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Institute *for* Healthcare Improvement

Middle East Forum on Quality & Safety in Healthcare **2023**

16–19 March, Doha
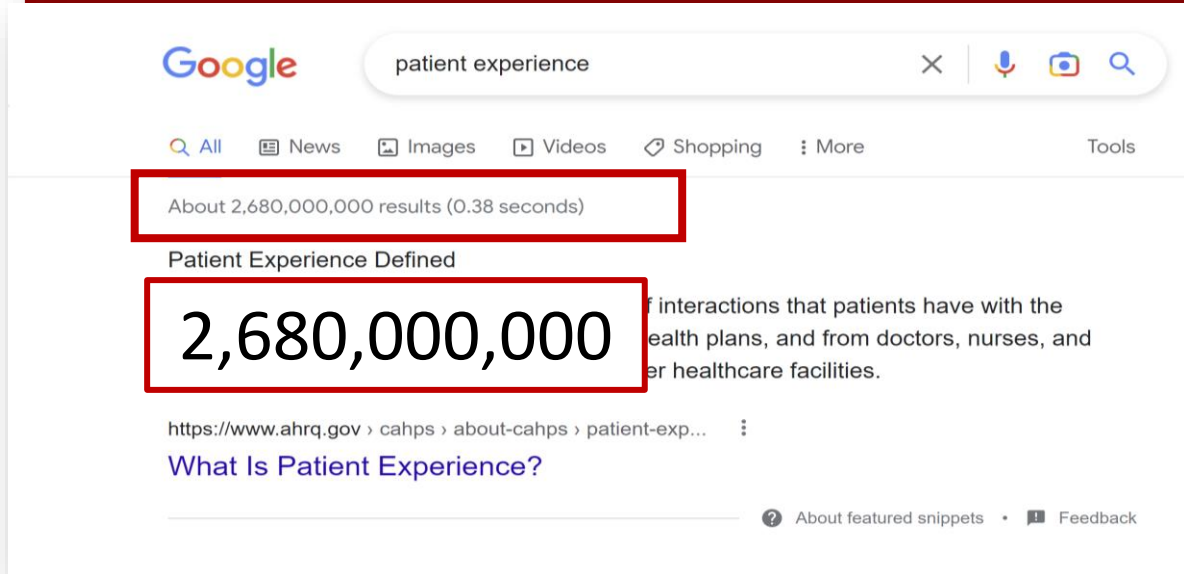
Healthcare Resilience in Extraordinary Times

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Hamad Healthcare Quality Institute

Can we get rid of Patient Experience ?

What is
Patient Experience?

Excellent healthcare

Poor healthcare

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Healthcare
Improvement

To understand what
Patient experience is.......

Remember..
Experience is everywhere..!

Let's imagine Healthcare as a Theme park….!

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Which amusement park would you choose ?

Safety…!

Quality…
Long ques…!

EXPERIENCE…!

WINTER WONDERLAND Experience

THANK YOU

CULTURE ?

VISION
2030
المملكة العربية السعودية
KINGDOM OF SAUDI ARABIA

"**Our ambition is to build a more prosperous country in which every citizen can find what he wishes...**"

His Royal Highness Prince Mohammed bin Salman bin Abdulaziz

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Learning Objectives

At the end of this session, participants will be able to:

Define patient experience.

Describe how to integrate patient experience in organization strategy.

Define culture and understand its impact on patient experience.

Implement Patient Experience through culture model.

Conflict of Interest

The speaker(s) or presenter(s) in this session has/have no conflict of interest or disclosure in relation to this presentation.

Patient Experience (PX)

"The sum of **all interactions** shaped by the organization's **culture** that influence the **patient perceptions** across the continuum of care".

Beryl Institute

PX represents a valid indicator and measure of **patient-centered care,** one of the healthcare quality domains.

- Cross-domain analyses reported by Press Ganey in the 2017 Strategic Insights Report demonstrate interdependent relationships among the **PX, safety, quality of care, workforce engagement, and financial outcomes.**

- Improvement in any one of these domains can positively influence others and support progress during the improvement project, while a defect or deficiency in any one of the areas can compromise the others.

PATIENT EXPERIENCE

TRANSITION OF CARE

QUALITY CARE

SAFETY

Healthy Teams

Patient Experience

An Organization's Culture...

What is it?

Shared philosophies, ideologies, values, assumptions, beliefs, attitudes, and norms that knit organizational members together

Culture is what you see, feel, and hear in your organization.

Culture

Influencing Behaviors at the Sharp End

Design of
Policy & Protocol

Design of
Culture

Design of
Work Processes

Design of
Structure

Design of
Technology & Environment
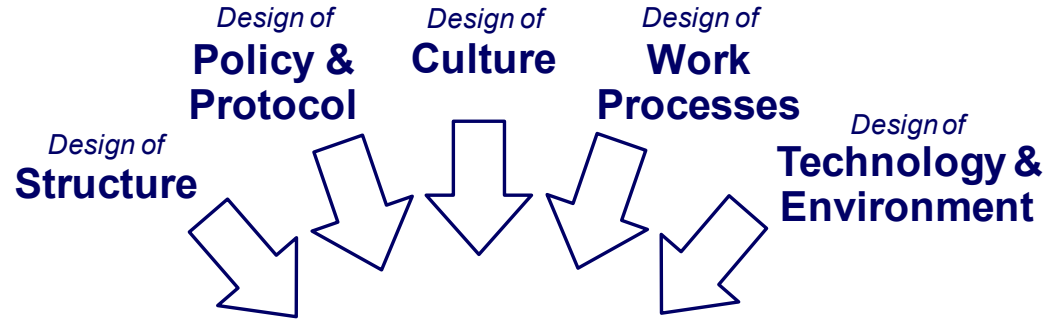
Behaviors
of Individuals & Groups

"You have to manage a system. The system doesn't manage itself."

W. Edwards Deming

"A bad system will DEFEAT a good person every time."

W. Edwards Deming
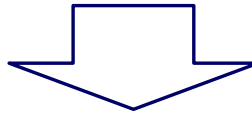
Outcomes

Adapted from R. Cook and D. Woods, *Operating at the Sharp End: The Complexity of Human Error* (1994)

The focus areas that are related to organizational culture :

Engaging leadership in patient experience.

Leveraging accountability.

Culture of Patient-centered care.

Building partnerships with physician leaders.

Implementing consistency as a core value.

ADVANCING THE INDUSTRY TOWARD TRANSFORMATIONAL SOLUTIONS

Sustained Cross-Domain Improvement

Domain-Level Improvement

Enterprise Transformation

Incremental Improvement

Strategic Solutions

Improvement Initiatives

CAHPS	Employee Engagement	NDNQI®	Safety Consulting
CBS	RN Engagement	Nursing Excellence	SMS
Point of Care	Physician Engagement	RN Engagement	PSO
Transparency	Safety Culture	CCC Training	Process Improvement

| Patient Experience | Workforce & Engagement | Clinical Excellence | Safety |

Measurement
Reporting/Analytics
Advisory

Safety

Patient Experience

Clinical Excellence

Workforce & Engagement

CARE CONTINUUM

PG Integrated Digital Platform

PRESS GANEY®

Transformation in Patient Experience is a Journey……

Alignment
01

Correlations
02

Behaviors
03

Culture
04
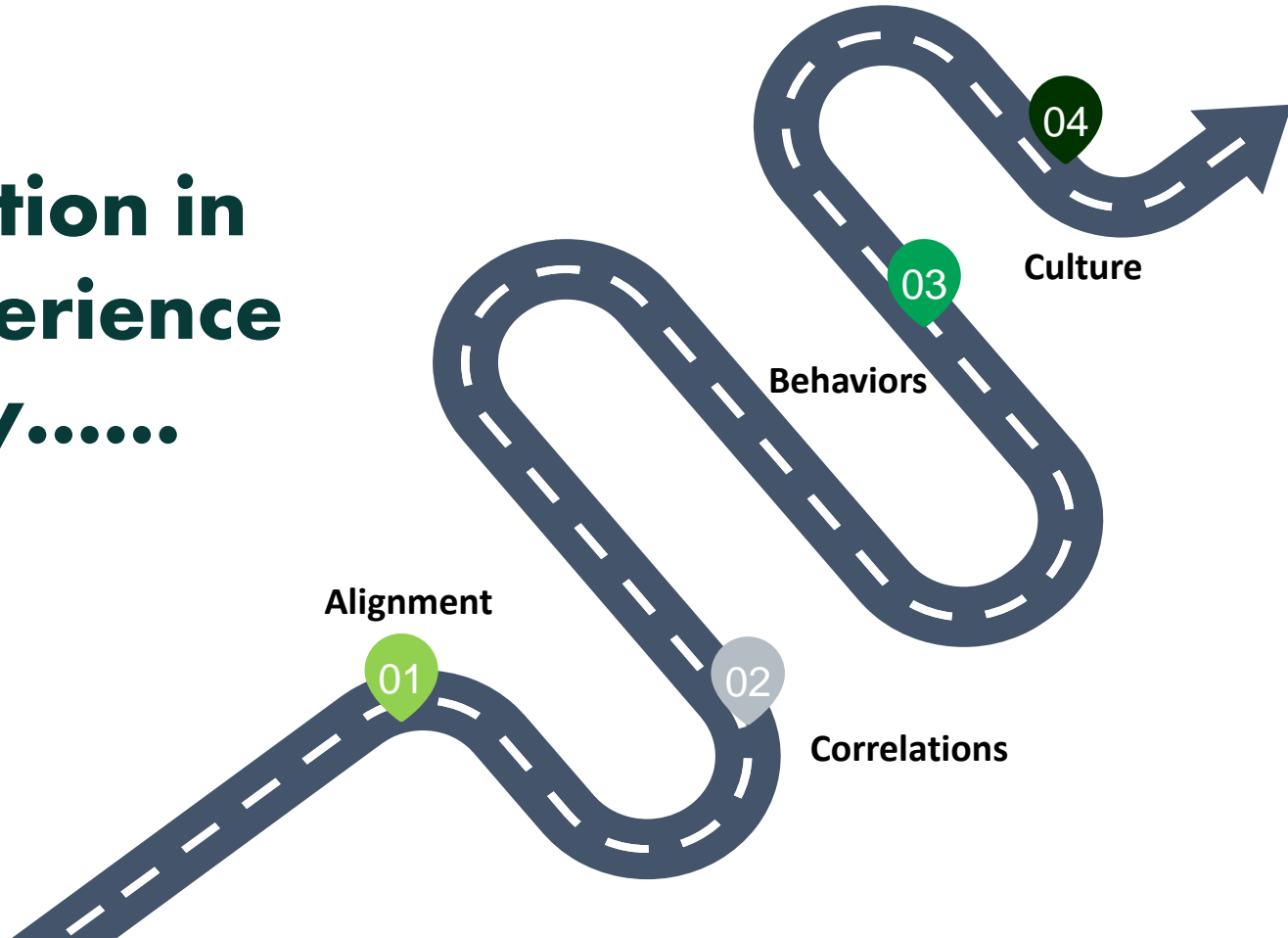
How Does MODHS Define Patient Experience?

Patient First
We believe in patients' safety and services as our utmost priority in everything we do

Alignment with Strategy

Human Centric
We believe that humans are the center of our care and the focus of our attention in our perpetual journey in promoting healthy lifestyle

SAFETY

PATIENT EXPERIENCE

QUALITY

PATIENT CENTRED CARE

Patient Experience Narrative in MODHS

Patients Come First

in

Every *Decision* We

Make

and

Every *Action* We Take

MODHS Values

Patient First   Human Centric   Creativity   Team Work   Professionalism   Continuous Learning

and Patient Experience alignment with
MODHS Strategy

| Culture of Safety | Patient Experience | معاً | Collaborative Improvements | Code of Conduct | Ethical Framework |

| Employee Engagement | | إبداع Innovation Program | | Teams and Committees |

| Monitoring | | Initiatives | | Policies |

Quality Improvement Project
Improving Patient Experience by Implementing an Organizational Culture Model

Introduction:

- Considering the effects of the PX in healthcare, the King Abdul-Aziz Armed Forces Hospital in Dhahran, Saudi Arabia (KAAB-AFH) seeks continuous improvement by **measuring the patient experience of care using the HCAHPS survey**.

Introduction:

This project **aims to improve the average PX scores in inpatient, outpatient, and emergency department settings** in KAAB-AFH by **4%**, starting from **July 2019 through the end of September 2021.**

Driver Diagram

Aim

Primary Drivers

Secondary Drivers

Improve Patient Experience (PX)

Culture

HCAHPS PX Priorities

Patient and Family Advisory Council

Empathy Training

Recognition for Patient Experience

Leadership Patiens' Interviews

Patient Experience Champions

Inpatient PX Priorities

Outpatient PX Priorities

Emergency PX Priorities
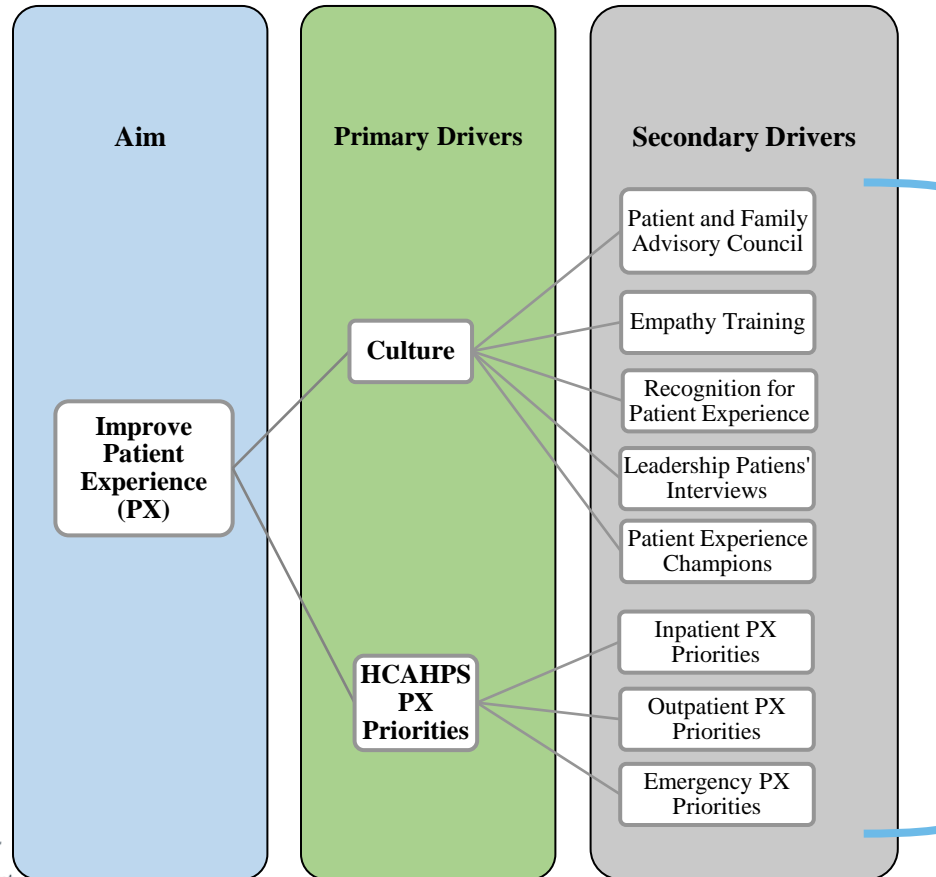
Interventions

PX Culture Model

Patient and Family Advisory Council
Recognition for Patient Experience
Quality Improvement
Empathy Training
Patient Experience Champions
Leadership Patient Interviews
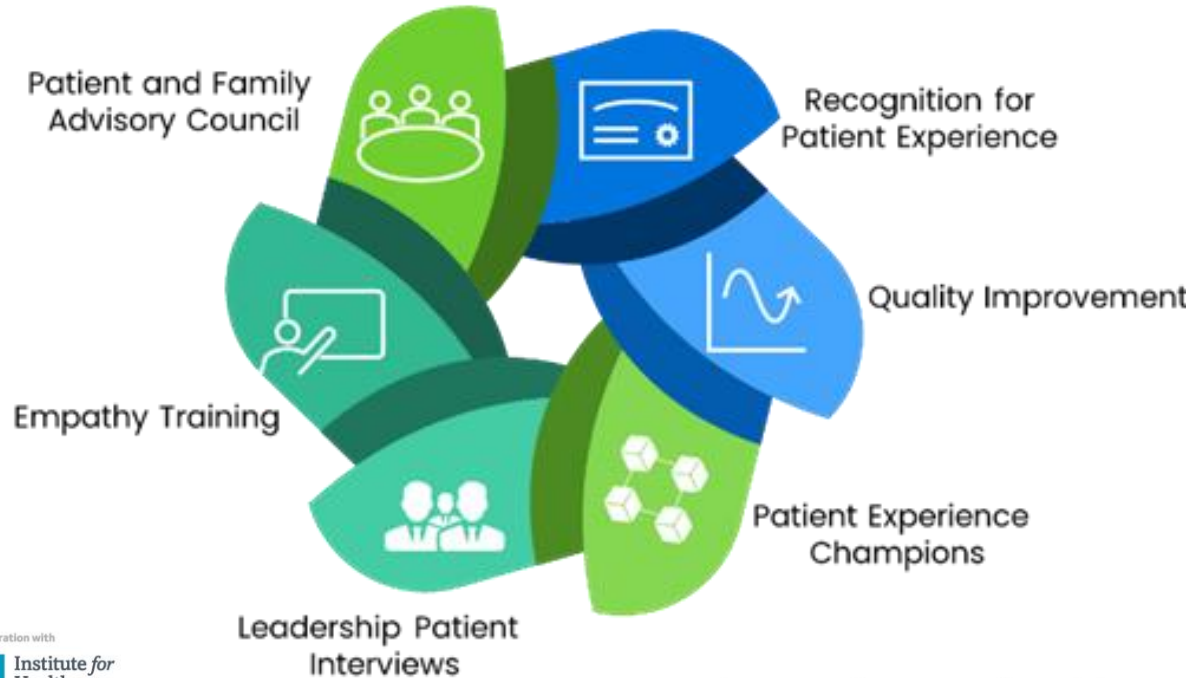
The improvements were monitored over time by the outcome and process measures

Outcome Measures (KPIs)	Process Measures (KPIs)
	Compliance with PFAC. (Numerator "number of annual PFAC meetings" / Denominator "8 meetings per year" X 100)
Inpatient Experience	Percentage of staff who had empathy training (Numerator "number of trained registration and nursing staff" / Denominator "total number of registration and nursing staff" X 100)
Outpatient Experience	Percentage of staff recognition for patient experience (Numerator "number of recognized staff for patient experience" / Denominator "total number of staff who were mentioned in patient's positive comment" X 100)
E.R. Patient Experience	Percentage of leadership-patient interviews (Numerator "number of rounds that included patient interviews by leaders" / Denominator "total number of conducted rounds" X 100)
	Percentage of appointed Patient Experience Champions (Numerator "number of appointed Patient Experience Champions" / Denominator "total number of planned Patient Experience Champions" X 100)

A. PFAC:

- Developing the structure and responsibility of a multidisciplinary team to initiate the PFAC.

- The plan included the personal characteristics of Patient Advisors, a detailed selection process including personal interviews, appointing the advisors, orienting them to the hospital, and signing consent and confidentiality forms. Then, the council started to discuss patient experiences with two Patient Advisors.

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B. Empathy training:

A four-hour workshop for training registration and clinical staff was implemented, including service excellence training.

Acknowledge .. أبتسم
Introduce .. عرّف
Duration .. أنتظر
Explanation .. أشرح
Thank You .. أشكر

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C. Recognition for patient experience:

Staff who received positive comments and were acknowledged by patients were awarded with a certificate of appreciation from the hospital director.

D. Leadership-patient interviews:

as part of the weekly leadership safety walk rounds, the leaders interviewed patients regarding their stay in the hospital, and the patients' comments were documented by the Patient Experience Head for follow up.
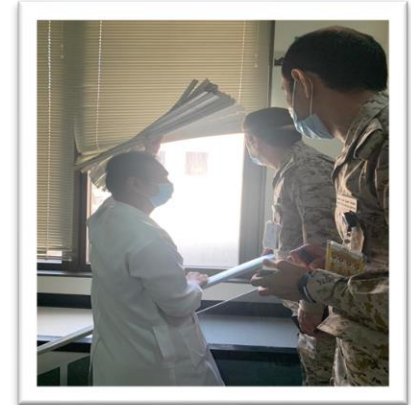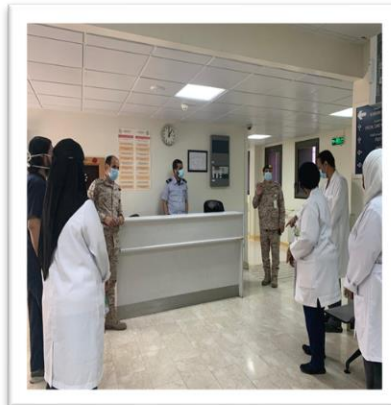
E. Patient Experience Champions:

In every department and nursing unit, a Patient Experience Champion was selected to work part-time to follow up on the implantation of the PX action plans in their area, and to share the knowledge and information about PX with healthcare providers in the same area.
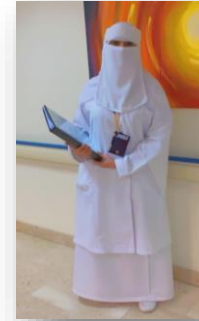

Patient experience champions

PX Officer

Patient experience champions

Study of the interventions:

| Evidence-Based Change Ideas Targeted the Culture		
Intervention	**Compliance**	**How**
Patient and Family Advisory Council	100%	The team is active and meets regularly
Empathy Training	100%	All registration staff and clinical staff
Recognition of Patient Experience	100%	All patient experiences with staff named in positive comments are awarded a certificate of appreciation from the hospital director
Leadership-Patient Interviews	100%	Including patient interviews to the scheduled weekly leadership safety walk rounds
Patient Experience Champions	100%	Assigned in every clinical department
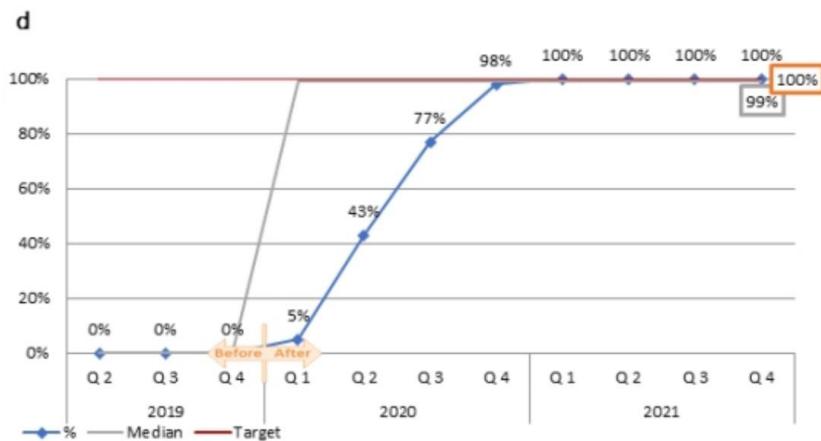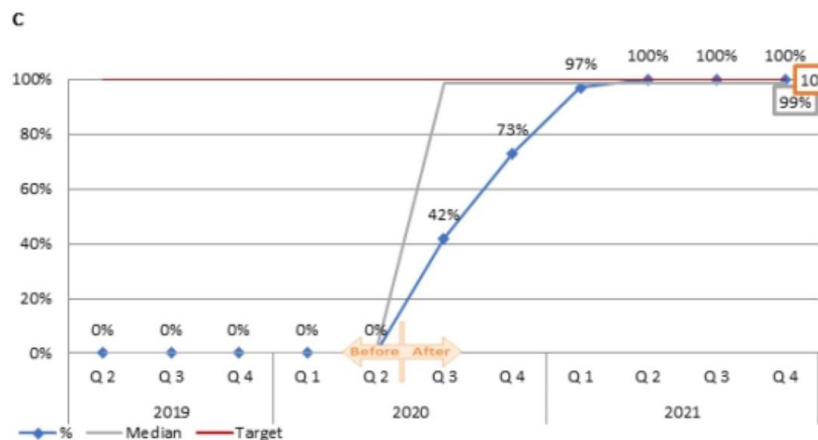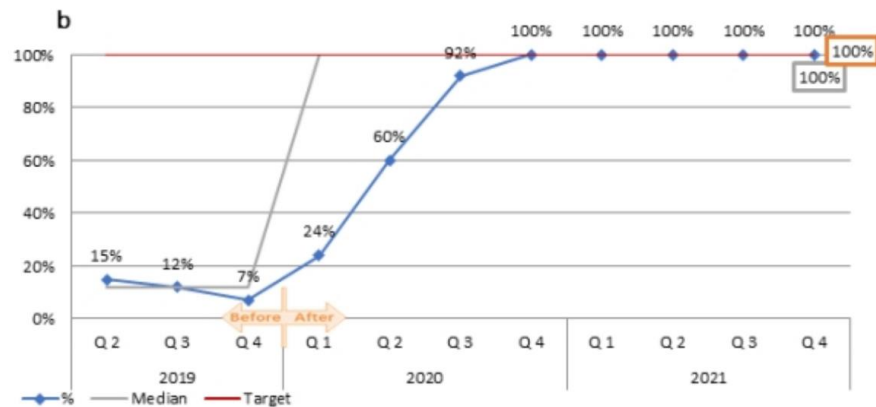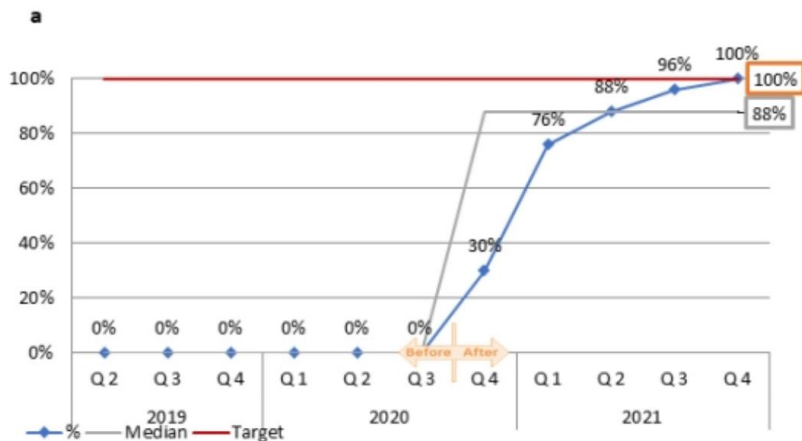
F. Quality improvement:

an IHI framework was implemented to conduct quality improvement projects in inpatient, outpatient, and emergency to develop the PX priorities based on HCAHPS results.

Example of evidence-based change ideas and compliance rates from previous studies have focused on PX priorities.

| Patient Experience	Compliance	Priority Area
Inpatient	60%	- Improving PX in inpatients by focusing on accommodation and comfort for visitors. - Improving PX at discharge.
Outpatient	10%	- Improving PX in outpatients by focusing on the courtesy of registration staff.
Emergency (E.R.)	90%	- Improving PX in E.R. by focusing on waiting time to see the physician.

Patient Experience Quality Improvement Projects: PX at Discharge
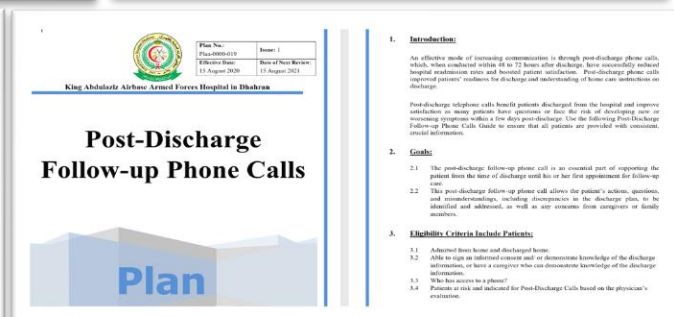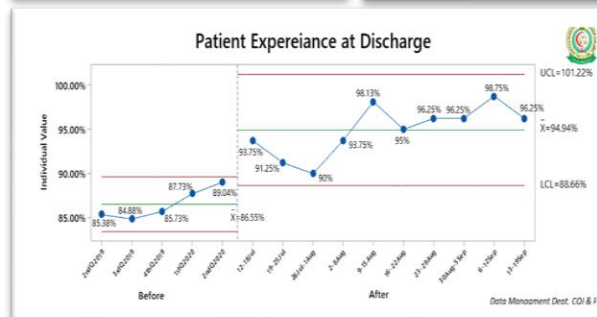
Patient Experience Quality Improvement Projects
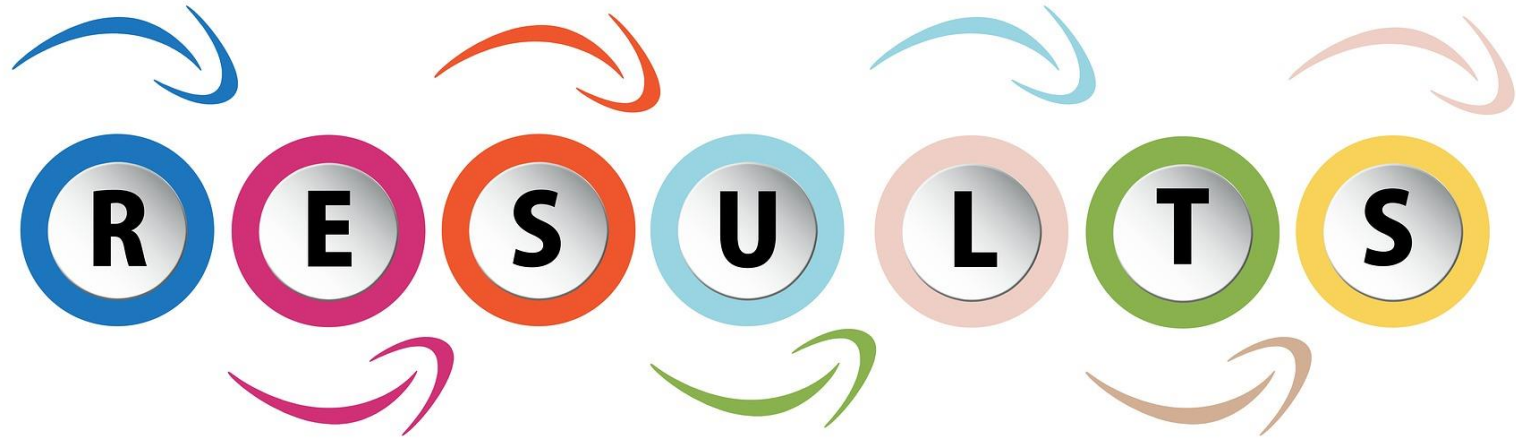
Biennially benchmarks set for the KAAB-AFH (2019-2021)

Department	2019		2021		Outcome
	N	2019 scores (%)	N	2021 scores (%)	
Emergency Department (ED)	1,366	59.75	1,454	65.64	**5.89%**
Inpatient (IP)	827	83.96	711	89.65	**5.69%**
Outpatient (OP)	1,893	66.53	1,602	74.18	**7.65%**

Patient experience before and after improvements

Patient Experience	Average Before Improvement (2019)	Survey Respondents 2019	Average After Improvement (2020-Up to date)	Survey Respondents (2020-Up to date)	Difference Improvement	P-value
Outpatient	65.57	1893	73.38	1348	+ 7.81	0.037
E.R.	59.60	1366	65.45	1063	+ 5.85	0.010
Inpatient	93.34	827	98.05	767	+ 4.71	0.081

KAAB Outpatient Experience

Q2-2019 - Q3-2021
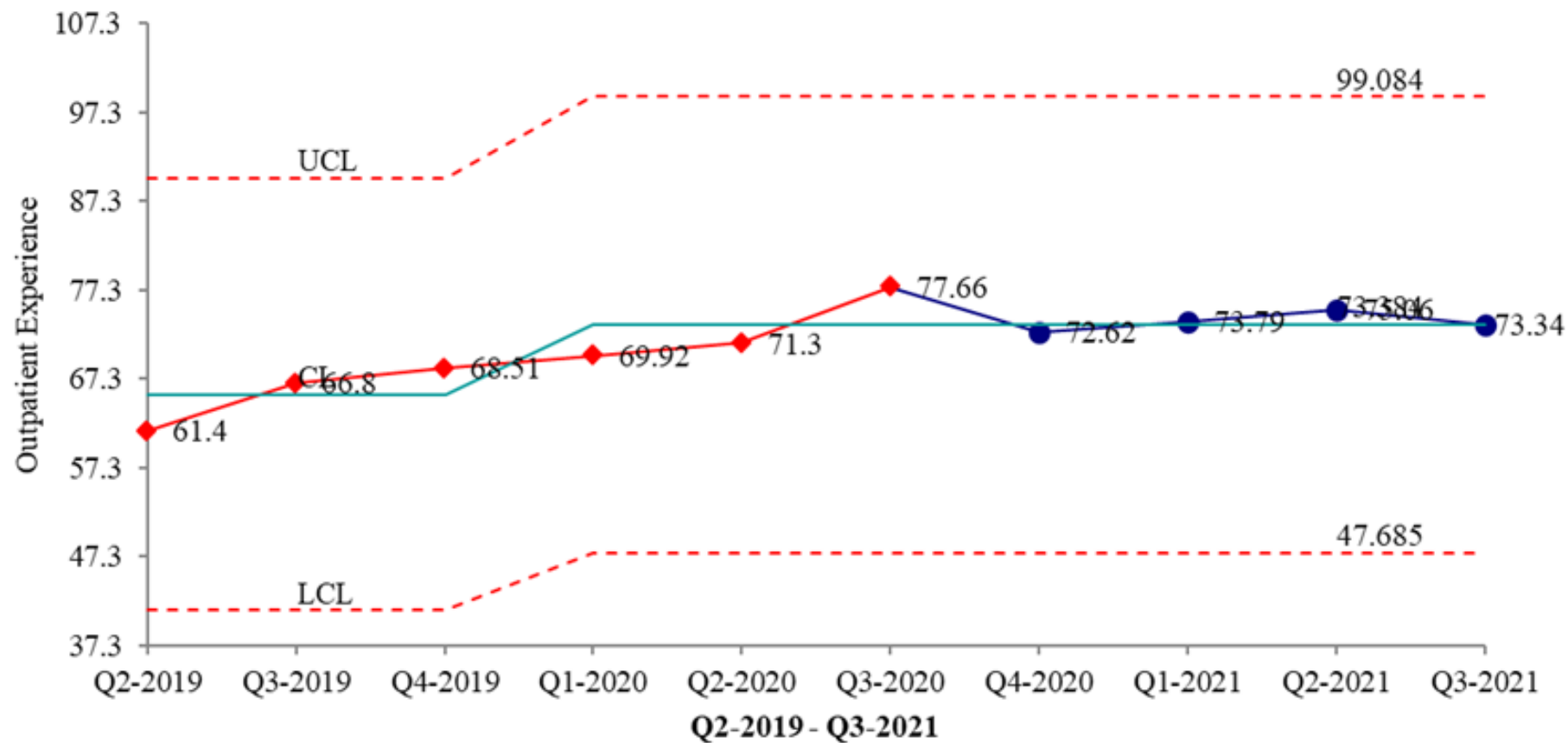
KAAB ER Patient Experience

KAAB Inpatient Experience

UCL 116.879.

115

105

95
CL 89.25 90.62 89.62

85 83.58 84.93 83.99 86.87 88.63 86.82 88.635

75

65
LCL 60.391

55

Inpatient Experience

Q2-2019 Q3-2019 Q4-2019 Q1-2020 Q2-2020 Q3-2020 Q4-2020 Q1-2021 Q2-2021 Q3-2021

Q2-2019 - Q3-2021
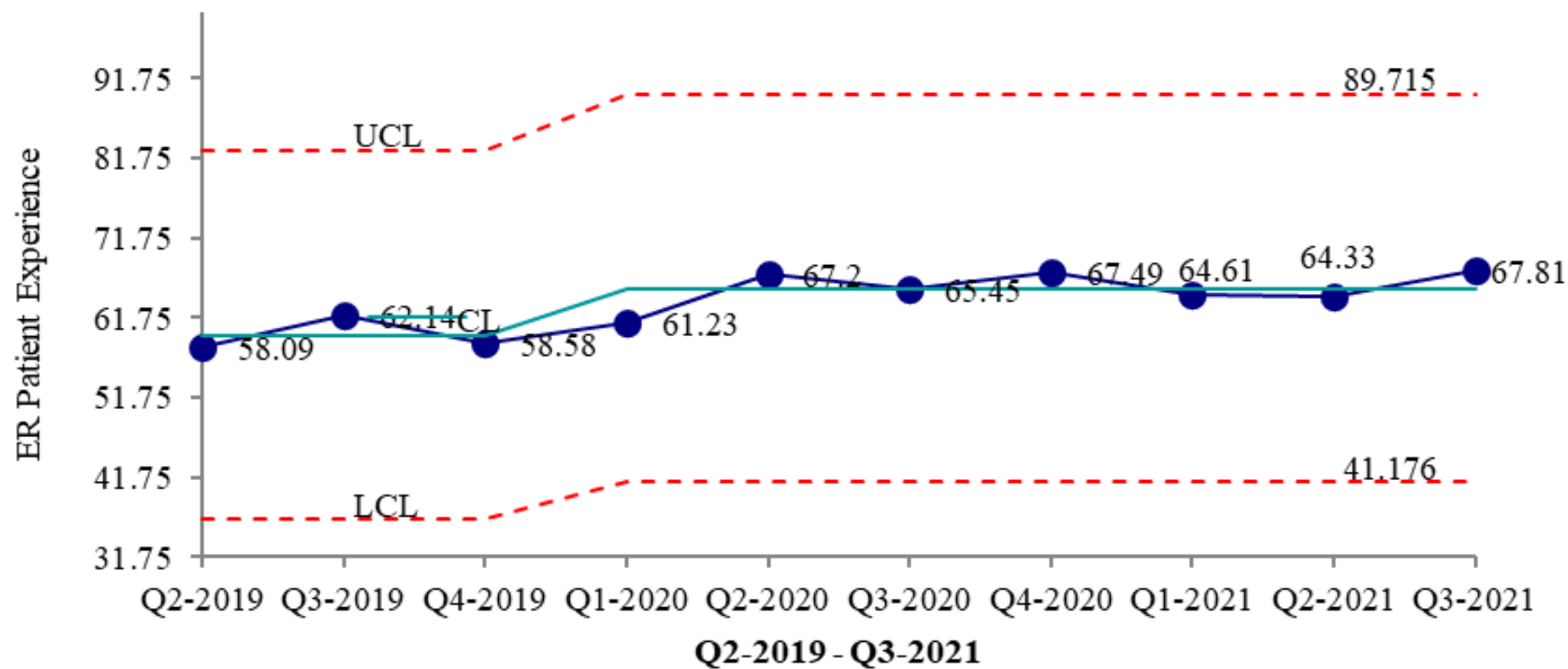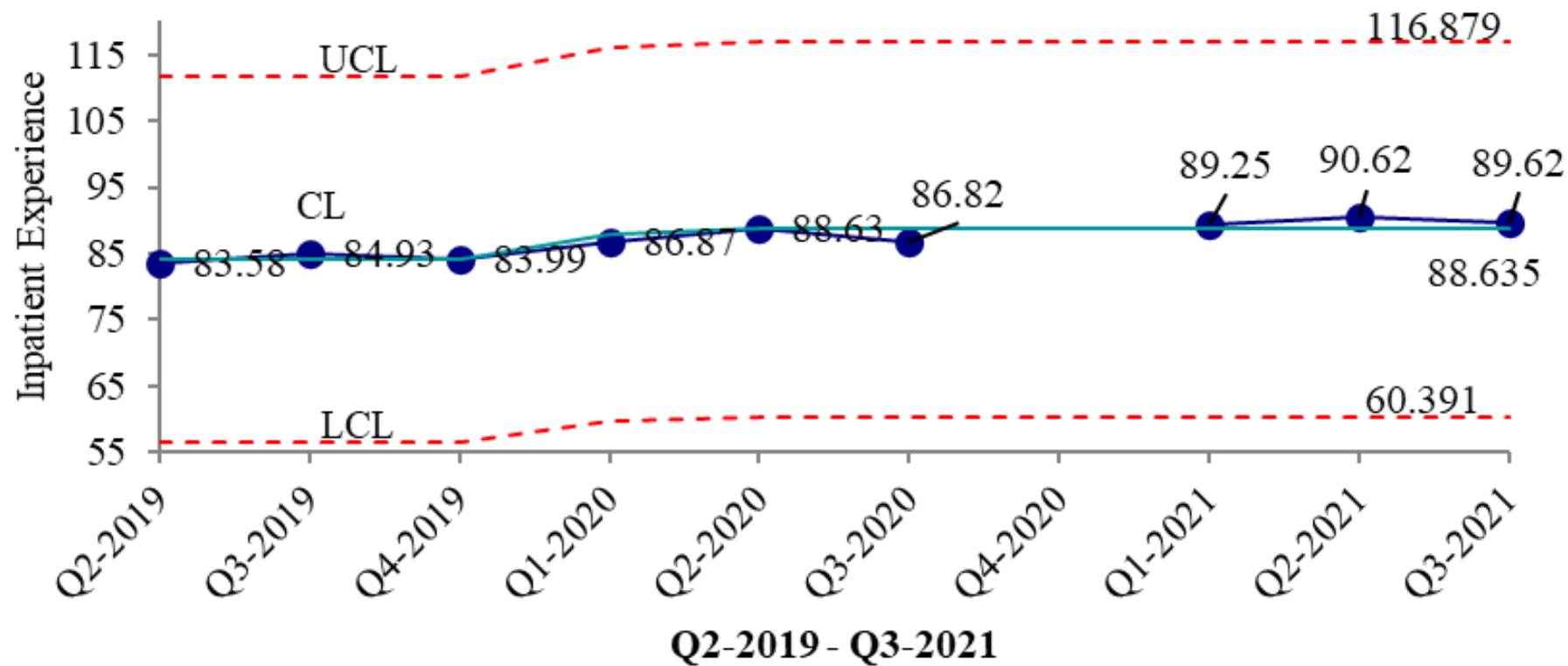
Conclusions:

- Improving the culture at the healthcare organization using a PX culture model was found to **enhance the comfort and care of patients in multiple departments**.

- Although the team faced **challenges in implementing the action plans** due to limitations in resources and budgets, the hospital could achieve the PX targets in all three settings, including inpatient, outpatient, and emergency departments.

- The critical elements for improving the PX and culture included **recognizing staff, creating networks across the system through effective leadership, employee engagement, and engagement of patients and their families.**

Thank You...