patients and family members receiving care. Maintaining this dual focus is a central tenet for PXPF and will remain a commitment into 2019.

**PRESS RELEASE**

**PXPF Advocacy Results In Positive Changes to CMS Public Reporting of Patient Experience Results**

Earlier this year, a delegation from the Patient Experience Policy Forum (PXPF) met with leaders from the Centers for Medicare & Medicaid Services (CMS) in Baltimore to discuss topics related to patient experience measurement and patient/family engagement. To help prepare for this meeting, topics had been identified and discussed at the all-member, in-person April 15 PXPF Spring Meeting held prior to the Beryl Institute Annual Conference in Chicago.

The delegation included PXPF Co-Chairs Shari Berman and Rick Evans, and PXPF board members Dale Shaller, Esther Burlingame and Hala Durrah.

The full CMS release can be found [here](#).
We are ALL the Patient Experience.
Patient experience remained a top priority for healthcare in 2018. From innovative patient experience research to real-world looks at patient experience improvement efforts, our library of patient experience resources continued to grow and expand topics across the continuum of care.

**Consumer Perspectives on Patient Experience 2018**

The full research report from the Institute’s latest benchmarking study provides insights into trends in structure and practice, leadership and measurement and offers core considerations for organizations looking to lead in experience excellence. The largest research of its kind, the study engaged almost 1,700 respondents from 26 countries representing six continents sharing the challenges and opportunities they are facing and the steps they are taking to address the patient experience.

According to the research:

- Experience efforts are expanding and are now an integral part of the fabric of our healthcare efforts.
- Patient experience remains a top priority with a focus on employee engagement now seen as a central driver in experience efforts.
- Leadership and culture are now the significant motivators versus the historic focus on mandates and requirements, and there is a recognition of the impact that patient/family voice and caregiver engagement has on the work of healthcare.

Patient experience itself continues to establish presence with the role of patient experience leaders, experience team size and the use of a formal definition on the rise.

**To Care is Human: The Factors Influencing Human Experience in Healthcare Today**

As one looks at the healthcare landscape today, it is hard to overlook the incredible pressures pushing both from outside and in. This is not a nation-specific phenomenon simply driven by policy or even a reaction to cost constraints or considerations. While those factors are unquestioningly at play, there are even greater issues pushing at the traditional ways of healthcare.

*To Care is Human* dives into the exploration of the opportunity to move healthcare away from simply a focus on error reduction to a focus on care expansion. Supported with in-depth research and consumer insight, *To Care is Human* brings clarity to the factors influencing patient experience.

In conjunction with this paper, The Beryl Institute will release a series of case studies from high performing organizations participating in the research.

In special recognition of their support, The Beryl Institute appreciates contributions by our partner in this study, Siemens Healthineers.
White Papers

Central to our shared commitment to improving the patient experience is this series of informative and thought-provoking publications that dig into the critical issues facing the healthcare industry today.

We published **three white papers** in 2018:

- Consumer Perspectives on Patient Experience 2018
- Interconnected: An Exploration of Improvement Efforts Connecting Patient Experience and Communication
- What Patient Experience Can Learn from Child Life Professionals

Research Reports

There are valuable efforts underway to research the value of improving the patient experience before, during, and after care, how it impacts customer service and the influence of culture on the experience.

We published **four research reports** in 2018:

- Using survey results to determine if first visit orientation to the ambulatory clinic will improve the patient experience
- This is My Child: A Hospital-Based Tool for Children with Autism
- Effectiveness of the Communication Model, C.O.N.N.E.C.T., on Patient Experience and Employee Engagement: A Prospective Study
- Exploring Health Outcomes Among Adults With Type 2 Diabetes in Primary Care Practices With and Without Care Coordination
Grant/Scholar Recipients

The mission of the annual grant and scholar program supports patient experience research efforts and represents our ongoing commitment to expanding the conversation, learning and sharing around improving the patient experience in the healthcare industry.

We awarded **11 healthcare organizations and three scholars** in 2018:

**Research Studies of Healthcare Organizations**

- **Banner Health, Phoenix, AZ** - Predicting healthcare consumer behavior: A cognitive-emotional-behavioral model
- **Christus Health, San Antonio, TX** - What are the fears, worries and concerns that families experience in health care and how can we as health care providers best address and mitigate these fears?
- **Cornell University, Ithaca, NY** - Impact of health information technologies (HIT) on patient-provider relationships
- **Planned Parenthood of the Pacific Southwest, San Diego, CA** - Leveraging technology to provide meaningful input into systems, processes, and the patient experience
- **WellStar Atlanta Medical Center, Atlanta, GA** - Does standardized Patient Experience training impact perceptions and clinical practice by medical and surgical residents?
- **UF Health, Neuromedicine Interdisciplinary Clinical and Academic Program, Gainesville, FL** - Comparing quality outcomes of patients who utilize the Patient Handbook and those who do not
- **Penn State Health, Penn State College of Medicine, Camp Hill, PA** - Can you provide an improved patient experience and increase medical knowledge by creating a more interactive exam room?
- **University of Tennessee, College of Nursing, Knoxville, TN** - Diabetes burnout: Lived experiences of individuals with type 1 diabetes
- **Sunnybrook Heath Sciences Centre, Toronto, Ontario, Canada** - What is the effectiveness of a practice-based research & innovation fellowship program in embedding the importance of patient and family engagement within quality improvement among health professionals?
- **Penn State Health, Middletown, PA** - What is the relationship between bariatric patients' reported perception of food insecurity, poor dietary quality & variety, and weight loss outcomes at 6 and 12 months post-surgery?
- **Royal Ambulance, San Leandro, CA** - As a medical transport company, how can we collaborate with our partner hospitals to reach our common goals of improving patient care?

**Research Studies of Doctoral Students**

- **Galina Gheihman**, MD Candidate, Harvard Medical School/Massachusetts General Hospital
- **Emily Stefano**, PhD Candidate in Clinical Psychology, University of Hawaii at Manoa
- **Michael Molta**, DM Candidate in Strategic Leadership, Thomas Jefferson University
On the Road

This series offers a virtual guest pass to many leading healthcare institutions, sharing patient experience journeys from hospitals around the globe.

We published **nine On the Road articles** in 2018:

- **Embracing Unique Cultures and Practices within an Integrated System** - Sentara Healthcare
- **The Integral Role of Volunteers in Caring for Cancer Patients** - Dana-Farber Cancer Institute
- **A Culture of Community as a Foundation for Patient Experience at a Rural Hospital** - Mercyhealth Hospital and Medical Center–Harvard
- **A Modern Approach within a Culture of History and Tradition** - Walter Reed National Military Medical Center
- **Systematizing the Patient Experience: Persona a Persona** - Quirónsalud – Barcelona, Spain
- **The Ripple Effect: Together, We are a Growing Global Movement** - Patient Experience Conference 2018
- **Redefining Healing in Healthcare** - Cherokee Indian Hospital
- **The Power of All: Engaging Individual and Collective Focus to Improve Care Experiences** - Ann & Robert H. Lurie Children’s Hospital of Chicago
- **Delivering Quality Service Through Quality People** - St. Luke’s Medical Center
- **Improving the Outpatient Infusion Experience with Virtual Reality** - UCHealth
- **Narrative Visualization – Building Stories from Survey Responses** - University of Missouri Health Care
- **Compassionate Caring Connections** - Beaumont Health
- **Changing Our Culture, One Moment at a Time** - Lenox Hill Hospital
- **Patient Navigation in Pediatrics: A Promising Practice for Eliminating Healthcare Disparities** - Seattle Children’s Hospital
- **Building a Culture of Understanding with a NICU Family Support Program** - March of Dimes
- **Configuring Technology Solutions to Improve the Patient Experience** - Phoenix Children’s Hospital

Case Studies

Our ongoing case study series offers an exclusive look into current healthcare efforts, presented as both an opportunity to learn from others as well as a spark for further ideas on how we can work to improve the patient experience.

We published **16 case studies** in 2018:

- **How University of Iowa Stead Family Children’s Hospital Used Technology and Empathy to Improve Patient Experience** - University of Iowa Health Care
- **Improved Patient Communication with Systematic Whiteboard Use** - Rush University Medical Center
- **52 and 52: An Effort at Rapid Improvement to Impact Staff and Patient Experience** - Stanford Health Care
- **A Holistic Approach to Infusing Hospitality in Healthcare** - Northwell Health
- **Springfield Healthy Homes Asthma Program (SHHAP)** - Baystate Medical Center
- **Connecting Revenue Cycle Enterprise-Wide to the Patient Experience** - Northwell Health
- **Improving the Outpatient Infusion Experience with Virtual Reality** - UCHealth
- **Narrative Visualization – Building Stories from Survey Responses** - University of Missouri Health Care
- **Compassionate Caring Connections** - Beaumont Health
- **Changing Our Culture, One Moment at a Time** - Lenox Hill Hospital
- **Patient Navigation in Pediatrics: A Promising Practice for Eliminating Healthcare Disparities** - Seattle Children’s Hospital
- **Building a Culture of Understanding with a NICU Family Support Program** - March of Dimes
- **Configuring Technology Solutions to Improve the Patient Experience** - Phoenix Children’s Hospital
• Engaged and Empowered Staff Fuel the Ambulatory Surgery Center Patient Experience - Copper Ridge Surgery Center
• A Journey of Cultural Transformation: Engaging the Hearts of Teams and Leaders to

Elevate the Experience - UChicago Medicine
• Optimizing Patient and Family Involvement to Support a Maturing Cancer Center - Stanford Cancer Center South Bay

Guest Blogs
This series invites members and guests to share their patient experience journey.

We released 23 guest blogs in 2018:

• Taking the Long View of Patient Experience - Allison Chrestensen, MPH, OTR/L
• Techniques for Bringing Compassionate Communication to Telehealth Interactions - Anthony Orsini, D.O.
• I'm an Industry Professional. Where I Go For Healthcare Recommendations Might Surprise You - Cally Ideus
• Managing Multiple Chronic Conditions During Care Transitions of Older Adults - Chantal Backman INF/RN, MHA, PhD
• Give Your Patients Permission to Dream - Chris Anselmo
• The Patient Experience Blind Spot. Three Ways to Fix It. - Dan Peterson
• Using Shared Governance to Improve the Patient Experience - Gen Guanci
• Where’s My Casserole? - Glenn Kopelson
• Does Response Rate Impact HCAHPS Scores? - Hope Brown
• The Clinician Progress Note as a Tool for Improving Patient Experience - Jeffrey H. Millstein, MD
• Preventing Burnout: Investing in Your Staff - Julie Danker, LCSW, CPXP
• Patient Experience: Putting the Patient Front and Center - Katie Joyce and Katie Ziemer
• The Evolution of Patient Experience with Design Thinking - Kelly Makino
• Re-centering Our Attention on Clinical Excellence - Kelly Parent
• Positively Impacting Staff Engagement and the Patient Experience with Community Giving - Magali Tranié
• The Invaluable Gift of Clarity - Mark VanderKlipp
• A New Framework for Putting Patients at the Center of Digital CARE - Niall O’Neill
• It’s Time for Experience Professionals to Lead Technology Innovation - Samir Batra
• Exploring Outside the Healthcare Silo - Sara Laskey
• Employee Perceptions are Key to Culture - Sara Laskey
• Phone Skills: Making or Breaking The Patient Experience - Sarah Suddreth
• Connecting with Patients is Key - Tom Scaletta MD CPXP
• Pay Patients? You must be kidding. – The patient advisor perspective on compensation. - Zal Press
In addition to its twice annual publication, PXJ also released its second special issue on Patient & Family Experience in Children’s Hospitals and Pediatric Care. The issue provided a look at evidence-based efforts at improvement, practices that have had impact on outcomes and included stories that reflect the true meaning and opportunity in providing a positive patient & family experience in pediatrics. PXJ also opened its call for its 2019 special issue on the role of technology and innovation in patient experience.

View 2019 call for submissions

In 2018 articles from PXJ were downloaded over 128,000 times. Overall PXJ articles have now been downloaded almost 390,000 times, by 12,800 organizations and institutions, in more than 200 countries and territories.

PXJ published 51 articles in 2018.

PXJ readership from the first nine issues represents a global dialogue with over 250,000 downloads in over 202 countries and territories.
With an expanding interest in the field of patient experience, we continued to support the consistent and continuous development of patient experience professionals by providing relevant and community-developed learning opportunities for all stages in patient experience journeys.

In addition to the over 400 Certificate Program recipients, we were excited to recognize 135 recipients in 2018 as individuals who have successfully completed the required set of PX Body of Knowledge courses. Certificate program recipients represent a community of experts in patient experience performance committed to delivering superior quality, safety and service to the patients and families they serve.

Certificate in Patient Experience Leadership

- Ghassan J. Abass, King Fahad Medical City
- Asma Salman Mohammed Al Aqeel, King Fahad Medical City
- Abdulrahman M. Al Dahi, King Fahad Medical City
- Sarah Fajhan Al Dajani, King Fahad Medical City
- Ali T. Asery, King Fahad Medical City
- Nicole Aviglano, Carolinas HealthCare System
- Emily Beauchamp, Erie County Medical Center
- Maureen Bennett, Henry Ford Health
- Sandra Bernabe, Hartford Healthcare
- Elizabeth Bollinger, Language of Caring
- Alla Borsen, ArchCare at Mary Manning Walsh Home
- Ann Brown, WakeMed Health & Hospitals
- Cailin Burke, Ellis Medicine
- Cassidy Butler, Keck Hospital of USC
- Dominique Cain, Huntington Hospital
- Mercedes Carrasquillo Rivera, Hackensack Meridian Health
- Annamarie Cutroneo, Hackensack Meridian Health
- Irma Dadic, Yale New Haven Health
- Leslie Dalaly, USC Verdugo Hills Hospital
- Kaylie Dalton, Fredericksburg Emergency Medical Alliance
- Linh Dang, NYC Health + Hospitals
- Kyle De Boer, Hackensack Meridian Health
- Megan DeBolt, East Tennessee Children's Hospital
- Franck Diarra, NYC Health + Hospitals
- Jose Diaz, Keck Medicine of USC
- Christopher Drake, Fauquier Health System
- Robert Farrell, Mobile Health Resources
- Rob Fritch, Good Shepherd Penn Partners
- Kerrie Fullen, Norton Healthcare
- Ellen Gallina, Memorial Sloan Kettering Cancer Center
- Donna Geiss, NYC Health + Hospitals
- Teresa Godinez, Keck Hospital of USC
- Mendy Goonan, Norton Healthcare
- Jeff Gregory, Maine Medical Center
- Ashley Harmer, University of Michigan Health System
- Janine Haspel, Memorial Sloan Kettering Cancer Center
- Salem Hawatmeh, Keck Hospital of USC
- Darlyne Hawkins, University of New Mexico Hospital
- Janna Hembrough, Hackensack Meridian Health
- Sandy Herrala, Allina Health
- Callie Hill, University of Wisconsin Health
- Mary Ann Himes, University of Virginia Health System
- Amy Horger, WakeMed Health & Hospitals
- Laura Jantz, St. Luke’s Health System
- Allison Johnson, Allina Health
- Steven Jongen, Maastricht UMC
2018
Year In Review

• Rhonda Joyner, Atrium Health
• Jennifer Kane, University of Virginia Health System*
• Patricia Kenney, Tallahassee Memorial Healthcare
• Sherry Kroll, Hartford Healthcare
• Diana Lebita, Memorial Hermann
• Joanne Leichte, Hackensack Meridian Health
• Kathleen Lindsey, University of Michigan Health System
• Kelsey Lindstrom, Norton Healthcare
• Marci Littlefield’
• Landon Lynch, Davie Medical Center’
• Amber Maracini, Renown Health
• Melodie McCade, Wake Forest Baptist Health’
• Suzanne McDermott, University of Virginia Health System*
• Carlos Moreno, Mutual de Seguridad
• Betty Mortensen, Northwest Community Hospital
• Mark Mulak, CitySide Chiropractic
• Debbie Oliphant, Norman Regional Health System
• Lawren Olivanti, Children’s Hospital of Wisconsin’
• Olayinka Oluwole, NYC Health + Hospitals’
• Dorothy Orlovski, Gaylord Specialty Healthcare’
• Paul Phillips, Gibson Area Hospital & Health Services’
• Nancy Prescott, Eastern Maine Health System
• Jyllyann Samuel, Keck Hospital of USC
• Karen San, The Permanente Medical Group
• Tori Scott, Northern Arizona Healthcare
• Hope Schwanhauser, Atrium Health
• Erin Shurtleff, Kaiser Permanente
• Susan Siler, White County Medical Center
• Eniko Simon-Sheeran, Pallas Management Solutions
• Susan Smith, Missouri Baptist Medical Center
• Marilee Spore, OhioHealth
• Timothy Stevens, U.S. Air Force Medical Service
• Mika Stilwell, Heritage Biologics
• Jessica Strickland, White County Medical Center
• Emmerlisia Taylor, NYC Health + Hospitals’
• Andrea Terry, Keck Medicine of USC
• Trina Thomas, Asante Rogue Regional Medical Center
• Lorna Tirman, Tahoe Forest Hospital District’
• Kelly Unrein, VA Office of Patient Centered Care and Cultural Transformation’
• Ashley Valentino, Keck Hospital of USC
• Kara Van Vooren, NERC CYSHCN CHW-FV’
• Sarah S. Ward, Sentara Healthcare
• Danae Watkins, Meditalk
• Jessica Weatherford, Norton Healthcare
• David Weisman, NYC Health + Hospitals’
• Regina Winters, Tallahassee Memorial HealthCare
• Rukiya Wongus, University of Maryland Faculty Physicians, Inc’
• Jin Zhao, Keck Medicine of USC
• Reynolds Zoleta, Keck Medicine of USC

* Earned Dual Certificate in PX Leadership and Patient Advocacy

Certificate in Patient Advocacy

• Layla Al-dorani, Sidra Medical and Research Center
• Lina Allen, Alaska Native Medical Center
• April Bledsoe Routh, Wake Forest Baptist Medical Center
• Margaret Bott, Mercy Health System /Mercy Fitzgerald Hospital
• Deborah Carey-Kilcullen, Department of Veteran Affairs
• Kathy Castillo Dewelde, Tallahassee Memorial HealthCare
• Markayla Corbin, Alaska Native Medical Center
• Cara Couture, Salinas Valley Memorial Hospital
• Tiffani Cropper, Emerus Hospital
• Felicia (Roxanne) Curtright, Baptist Medical Center Nassau
• Lilanya Dantzler, Hartford Healthcare
• Carmen Diaz, Hartford Healthcare
• Christine Drown, Firelands Regional Medical Center
• Amy Evans, Tallahassee Memorial HealthCare
• Danielle Goss, Hendrick Medical Center
• Cynthia Heredia, Yuma Regional Medical Center
• Bradly Hogue, SAVAHCS
• Adriana Kautter, Reading Health System
• Marlana Kirk, Wake Forest Baptist Health
• Patricia Kreiser, Penn State Hershey Medical Center Cancer Institute
• LeeAnn LaBombard, UVHN-CVPH
• Lisa Lamkin, Providence Health & Services
• Judy Lewis, Providence Health & Services
• Sebastian Lopez , Keck Medicine of USC
• Laura Markus, Marshfield Clinic
• Ingrid McCrory, Yuma Regional Medical Center
• Sue McKeegney, Erie County Medical Center
• Angela Miller, Geisinger Health System
• Anacellis Mion
• Nadia Nevels, Yuma Regional Medical Center
• Jana Olutola, UF Health Shands
• Angela Pascopella
• Deb Pierce, Marshfield Clinic
• Agustin Rams, Madigan Army Medical Center - California Med Det
• Tina Rube, Yuma Regional Medical Center
• Devon Santoro, Tower Health System - Reading Hospital
• Alesia Schraf, Fauquier Health System
• Jennifer Showalter, Central Peninsula Hospital
• Beth Smith, UF Health Shands
• Cynthia Vargas, Salinas Valley Memorial Hospital

THE BERYL INSTITUTE Learning
CPXP Prep Courses

Workshops continue to be a valuable resource for the PX community. Workshops were conducted both in-person and live online offerings to prepare participants for the CPXP exam.

With a total of 38 participants, the in-person workshops were full day interactive sessions led by the LPD faculty and held at:

- Hyatt Regency Chicago, Chicago, Illinois - April 15

With a total of 79 participants, the live online workshops each consisted of four live, online facilitator-led sessions and were held on four date ranges:

- February 15 – March 8
- March 1 – March 22
- August 8 – August 23
- August 16 - September 6

What 2018 CPXP Prep Course Participants Said:

“I was nervous walking into the prep course. Regardless of the years of experience I had, I felt like I didn’t know anything. The CPXP Prep Course gave me the needed confidence in that I DID know this stuff and it’s not only a passion of mine, it’s part of who I am. I feel completely prepared for the exam. The ability to study and work with my peers from around the globe was extra exciting. For anyone thinking about sitting for the exam, I fully recommend this course as a way to prepare.”

- Jason B. Ruda, MS, CPXP, Director, Patient Experience, CareMount Medical

“I thought the course was good and the workbook very helpful. I did do further in depth studying of each domain on my own. I appreciated the facilitators sharing with us about other study resources, such as from HBR articles, to reference books, webinars etc. I very much appreciated the class and workbook and feel good about the learning and review of topics that I’ve done. The learning will undoubtedly support me in the work I do with patient experience and patient advocacy.”

- Ellen Harry, Manager, Patient Relations and Volunteers, St. Vincent’s Medical Center/Ascension
Webinars

Facilitated by patient experience leaders from around the world, webinars share proven practices and strategies to implement in your own organization.

We offered **35 webinars with over 9,000 registrations** in 2018:

- **Patient Experience: A Path to Better Outcome**  
  Rob Parker MBA, CMPE, CPXP, Administrative Director of Physician Practices, Memorial Healthcare System

- **Creating a Culture of Caring**  
  Rana L. Awdish, MD, FCCP | Director of the Pulmonary Hypertension Program and Critical Care Physician, Henry Ford Hospital | Medical Director of Care Experience, Henry Ford Health System

- **Hope and Compassion: The Keys to Treating Mental Health Patients & Families**  
  Glenn Kopelson, Co-Chair Resnick PFAC, UCLA  
  Martha Browning, Member Resnick PFAC, UCLA

- **Understanding and Advancing the Patient Experience at End of Life**  
  Mike DeWitt, CPXP | Manager, Patient Relations, Moffitt Cancer Center

- **Creating a Culture of Caring**  
  Laura L. Jantz, CPXP, PMP | Program Manager, Patient Experience, Service Excellence, St. Luke’s Health System

- **Pit Crew: How Communication Fuels the Ambulatory Surgery Center Patient Experience**  
  Mark L VanderKlipp, Partner, Connect_CX  
  Tricia Wollam, R.T.(R), BSHCS | Total Joint Program Coordinator, Copper Ridge Surgery Center

- **Empathic Approaches to Writing Meaningful Grievance Letters**  
  Amy Crowe, Patient Advocacy Program Manager, Novant Health

- **Overcoming Caregiver Burnout: Improving the Patient Experience in 60 Seconds or Less**  
  Charles Kunkle, Chief Engagement Officer, No Time To Care Solutions.

- **Comfort, Dignity, Delight: An Economical Model of Therapeutic Arts and Holistic Services**  
  Alice Kinsler | Manager, Therapeutic Arts and Holistic Service, Concord Hospital

- **Peer Navigation in Transgender Care: A Case Study in CoDesigning Care**  
  Jonathan Bullock | Principal Consultant, National Leader, Person & Family Centered Care, Kaiser Permanente  
  “Dexter” Janet Borrowman | Director, Care Experience, Maui Health System, Affiliated with Kaiser Permanente
• **This Little Light of Mine**  
  Sandy Johnson, Director, Organizational Culture, Kettering Health Network

• **Communication to Reduce Healthcare Disparities**  
  Wendy Leebov, Ed.D. | Founder & Partner, Language of Caring

• **Ignite the Patient Experience - 6 Keys to C-Suite Patient Driven Leadership**  
  Dennis Shelby, MSW | CEO, Wilson Medical Center  
  Brian Lee, CSP | Founder and CEO, Custom Learning Systems Group

• **Social Media from the Lens of a Multigenerational Workforce**  
  Laura Miller, CPXP | Managing Consultant, NICU Innovation, March of Dimes

• **Physician Engagement Strategies**  
  Justin Bright, M.D. | Senior Staff Physician, Henry Ford Hospital

• **Improving Patient Experience through the Adoption of an Accelerating Program**  
  Sidney Klajner, President, Sociedade Beneficente Israelita Brasileira Hospital Albert Einstein  
  Miguel Cendoroglo Neto, Medical Director and Superintendent, Hospital Israelita Albert Einstein

• **Unconscious Bias: The Nexus between Awareness and Accountability**  
  Troy Cicero, President and Chief Skill Officer, MulticultuReal Communications, Inc.

• **Implementing the New CAHPS Protocol for Obtaining Patient Comments About Their Care**  
  Dale Shaller, Principal, Shaller Consulting Group  
  Tara Servati, Patient Experience Specialist for the Ambulatory Care Network, NewYork-Presbyterian

• **We Can Talk: Co-Produced Children and Young People Mental Health Training for Hospital Staff**  
  Kate Martin, Director, Common Room and Grace Jeremy, Young Advisor, Common Room

• **Inside a Patient Simulation Lab: Learning from a Real Patient**  
  Jamie Di Piazza-Rodriguez, MSW | Manager of Patient Experience, Languages Services, and Patient & Family Relations, Hillcrest Medical Center

• **52 Weeks of Overmanaging Creates Success**  
  Karen Byrnes, MSN, RN, CPXP | Director – Patient Experience, Dignity Health - AZ East Valley  
  Sandy Rush, BSN, RN, MA, CHE | Sr. Director - Patient Experience, Dignity Health

• **What Patient Experience Can Learn from the Radiology Experience**  
  Martijn Hartjes, Head of Global MR Product Marketing, Philips

• **Transforming the Riley Experience**  
  Darla Cohen, CPXP, Coordinator Patient and Family Experience, Riley Hospital for Children  
  Kara Casavan, Family Advisor, Riley Hospital for Children; and  
  Joe Primavera, Deployment Leader, Riley Hospital for Children.

• **Millennials + Healthcare: How to Create Synergy within a Four Generational Workforce**  
  Megan Charko MAM | Program Manager, Pediatrics, NRC Health  
  The Patient Experience: A Path to Better Outcomes  
  Rob Parker MBA, CMPE, CPXP | Administrative Director of Physician Practices, Memorial Healthcare System

• **The Patient Experience Consumer Study 2018: Insights and Opportunities for Action**  
  Jason A. Wolf, PhD, CPXP, President, The Beryl Institute  
  Debbie Landers, Innovation and Product Leader, Studer Group  
  Hala Durrah, Patient/Family Engagement Advocate  
  Sean Rodriguez, Vice President & Advisor to the Office of Experience, Engagement and Organizational Development, Hartford HealthCare

• **Why am I doing this? Matching PX Efforts to Organizational Needs**  
  Tiffany Christensen | Vice President, Experience Innovation, The Beryl Institute

• **Understanding, Equity, Inclusion and Cultural Differences: Enhancing the Patient Experience**  
  Pamela Y. Abner, Vice President and Chief Administrative Officer-Office for Diversity & Inclusion, Mount Sinai Health System

• **What Patient Experience Can Learn from Child Life Professionals**  
  Jason A. Wolf, Ph.D., CPXP, President, The Beryl Institute  
  Representatives of the Association of Child Life Professionals (ACLP)

• **Empathy Reinvented for the Resistant or Misunderstood Healthcare Professional**  
  Lisa Bruhn, MBA, CPXP | Patient Experience Educator, Marshfield Clinic Health System  
  Jami Kaiser, CPXP | Patient Experience Educator, Marshfield Clinic Health System
2018
Year In Review

• XIC Marks the Start
  Tria Deibert, VP Experience Marketing, Hackensack Meridian Health
  Elizabeth Paskas, VP Experience Innovation, Hackensack Meridian Health

• The Follow Through: Transforming Health Care
  Victoria Baskett, CPXP | Founder and President, Victoria Baskett Patient Safety Foundation | Director of Patient Experience, Wayne UNC Health Care

• Building Impactful Relationships and Collaboration with Non-Traditional Team Members as Partners
  Caroline Costello, FACHE, Director, Friends and Family Program, Patient and Family Insights and Guest Services Ambassadors, University of Chicago Medicine
  LaTonya Macklin, RN, BSN, Program Manager, Experience Improvement and Innovation, University of Chicago Medicine

• A Patient and Family Experience Framework: Combining Lean & Person Centered Care
  Cathy Bachner, Patient Partner, Huron Perth Healthcare Alliance
  Anne Campbell RN, BScN, MN | VP Partnerships and Chief Nurse Executive, Huron Perth Healthcare Alliance

• CAHPS Round-Up
  Jan Gnida, CPXP | Director, Patient Experience & Government Surveys, Professional Research Consultants, Inc.
  Erin Godden | CAHPS Communications Manager, Professional Research Consultants, Inc.

• The Human Experience in Healthcare: How We Can Thrive at the Edge of Uncertainty
  Jason A. Wolf, Ph.D., CPXP, President, The Beryl Institute

• Carrying the Load: Improving Clinical Outcomes by Strengthening Patient/Family Caregiver Relationships
  Joan Forte, Healthcare Consultant/Nurse/Administrator
  Barbara Kivowitz, Healthcare Consultant/Author/Advisor

We offered five topic calls in 2018:

• How are you improving the experience of waiting for patients and families?
  Karen D. DeCuir-DiNicola, Founder, WaitWell

• How can a Voice of the Patient Panel support your patient experience efforts?
  Lori Gunther, Sr. Director, NICU Innovation & Education, March of Dimes and Heather Reimer, Manager, NICU Family Support, March of Dimes

• How are you utilizing patient and employee feedback and ideas to implement positive change?
  Cathy Brandon, Regional Manager, Credentialing and CME & Service Excellence Team Member, Desert Oasis Healthcare
  Kristi Vaughn, MBA, Director, Clinical Research & Service Excellence Team Member, Desert Oasis Healthcare

• How do you create meaningful huddles to help drive staff engagement, patient quality, and patient experience?
  Shelly Barber, BSN, RN | Senior Manager of Patient Experience, Cone Healthcare

• How are you partnering with community organizations to improve transitions of care?
  Janiece Gray, MHA, BSW, CPXP, CEO & Founding Partner, DTA Associates, Inc.

Top Topic Calls

During these interactive, multimedia events, a small group of participants engage in a dialogue on a specific topic, sharing ideas and practices that have been implemented to address the issue.
Learning Bites

The learning segments are brief webcast videos highlighting key insights on a variety of patient experience topics to provide ideas, recommendations and opportunities in addressing and excelling in the patient experience.

We released 12 learning bites in 2018:

- **Mitigating Unconscious Bias to Improve Patient Experience**
  Barbara Warren, Director, LGBT Programs and Policies, Mount Sinai Health System

- **How to Boost Teamwork in Just 10 Minutes a Day**
  Roel van der Heijde, Trainer Customer Excellence, N3Wstrategy & RoelRotterdam

- **The Power of Experience Excellence to Change Healthcare**
  Katie Owens, President, Healthcare Experience Foundation

- **Patient Experience and the Physician Practice**
  Nicole L. Cable, CPXP, Chief Experience Officer, Innovacare Health

- **Standardized Practices: How to Improve Medication Communication with Patients**
  Takiya Revis-Benjamin, B.S.P.H., M.B.A., H.M.A., Manager of Patient Experience, John Hopkins Bayview Medical Center

- **Designing the Healthcare Experience**
  Mark VanderKlipp, Founding Partner, Connect_CX

- **Social Responsibility and Community Engagement as part of Human Experience**
  Marcelo Alvarenga, MD, MSc, CPXP, Chief Experience Officer, Hospital Sírio-Libanês

- **Creating a Culture of Excellence in Long-Term Care**
  Alla Borsen, LS, MLS, Senior Director Guest Experience, ArchCare at Mary Manning Walsh

- **Are you Ageist?**
  Tammy L. Marshall, Chief Experience Officer, Thrive Senior Living

- **Patient and Family Centered I-PASS**
  Alisa Khan, MD, MPH, Staff Physician and Instructor in Pediatrics, Harvard Medical School

- **A Department Playbook - Keys to Creating Your Culture of Always**
  Jake Poore, President and Chief Experience Officer, Integrated Loyalty Systems

- **Patient Centered Responsiveness**
  Megan Hirsch and Nicole Iarrobino, Sr. Project Administrators, The John Hopkins Hospital
Special thanks to our 2018 Supporting Partners. These organizations have contributed to the future of the field by supporting the continued growth of The Beryl Institute as the global community of practice on improving the patient experience.

Diamond

PHILIPS  SIEMENS Healthineers

Platinum

Language of Caring

Gold

CipherHealth  DTA Associates

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