Capturing the Patient Experience

Why is it important to capture the patient experience?

There is a growing body of knowledge that demonstrates that improving the patient experience decreases stress, speeds recovery and improves health outcomes for patients. A great deal of the research and strategies on how to improve patient experience emerged from the United Kingdom's National Health Service (NHS). To improve patient experience, the NHS formulated the theory of Experience Based Co-Design (also known as the EBCD approach[™]). Experienced based co-design is essentially a set of principles implemented with a variety of tools that capture the experiences of patients, carers and staff through discussion, observation and filmed interviews.¹

Patient 'experience' differs from patient 'satisfaction' in that it captures the experience of care from the point of view of the patient and brings together both the recipients of care and the providers of that care to determine how care can be improved based on their mutual experiences.

Making improvements to health care based on the experiences of patients is unique in that it focuses on understanding the experiences of patients, carers, staff in their interactions with health services and each other. Patient experience does not measure their satisfaction with processes, for example the speed and efficiency at which they travel through the system. Instead, patient experience:

...deliberately draws out the subjective, personal feelings a patient and carer experiences at crucial points in the care pathway. It does this by: encouraging and supporting patients and carers to 'tell their stories'; using these stories to pinpoint those parts of the care pathway where the user experience is most powerfully shaped; and working with patients, carers and frontline staff to redesign these experiences rather than just systems and processes.²

How to capture the patient experience at different stages of the QI Framework?

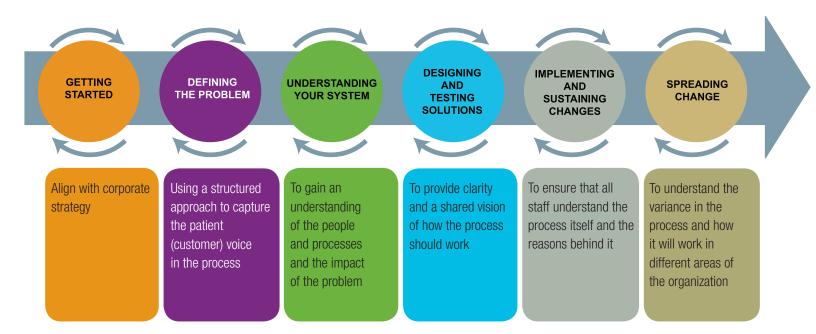
To truly create high-quality, focused health care that is meaningful to patients, we must ask patients (external customers) what it feels like to seek and receive health care and related services. We have to ask health care providers (internal customers) what it feels like to provide these same health care services. We must engage all health care customers in the quality improvement process to improve health care delivery.

² The ebd approach (experience based design). *NHS: Institute for Innovation and Improvement*. Retrieved July 23, 2013, from http://www.institute.nhs.uk/quality_and_ value/experienced_based_design/the_ebd_approach_(experience_based_design).html



¹ Is Experienced Based Co-Design for You? *The King's Fund: Ideas that Change Health Care*. Retrieved July 23, 2013, from http://www.kingsfund.org.uk/projects/point-care/ebcd/experience-based-co-design-intro

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How to capture the patient experience?

1. Capturing the patient experience

- Survey, Experience Questionnaire
- Focus groups, interviews to further understand the customer experience
- Please refer to HQO's Voice of Customer Primer for more information on this process

2. Understanding the Patient Experience

- Identify the emotions of the customer
- Find the "touch points" (any point where a user interacts with a service) in the health care delivery process. Clearly identify when the patient is engaged in processes as well as those functions that occur without patient involvement
- Map high and low emotions to touch points:



• Understand the impact that both positive and negative experiences have on behaviours and outcomes (for those seeking care as well as those providing care)

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3. Improving the patient experience

- · Patient and staff engagement day
- Identify problems
- Generate ideas to address problems. Ensure that both staff and patients participate in the brainstorming to enhance care experiences and improve care and service delivery
- Develop a next steps plan. Ask yourself: "what will we test?"

4. Measure the Improvement

- Capture both the objective (e.g., reducing readmissions) and subjective (e.g., how patients feel about their experience) to generate the most value
- Measure both baseline and after the changes you have implemented
- Please refer to HQO's Measurement Primer for more information on this process

What do I need to use this tool?

Materials

- Cameras/story board material/film to capture the patient experience
- Space to interview and have conversations
- Creation of posters/ PowerPoint to share findings with others

Timing

Capturing the patient experience can take two to three hours. The length of the process will vary depending upon the experience you are trying to capture and how you analyze your data.

Setup

- A group of ten staff and patients is ideal for emotional mapping
- Large room with blank wall space
- On a large piece of paper, outline the stages of the process that is to be improved, add a scale that indicates the bottom of the paper is indicative of negative emotions, while the top of the paper indicates positive emotions.
- Identify the points in the process and "map" them on the emotional scale to determine which areas require improvement.

What tips and tricks will be useful in facilitating the use of this process?

- Sit back and watch and listen
- Do not jump to solutions or conclusions
- Don't let staff "take-over" the co-design process