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MD Anderson Cancer Center
Making Cancer History®

Patient Experience and Engagement at MD Anderson

Patients First • Zero Harm • High Reliability

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Agenda

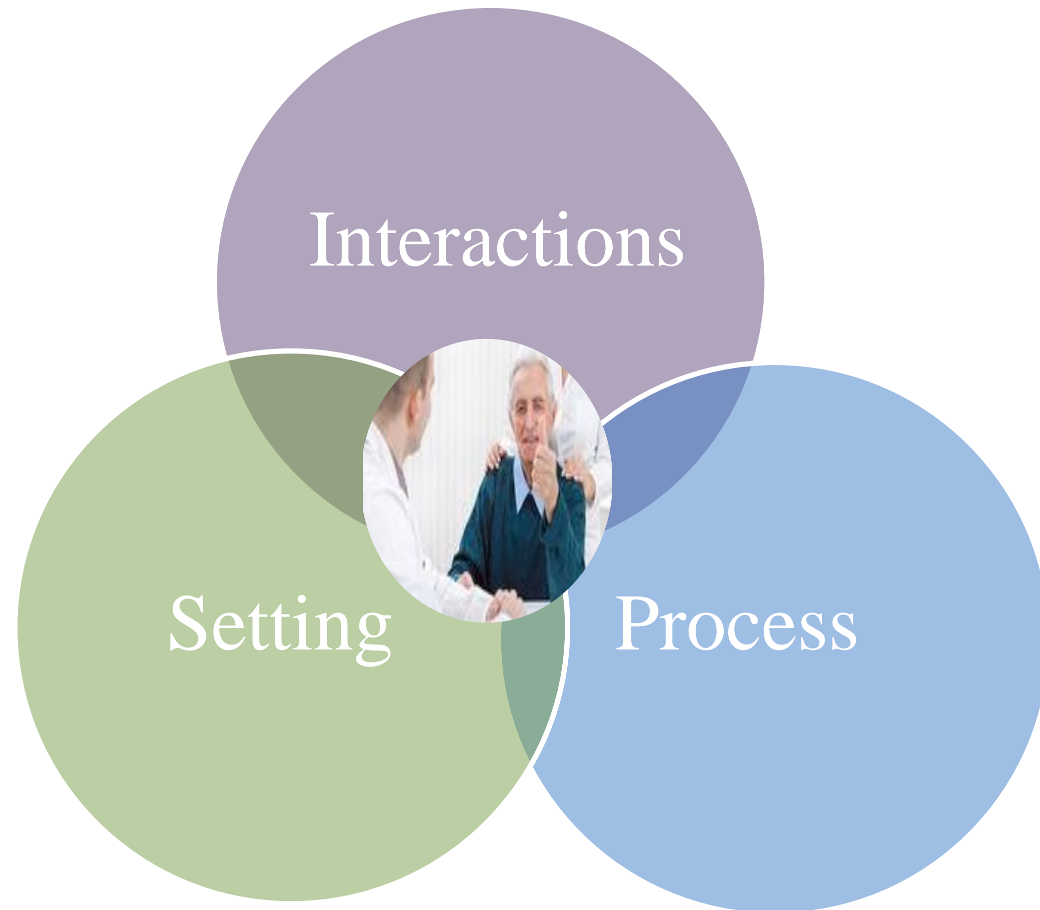
- Patient Experience Overview
- Measuring patient experience
- Patient Engagement overview
- Examples of patient engagement

What is the Patient Experience?

“The sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care”

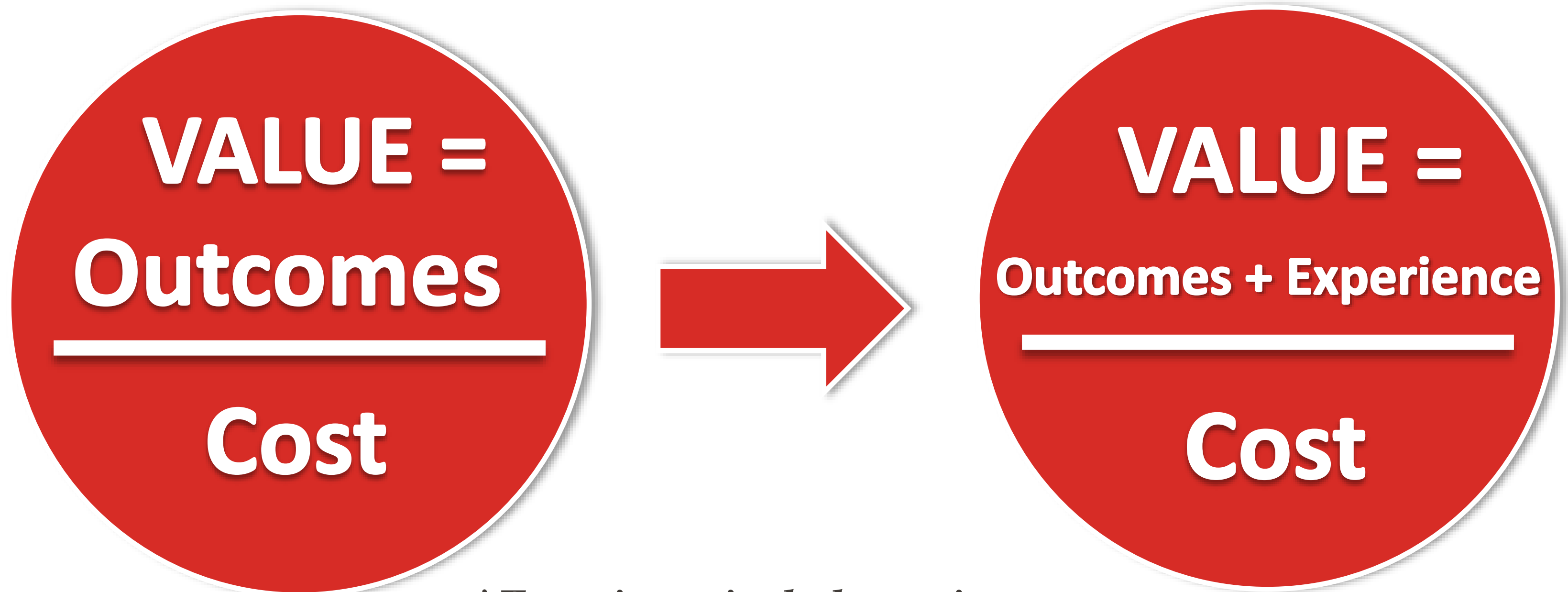
(People, processes, and physical setting)

-The Beryl Institute



Defining Value and Quality

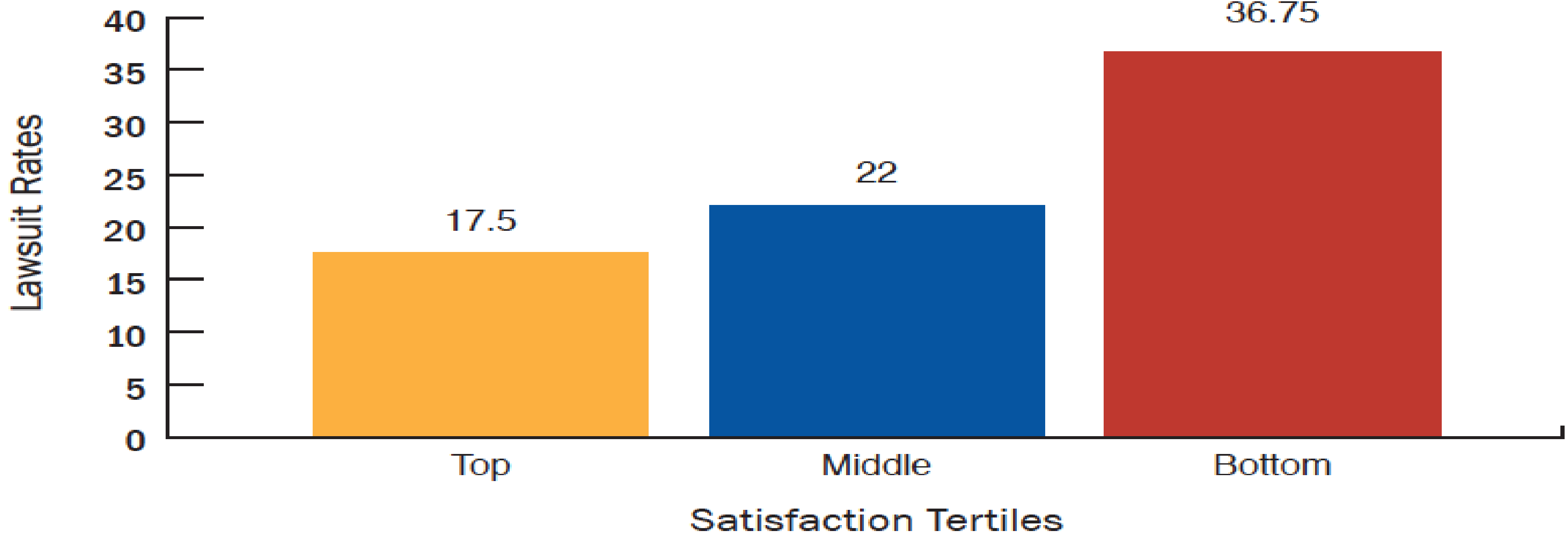
Patient care isn't truly great, unless the patient thinks it is!



**Experience includes patient, caregiver, provider and employee*

MD Anderson Value Equation

Patient Experience Affects Safety



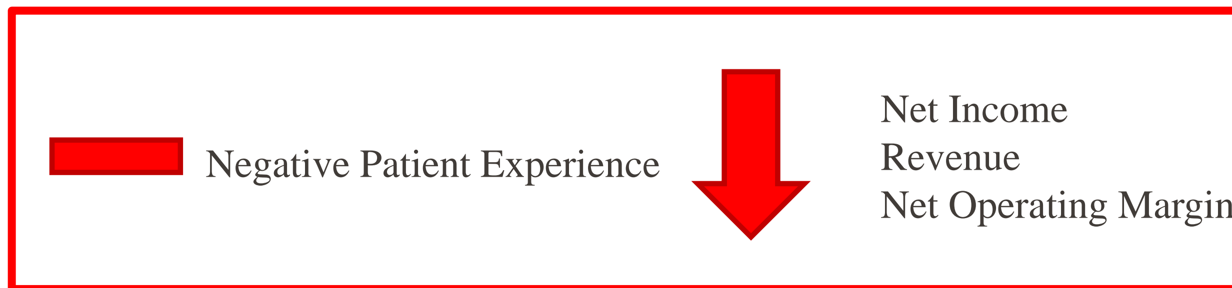
Stelfox, HT, et al American Journal of Medicine 118 (2005): 1126-1133

Patient Experience Improves Quality of Care

- One-point decrease in satisfaction was associated with a 5% increase in the rate of risk management episodes
- Lower provider patient satisfaction scores associated with higher malpractice actions
- Quality of the patient-physician interaction was negatively correlated with complaints

Stelfox, HT, et al American Journal of Medicine 118 (2005): 1126-1133

Patient experience and Hospital Profitability: Is there a Link?



HCAHPS Score

- % Patients definitely recommend hospital
- % Patients definitely not recommend hospital
- % Patients scoring hospital 9-10
- % of Patients scoring hospital 6 or less

Richter J and Muhlestein DB: Health Care Management Review 2016

Unbreakable Links: Safety, Quality, Experience and Employee Engagement

- Evidence shows the link between safety, quality, experience and employee engagement
- These elements all need to be supported by a robust culture
- Understanding these interdependencies is crucial

Press Ganey Special Report, Achieving Excellence: The Convergence of Safety, Quality, Experience and Caregiver Engagement (2017): 1-15

What is Patient-Centered, Value-Drive Care?

Strategy for Cultural Transformation

Faculty and staff engagement

Use organizational structure

Share data internally and externally

Use patient feedback: satisfaction data and comments

Service Excellence education and awareness

Measurement & Data-driven culture change

CAHPS Surveys (Consumer Assessment of Healthcare Providers and Systems)

- Developed by Agency for Healthcare Research and Quality as request of Medicare/Medicaid (CMS)
- Measure of the patient's perception of experience in a health care setting
- Defines quality from patient perspective
- "Culture of Always"

○ Never
○ Sometimes
○ Usually
○ Always

○ Yes
○ No

Measurement: Integrated Survey Approach

CAHPS Questions

- Consumer Assessment of Healthcare Providers and Systems
- Required by CMS, tied to reimbursement
- Quantitative in nature
- **Demonstrate frequency (how often something happened)**

YOUR CARE FROM THIS PROVIDER ON Precode 2 ({PRECODE2})

13. Wait time includes time spent in the waiting room and exam room. During this visit, did you see this provider **within 15 minutes** of your appointment time?
    - ○ Yes
    - ○ No
14. During this visit, did this provider explain things in a way that was easy to understand?
    - ○ Yes, definitely
    - ○ Yes, somewhat
    - ○ No

Press Ganey Questions

- Qualitative in nature
- **Demonstrate quality of experience (how well something was done)**
- Provides comment section for use in improvement efforts
  - Invaluable insight into the patient experience
  - Comments add color to the data and help with engagement in improvement

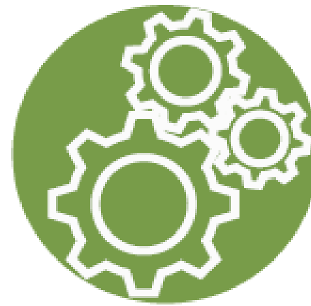
MOVING THROUGH YOUR VISIT	very poor 1	poor 2	fair 3	good 4	very good 5
1. Degree to which you were informed about any delays	○	○	○	○	○
2. Wait time at clinic (from arriving to leaving)	○	○	○	○	○
3. Speed of the registration process	○	○	○	○	○

Comments (describe good or bad experience): ____________________

Cultural Transformation at MD Anderson

The environment we create for ourselves directly affects the experience we provide.

Service Excellence at MD Anderson



Safety **Courtesy** **Accountability** **Efficiency** **Innovation**

Patient Engagement at MD Anderson

Patient and Family Advisory Program (PFAP)

- Established in May, 2014 as a Council, meeting monthly
- Specifically formatted for advisors to give feedback, leaders to listen, then return to follow-up
- Expanded to a Program in January, 2016 from 22 to 80 members and provided formal process improvement education
- Serves as the Patient Voice for institutional committees, projects, programs and departmental initiatives
- OneConnect (EPIC) implementation and optimization, Safety Committee, nursing simulations, Model of Care committee, Caregiver Program enhancement

Patients: Partners for Process Improvement

Hospital Responsiveness Improvement

AIM: Increase Press Ganey Top Box scores (from 74% to 76%) for Hospital Responsiveness in the Surgical Cohort for the questions measuring

“Prompt response to call” (response to toileting and answering call light)

The results will be achieved by May 2017

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Improving Patient Experience

Using: Press Ganey Survey Patient Satisfaction Results for Hospital Responsiveness

Summary Meeting

February 10, 2017

Patient Advisors: Josephine Lees and Christine Zhou
Inpatient Surgical Cohort, P6, P7, P9, P11, G10E
Office of Performance Improvement
Clinical Process Analysis

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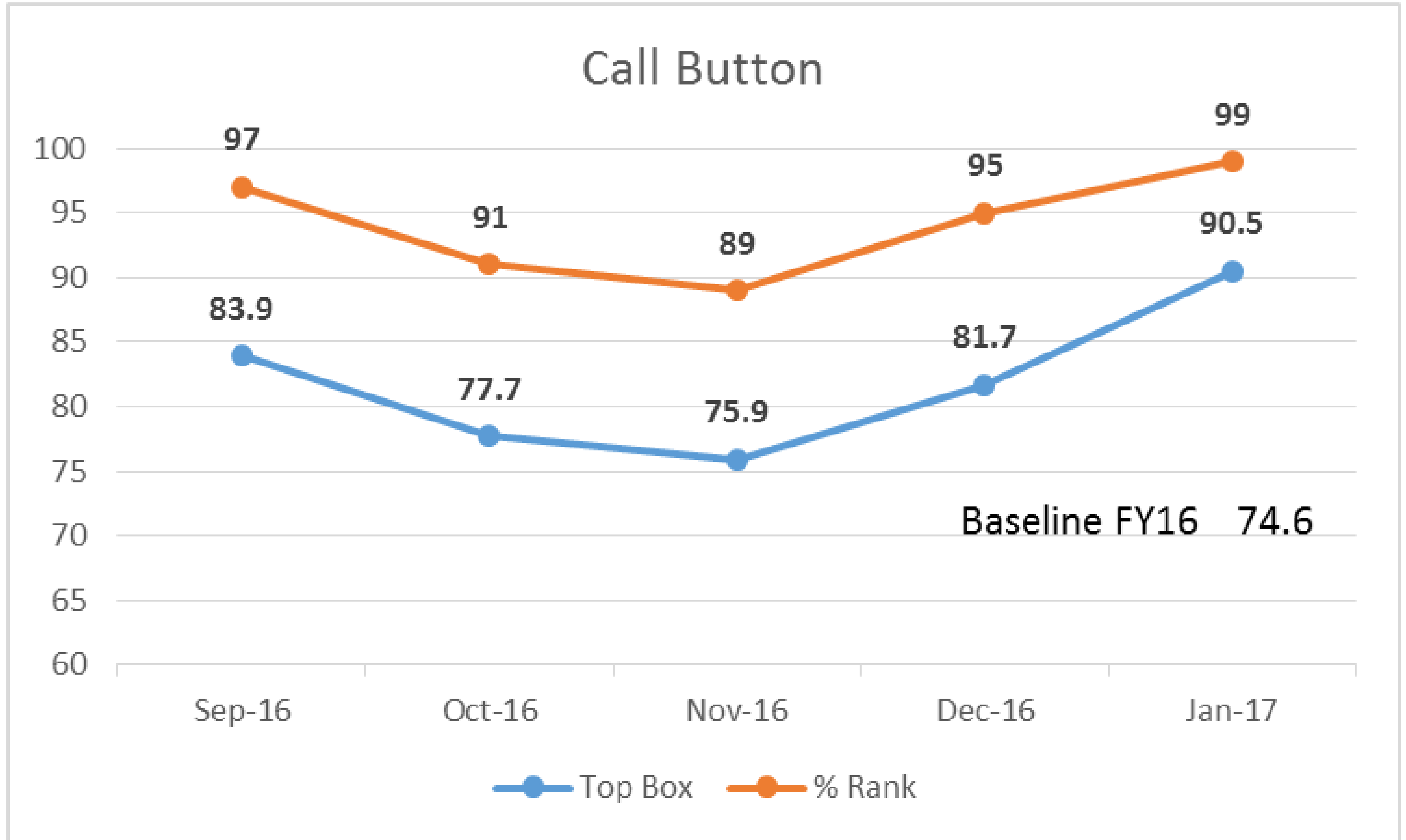
Process Improvement Team

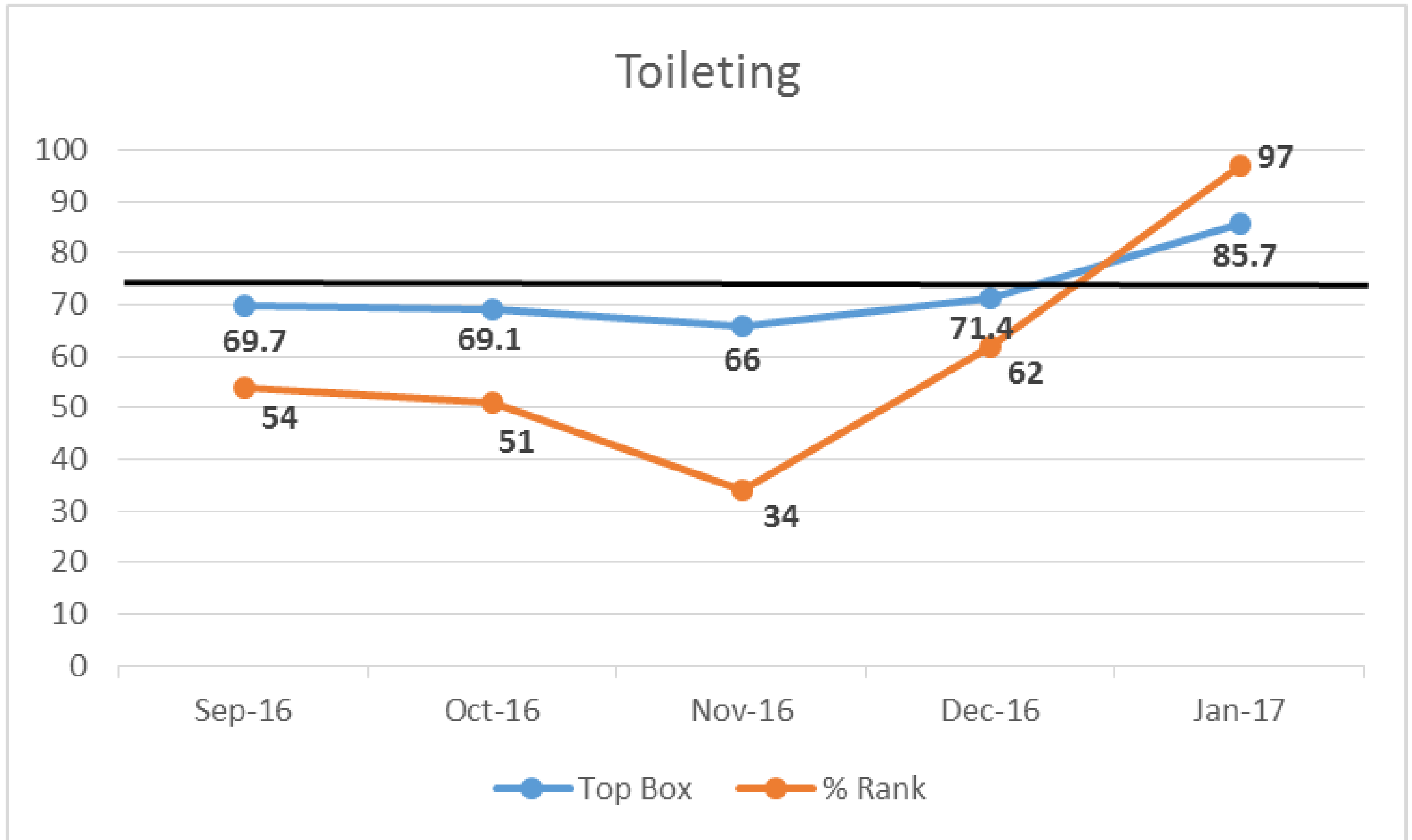
Evidence Based Best Practice:

Include Patient Advisors on the team

Surgical Cohort Survey Results



Surgical Cohort Survey Results



Ah Ha Moment

“Through storytelling, the advisors input led to the discovery of call lights not working due to a failure of the connection.”

-Luisa “Dee” Gallardo MSN, RN, NE-BC
Director of Nursing
Improvement Team Leader

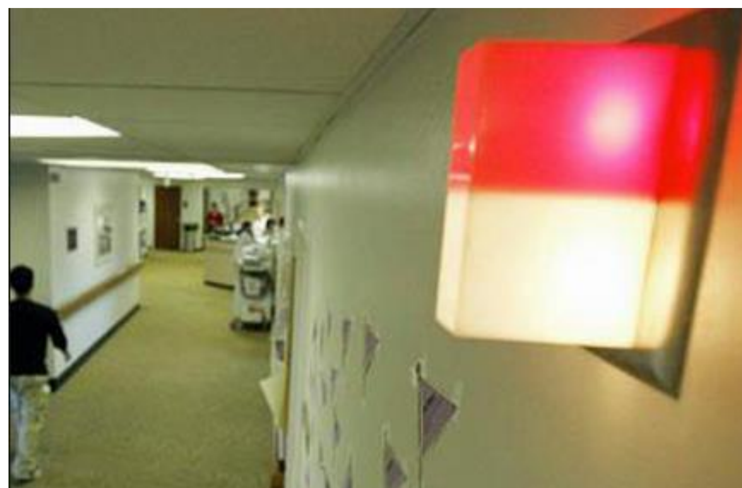
Intervention: Education and Follow-up

REMINDER

Plug and cap must be in place or bedrail nurse call light will not work.

Data = Process + Scores + Patient Feedback

- Measuring how often and how quickly call lights were answered showed we did very well
- HCAHPS scores showed the patients thought we weren't doing well at answering call lights
- Getting to the level of speaking directly to patients about their experience gave us a meaningful, sustainable intervention



Patients as Partners in Safety

- Patient receives the wrong pills at the pharmacy
- A report is filled out and the pharmacy reacts appropriately investigating
- New process steps are put in place, along with education and an accountability model

Patients as Partners in Safety

- Physician talks to the patient
- Patient communicated before leaving the pharmacy, that her pills "did not look the same."
- Physician emailed the Chief Quality Officer, Dr. Levenback, with this information

STOP THE LINE

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UTMDACC INSTITUTIONAL POLICY # CLN1185

STOP THE LINE FOR PATIENT SAFETY POLICY

All MD Anderson health care team members, patients, and family members have the authority and responsibility to immediately intervene to protect the safety of a patient, to prevent a medical error, or to avert a Sentinel Event without fear of Retaliation.

Communication Plan reviewed by PFAC

STOP!

I have a safety concern

That's all you need to say.
It tells your health care team
that you have a concern about
your medicine, procedure, care or
cancer treatment. You may also
simply say **"Stop and hear me out."**

Stop the Line Reminder by Advisors

Patient Safety Awareness Week

March 12-18

Join your colleagues and raise awareness of patient safety at MD Anderson

Wednesday, March 15

Patient and Caregiver Panel Discussion

Noon-1 p.m., Main Building, Floor 11, Elevator B
Hickey Auditorium (R11.1400)

Three patient and caregiver panelists will share their experiences. Afterwards, watch a live webcast from the National Patient Safety Foundation on The Voice of the Patient and the Public (1-2 p.m.).

Patients as our Partners in Safety

Without the patient feedback, we would have never known the need to educate and reinforce the role of patients and families in Stop the Line.

Currently a communication/education campaign is underway for staff, patients and caregivers.

Thank you!

- Do you use the CG CAHPS (ambulatory) surveys?
- Do you transparently display data?
- Any best practices for patient and caregiver engagement?
- Questions and Discussion

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Thank You

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