



How do health systems approach patient experience? Development of an innovative elective curriculum for medical students

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Recommended Citation

Silberg, Jordan MD; Bennick, Michael MD, MA, AGAF, FACP, CPXP; Caverzagie, Kelly MD, FACP, FHM; and Richards, Sarah MD, FACP () "How do health systems approach patient experience? Development of an innovative elective curriculum for medical students," *Patient Experience Journal*: Vol. 7 : Iss. 1 , Article 14. DOI: [10.35680/2372-0247.1402](https://doi.org/10.35680/2372-0247.1402)

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How do health systems approach patient experience? Development of an innovative elective curriculum for medical students

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Abstract

Medical students currently learn about patient-centered care and practice communication skills via a variety of curricula. However, there is little in the published literature describing a standardized approach for training future physicians how health systems approach and work to improve patient experience. The [Anonymous1 and Anonymous2] Schools of Medicine designed a plan to pilot a two-week elective for medical students in their clinical years. The curriculum is designed to help students understand and appreciate the key elements of the patient experience across the continuum of care and prepare students to impact the patient experience either as a practicing physician and/or as a future leader. Teaching methods include experiential activities as well as a variety of flipped-classroom sessions, dedicated time for independent reflection and study, interactive lectures, and a capstone project. This elective is slated for implementation at both medical centers over the next couple of years and the curriculum design stakeholders will continually review and refine the structure of the course based on feedback from participating students and core educators. The goal is to develop a novel and reproducible patient experience curriculum that can be taught to medical students around the country, ideally during both the clinical and pre-clinical years of their training.

Keywords

Patient experience, health systems, medical education, curriculum, interprofessional education, organizational communication

Problem

Medical schools are integrating new education about health systems to prepare students for the healthcare system of the future.¹ A key priority for any health system is to provide patient-centered care and, more broadly, to improve the overall patient experience. This is, in part, because of increasing evidence that improved patient communication is connected to improved quality, safety and health outcomes, as well as new financial incentives tied to patient experience metrics.^{2,3} To date, formal mechanisms or programs to train future and current physicians about how health care systems approach patient experience are fragmented and inadequate. There remains an imminent need to incorporate this component of education about health systems for students in a way that is engaging, relevant and valuable.^{3,4}

The Beryl Institute, a global organization with the mission of improving the patient experience, 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”.⁵ Health systems can impact patient experience by developing resources to promote

communication, standardizing and simplifying tasks, incorporating new technologies, and identifying patient system flaws.^{1,6} Key tenets to promote effective health systems that are relevant to the patient experience include patient-centricity, the ability to customize on a larger scale, increased process interfaces, educating the workforce of the health system on available resources, prioritizing research and ultimately fostering a cohesive leadership culture.

Health systems recognize that physicians must take on leadership roles to influence and guide patient experience-related programs and initiatives. These physicians must first learn, via communication skills training and experience, how to best elicit a patient’s individual wants and needs. When paired with a deeper knowledge of the various components of the healthcare systems, physicians are in a position to advocate for and navigate patients through the system. Ultimately, physicians can improve patient experience on a larger scale by learning to use the health system as a tool for the benefit of all patients. Although medical schools have traditionally included courses aimed at improving communication skills to meet LCME accreditation standards, focus on the diverse and

comprehensive systems' level approach to the patient experience is lacking.^{7,8} Demonstrating a positive example of such a course as part of the AMA "Accelerating Change in Medical Education" initiative in 2013, Pennsylvania State University College of Medicine started a Systems Navigation Curriculum consisting of a longitudinal integrated curriculum for first and second year medical students, which formalized the education of health systems science in undergraduate education.^{1,6} Additionally, the Interprofessional Education Collaborative (IPEC), which identifies core competencies for several national associations (including LCME), has played a key role in advancing patient experience. In 2016, their board announced that they had broadened the interprofessional competencies to better achieve the Triple Aim with includes the patient experience of care.⁹ Therefore, curriculum development around the system's approach to patient experience will help fulfill any future accreditation standards or competency requirements in medical education.

In summary, medical education has not yet adapted to include a health system's approach to patient experience. To fill this gap, the authors designed an innovative and interactive experience for medical students to teach how health systems approach patient experience. The ultimate aim of this experience is to train future physicians about the impact of patient experience on health systems' outcomes and their role in optimizing patient experience to improve patient care.

Approach

Course Goals

Overall, this elective aims to accomplish the following goals:

1. Establish a novel curriculum for the patient experience
2. Provide knowledge and skills to enhance the provider-patient relationship for medical students
3. Recognize that the patient experience is critical to the effectiveness of a health system
4. Evaluate the healthcare system through a patient-oriented lens and define opportunities to improve that system

Course Design

Recognizing the need for a patient experience curriculum, leaders at the University of Nebraska Medical Center College of Medicine (UNMC) and Yale School of Medicine (YSM) designed a novel two-week elective for small groups of medical students to be implemented in a clinical setting. In designing this elective, we sought to utilize principles of learning that have shown to be innovative and effective.^{1,10} The majority of the curriculum is experiential and includes activities such as shadowing and/or interviewing members of the hospital's

administrative patient experience team (i.e., volunteer services coordinator, spiritual care team member, or patient experience coach). Further, activities will be individualized to each student's interests in order to enhance engagement. The course will be complemented with traditional interactive lectures to provide a foundation of health system and patient experience vocabulary. Students will attend flipped-classroom sessions to discuss cases and have the opportunity to bring their own interests and reflections to the elective. Table 1 outlines the content as well as learning objectives for each proposed activity in the elective. In addition, a sample day-to-day schedule is included in Table 2.

Each student will complete a final project at the end of the elective. To meet this requirement, students will have the option to develop a journey map for a specific type of patient as they navigate the health care system, or they may choose to propose a quality improvement project.

Proposed Outcome Metrics

The effectiveness of this rotation will be evaluated and refined based on pre- and post-survey data (Figure 1). The students that participate will complete a survey before the elective, immediately afterwards, and at six months. The survey will assess student comfort with patient experience topics, interest in the field, and involvement in patient experience going forward. The survey will also assess how well the elective met each learning objective and an overall elective rating. The survey will be made up of questions based on a seven-point Likert scale from strongly disagree to strongly agree. We propose that post-elective survey scores will improve over their pre-survey evaluation by the end of the rotation. Moreover, we will compare pre- and post-survey results for the participants.

Future Plans

This elective is designed to meet the needs of physicians who will practice in the current healthcare system and inspire them to become patient experience champions and perhaps leaders in any clinical practice setting. As discussed earlier, however, there is a need for all medical students to gain more understanding of the patient experience. Therefore, there is a future plan to design a formal Patient Experience curriculum that would expand from the first day of medical school until graduation. This curriculum would utilize the same vocabulary and language offered in this two-week intensive elective as well as incorporate similar hands-on activities for learning. Additionally, the plan is to introduce this curriculum into the longitudinal courses that already exist at the UNMC as well as YSM for students in their pre-clinical years.

Barriers to implementing this elective primarily include getting administrative approval from each respective

Figure 1: Pre-/Post-Survey Questionnaire

(1 = Strongly Disagree, 2 = Disagree, 3 = Somewhat Disagree, 4 = Neutral, 5 = Somewhat Agree, 6 = Agree, 7 = Strongly Agree)

1. Knowledge

- a. I can explain why patient experience is important to health systems.
- b. I can explain the components of a health system's approach to patient experience.
- c. I can interpret patient experience data.

2. Confidence

- a. I know how to engage patients so they can act as critical partners in the overall healthcare experience.

3. Attitudes

- a. I believe that the patient's experience is important to a patient's overall health and wellbeing.
- b. I have a strong awareness of the importance of patient experience.
- c. I believe that the patient experience should be a part of the medical school curriculum for all students.

medical school and identifying patient experience leaders to act as directors. Both sites have presented this elective to the administration with positive feedback and have identified possible patient experience leaders.

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Table 1. Sample Elective Activities, Strategies and Learning Objectives

Didactics and Interactive Activities	Description and Instructional Strategies	Learning Objectives
Introduction to the Patient Experience and Health System	A one-hour interactive lecture defining terms relevant to patient experience and the relevance of the patient experience within the medical system.	<ul style="list-style-type: none"> • Define patient experience and compare/contrast with patient satisfaction • Describe the relationships between clinical effectiveness, patient experience, and quality and safety • Explain what constitutes a health system • Describe why patient experience is important to healthcare systems
Quality Measures, Statistics, Feedback	A one-hour interactive lecture facilitated focusing on ways to measure and compare patient experience.	<ul style="list-style-type: none"> • Recognize common patient satisfaction/experience surveying instruments in use • Appreciate benefits, limitations, and controversies involved with use of patient survey data • Describe connections between patient satisfaction/experience results and financial implications
Health Systems Initiatives for Improved Patient Experience	A one-hour interactive lecture that defines strategies to improve the patient experience at multiple levels within health systems.	<ul style="list-style-type: none"> • Appreciate elements of customer service training as it relates to the healthcare environment • List common approaches to improve patient experience
How to Create a Journey Map	A one-hour interactive session that introduces the concept of a journey map, the components of the map, and how the journey map can be analyzed.	<ul style="list-style-type: none"> • Create a journey map • Identify potentially modifiable elements of the provider-patient relationship
Flipped Classroom: Journal Article Review	A one-hour session in which students will come prepared to discuss one assigned landmark patient experience article to read. They will also perform a literature search and bring in two other articles to share on a topic of their choice, ideally a topic related to QI project.	<ul style="list-style-type: none"> • Perform a literature search • Understand the evolving literature pertaining to the patient experience
Flipped Classroom: Online Reputation	A one-hour session in which students will meet for a reflective discussion after performing a Google search of a large health care organization (such as a hospital network or insurance company) to get a sense of how transparent that organization is, how they approach the patient experience, what types of health grades are they getting, where are those grades coming from, etc.	<ul style="list-style-type: none"> • Appreciate alternative online sources of literature • Describe how an organization can use patient experience data
Flipped Classroom: Transparency in Patient Experience Reporting	A one-hour interactive group session after pre-work to explore transparency requirements for organizations as defined by Medicare and Medicaid.	<ul style="list-style-type: none"> • Understand Medicare and Medicaid requirements for organizations as it pertains to transparency.
Patient Relations & Service Recovery	Sit down and interview a patient relations representative about his/her responsibilities at the hospital and what a typical day looks like in that field. They will shadow that advisor for the rest of the session.	<ul style="list-style-type: none"> • Define the role for patient relations in the hospital • Review specific examples of grievance resolution
Volunteer Services	Shadow a volunteer in the hospital or outpatient setting.	<ul style="list-style-type: none"> • Describe the benefits and limitations of having a volunteer interact with the patient • List the roles that a volunteer can serve • Explain how a volunteer can get connected with the hospital • Explore how you would feel about having a volunteer come visit you in the hospital

Table 1. Sample Elective Activities, Strategies and Learning Objectives (cont'd.)

Didactics and Interactive Activities	Description and Instructional Strategies	Learning Objectives
Hospital Advisor	Shadow an Advisor or Coach in the hospital or clinical setting, i.e. during Coaching Rounds.	<ul style="list-style-type: none"> • Define the role of a hospital advisor • List examples of how they add value to the medical team • Describe one way to improve giving feedback
Spiritual Care	Work closely with the chaplain during a typical day in the hospital.	<ul style="list-style-type: none"> • Explain when a chaplain should be involved in patient care • Describe the various faiths and beliefs that spiritual care in the hospital can support • Describe barriers to providing spiritual care
Care Coordination	Shadow a care coordinator in any clinical setting that is of interest to the student (i.e. Pediatric Oncology or Adult Neurology).	<ul style="list-style-type: none"> • Define what a care coordinator is • Explain what types of services a care coordinator provides • List the various medical settings that could utilize a care coordinator
Patient and Family Advisory Council	Attend a PFAC council meeting.	<ul style="list-style-type: none"> • Define a patient family advisory council • Explore how this type of group can lead to changes in hospital policy
Executive Shadowing	Sit down with an executive in the patient experience and observe what a typical day in his/her job is like.	<ul style="list-style-type: none"> • Explain the organizational structure of a patient experience executive • Describe the various roles the executive fills in the health system
Patient Experience Meeting	Attend a regularly scheduled patient experience committee meeting to find out what the current initiative is. Also, learn about who attends those meetings and how they are run.	<ul style="list-style-type: none"> • Describe a typical patient experience meeting, including topics discussed and types of attendees • Explain how the meeting is run • Describe the outcome of that meeting and the reaction of the attendees to the meeting
Direct Patient Care	Observe a multi-disciplinary team of practitioners (attendings, residents, medical students, nurses, pharmacists) as they communicate with patients, family members, and other practitioners in the hospital and clinic settings during rounds and throughout the day.	<ul style="list-style-type: none"> • Describe how different types of practitioners communicate differently • Explain any differences with communications with families versus with other practitioners • Identify a few key areas with communication to make the patient experience better
Evaluation Review	Read through the written comments made about physicians in the hospital network by their patients.	<ul style="list-style-type: none"> • List commonalities that patients expect from their physician • Describe the type of language patients use in the evaluations.

Table 2. Sample Elective Daily Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
AM 1	Didactic Learning 1	Flipped Classroom	Flipped classroom	Flipped Classroom	Experiential Learning
AM 2	Didactic Learning 2	Project Discussion	Didactic Learning 3	Didactic Learning 4	
PM	Experiential Learning	Experiential Learning	Experiential Learning	Experiential Learning	Small Group Discussion on Activities

	Monday	Tuesday	Wednesday	Thursday	Friday
AM 1	Experiential Learning	Follow-up project	Experiential Learning	Project	Project
AM 2					
PM	Project	Experiential Learning	Experiential Learning		