Seven Strategies to Improve Patient Satisfaction
Introduction

For years, most hospitals have tracked patient satisfaction to gauge the perceptions of their facility and improve their customer service. However, with the Hospital Value-Based Purchasing Program (VBP), patient satisfaction has become more than a bit of data for internal assessment and improvement. Beginning in October 2012, a portion of the Inpatient Prospective Payment System (IPPS) is now being tied to hospital scores on the Hospital Consumer Assessment of Health Providers and Systems (HCAHPS) survey\(^1\). Simply put, hospital reimbursements are now influenced by patient satisfaction scores. This financial incentive has precipitated a closer look at the entire patient experience, and hospitals and providers are paying close attention to every detail.

It turns out that communication is a common thread through most areas of the survey in which patients identify dissatisfaction, and 10 of the HCAHPS questions specifically target communication. Three examples include:

- During this hospital stay, how often was the area around your room quiet at night?
- During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?
- During this hospital stay, how often did doctors explain things in a way you could understand?

Poor communications can also affect the patient experience by delaying patient admittance and discharge, and cause a host of problems in between. Simply put, patients need to see and hear that your staff are coordinated and working in support of their best interest. Patients can receive exceptionally high-quality care, yet still be dissatisfied because of how they perceive staff are communicating (or not), even during short interactions.

Here are several of the pain points top hospitals are focused on, and some of their approaches to tackling them:

1. Give patients a fast, smooth admittance process
2. Communicate test results promptly
3. Respond quickly to the patient
4. Keep the patient informed and show compassion
5. Coordinate provider communication
6. Promote a quieter, more restful healing environment
7. Speed the discharge process

1. Give Patients a Fast, Smooth Admittance Process

Whether a patient is scheduled for a hospital visit or arrived unexpectedly in the emergency department, waiting to be admitted can seem to take an eternity. Sometimes it only appears slow due to patient distress, but actual delays can result from a number of factors. In many cases, holdups are caused by inefficient communications among the admitting department, bed management team, transport staff, and nursing staff on the floor. Slow connections between physicians for hand-off discussions can also postpone admissions.

How can the admittance process be improved? The overall workflow must be well coordinated to ensure smooth transitions, and there are multiple steps and departments involved. One of the keys to efficient communications is the ability to reach staff directly on their mobile devices, such as smartphones, pagers, tablets, Wi-Fi phones, etc. This includes alerting housekeeping personnel when a room is ready to be turned over for a new patient, letting transport staff know as soon as a patient is ready to be taken to a room, telling the nurse a patient is arriving on the floor for his/her care, and ensuring the admitting hospitalist can quickly connect with the hospitalist for a hand-off conversation.

All of these steps can be easily managed with software to alert relevant staff of an action or request quickly on their preferred devices. Saving time at each step of the admitting process leads to better patient flow and a faster admittance process. Ultimately, this can result in a happier, more satisfied patient.

2. Communicate Test Results Promptly

Thousands of diagnostic test results are processed every day in hospitals, in the Lab, Radiology, Cardiology, and more. Within each of these departments, communicating the results is still largely a manual process requiring staff to enter data into the electronic medical record (EMR), make phone calls (often in a game of tag with the ordering physicians), and keep a log book. What does this mean for the patient? Extra waiting that could be avoided.

Waiting for test results can be merely an annoyance if the results are negative and the patient is ultimately released to go home. On the other end of the spectrum, patients with life-threatening conditions could experience complications from delayed treatment, or worse. Both of these situations can be improved with workflows that automate much of the test results notification process.

EMH Healthcare, based in Elyria, Ohio, has done precisely that. Using a critical test results management solution they have improved the workflows of both radiologists and ER physicians. According to Michelle Dossa, Manager, Department of Imaging Services for EMH Healthcare, the previous process was very labor-intensive:

"When a radiologist identified a critical result, he or she would contact the ordering provider via phone, and the information was manually reviewed to determine Joint Commission compliance."
For all other wet readings, the ER doctors would then have to retrieve information from the PACS [picture archiving and communications system] and reenter it into their EMR. With so much technology at play we looked for an easier solution to bring it all together."

After implementing their critical test results solution, Dossa reports that communications are smoother and the ER process is much less manual. “We have eliminated the need for radiology nurses to track reports and dictations, maintain a document log, and make calls to notify ER physicians,” said Dossa. Ultimately this means providers at EMH Healthcare have more time to focus on patient care, patients receive faster treatment, and both staff and patients are happier.

Tuomey Healthcare in Sumter, South Carolina is another organization successfully using critical test results management in their communication workflow. Their process links communications between the health information system (HIS), radiology information system (RIS) and the picture archiving and communications system (PACS) to coordinate patient care. Critical test results and full findings are automatically sent to ED physicians, eliminating the need for voicemails and faxes. Radiologists also like the streamlined workflow. “Just two clicks for an ED study, and no need to pick up the phone and try to reach a busy ED doctor,” said José Bennett, PACS Administrator for Tuomey Healthcare.

In addition to faster care and shorter visits, another big satisfier for patients is that the critical test results solution lets Tuomey follow up on incidental findings discovered during exams. “If a patient has, say, pulmonary nodules that show up during a scan, these could become cancer in six months or a year,” said Bennett. “We can note these findings on a CT scan and advise the patient and his or her family physician to follow up.”

3. Respond Quickly to the Patient

Being a patient can make a person feel very vulnerable, especially when assistance is needed for everything from pain relief to getting a glass of water or even getting out of bed. How quickly staff respond to a patient’s call for help can have a large impact on patient happiness and set the tone for their overall perception of the facility. Of the 25 hospital-related questions on the HCAHPS survey, two specifically ask about staff responsiveness to calls for assistance². These questions highlight an area where hospitals can positively impact the patient experience. Lake Norman Regional Medical Center, based in

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Mooresville, N.C., did just that.

“We wanted to improve nurse responsiveness. It was one category on patient surveys that repeatedly showed an opportunity for increased satisfaction,” said Brian Bissonnette, Director of Information Systems at Lake Norman. “But we didn’t want to add complexity to a nurse’s day.”

To tackle the challenge they selected a technology solution for two-way communications between patients and nurses, allowing Lake Norman’s nurses to care for patients more efficiently and respond to queries faster. The system also includes escalation rules to alert another caregiver if necessary, and it maintains a full audit trail. The audit trail is an important feature for internal analysis and improvement initiatives, as well as providing evidence of messaging in the event of a disagreement about how communications were handled in a particular case.

For a patient, reaching someone quickly is very important, and that someone does not always have to be the nurse. Using smart technology, a request for blankets or assistance getting to the bathroom can be sent to a nurse’s aid and be just as effective from the patient perspective. By reaching the right person for each situation, helping patients is more efficient and nurses have more time to focus on other patient duties that specifically require their attention, such as administering medication.

Then there are situations such as a change in vitals when the patient needs aid but cannot actively call for help or may not even know something is happening. Having alerts from patient monitoring equipment such as heart (telemetry) monitors, ventilators, pulse oximeters, and more go right to a caregiver’s mobile device can speed response in potentially dangerous situations. This automated messaging is also a step toward an alarm management program. In fact, in 2014 the Joint Commission added a new National Patient Safety Goal (NPSG), NPSG.06.01.01: Improve the safety of clinical alarm systems. The goal of an alarm management program is to combat the risk of caregiver alarm fatigue that can threaten patient safety.

4. Keep the Patient Informed and Show Compassion

A common desire among patients is to be kept informed of their situation and be included in decisions about their care. This means not only being aware of test results and their treatment options, but also being listened to about their preferences and needs.

In a 2004 study of five clinical conditions, researchers found that improved performance in a few key areas was associated with significant increases in patient satisfaction: (1) respect for the

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3 http://www.jointcommission.org/assets/1/6/HAP_NPSG_Chapter_2014.pdf
patient's values, preferences, and expressed needs, and (2) emotional support, relieving fear and anxiety. “Simply put, providing support and involving patients in decision making are associated with better outcomes. Good communication between patients and care providers drives positive patient experiences and compliance, which lead to positive outcomes.”

Good communication between patients and nurses is also an area of significance worth focusing on. In a study by Press Ganey Associates, the research team found that improvements in how nurses communicate with patients initiated positive change in four other areas on the HCAHPS survey, as well:

- Pain management
- Responsiveness of hospital staff
- Communication about medication
- Overall rating

“All thirty percent of hospitals’ VBP incentive payments will be determined by how patients evaluate their stay on eight HCAHPS dimensions that make up the Patient Experience of Care domain within the VBP framework.”

Compasion also ranks highly among patients. Displaying empathy does not take more time for providers, and these non-verbal skills to promote patient trust are behaviors that can be learned.

Earning patient trust and displaying human connection can be as simple as making more eye contact, and those small actions can make a big difference to the patient experience.

5. Coordinate Provider Communication

Coordinating provider communication, like improving the admissions process, is an indirect method of enhancing the patient experience and focuses on the clinical avenues for improving outcomes. While patient satisfaction scores may not always directly correlate to quality of care, quality certainly still makes a difference.

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6 The Rising Tide Measure: Communication With Nurses. Press Ganey. May 2013. [http://healthcare.pressganey.com/content/NurseCommunicationWP](http://healthcare.pressganey.com/content/NurseCommunicationWP)


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Poor communication among hospital staff is recognized as a barrier to patient safety, and disorganized communication among providers causes inefficiencies with treatment planning and care coordination. Besides reduced reimbursements from poor patient survey scores, uncoordinated care can also be quite expensive in a more direct way.

In a study published in the Journal of Healthcare Management, the authors estimate that U.S. hospitals waste more than $12 billion annually from communication inefficiencies among care providers. Of that amount, increased length of stay accounts for 53 percent. Looking more closely at what poor communications cost an individual facility, the authors estimate a 500-bed hospital loses more than $4 million per year. The article’s concluding remarks mention that, “Information technologies and process redesign may help alleviate some of this burden.”

Information technologies are available to help, and leading hospitals around the globe are already successfully using mobile devices and intelligent software to improve provider communications, reduce patient length of stay, and boost patient satisfaction. Efficient communications also generate happier providers, who can set their contact preferences for different times of the day, access on-call schedules to easily find a colleague, and save time that can instead be spent with patients for treatment and keeping them informed.

Kosair Children’s Hospital, part of the Norton Healthcare System in Louisville, Ky., looked to technology to bring their nurse call and interactive patient care system together in an integrated framework. By coordinating these systems, messages are being routed to nurses’ Wi-Fi phones and smartphones, speeding response to requests and improving patients’ comfort. Messages can also be sent from device to device, allowing staff to communicate with each other from any location and coordinate care more easily. “We want critical communications to be delivered in a timely manner,” said Scott Stanton, Manager of Service Excellence, Kosair Children’s Hospital. “This means increasing communication to and among nurses with the latest technology so we can work smarter and simply cut wasted time out of the process.”

“Staff can easily communicate with one another on all the different devices they carry.”
Margaret Quirie, Director, Library Services and Telecommunications, The Ottawa Hospital

The Ottawa Hospital in Eastern Ontario, Canada, is also using technology to improve communication among staff with secure messaging, including code call notifications. “Staff can easily communicate with one another on all the different devices they carry,” said Margaret Quirie, Director, Library Services and Telecommunications at The Ottawa Hospital. Physicians are pleased to be able to use their smartphones for smoother communications and can track their messages to see when they were received and responded to.

IU Health Goshen Hospital in Goshen, Ind., is using technology to assist with care coordination, specifically to streamline their average door-to-balloon response time for heart attack patients. The Joint Commission, Centers for Medicare and Medicaid, and the American College of Cardiology all promote a 90-minute guideline for the time it takes from a patient presenting with an ST elevation myocardial infarction (also known as STEMI) until they are in the operating room receiving treatment (the balloon).

Why can a code STEMI take so long? Because hospitals have to organize upwards of 30 staff members from multiple departments, often by making lots of phone calls and manually tracking all the responses. Since implementing an emergency notification system, Goshen is able to coordinate the entire process and bring together all the needed staff members for a code STEMI response in 68 minutes—24 percent faster than the national guideline. The system has built in escalation features if someone does not respond quickly, and an audit trail tracks all the responses.

“We’re on a mission to provide excellent care,” said Andrea Daniels, RN, BSN, and Director of Cardiovascular Services for IU Health Goshen Hospital. “For code STEMIs, there were a multitude of calls being made that didn’t need to be. It all just happens now. Ultimately, our patients will receive faster care, and we’ll be able to save more lives.”

6. Promote a quieter, more restful healing environment

Research has shown how important sleep is to mental and physical health, and that a peaceful environment is important to the healing process. Patients struggle with disturbances in hospitals every day, from overhead announcements, hallway conversations, and infuser pump alarms to squeaking wheels on the laundry cart. Noise not only disrupts patient healing, it is also a common source of dissatisfaction.
An emerging trend in healthcare is to tone down the decibels and eliminate some of these sleep interruptions. Several low-tech initiatives include keeping all cart wheels silent (the squeaky wheel truly should get the grease), using gentle music on the overhead paging system to signal the start of quiet time at night, and posting signs on all patient floors reminding visitors to use inside voices.

Some leading hospitals are also pursuing technology solutions to help foster a quieter environment by reducing overhead pages and phone conversations in the hallway.

Designers and administrators at Maple Grove Hospital in Maple Grove, Minn., set out to create an environment that didn’t feel like a hospital. Part of this process included sophisticated software to connect all nurse call system patient requests, alarms, and alerts from patient monitoring equipment to the right individual’s mobile device, whether that meant involving a nurses’ aid, a nurse, or a group of responders. The messages are routed efficiently and effectively to staff on their mobile devices. “One of the significant effects of this approach, and one of the most frequent patient comments we receive, is how noticeably quiet the hospital is,” said Craig Wolgemuth, Senior IT Project Manager at Maple Grove Hospital. “It’s very rare to hear an overhead page; busy units are amazingly quiet. All of that is intentional to support a healing environment.”

PinnacleHealth System in Harrisburg, Pa., is also using technology to route messages to staff and reduce overhead paging and noisy hallway conversations. “We used to use phones to call and ask for beds to be moved,” said Chris Hunsinger, Telecommunications Technician for PinnacleHealth System. “When a text is sent there’s no noise of someone talking on the phone in the hallway. It’s an efficient method that is also more discreet. We’re a quiet hospital, so we don’t make overhead announcements or use alarms unnecessarily.” A bonus, according to Hunsinger, is that texts are also more accurate and efficient. “When texts are sent, no translation is needed, and there’s no paper.”

7. Speed the discharge process

Once a patient has been told they’re being released, waiting an hour or more to leave can put a negative pall over the entire hospital experience. Sitting in their room growing frustrated, patients do not see the steps required to get them to the front door and prepare their room for the next patient waiting to be admitted. Coordinating the discharge process can be sped up and simplified with automated messaging to alert nursing, transport and housekeeping, and other necessary departments, such as infection control and the pharmacy.

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Mentioned above for reducing the amount of overhead paging in support of a quiet hospital, another way PinnacleHealth System uses their messaging software is in support of patient discharge. “When we have a bed change, there’s a whole team involved, and it’s a coordinated effort,” Hunsinger said. “Sending messages to Wi-Fi phones and/or pagers has made the process much smoother. It’s very fast—just the push of a button.”

Lake Norman is also seeing benefits in their discharge process from automated messaging. When a patient is discharged, messages are automatically sent to housekeeping, transport, and any other pertinent staff. This eliminates unnecessary time spent calling individuals and waiting for answers. Transport staff responses are immediate, reducing patient discharge times and improving satisfaction. Instant messaging to environmental staff also improves bed turnover by decreasing response times and increasing room availability, which can feed back into patient satisfaction with faster admissions.

Tuomey Healthcare has also seen discharge benefits from their critical tests results management implementation. “During the three months immediately following implementation, we saw in 11% improvement in patient discharge times,” said Bennett. “Even when test results are normal, the doctor simply knows this information sooner than before.”

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Summary

The overarching suggestion for boosting patient satisfaction is frequent, efficient, timely communication. Whether in person with the patient, among care providers, between hospital information systems, or from monitoring equipment directly to staff on their mobile devices, the right information must get to the right person at the right time. Replacing manual processes with efficient technology solutions that enable staff to easily communicate each other will increase patient safety, speed response times, and result in more satisfied patients, from admissions to discharge.

Tips when researching communication solutions for increased patient satisfaction:

1) Determine whether messages can be sent to the variety of mobile communication devices used by different roles; this should include smartphones, Wi-Fi phones, pagers and more
2) Ask about integration capabilities with existing hospital systems (LIS, PACS, the EMR, etc.)
3) Make sure the system includes receipt acknowledgement and audit trail support
4) Ensure it has the ability to escalate unacknowledged notifications
5) Ask whether you can send alerts/alarms from clinical alerting/monitoring systems right to caregivers’ mobile devices for fast resolution
6) Explore the capabilities for ensuring protection of patient data (encryption, remote message removal, etc.)
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