



ASQ Health Care Quality & Patient Experience Survey Summary Report

As health care continues to become increasingly competitive, it also is experiencing greater consumerism. Globally, patients have increased their attention to how they're treated. By incorporating patient experience as a key strategic element, health care organizations will be better positioned to meet these quickly growing patient expectations.

ASQ recently polled more than 260 of its members in the health care quality profession regarding potential quality solutions and practices that could help health care organizations and improve patient experience while reducing cost and improving profitability.

The results of the ASQ survey have been shared with media to continue raising awareness of the importance of health care quality initiatives, and we share the following unaltered responses from the survey with you to encourage continued dialog about this topic.

Top Priorities

ASQ asked survey respondents to rank their top priorities for improving patient experience: reducing costs. A significant percentage of respondents identified the following, in order, as their highest priorities:

- Improved communications between patients and caregivers (83%)
- Strong leaders who prioritize a patient-centered philosophy among all staff and promote an organized system where patients know what to expect and when (81%)
- Experienced, socially skilled and engaged staff (including administration, physicians, and support staff) (77%)
- Viewing improvement in quality of patient experience and service delivery as being of equal priority to financial and clinical performance measures (71%)
- Staff work-flow that allows for frequent face-to-face engagement with patients (61%)
- Ease of access to treatment across the entire continuum of care — via accountable care orgs, etc. (56%)

- Interactive technology that enables patients to become more involved in their own level of care. (e.g. smartphones, text messaging, social networking, web portals and email) (36%)
- Non-traditional care delivery and amenities: concierge care, on-demand services, healing gardens, aesthetic services, etc. (21%)

Impact on Reducing Cost & Improving Profitability

Survey participants also ranked which of these same patient experience factors will have the greatest impact on reducing the overall cost to the organization and/or improving the profitability of providing health care:

- Strong leaders who prioritize a patient-centered philosophy among all staff and promote an organized system where patients know what to expect and when (67%)
- Improved communications between patients and caregivers (61%)
- Viewing improvement in quality of patient experience and service delivery as being of equal priority to financial and clinical performance measures (60%)
- Ease of access to treatment across the entire continuum of care — via accountable care orgs, etc. (52%)
- Experienced, socially skilled and engaged staff (including administration, physicians, and support staff) (51%)
- Interactive technology that enables patients to become more involved in their own level of care. (e.g. smartphones, text messaging, social networking, web portals and email) (41%)
- Non-traditional care delivery and amenities: concierge care, on-demand services, healing gardens, aesthetic services, etc. (18%)

Hurdles to Achieving Patient Satisfaction

Many of the factors that improve patient experience have hurdles that make implementation prohibitive. Survey respondents said the following hurdles are “very difficult” to overcome by health care organizations as they work to improve patient experience:

- Payment and regulatory systems that are documentation-heavy, taking care team away from the patient (47%)
- Fragmented, uncoordinated patient care (e.g., multiple hand-offs, communication barriers, lack of nationally integrated health care information system) (46%)
- Governance and senior leadership that does not set the example for or support staff engagement (45%)

- Current reimbursement models which drive increased patient volumes and result in insufficient time spent with patients (42%)
- An organizational culture that does not allow staff to be engaged or to be problem-solvers who are empowered to take action to improve the customer experience (43%)
- Struggles with establishing and sustaining quality and safety initiatives (25%)
- Insufficient quality training offered by healthcare providers (29%)

“Health care is a complex, interconnected system of processes that have been built and layered with additional requirements over time,” said Susan Peiffer, chair-elect of ASQ’s Healthcare Division and performance improvement specialist at Hospital Sisters Health System (HSHS) Western Wisconsin Division. “Add complicated patient issues to the mix and one can understand the ongoing quality and service challenges.”

Setting a New Course for Improving Patient Experience

Experts surveyed ranked the following methods as having the greatest potential in helping health care organizations to improve patient experience:

- Employee engagement programs that demonstrate that staff input is valued (60%)
- Leadership development that focuses on seeing operations from the frontlines (60%)
- Lean management systems at all levels of the organization such as strategy deployment and cross-functional and daily management (52%)
- Creating 'voice of the patient' advisory councils to ensure the organization doesn't lose sight of patient interests (46%)
- Using measurement tools such as patient satisfaction surveys. (41%)
- Implement mandatory process improvement education and training structure to sustain the mission (ISO, Lean, Six Sigma) (40%)
- Require all healthcare organizations apply the Health Care Criteria for Performance Excellence using the Baldrige Excellence Framework. (26%)

Respondents were also encouraged to provide creative ideas for improving patient experience, which fell largely into the following categories:

Process Improvement Tool Considerations

- A focus on root cause identification and validation tools will enable teams to be more successful.
- Process flowcharts and the identification of the needed instructions and job aids are an important prevention cost in process design. The process should be

proactively designed in a way that meets regulatory, accreditation, and customer requirements when people are trained and competent in the process.

- Use Shewhart -like control charts to help patients track their progress over time on various measures (affecting patient well-being, e.g. weight, glucose, blood pressure, etc).
- Expose clinical staff to the concept of the 8 Wastes helps them to identify and label pain points within their own daily work. Educate staff in the models and application of improvement tools (SIPOC, Pareto chart, Fishbone, etc.) further helps them think of these problems in a way that is solvable, and not overwhelming.

Patient Input

- Implement a “voice of the patient” advisory council to consider patient interests. 100% of patients need to be surveyed. Currently, only a very small percent are asked for feedback. Hospitals should create real time online blogs so patients can interact and see things that affect their care.
- Create focus groups for gathering Voice of the Customer information on ways to improve the process.
- Educate patients how to better evaluate healthcare settings

Training & Performance Excellence Criteria

- Teach the basics and allow some leeway for staff to trial and learn from the tools. A large portion of staff can do hands-on learning. By allowing them to practice with the tools, a stronger foundation is established.
- Require all health care organizations to apply some performance excellence criteria such as the Baldrige excellence framework or the Shingo model.
- Increase sharing of best practices among staff and with other health care organizations.

Technology-Driven Improvements

- Implement a universal health information system that crosses every continuum and sorts and sends data and necessary information to all those who need it, including real-time to visual management boards (a simple display of information) for continuous improvement and project status updates.
- Use wireless and Bluetooth technology for access to patient portals.
- Centralize technology to reduce duplicative and costly CAT, MRI and next generation technology from being present at each facility and outpatient setting.