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Showcasing patient experience and engagement best practices through an innovative forum celebrating patients, families, and multidisciplinary care teams

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Abstract

A platform was designed for interdisciplinary teams to learn from colleagues, patients, and their families, about what creates and sustains positive, lasting impressions from their care team. A forum focused on positive experiences designed to highlight the relationships between patients and care teams was utilized. A Best Practices Forum was designed to share methods for generating positive patient experiences across the institution. These quarterly conferences featured patient stories and highlighted best practices such as empathic communications, collaboration, and teamwork used by caregivers throughout the institution. The patient experience team invited various well-performing departments to share best practices, as well as assisted in identifying patients willing to share their healthcare journey in front of an audience of clinical and non-clinical staff. The forum serves as an innovative learning lab using our patients and care team members as instructors of best practices in patient experience and patient engagement.

Keywords

Patient experience, patient engagement, appreciative inquiry, best practices

Background

As the healthcare industry continues to strive towards improving the health of populations, reducing the cost of healthcare, and improving the patient experience of care, significant resources have been dedicated to transforming traditional healthcare delivery systems toward patient-centered entities.¹ The patient care experience has been positively associated with increased adherence to medical treatment, better use of preventative services, and positive outcomes on mandatory-reported safety indicators.² Additionally, patient satisfaction with the care experience has become a metric considered in national reimbursement programs, further prioritizing a patient-centric approach to care delivery.³

A focus on the holistic healthcare experience requires fundamental transformation for many healthcare institutions. One evidence-based approach to

transformational change is *Appreciative Inquiry*- an approach rooted in the theory that meaningful change occurs through “discovering and valuing the strengths, assets, vision, and ideals of individuals in an organization.”⁴ Appreciative inquiry argues that by focusing on strengths, rather than organizational problems, individuals are empowered to imagine a preferred future state that may require bold change.⁴

Strategic approaches rooted in evidence-based theory are needed in order to establish best practices and catapult bold organizational transformation focused on delivering health care tailored to individual patient and family needs. Understanding and leveraging the patient’s voice is essential. We set out to establish an institutional platform incorporating the patient’s voice to showcase, study, and disseminate best practices for providing patient and family-centric care.

Methods

Setting

The University of Chicago Medicine (UCM) is a major teaching hospital located in Chicago, Illinois. It serves as the primary nexus of clinical care for the south side of Chicago and as the principal teaching hospital for the University of Chicago's Pritzker School of Medicine. With an inpatient capacity of 600 beds, the health system sees more than 20,000 hospitalizations and almost 500,000 outpatient visits annually. The medical center provides a full spectrum of care from primary through tertiary and quaternary care. This initiative was deemed quality improvement and not human subjects research and was therefore not reviewed by the Institutional Review Board.

Approach

On a quarterly basis, a Best Practices Forum was developed to showcase two patients' experiences with their care. A multidisciplinary committee, convened and directed by the Patient Experience and Engagement Program, set out to develop a platform for showcasing the strengths and best practices of care teams identified as top performers in patient satisfaction. This was done by combining the voice of the patient with the voice of the caregiver. In order to select an impactful patient story that outlines care team best practices, several data collection repositories were reviewed to identify patients and families that were highly satisfied with the care they received.

Patient satisfaction surveys, UCM's database for collecting internal compliments and complaints, direct provider and clinician referrals, and care call feedback were the primary sources for identifying remarkable patient stories. In review of the potential stories, the Best Practices Committee was deliberate in selecting stories that represented the diverse UCM patient population as well as care team members. Care team members included physicians, frontline clinical staff, ancillary staff, as well as those care team members that did not have traditional patient care tasks such as parking and valet services. After a preliminary phone interview with patients and family members to gather more information about their care experience, they were invited to share their experience in the Best Practices Forum in partnership with their care team.

Preparation for the forum was completed both by phone and in person to prepare the patient/family and the care team members. Patient Experience and Engagement senior leaders were identified to facilitate the discussions during the forum. These calls intentionally included the leaders in order to engage with the patient and their family

on a personal level and minimize discomfort during the panel discussion. At this time, the patients also described their experience with the medical system. This discussion allowed patients and their family members to ask questions and become comfortable with sharing their experience. The patient and their family were asked to identify physicians, nurses, physical therapists, transportation services, and anyone else that was integral to their care experience to join the patient on stage. After lengthy conversations with each of the care team members, they became an integral part of the forum.

Using a talk show, panel format, a structured interview showcasing care received from the moment of first contact through follow-up appointments. Once the patient and their family members shared their story, the patient care team on the panel was prompted to discuss how their standard work, individual processes, and personal outlook contributed to the patient story. During the discussion, personal quotes, pictures and information about the patient was displayed on the overhead monitors to reflect the *person behind the patient*. Additionally, structured interviews with the patient, the family, and the care team allowed for real-time identification of best practices associated that showcased positive attributes of the patient experience. These best practices were compiled and disseminated using an internal medical center webpage to promote implementation across medical specialties and operational teams. Following each forum, a survey was administered to participants to measure the effectiveness of the program from the audience perspective. The brief questionnaire posed the following three questions: 1) Were the speakers informative? 2) Were the questions handled to your satisfaction? 3) What is one take away that you will share and implement with your team? The committee reviewed participant responses and implemented suggestions for improvement to the forum structure in order to promote continuous change of this platform.

Results

The Best Practices Forums began in June 2014 and attracted an average attendance of 150 attendees per session, ranging from senior leaders to frontline staff. Forums held on a quarterly basis provide continuing medical education credit to audience members. Over fourteen stories have been shared by a variety of patients receiving highly specialized, frequent care for chronic conditions as well as general care during acute episodes of illness. Patients and their families have expressed great joy in having their voices heard in order to better the patient experience for others across the institution.

On average, audience members felt the speakers were informative (average score: 3.75) and the questions were handled satisfactorily (average score: 3.89). These questions were measured on a scale from 1 to 4. Most notably, the qualitative data discovered during the forums have been highly informative for the establishment of best practices across medical specialties and operational teams (Table 1). Best practices identified reflect the insight of attendees in exploring characteristics of the care provided

at an individual and team level that contributed to a positive patient experience. An institutional communication including messaging from the Chief Operating Officer, allowed for best practices to reach providers and staff unable to attend the forum sessions further promoting dissemination of both the patient stories and identified best practices. Additionally, all panels were filmed and recorded.

Table 1. Best Practices Identified

Patient Observation	Attributable Team	Best Practice Identified
“Each time I arrived for another treatment, I felt more comfortable when he greeted me with a smile.”	Valet Services	You are responsible for your energy. <ul style="list-style-type: none"> • Greet every patient with a smile.
“I really felt that I was involved in the care of my mother.”	Nursing team	Family engagement is a priority. <ul style="list-style-type: none"> • Include families in the care of their loved ones.
“I was scared. He was patient and listened to all of my questions. That really made me feel more comfortable.”	Physician team	Active listening is as important as providing information. <ul style="list-style-type: none"> • Take time at every patient visit to listen and ask the patient questions.
“Their number one concern was to get him comfortable. That was their main concern and that made everything a little bit easier.”	Nursing team	“Minute to Win It”- Get to know the person behind the patient by: <ul style="list-style-type: none"> • Learning personal interests • Understanding immediate needs • Addressing spiritual needs • Clearly identifying family contacts • Capturing comfort preferences
“The nurse seemed to read my mind - she was so attentive to my needs”	Nursing team	Purposeful rounding on an hourly basis is a standard to assess: <ul style="list-style-type: none"> • Pain management • Fall prevention • Personal care • Positioning for comfort and safety
“I felt genuinely cared for my surgeon”	Surgeon	Expectation management and relationship building are essential. <ul style="list-style-type: none"> • A scheduled visit prior to procedures should be used to educate patients and families prior to the day of procedure. • Pre-surgery: visit with the patient • Post- surgery: the surgeon should be present when the patient wakes up. The day after surgery, surgeons should visit their patients even on weekends. • Sitting down and professional human touch can really help calm a patient.

An unanticipated outcome of the Best Practices Forums was the platform for employee and team recognition. Many patients called out excellence in care received by naming individual clinicians and staff in both patient surveys and during the forum. This led to individual recognition of physicians, nurses, and operational teams not by their peers but from the patients they impacted. This recognition was patient-driven rather than management-driven and identified faculty and staff across all areas of the hospital, many of whom may otherwise not have been recognized for their impact on improving the patient care experience. Patient testimonies shared during the forum highlighted the impact that all individuals have in the patient experience. Stories shared included the one below:

“As much as I don’t want it to be my home away from home, it IS my home away from home. I’ve been here for many years; I’ve had several procedures here. And when I come here, I feel that everyone is so positive, everyone is smiling.

The first person you see is the traffic controller who has got a smile, you’ve got valet, they are smiling and positive, then you’ve got the people who direct you where you need to go, and they have a smile on their face, then you go to the person who checks you in, and they are smiling and positive too, and then you see the doctor. So you’re going past four people before you’re seeing the person you were actually here to see. And having that positive experience where people are happy really makes a difference.

Nobody wants to be here, but if you’re going to be here, I’m happy to have that positive environment around me.”

The planning committee reached out to the supervisors of each individual recognized by name during patient preparation interviews. This resulted in two things. First, supervisors were made aware of patient compliments about their staff. Second, supervisors began to provide words of praise from a managerial perspective of the individuals recognized. Managerial recognition was summarized and presented at each forum to further promote recognition for the accomplishments of individual faculty and staff members that positively impacted the patient experience.

Discussion

The creation and implementation of a forum designed around the patient perspective has allowed for exploration of best practices across all levels of the organization that contribute to a positive care experience. Highlighting positive care practices supported an appreciative inquiry

model of learning. Participants indicated high satisfaction with these forums as indicated by follow-up survey scores. Furthermore, the development of the forums into a patient-centric, employee recognition platform has been an added benefit of the program.

Future efforts will be dedicated to promoting greater interaction between audience members and the care teams through simulations and interactive technology advancements. Additionally, the compilation of a database for best practices identified during forums will be enhanced to allow search options and contacts for further inquiries. Finally, further efforts to spread best practices as standard work and enhance the measures of the impact will help further integrate the patient voice into operational standards. While the initiative focused on outstanding patient care events and experiences, future efforts around this forum would include examining areas of needed improvement and how that might be accomplished to continue to fulfill a patient-centered culture.

Overall, the forum served as an innovative learning lab using our patients and care team members as instructors of best practices in patient experience and patient engagement.

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