

# The Top Five Recommendations for Improving the Patient Experience

By Kathleen Merkley and Anne Marie Bickmore

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Healthcare organizations are working diligently to improve patient satisfaction and the patient experience of care. After all, patient experience of care is a critical quality domain used to evaluate hospital performance under the 2016 [CMS Hospital Value-Based Purchasing \(VBP\) Program](#) (accounts for 25 percent of a hospital's VBP score)—and comes with the potential for a penalty or bonus.

Patient experience of care is also one of three essential dimensions of the industry-guiding [IHI Triple Aim](#) (a framework for optimizing health system performance):

1. Improving the patient experience of care.
2. Improving the health of populations.
3. Reducing the per capita cost of healthcare.

Improving the patient experience can seem like a moving target influenced by a variety of factors. For one, despite the fact that healthcare organizations have been talking about and focusing on patient experience and patient satisfaction for a long time, universally accepted definitions don't exist. For example, patient satisfaction survey vendors use contrasting language, leading to varying patient interpretations. The industry also lacks conclusive research that proves the connections between patient satisfaction and outcomes. And with so many resources focused on improving patient satisfaction, it's no surprise healthcare leaders want to understand the connection.

When it comes to patient satisfaction and outcomes, this article advises health systems use patient satisfaction as a balance measure—not a driver for outcomes. The article also explains the connection between the patient experience and quality of care, demonstrating why patient experience is a prime indicator of a system's overall health and, therefore, a worthy goal with benefits that extend beyond the expected (financial reimbursement, higher physician ratings, etc.). It concludes with five key recommendations that can lead to significant patient experience improvements.

## Patient Satisfaction Surveys Are Integral in the Transition to Value-Based Care

“Whether you think patient satisfaction surveys are good or bad,” [according to California-based family physician Leonard Fromer, MD](#), “the fact of the matter is that the marketplace you work in is demanding that data on patient satisfaction be used to empower consumers.” Fortunately, as a result of having been tested, validated, and refined for decades, most health systems see patient satisfaction surveys as meaningful ways to identify gaps, develop quality improvement initiatives, and act as balance measures to ensure changes in care delivery don’t negatively impact the patient experience. Patient satisfaction surveys are essential to the industry’s transition to value-based care.

[HCAHPS](#) (Hospital Consumer Assessment of Healthcare Providers and Systems) is the industry’s gold standard when it comes to patient experience surveys. Developed by CMS and the Agency for Healthcare Research & Quality (AHRQ), the survey collects patient experience data to enable objective, meaningful comparisons of hospitals. HCAHPS scores indicate the level of service provided by an organization, contribute to its reputation, and have reimbursement implications for providers. HCAHPS is consistent, validated, and ensures timeliness of measurement (administered no later than 42 days after patient discharge). The HCAHPS survey is administered to a random sample of adult patients between 48 hours and 6 weeks after discharge and asks for patient feedback in a variety of areas:

- Communication with clinicians
- Responsiveness of hospital staff
- Cleanliness and quietness of the hospital environment
- Pain management
- Communication about medicines
- Discharge information

The industry has made leaps and bounds when it comes to survey design and asking the right questions. But surveys must continue to evolve as populations change. Survey vendors need to keep pace with the changes in technology and healthcare delivery to capture the data needed to make meaningful, measurable improvements.

## What the Research Reveals: Patient Experience Measures Are Indicators of Quality

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Regulatory agencies believe the patient experience directly impacts quality of care (based on the fact that they require patient satisfaction reporting for reimbursement). But, despite quantitative and qualitative factors motivating organizations to prioritize patient satisfaction, many in the industry are still skeptical due to conflicting research. As Matthew Manary and others explain in The New England Journal of Medicine (NEJM) article, [The Patient Experience and Health Outcomes](#), “Some studies indicate patient-experience measures have no relation to the quality of care. But some studies found that better patient experiences—even more than adherence to clinical guidelines—are associated with better outcomes.”

The NEJM article investigates the connection between patient experience and quality of care by researching three common concerns:

- Patient feedback isn’t credible because patients lack formal medical training.
- Patient-experience measures could be confounded by factors not directly associated with the quality of processes.
- Patient experience measures may reflect fulfillment of patients’ a priori desires or expectations (e.g., request for a certain drug regardless of its benefit).

Ultimately, the NEJM article determines that patient experience measures are indicators of care quality. It emphasizes that the industry’s debate “shouldn’t center on whether patients can provide meaningful quality measures but on how to improve patient experiences by focusing on several activities.” The activities range from focusing on care coordination to improving data collection methods:

- Prioritizing care coordination and patient engagement (associated with satisfaction and outcomes).
- Understanding the effects of new care delivery models on patient experiences and outcomes.
- Developing robust measurement approaches that provide timely and actionable information to facilitate organizational change.
- Improving data collection methods and procedures to provide fair and accurate assessments of individual providers.

Using patient experience as balance measure helps healthcare organizations ensure that improvements in one area don't negatively impact other areas.

## The Top Five Recommendations for Improving the Patient Experience of Care

Although inconsistencies exist when it comes to how the industry (systems, vendors, etc.) defines the patient experience, the research demonstrates the clear connection between improving the patient experience and delivering a higher quality of care. Health systems have the right motivation (the Triple Aim), the right incentives (CMS), and the right tools (HCAHPS), but there are five key recommendations that can significantly enhance health systems' patient experience improvements, from using patient experience as a balance measure to leveraging innovative technology.

### Recommendation #1: Use Patient Satisfaction as a Balance Measure—Not a Driver for Outcomes

Improving the patient experience seems like a common sense approach to improving outcomes. If a patient feels good about her doctor and the care she's receiving, then she's more likely to comply with treatment recommendations. But a patient can have a positive experience and still end up with a negative outcome, such as a cancer diagnosis. Health systems should use patient satisfaction as a balance measure; not a driver for outcomes. Balance measures empower health systems to make significant quality of care improvements without losing sight of potential negative impacts

Using patient experience as balance measure helps healthcare organizations ensure that improvements in one area don't negatively impact other areas. For example, if a health system wants to reduce length of stay (LOS) in labor and delivery, then LOS is the outcome measure. But if mothers feel rushed toward discharge, then improving LOS has a negative impact on patient experience (the balance measure). Another example: a health system makes a change to a heart failure order set. A patient experience balance measure is included to ensure the new, evidence-based order set doesn't negatively impact the patient experience.

### Recommendation #2: Evaluate Entire Care Teams—Not Individual Providers

The most effective surveys capture the overall care experience; they capture data as a whole rather than asking pointed questions about individual care interactions. Resistance to patient satisfaction methodology and the resulting credibility of the data happens when negative scores are attributed to individual providers. Surveys should evaluate more than just single providers; they should evaluate the

entire care team and ask questions such as, “how did your nurses and physicians get along?” The value lies in understanding the effectiveness of the whole care team; not individual clinicians.

The NEJM [article about patient experience](#) states the importance of evaluating patient interactions with all care team providers: “When analyzing all the factors influencing overall patient-experience scores in hospital settings, we found that aspects of nursing care and communication were more predictive than interactions with physicians” and that “limiting patient experience measurement to a single dimension excludes the interactions that most strongly affect experiences and outcomes.”

### **Recommendation #3: Use Healthcare Analytics to Understand and Act on Data**

Unless systems understand, use, and act on patient satisfaction data, they won’t improve the patient experience. [Healthcare analytics](#), through the use of an [enterprise data warehouse](#) (EDW) and patient experience applications, identify meaningful relationships between patient experience, clinical outcomes, and employee satisfaction.

Patient satisfaction data has the power to inform more than just the patient experience or a single episode of care; it tells a much bigger story. For example, Health Catalyst’s Patient Experience Explorer Application helps users understand and act on their patient experience data; it analyzes data by demographics and outcomes improvement goals (e.g., readmissions) and delivers multiple, robust views into the data patients provide about their experience, from performance score summaries for executive leaders to survey results with goals and percentiles for unit managers. Integrating patient satisfaction and healthcare data into an EDW enables widespread data sharing at any time, across any clinical application. Analytic systems and tools make it easy to access and understand patient satisfaction data as it relates to overall care delivery. They also integrate data into the daily workflow and enable its use as a balance measure.

#### ***How Texas Children’s Hospital Used Healthcare Analytics to Transform Its Patient Experience Efforts***

In addition to implementing an EDW, Texas Children’s Hospital (TCH) deployed the Patient Experience Explorer Application to drive broader interest in patient satisfaction. As a result, TCH staff has access to the data and is more engaged in patient experience as a

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measure of quality—they can more clearly see the benefits of their efforts with patients.

The EDW aggregates data from a variety of hospital systems (clinical, financial, and operational), allowing TCH to integrate patient satisfaction data into its quality improvement initiatives. For example, TCH can now determine how decreased postoperative LOS (outcome measure) impacts patient satisfaction (balance measure) as it relates to its quality improvement initiative to improve outcomes for surgical patients. Regarding its other initiative to provide more timely care delivery in radiology, TCH can analyze how exam wait times impact patient satisfaction. TCH continues to integrate patient satisfaction into its clinical and operational improvement initiatives using its analytic systems and tools.

According to TCH’s Assistance Director of Patient & Family Services, Elisa Mozley, “We look to patient satisfaction as a way to connect with families and see how well we’re serving them. It provides an important gauge of how effective our operations are in any particular unit of the organization. Now, with our satisfaction data integrated into the EDW, we can also analyze with accuracy how the quality improvement initiatives we’re implementing are affecting patient satisfaction. Having patient satisfaction as a balance measure to these other initiatives enhances the effectiveness of our improvement program.”

#### Recommendation #4: Leverage Innovative Technology

Innovations in healthcare technology are revolutionizing the patient experience. From interactive tools that improve wayfinding and reduce stress for patients and visitors, to real-time location service technology that improves patient flow and reduces wait times (positive reviews start to skew negative when wait times exceed 20 minutes, according to the [2015 Vitals.com Annual Wait Times Report](#)), healthcare organizations can use innovative technology to enhance the patient experience:

- Communication devices and electronic patient feedback systems that alert staff in real time.
- Interactive education systems that give patients important information about their care.
- Smart rooms that allow patients to customize their environment in waiting rooms, exam rooms, and during high stress treatments and procedures.

“Healthcare systems and leaders can continue to improve the patient experience and better manage the myriad of variables adding to its complexity by implementing five key recommendations that reflect industry best practices”

## Recommendation #5: Improve Employee Engagement

Healthcare organizations are increasingly realizing and understanding how [employee engagement](#) impacts patient experience. For every one-percent increase in employee engagement, an organization’s overall hospital HCAHPS rating increased by .33 percent and patients’ willingness to recommend the hospital increased by .25 percent, according to the Advisory Board Company’s 2015 [Employee Engagement Survey](#).

Many healthcare organizations have created the role of Chief Patient Experience Officer to enhance the patient experience, from facility design to employee training and engagement initiatives; they’ve realized the important connection between engaged, satisfied employees and happy patients. Without an engaged staff, the right systems and tools in place to make data-driven decisions (and employees who know how to use them), and a culture dedicated to achieving the Triple Aim, the patient experience will suffer. Good patient satisfaction scores speak to the overall health of an organization, including its staff.

## Patient Experience Is a Prime Indicator of a System’s Overall Health

Health systems continue to shift their perspectives about the patient experience, seeing it less as another regulatory requirement to meet and more as a prime indicator of healthcare organizations’ overall health. A great patient experience comes from more than just the patient-clinician interaction; it’s influenced by everyone and everything within a health system, from the admitting clerk to a clean room—it’s influenced by the entire health system’s infrastructure.

Health systems are tenaciously pursuing patient experience improvements, eager for more information about how patient satisfaction and experience fits into the bigger healthcare picture. Fortunately, the industry has come a long way with validated, reliable survey instruments and data-powered insights. Healthcare systems and leaders can continue to improve the patient experience and better manage the myriad of variables adding to its complexity by implementing five key recommendations that reflect industry best practices:

1. Use patient satisfaction as a balance measure—not a driver for outcomes.
2. Evaluate entire care teams—not individual providers.

3. Use healthcare analytics to understand and act on data.
4. Leverage innovative technology.
5. Improve employee engagement. 📌

### About the Authors



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