Leaders’ Role in Patient Experience

Hospital leadership must drive efforts to better meet patients’ needs.

Similar to the challenges related to developing and sustaining a patient safety culture, many healthcare organizations have discovered that excellence in hospital patient experience is difficult to achieve. Executives are paying particular attention to the results from the public reporting of HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) and anticipated links between HCAHPS results and Medicare reimbursement.

What executives often see is, at best, a sawtooth pattern of improvement. Combined with additional performance demands and constrained finances, executives wonder what they should be doing better or differently to meet patients’ needs. What they might not realize is how important a role they play in efforts to improve the patient experience.

The Institute for Healthcare Improvement (IHI) receives frequent requests from hospitals that want to improve the experience of patients and families while sustaining and spreading positive outcomes throughout the entire hospital. As a result of the growing demand for knowledge and guidance, in 2009 IHI embarked on a research and development project that involved an in-depth review of relevant literature studying exemplar organizations and interviews with experts in the field. The aim was to identify the primary and secondary drivers of exceptional patient and family inpatient hospital experience.

IHI’s research revealed that exemplars performed in the top 10 percent nationally on the HCAHPS survey question, “Would you recommend this hospital to your family and friends?” The research also showed that an excellent patient experience involved all aspects of the Institute of Medicine’s aims for care: care that is patient centered, safe, effective, timely, efficient and equitable.

The project, which was updated in 2011 with input from additional exemplars and published in an IHI white paper titled Achieving an Exceptional Patient and Family Experience of Inpatient Hospital Care, identified five primary drivers of exceptional inpatient hospital experience: (1) leadership actions, (2) engaging the hearts and minds of staff and providers, (3) respectful partnerships, (4) reliable care and (5) evidenced-based care. The drivers of exceptional patient experience are founded on a commitment to patient- and family-centered care—care that is constantly viewed through the patient’s eyes and has the following characteristics as described by the Institute for Patient- and Family-Centered Care:

- People are treated with dignity and respect
- Healthcare providers communicate and share complete and unbiased information with patients and families in ways that are affirming and useful
- Patients and family members build on their strengths by participating in experiences that enhance control and independence
- Collaboration among patients, family members and providers is evident throughout the hospital (on advisory boards, performance improvement teams, in policy development) as well as in the delivery of care

Critical to the entire hospital’s success is senior leaders’ ability to continually clarify, articulate and model the organization’s goals for patient and family experience and why they matter. Examples include: executives and multidisciplinary teams conducting regular patient rounds; enabling family members to act as partners with the care team; eliminating visiting restrictions for family members; using scripts
to aid staff in effective communication; and conducting nursing “change of shift” reports at the patient bedside.

Numerous organizations, however, have implemented these and other changes and have seen little improvement in overall patient experience measures. Often missing are leaders skilled in making sense of patient experience for others in the organization. These leaders commit to creating a positive patient experience and are able to tap into the collective energy of staff members, encouraging staff to test new ideas for change and generating action from everyone in the organization rather than relying on direction from leaders or the next new initiative.

Without absolute clarity and framing, organizations are at risk for well-intended activities that do not result in sustained outcomes. What results instead are, as one colleague describes it, random acts of goodness.

If leaders clearly and concisely describe to staff what patient and family experience is, why it is important, how it fits with other strategies, and how each individual in the organization contributes every day to those experiences, then the potential for excellent patient experience outcomes increases dramatically. Below is what we learned from exemplars in excellent patient experience.

**Purpose is key.** At every opportunity, leaders must ask: How does this improvement benefit patient care and experience? How do we know? What patients have we asked? Leaders further advance great patient experiences by ensuring the infrastructure is in place to enable success. For example, elimination of traditional visiting restrictions to ensure family participation requires infrastructure and systems that enable staff to effectively partner with patients.

Purpose also includes being able to answer the question: How does patient experience fit in with patient safety, core measures, productivity and financial performance? In this way staff who work in finance, materials management, environmental services or clinical care all know they contribute to a great patient experience.

Communicating the purpose is enabled by storytelling. Leaders need to develop skills to share stories of patients’ actual experiences, what organizational team members did to model exceptional behaviors and the impact that had on the patient experience. Storytelling will enable others to learn and apply lessons quickly within the organization.

**Patient experience is part of an integrated system.** Exemplar leaders have the consistent ability to understand the improvement and measurement of patient and family experience as part of an integrated system of care. These leaders view efforts to improve the patient experience as integrated and mutually reinforcing to quality and safety.

Patients and families view their experience of care in its entirety: The clinical treatment, the interactions with staff, and the physical and ambient environment all tie together as one, overall impression and journey. Leaders and caregivers who commit to observing and learning in detail about this journey quickly identify what needs to improve to create a better experience.

**Engaging hearts and minds will go a long way.** The observation and knowledge of the patient journey also aid in ensuring reliable, effective systems that work for both patients and staff. Caregivers and support staff can and should be trained in improved communication skills. However, if staff members are saddled with systems that get in the way of excellent experiences, no training will overcome the frustration.

Generally, staff members treat patients and patients’ families as well as those staff members are treated by leaders, peers and others in the organization. Engaging hearts and minds is about everyone being clear on the purpose of their work, having mutual expectations for respectful communication and follow-through if expectations are violated by anyone, having a voice in shaping systems of care, and receiving recognition for their contributions.

Senior leaders committed to clarity of purpose, an integrated system of care, and engaged hearts and minds of staff and providers will excel in hospital patient experience and outcomes.

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