A Strategic Framework for Improving the Patient Experience in Hospitals

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EXECUTIVE SUMMARY

Hospitals are taking new approaches to satisfy consumers and deliver on customer expectations by enhancing their patients' comprehensive experience. The HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey and value-based purchasing initiatives have tied reimbursement to patient satisfaction scores, bringing patient perspectives on care to the forefront of hospitals' strategic priorities. This essay reviews the patient experience literature and argues that hospitals should adopt an expanded approach beyond HCAHPS measures to enhance the patient experience. Such an approach allows providers to deliver quality outcomes that satisfy patients' wants and needs.

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INTRODUCTION

Hospitals face a continuing challenge to reduce the gap between consumers' expectations and the actual services provided. Since the 1990s, hospitals have recognized that customer service and providerpatient interactions are important in creating successful outcomes, and they have emphasized the measurement and reporting of patient satisfaction measures (Fottler, Ford, & Heaton, 2002). As a consequence of intensifying market pressures, pay-for-performance tied to HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey scores, and greater consumer expectations, hospitals are focusing on maximizing the patientexperience.

To establish and maintain a competitive advantage, hospitals must acknowledge and prioritize patient experience as a key to organizational success and sustainability. Although healthcare leaders recognize the value and growing implications of the patient experience, hospitals struggle with consistency in addressing the patient experience. Misunderstanding of consumer expectations and inconsistent organizational practices leave room for improvement. By identifying the dimensions of patient experience valued by the customer, hospitals can tailor services according to customer expectations.

Improving the patient experience should be fundamental to the mission and goals of any healthcare organization, because it will result in high return on investment, quality improvements, and increased customer loyalty (Betts, Balan-Cohen, Shukla, & Kumar, 2016; Charmel & Frampton, 2008). Although HCAHPS scores are important to meeting short-term goals, a hospital that strives for long-term success and market leadership must

implement patient experience initiatives that go beyond HCAHPS. Hospitals have a duty to seek more than financial gains; they must operate a people-centered organization that promotes "purpose, worthwhile work, and making a difference" in the lives of patients (Studer, 2003, p. 4).

Hospitals will fulfill their duty to patients if they establish a culture that supports the patient experience, facilitates patient–provider communication, improves information transparency, increases patient engagement, makes the organization accessible to consumers, creates an empathetic environment, and prioritizes quality clinical outcomes. The purpose of this essay is to provide a strategic framework for hospital administrators to maximize the patient experience by focusing on satisfying patients' wants and needs.

BACKGROUND

In the 1990s, hospitals began using patient satisfaction surveys to identify their strengths and weaknesses (Fottler et al., 2002). Hospitals have learned that patient expectations have an important influence on patient satisfaction. In 2008, the Centers for Medicare & Medicaid Services (CMS) mandated that U.S. hospitals gather data on patient satisfaction by distributing the HCAHPS survey. This standardized survey has provided hospitals with a baseline comparative model by which to measure patient-assessed hospital performance. Because reimbursement rates are now tied to HCAHPS scores through the value-based purchasing initiative, hospitals are now motivated by more than competitive market pressures (Ferrari, 2012). The HCAHPS requirement reflects a systematic focus on quality outcomes that highlights the patient

experience as a key quality measure for healthcare organizations.

The HCAHPS generates publicly available data that allow fair comparisons between hospitals, incentivize hospitals to improve quality, and hold hospitals accountable for services paid for by public funds (Long, 2012). HCAHPS survey items fall into eight experience-of-care categories: communication with physicians, communication with nurses, pain management, cleanliness and quietness of the hospital environment, responsiveness of hospital staff, communication about medications, discharge information, and overall rating of the hospital (CMS, 2016). Although these categories address many aspects of patient satisfaction, HCAHPS data are limited and should not be used to fully define the components of a good patient experience. The standardized survey does not ask patients about other important factors affecting their hospital experience, such as access to information and overall comfort of the environment. Punke (2016) reported that approximately half of executives make the mistake of measuring experience exclusively by means of the narrow HCAHPS metrics, which report on inpatient care only.

HCAHPS has created a foundation for understanding the concept of the patient experience, which has been defined as the sum of all interactions, shaped by an organization's culture, that influence patient perceptions across the continuum of care (The Beryl Institute, n.d.). However, recent data show that hospitals are not living up to consumer expectations. A Prophet/GE Healthcare Camden Group (2016) survey found that "providers overestimate the quality of their patient experience by over 20 percentage points," and 63% of providers feel they are delivering, whereas

only 40% of consumer respondents agreed.

Researchers have studied the value of patient experience and found that "investments in patient experience increase costs but increase revenue even more" (Betts et al., 2016, p. 2). Studer (2003) argued that hospitals owe it to customers to achieve quality outcomes and maximize the patient experience; financial benefit should be considered a positive side effect, not the main motivation, of these efforts. This commitment to doing the right thing stems from the belief that most healthcare professionals are driven by the core values of "purpose, worthwhile work, and making a difference" (Studer, 2003).

Charmel and Frampton (2008) found that "hospitals that respond to their consumers with personalized care, highquality care, and service excellence are poised to thrive in this era of healthcare consumerism." By differentiating themselves from competitors, they will build a "brand identity around a patient-centered approach to care that proactively addresses healthcare consumers' increasingly high expectations" (Charmel & Frampton, 2008, p. 2). Hospitals that implemented patient-centered care initiative models achieved improved overall satisfaction ratings, and one hospital reported increasing inpatient volume by 24% and outpatient volume by 35% after adopting a patient-centered model (Charmel & Frampton, 2008, p. 3). Radick (2016) also reported that patient satisfaction scores at an academic health center were sustained at 90% after introduction of innovations in patient-centered staff behaviors and new electronic health records features. Given this combination of financial incentives and the inherent mission of a hospital to serve its patients, patient experience

initiatives should be a top strategic priority of hospitals. But the question remains: How does a hospital ensure the best patient experience?

PROPOSED FRAMEWORK FOR IMPROVING PATIENT EXPERIENCE

On the basis of a review of the literature, I developed a strategic framework for improving the patient experience. This framework allows hospital administrators to classify patient experience dimensions that can be addressed by specific organizational initiatives. The framework is shown in Figures 1 and 2. In the framework, patient–provider communication, information transparency, and patient engagement work together to form an accessible organization. The organization can then create an empathetic environment that

generates quality outcomes and creates value. Each step depends on the expertise, attitudes, and behavior of hospital staff members, who rely on leadership to establish an organizational culture of excellence and accountability. Implementation of this framework builds a hospital's capacity that goes beyond HCAHPS measures to maximize the patient experience.

Establish a Culture to Support Patient Experience

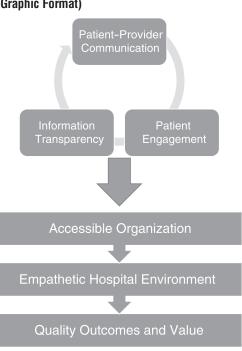
The patient experience begins with a culture that shapes staff behaviors. The hospital staff's efforts underlie the framework components and are key to improving the patient experience. Leadership sets the standard for the hospital by establishing the organizational culture and codes of conduct for employees; clinical and

Figure 1 Framework for Patient Experience Improvement (Text Format)

• Establish a Culture to Support Patient Experience

- create specific job titles and training initiatives designed to enhance staff buy-in and have leadership instill an organizational culture prioritizing patient experience
- Facilitate Patient-Provider Communication
 - create communication channels that encourage transmission of ideas between consumers and the provider
- Improve Information Transparency
 - promote information symmetry by giving patent and provider access to the same data and knowledge
- Increase Patient Engagement
 - give patients locus for control of care decisions by using information transparency and communication to enhance knowledge and participation
- Make Organization Accessible to Customers
 - Proactive, consumer-driven approach to care, emphasizing responsiveness and timeliness to consumer wants and needs
- Create an Empathetic Hospital Environment
 - design a supportive physical, technological, and psychosocial setting that forms a comfortable atmosphere for clinical and procedural processes to generate quality outcomes
- Prioritize Quality Outcomes to Maximize Value
 - consistently prioritize good clinical results

Figure 2 Framework for Patient Experience Improvement (Graphic Format)



frontline staff demonstrate these organizational values in their interactions with patients. A positive patient experience can only be created with engaged staff. The nursing staff, in particular, has a large influence on the patient experience. HCAHPS data show that "specific nursing actions, including hourly rounds, patientfocused communication, bedside report, a focus on pain management, and discharge teaching can make a measurable impact on patient experience" (Long, 2012, p. 37). A study by Kutney-Lee et al. (2009) found that hospitals with better work environments for nurses and favorable patient-to-nurse ratios yielded higher patient satisfaction scores. In addition, researchers found that patients' interactions with nurses had a greater impact on their hospital experience than interactions with physicians (Manary, Boulding,

Staelin, & Glickman, 2013). Although clinical staff can most directly influence patient satisfaction scores, a survey of healthcare professionals found that, of 303 respondents, 9% thought that nurses and physicians were primarily responsible for patient experience, 7% said responsibility belonged to the frontline staff, 13% placed responsibility solely on the CEO, and 34% stated that responsibility lay with a multidisciplinary team of leaders, clinicians, and staff (Shaw, 2010). To improve the patient experience, all hospital personnel must embrace patient-centered care and deliver quality services.

Cultivating this staff buy-in is the duty of administrators, who should communicate expectations regarding patient-centered care throughout all levels of the organization (Radick, 2016). Hospital leaders are "the key to empowering everyone in the organization to prioritize and innovate change," but interventions also must occur "at the frontline, allowing staff to take ownership of the solutions" (Ferrari, 2012). Creating an organizational culture that values the patient experience must be an administrative priority, but efforts will be effective only if the frontline staff and clinicians embrace the initiatives.

Hospital leaders should focus on constructing a culture of excellence to generate positive outcomes. According to Studer (2003), excellence "is when employees feel valued, physicians feel their patients are getting great care, and patients feel the service and quality they receive are extraordinary." These successes can be "hardwired" into the organization through consistent processes that instill a culture of excellence that can adjust and respond to change regardless of the specific hospital leadership and employees (Studer, 2003).

Establishing accountability for patient experience is necessary. One administrator has noted that patient experience is everyone's responsibility, "but if someone doesn't have accountability for it, then it doesn't happen. If it's everybody's job, then it's nobody's job" (Shaw, 2010, p. 9). Hospitals are assigning accountability by creating specific job titles or departments in charge of patient experience. The Cleveland Clinic (n.d.) was a pioneer among medical centers to make patient experience a strategic goal, to appoint a chief experience officer, and to establish an office of patient experience. Organizations can also initiate training programs to better equip staff—including hospital executives—to deliver on positive patient experiences. Hospitals will attract the highest-quality employees and nurture a positive work environment if they are led by competent executives. For clinicians, training programs that focus on customer service, bedside manner, health literacy and health education, and empathy can enhance the patient experience. In addition, investing in qualified personnel pays off. One study found that "engaged staff translates to \$460,000 in average additional patient revenue per physician per year" (Prophet/GE Healthcare Camden Group, 2016).

Facilitate Patient-Provider Communication

For customers, interaction with staff is the single most important determinant of patient experience. Face-to-face communications form consumers' overall impression of the hospital, sometimes before service delivery and medical treatment occur. Forty-two percent of consumers said that the way they are treated by physicians, nurses, and reception staff is the

most important component of a successful inpatient experience (DeShano, 2016). Betts et al. (2016) reported that 75% of consumers surveyed considered staff engagement measures, including quality, communication, and responsiveness, to be the most important factors in their care experience. The best way to ensure positive interactions between patients and staff is to improve patient-provider communication. Clinical teams serve the most important role in facilitating communication between the patient and the organization. Physicians and nurses must take the time to explain procedures, medical treatments, and care options to patients, who, in turn, need to communicate to clinicians their expectations regarding treatment and the service experience.

In addition to communicating directly with patients, clinical staff can also perform charting and onboarding at shift change directly in front of patients to establish a clear communication channel. Providers should take extra measures to ensure that patients understand their current health condition and receive any needed instructions; 57% of hospital consumers report value from receiving patient education during a visit (FierceHealthcare, 2012). Effective patient–provider communication is the most efficient way to align patient and provider expectations and ensure that patients' needs are being met.

Improve Information Transparency

Information transparency is a key element in increasing patients' involvement in their care. Organizations can facilitate information transparency outside hospital walls by means of the Internet for access to data and inside hospital walls by making sure that staff members communicate relevant information clearly to patients in face-to-face settings. Consumers should have clear information at their disposal regarding comparative data, such as hospital pricing and quality outcomes. Since the Institute of Medicine published its quality framework in 2001, the availability of health data has been emphasized as an industry-wide quality initiative. The report (Institute of Medicine, 2001, p. 4) states that "patients should have unfettered access to their own medical information and to clinical knowledge," as well as to "information that enables them to make informed decisions" about hospitals. The Kaiser Family Foundation (2004) reported that 70% of consumers felt that information about medical errors and providers' experience with particular tests or surgeries would be most useful when comparing hospitals.

Hospitals must provide consumers with patient-specific data, such as medical records, outcomes, and clear options regarding medical decisions. Hospitals can also simplify appointment scheduling. Maintaining a visually appealing, userfriendly website is an effective tool to reach today's consumers. One executive noted that the "patient experience no longer begins at the front door" because patients rely on the Internet to "gather information about your organization, your physicians, your culture" (Shaw, 2010, p. 3). Publically accessible information can signal to consumers what they can expect from a hospital before they even enter the facility.

Increase Patient Engagement

Increasing patients' engagement with hospitals is a function of improving patient–provider communication and facilitating information transparency. Patient engagement can be defined by patients' access to information, their participation in healthcare decisions, and their involvement in healthcare organizations' policymaking (Carman et al., 2013). Engaged patients must communicate their health situation to providers, as well as their "values, beliefs, and risk tolerance regarding care choices." Providers must provide patients with "timely, complete, and understandable information" (Carman et al., 2013, p. 225). Through these positive interactions with patients, clinicians play an important role in shaping patient engagement.

In organizations with high patient engagement, patients may even contribute to codesigning care processes in which patient input is sought in collaboration with multidisciplinary clinical teams (Lavoie-Tremblay et al., 2016). Surveys and focus groups are other ways hospitals can solicit input from patients about organizational processes. Patient journey maps, which evaluate the touch points of patient interactions across the organization, are also being implemented to enhance hospitals' understanding of the care experience from the customers' perspective. Involving patients in their own care experience helps to bridge the gap between patient expectations and provider services.

Make the Organization Accessible to Customers

The synergy created by improved patient-provider communication, information transparency, and patient engagement leads to a hospital that is more accessible to consumers. An accessible hospital has transformed the service experience from the traditional institutional atmosphere (i.e., impersonal and inflexible) to a consumer-centered model that accommodates the needs and wants of individual

patients. An accessible organization has two key competencies: timeliness of service and responsiveness to consumers.

Timeliness is a valuable indicator of the efficiency of organizational processes. Not only should patients be seen in a timely manner, but providers should also maximize the time that clinicians spend with patients. According to a recent study (Prophet, n.d.), 51% of providers felt that they take the time to understand consumer needs and explain options, but only 34% of consumers agreed. Spending more time with patients not only increases consumer satisfaction but can also improve clinical care. Hospital stays shift from a focus on acute medical conditions to discussions of preventive measures and improvement of long-term holistic health.

Responsiveness is how quickly and effectively an organization can react to patients' needs. According to the World Health Organization, responsiveness is "the manner and environment in which people are treated when they seek health care" (Bleich, Ozaltin, & Murray, 2009, p. 271). Responsiveness is tied to accessibility, as patients expect to make outpatient appointments easily, contact staff members promptly, be attended to during their inpatient stay, and be contacted for follow-up. Customer service training, especially for nursing staff, can improve responsiveness. Low patient-to-nurse ratios and hourly rounding have been linked with higher job satisfaction and are associated with higher patient ratings and recommendations of the hospital (Long, 2012). Technological innovations that create accessible patient portals in the electronic health record, offer opportunities for immediate feedback to staff, and create the ability to make an appointment through the Internet have been

shown to promote patient convenience and accessibility (Radick, 2016).

Create an Empathetic Hospital Environment

Provision of timely and responsive care creates an empathetic hospital environment that is patient-centered and focused on quality of care and service experience. A hospital's environment is a combination of the physical and psychosocial settings the organization creates through clinical and process measures. Although consumers place highest value on human interaction and quality care outcomes, the physical facility does play an important role in customers' impressions. Hospitals can enhance the patient experience with facilities that are clean, have established zones of privacy, use modern technology, and are accessible. Patients see added value when they have amenities such as convenient parking, available Wi-Fi, televisions, comfortable waiting areas and examination rooms, quality dining options, and esthetic appeal such as windows and a warm, nonsterile interior design.

The psychosocial setting is the interpersonal, emotional, and social environment established by the hospital for its clinical care and organizational processes. Care coordination initiatives are a good opportunity for hospitals to demonstrate efficiency and eliminate waste. When patients experience a well-coordinated journey through the hospital and see staff members working in teams across departments, they feel that the hospital is focused on caring for them. As Radick (2016) pointed out, integrated and coordinated staff activities foster a positive patient experience. The emotional support derived from the hospital staff and environment allows patients to not only

receive medical treatment but healing processes as well. One executive noted that when patients compliment his organization, they make comments such as, "I felt safe, I felt cared for," rather than "my wound was cleaned, I got my drugs on time" (Lavoie-Tremblay et al., 2016). Although focusing on clinical aspects of care, providers also need to remember that patients emphasize the quality and safety of service, with a focus on interpersonal elements of care as well (Lavoie-Tremblay et al., 2016). Positive interactions with staff, quality treatment outcomes, and responsiveness of the hospital reinforce a patient-centered care model that prioritizes patient preferences, comfort, outcomes, and overall value.

Prioritize Quality Outcomes to Maximize Value

The framework components are designed to enhance patient experience and improve quality, because the quality of health outcomes is the main purpose of medical treatments and clinical processes. Patient experience cannot be fully maximized unless clinical outcomes are effective. Maximizing patient value is the key to ensuring a good patient experience, and that is unachievable with poor-quality care. Long-term quality should be continually measured with assessment tools beyond HCAHPS to evaluate hospital performance and execution of the recommended framework and its impact on patient experience. A HealthLeaders Media report found that 66% of hospitals gather HCAHPS data, whereas more than 50% of hospitals also use vendor surveys, dashboards, quality outcomes, and anecdotal evidence to measure their performance (Shaw, 2010). In addition to HCAHPS, proactive hospitals construct measures to

evaluate holistic patient experience beyond patient satisfaction scores; thus, patient experience is a long-term, sustainable hospital initiative.

CONCLUSION

Hospitals must work to close the gap between service experience and consumer expectations. The hospitals that best align their service delivery models with consumer expectations will enjoy the most success by receiving increased referrals, achieving improved employee retention, and establishing customer loyalty. Healthcare providers have a duty to serve patients not only with respect to quality medical outcomes but also in terms of outstanding customer service throughout the care process.

To improve the patient experience, providers can use the framework components presented earlier to create a culture that establishes customer experience as the ultimate goal of the hospital. The synergy created by patient–provider communication, information transparency, and patient engagement creates a hospital that is more accessible to the consumer. The accessible hospital fosters an empathetic environment that leads to improved quality outcomes, enhanced consumer value, and an optimal patient experience.

It is the duty of administrators to shape the culture, establish a vision, direct resources, and enable the staff throughout the hospital to deliver a positive patient experience. When hospitals focus their efforts on the patient experience, the organization attracts high-quality personnel, contributes to a purpose larger than itself, and delivers on the ultimate call of service: satisfying the needs and wants of the patient.

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