

A blueprint for setting up an impactful patient experience program

A thought leadership paper on 'Innovating personalized care', 'Achieving operational excellence' and 'Transforming the system of care' with an introduction by Jason A. Wolf, PhD, CPXP

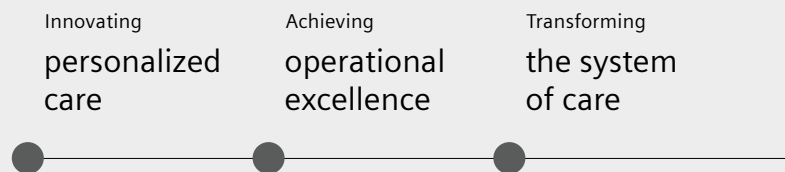
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Preface

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Paper

A blueprint for setting up an impactful patient experience program

Introduction

The experience era¹ has taken hold in healthcare. It calls for new ways of thinking about how care is delivered, and it is driving how those who seek care – the healthcare consumers – will make their future healthcare choices. This reality is reinforced by the findings of the examination shared here, conducted in partnership by The Beryl Institute and Siemens Healthineers.

The influence factors of patient experience described in this paper are firmly grounded in the essence of healthcare, namely, reinforcing earlier discoveries from the voices of consumers² and underlining that what healthcare organizations know must be central to their work. On the pages that follow, these ideas have been turned into action. The ultimate measure of success for discoveries such as those in this study is the ability to create pathways to take rich and practical data to build processes for assessment and action that lead us forward. This paper does just that in providing a powerful model with which one can engage, reflect on one's efforts, and determine opportunities for action and improvement.

Most importantly, and I believe essential to any useful model: this paper reinforces a critical point in its conclusion. The experience era is not a time of complacency or an idea with boundaries; rather, as the authors share, what the true nature of this research and work reveals is that the commitment to human experience is never finished, and it never should be.

It is important to note that initiatives to improve influence factors are not distinct efforts either, but rather from the perspective of healthcare consumers, all of what they encounter is part of their experience and therefore it is essential these are considered together as one. This essential need builds on the broad framing of 'To Care is Human: The Factors Influencing Human Experience in Healthcare Today'³ where I shared, "What the study into the influence factors of experience shows is that people in healthcare see themselves and acknowledge those they serve as humans, as people, first. In the end, it is the things that speak to people as human beings that have the greatest impact in healthcare."

Jason A. Wolf, PhD, CPXP
President, The Beryl Institute

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About The Beryl Institute

The Beryl Institute is a global community of practice dedicated to improving the patient experience through collaboration and shared knowledge. The Influence Factor Study is the foundation of the December 2018 publication: 'To Care is Human: The Factors Influencing Human Experience in Healthcare Today.' In conjunction with this paper, The Beryl Institute is releasing a series of case studies from high-performing organizations participating in the research.



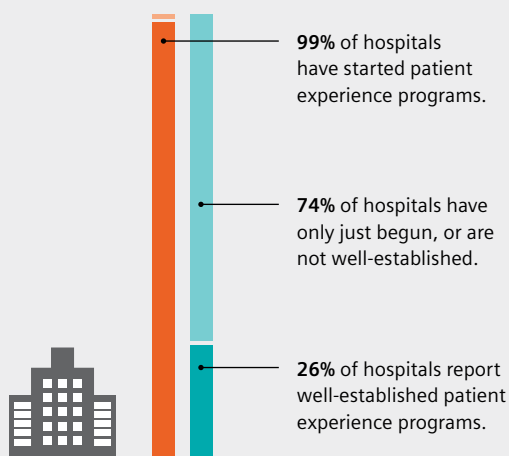
40% of U.S. citizens
are not satisfied with their
interactions with hospitals.

Executive summary

Use our scorecard to identify white spots and areas for improvement in your patient experience efforts.

As only 60% of U.S. citizens are satisfied with their interactions with hospitals, it is no surprise that patient experience is rated as a top priority in the U.S.⁴ According to The Beryl Institute study 'The State of Patient Experience 2017: A Return to Purpose,' the top three healthcare priorities for 2019 to 2022 are: improving the patient experience, employee engagement, and cost management.⁵

Outside the U.S., the focus on patient experience is also growing and a commitment to experience overall is taking hold. In a global study, more than 80% of over 1,600 healthcare organizations identified themselves as having 'established' or even 'well established' experience efforts, while just 1% of respondents reported that they had 'not yet started.'⁵ These numbers reveal that it is no longer about why to set up patient experience efforts, but that it is important to identify what priorities and practices lead to sustained success for your organization. Reason enough for Siemens Healthineers and The Beryl Institute to conduct a study in 2018 with more than 1,100 patient experience professionals, including 294 from high-performing units³ and 175 patients and their family members to find out the most important influence factors on patient experience. The participants rated more than 35 different factors. We used the results of high-performing units and patient organizations and summarized them in the attached scorecard that displays the most influential factors along the continuum of care. You can use this scorecard to gauge your system-wide patient experience efforts as well as to identify gaps and potential improvement areas.



More than 1,600 hospitals surveyed, including 944 U.S. hospitals and 246 non-U.S. hospitals from 25 countries⁵

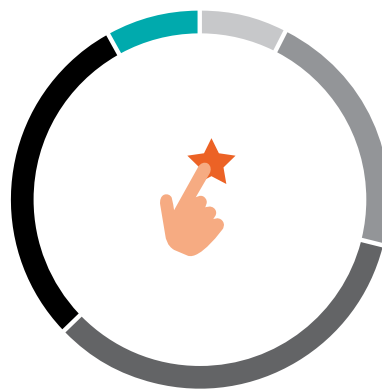
The challenge

It's not always clear what efforts have the most impact when building a successful and sustainable patient experience program. But identifying the right initiatives can lead to better clinical outcomes and financial performance.

Many healthcare organizations are investing in improving the patient experience from different angles, and there is no single best approach. As in many other markets, the patient experience landscape in the U.S. still looks very unhomogeneous:⁶ According to Becker's Hospital Review as of March 7, 2019, more than 3,724 hospitals had a Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) summary star rating as a measure for patient experience. Of those hospitals, about 29% have one or two stars, about 63% have three or four stars, but only about less than 8% have a five-star rating. So what are high-performing organizations doing differently?

In any case, hospitals with high patient-reported experience scores have better clinical quality and higher profitability. Recent research from the Deloitte Center for Health Solutions revealed that for every 10% increase in the number of patients giving a hospital a top HCAHPS score, there was a 1.4% increase in net margin compared to hospitals given lower scores.⁷

This is also supported by programs such as Medicare's Hospital Value-Based Purchasing Program that financially reward hospitals that have better patient-reported experience scores. Patient experience can make a difference to financial success, especially in markets like the U.S. But



*Less than **8%** of hospitals received a five-star patient rating.*



Quality measures for more than 3,724 hospitals in the U.S. Breakdown of star ratings

even in partly-nationalized health systems like in Germany, or nationalized systems as in the UK, where the link between revenue and patient experience is weaker, governments are starting to prioritize patient experience. Positive patient experience is an innovation driver. This can influence the commissioning of services and, therefore, revenue.

“Safe and reliable care is the foundation on which any effective experience is ultimately built.”

Jason A. Wolf, PhD, CPXP

The solution

Understanding patient experience priorities is the basis for an impactful patient experience program.

We asked 1,478 patient-experience professionals from 19 countries about the factors that have the most influence on patient experience, with non-U.S. responses representing 16% of the sample. This included almost 300 high-performing healthcare units and 175 patients and their family members. High-performing healthcare units were identified in the following way: across the United States, organizations were invited to propose internal units that had scored a top rating of nine or ten in the overall rating question of the Hospital Consumer Assessment of Healthcare Providers and Systems HCAHPS survey (or equivalent). Acknowledging a single HCAHPS survey is just one indicator of success. For control purposes, high-performing units were defined as those that have achieved and sustained a HCAHPS overall rating of nine or ten over the last six months of collected data.

The top influential factors were then identified by analyzing the ratings of high-performing patient experience units as well as patients and family members. At least 70% of these respondents rated these factors as having ‘great’ or ‘the greatest’ influence. They combine with other ‘must-have’ factors that mostly relate to the facility, and hospitality, and were rated as having ‘great’ or ‘the greatest’ influence by at least 50% of respondents. All factors are summarized in a scorecard (see pp. 7 and 10) that is structured along the continuum of care and briefly described as follows:

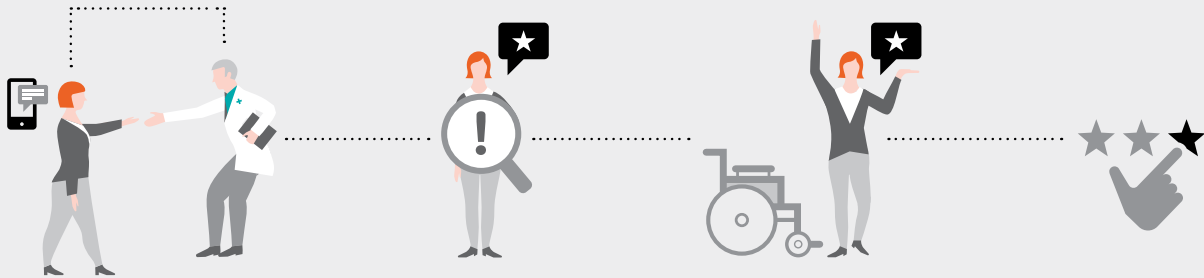
Engage patients and families to set an expectation for a hospital stay

The continuum of care starts with engaging patients and families before they go into a hospital. Can you learn to speak a new language in five days? If patients are not medical experts, this is what they face. Medical terminology and jargon is confusing. It is essential to communicate with patients and their families in a way they understand, and that is customized to their needs. It's helpful to make time for questions before procedures and treatments start. Answering questions helps create expectations for the upcoming stay, and a partnership between patients and caregivers. Equally important is partnering with families. They can help maintain treatment plans after discharge, thereby improving adherence and avoiding readmissions.

Optimize the diagnostic experience to make better treatment decisions

Good teamwork among the care team is the foundation for executing diagnostic episodes with empathy, efficiency, and transparency. Patient-friendly technology improves the effectiveness and comfort of the diagnostic experience. This fosters opportunities for care by actively mitigating anxiety and thereby lowering the number of missed appointments. Another aspect is easy access to care healthcare providers can improve by offering point-of-care diagnostic testing or tele-radiology closer to patients. By achieving all of the above, healthcare providers can optimize the diagnostic experience, which is the foundation for making the best possible treatment decisions.

Top influence factors for patient experience – Elements of effective patient experience programs



Engage patients and families	>	Optimize the diagnostic experience	>	Deliver outcomes that matter to patients	>	Sustain patient loyalty
Effective communication with patients/families		Teamwork among the care team		Coordination of care during and between encounters		Engagement level of employees
How patients/families are personally treated		Effectiveness of diagnostic/testing experience		Serious and responsible pain management		Previous encounters with a healthcare organization
Opportunity for a patient to ask questions of care provider		Comfort of diagnostic/testing experience		Quality/safety practices evident during a care encounter		Communication/education about prescribed medications
Partnering with/engaging patients and families		Ease of access to care		Clinical outcomes of the prescribed treatment/therapy		Check-out/discharge process

Must-haves in the continuum of care

- Clinical team well-being
- Commitment of leadership
- Cleanliness of facility
- Clear signage and wayfinding
- Noise level in facility

- 90 – 100%
- 70 – 90%
- 50 – 70%

Percent of survey participants (healthcare providers, patients and family members) rated the importance of influence factors with 'greatest' or 'great'.

“High-performing organizations acknowledge the need for evident quality and safety practices, effective diagnostic and testing experiences, and clear coordination of care.”

Jason A. Wolf, PhD, CPXP

Deliver outcomes that matter to patients

The coordination of care during and between encounters without information loss at handovers is key for a seamless patient experience, and is the foundation for delivering outcomes that matter to patients. This includes reducing waste and non-value-adding activities along the care pathway. Responsible pain management means offering pain-free diagnosis, and treatment with fewer side effects and complications. During a care episode, patients expect clinical measures to follow quality and safety practices, and that the prescribed therapy delivers a clinical outcome with a fast recovery and better quality of life. Technology can support improving patient reported outcomes by leveraging, e.g., minimally-invasive treatments or imaging-enabled precise robotic surgery.

Sustain patient loyalty beyond the stay

Employee engagement is the basis for a good experience during a stay in the hospital. Loyalty starts with the most recent stay. This is important because the patient always compares recent encounters with health systems and care providers with previous experiences. Loyalty depends on the sum of interactions the patient has in the hospital, including onboarding and discharge. At the end of a hospital stay, a structured discharge is a valuable procedure in preparing the patient for his post-stay care. Before the patient checks out, asking for feedback about the hospital stay and answering questions about billing and continued care alleviates stress and creates a more positive overall experience. By providing the patient with access to their health records, supporting health literacy, crafting integrated care plans, and educating about prescribed medications, the patient can plan his aftercare, leave the hospital with confidence, and reduce the chance of readmission.

Must-haves for positive experience

Regardless of organizational size, clinical focus, or expertise, there are some factors that influence patient perception from the moment they enter the hospital. These ‘must-haves’ are not always the highest rated, but describe the setting they are entering. These include cleanliness, way-finding, and noise level in the facility. Often, these factors are easily manageable and represent quick wins for positive patient experiences.

To achieve all of the above, the well-being of the clinical team is crucial: when hospital management supports a culture that fosters employee health, it's easier to retain talent, achieve high employee satisfaction, and ultimately positively influence all interactions that shape patient perceptions across the continuum of care.



Suggested follow ups

[siemens-healthineers.com/improving-patient-experience](https://www.siemens-healthineers.com/improving-patient-experience)

- The Beryl Institute Study: To Care is Human: The Factors Influencing Human Experience in Healthcare today
- HBR Report on improving patient experience
- Economist paper on patient experience

In conjunction with ‘To Care is Human’ paper, The Beryl Institute will release a series of case studies from high-performing organizations participating in the research.

*Are you focusing on the right factors to improve your patient experience?
Find out how to evaluate your scorecard:*

On pages 7 and 10 you can find the highest-rated factors that influence the patient experience along the continuum of care. For example, 'Effective communication with patients and families' is the most important influence factor in the phase 'Engage patients and families.' The relevance of the influence factors decreases toward the lower part of the graphic. This doesn't mean partnering with patients and families is unimportant in that phase. It was still rated by more than 70% of survey respondents as having 'great' or 'greatest' importance. Further, the 'must-haves' should be part of broader patient experience programs because they reflect basic needs. The scorecard can be used in different phases of your patient experience efforts:

1 Gauge your existing patient experience efforts

Prepare a list of your patient experience initiatives and map it to the phases and influence factors in the boxes. Rate the initiatives with a number reflecting the maturity of your initiative. Keep it simple and use the spread between one and four. Please see the description of the rating in the scorecard on page 10.

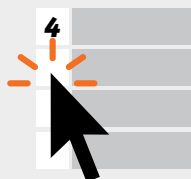
Check if you have high numbers in the top boxes under each of the phases. If you have high numbers there, you are working on the influence factors that have been identified by high-performing patient experience institutions and patients and their families as the most important influence factors. When your high numbers, i.e., more

mature patient experience initiatives, are in the bottom boxes, and low numbers in the top boxes, you may want to shift priorities. Put more effort in the top box initiatives and decrease efforts in the bottom ones. If your initiatives don't match any of the boxes, you are currently focusing on factors that are not seen as the most important factors to improve the patient experience. Consider shifting these resources to other initiatives.

2 Starting patient experience programs

If you start from a scratch, it is a good idea to have a multidisciplinary team that understands your hospital strengths and specialties and includes the front line and provider perspective. The team can use the scorecard structure to discuss which of the phases and influence factors you want to improve. Whatever you choose, it is important to define who is driving this implementation and how to measure it. The experts we interviewed for the study recommend focusing on a few important initiatives to start – this helps drive execution alongside the normal workload and demonstrate success quickly.

Are you focusing on the right factors?
Rate your measures from 1 to 4.



Fill in '1' for **Low** – We haven't really tracked it.

'2' for **Initiating** – We have analyzed the pain, and started to initiate activities around it.

'3' for **Ongoing/learning** – We have several activities ongoing and are tracking KPIs and learning how we can improve.

'4' for **Expert** – We have optimized the issue and know how to best execute.

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You will need Adobe Acrobat Reader or another PDF reader program to fill out the form. You can download these at no cost in the Internet.

Conclusion

The United States is a leader in examining and measuring patient experience activities. This may be due to a consumer-centric culture, but not every hospital is in fact a top performer in patient experience. The landscape is very heterogeneous, but transparent. Outside the United States, developments in patient experience are also driven by health systems, politics, and consumers.

Improving patient experiences offers many opportunities for healthcare providers, hospitals, and patients. It is important to understand patient experience holistically for your strategy to be successful. But you also have to focus on your own organizational needs as you define your levers for improving the patient experience. Matching these to the most important influence factors will identify and help develop the most value-adding, patient-centric, and long-lasting initiatives. Providing a better patient experience is not a one-off project, but a continuous improvement cycle that has to consider organizational needs, staff, and environmental fluctuations.



Literature

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About the authors



Dr. Ralph Wiegner
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Ralph Wiegner and his team engage in thought leadership and portfolio-related activities for improving the patient experience. He is a member of both The Beryl Institute and the Solutions Provider Advisory Board at The Beryl Institute. Prior to joining Siemens Healthineers, he spent several years with McKinsey & Company, where he worked on various European and international assignments. Ralph holds a PhD in theoretical physics from the University of Erlangen, Germany, and completed a number of research engagements at Oklahoma State University, USA.



Jason A. Wolf, PhD, CPXP
President at The Beryl Institute

Jason A. Wolf is a passionate champion of and recognized expert on patient experience improvement, organization culture and change, and sustaining high performance in healthcare. As president of The Beryl Institute, Jason has led the growth of the organization into the leading global community of practice and thought leader on improving the patient experience, engaging over 55,000 members and guests in more than 70 countries, and establishing the framework for the emerging profession of patient experience. Jason is the founding editor of the 'Patient Experience Journal,' the first open-access, peer-reviewed journal committed to research and practice in patient experience improvement. He also established and currently serves as president of the Patient Experience Institute, an independent non-profit committed to the improvement of patient experience through evidence-based research, continuing education, and professional certification. Jason is a sought-after speaker, provocative commentator, and respected author of numerous publications and academic articles on culture, organization change, and performance in healthcare, including two books on organization development in healthcare and over 40 white papers and articles on patient experience excellence and improvement. Jason also received the American College of Healthcare Executives (ACHE) 2018 Dean Conley Award for his article 'Patient Experience: The New Heart of Healthcare Leadership,' published in the spring 2017 issue of 'Frontiers of Health Services Management.'

At Siemens Healthineers, our purpose is to enable healthcare providers to increase value by empowering them on their journey toward expanding precision medicine, transforming care delivery, and improving patient experience, all made possible by digitalizing healthcare. An estimated 5 million patients globally benefit every day from our innovative technologies and services in the areas of diagnostic and therapeutic imaging, laboratory diagnostics, and molecular medicine, as well as digital health and enterprise services.

We are a leading medical technology company with over 120 years of experience and 18,000 patents globally. Through the dedication of more than 50,000 colleagues in 75 countries, we will continue to innovate and shape the future of healthcare.

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