

Patient Experience

The Cleveland Clinic Journey

American Medical Group Association Orlando, Florida March 14, 2013

James Merlino, MD
Chief Experience Officer



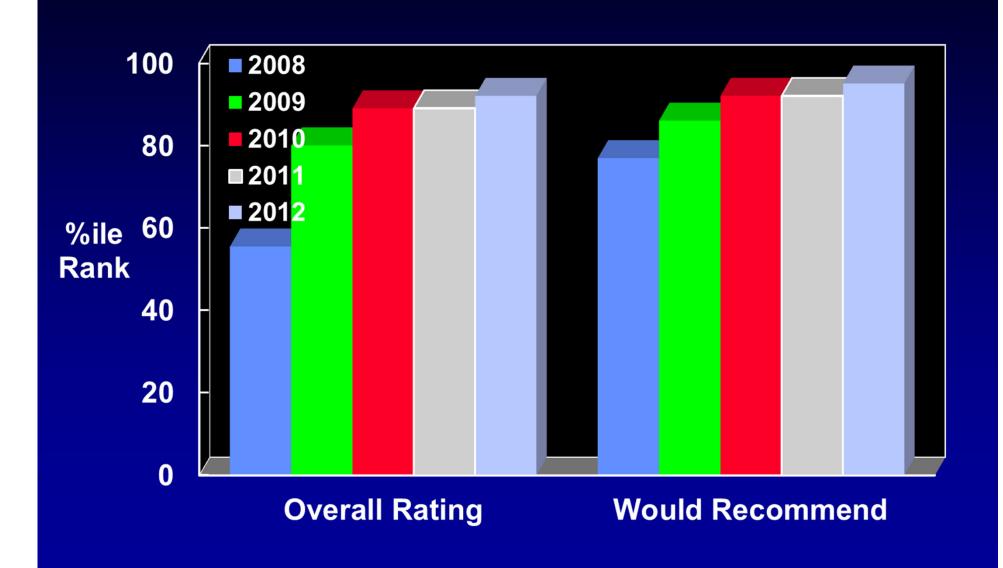
Overview

- How did Cleveland Clinic change their culture to be "patient first"
- How did they improve their HCAHPS scores in three years
- What tactics proved most useful in engaging employees and physicians

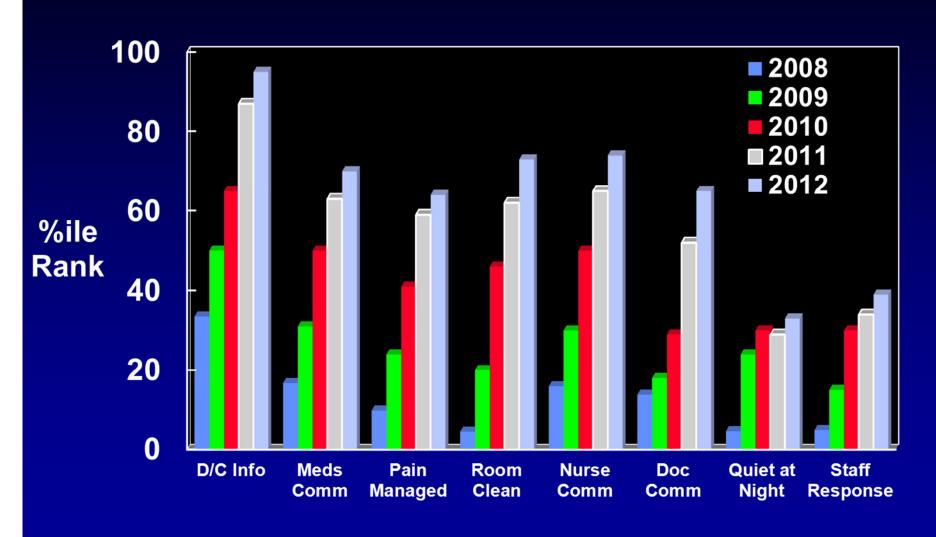
Cleveland Clinic



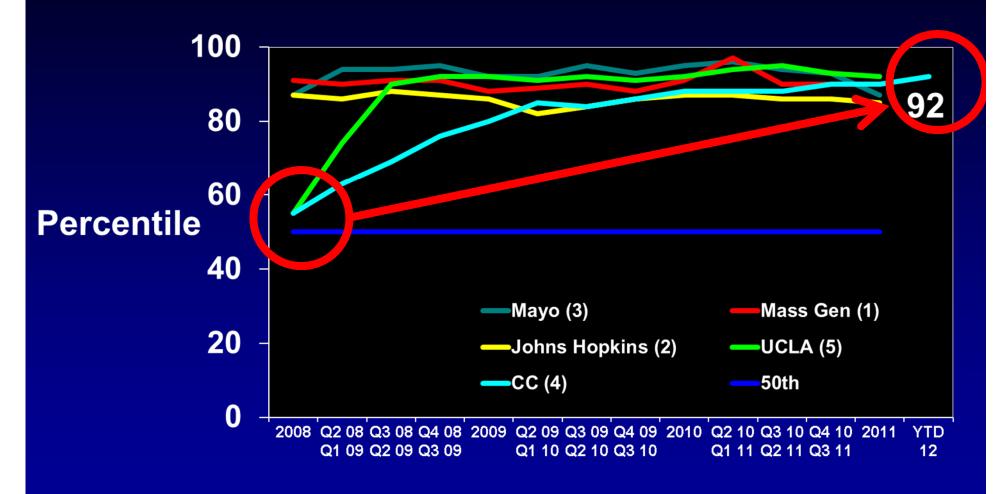
Main Campus



Main Campus

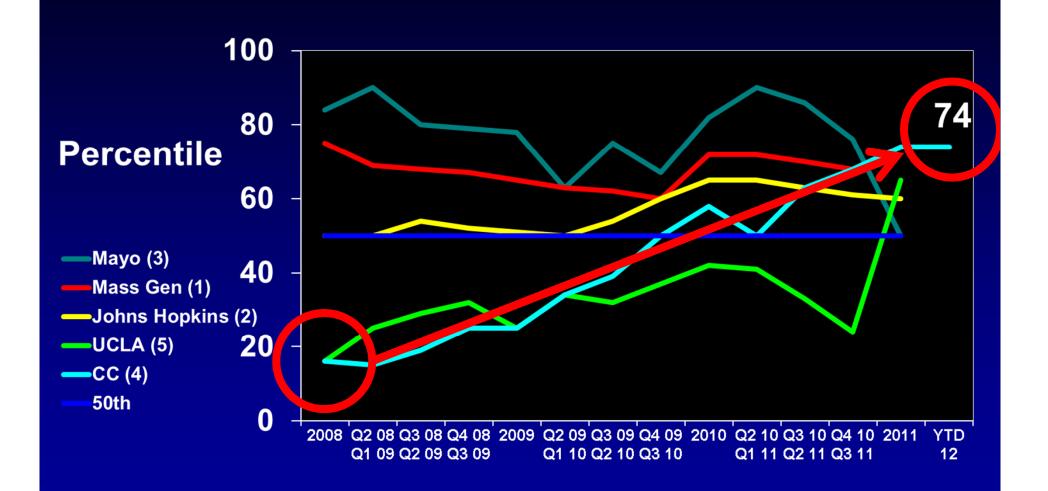


Rate Hospital

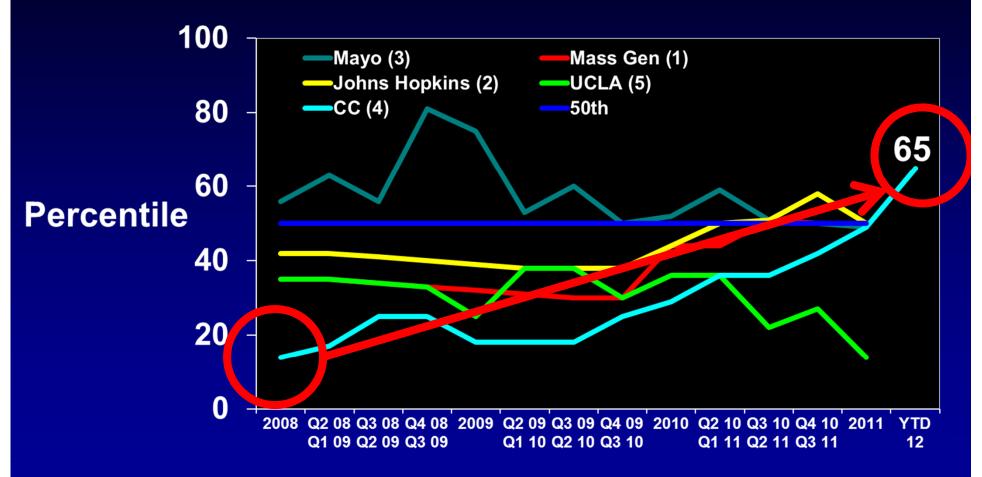


CMS Reported Periods

Nurse Communication

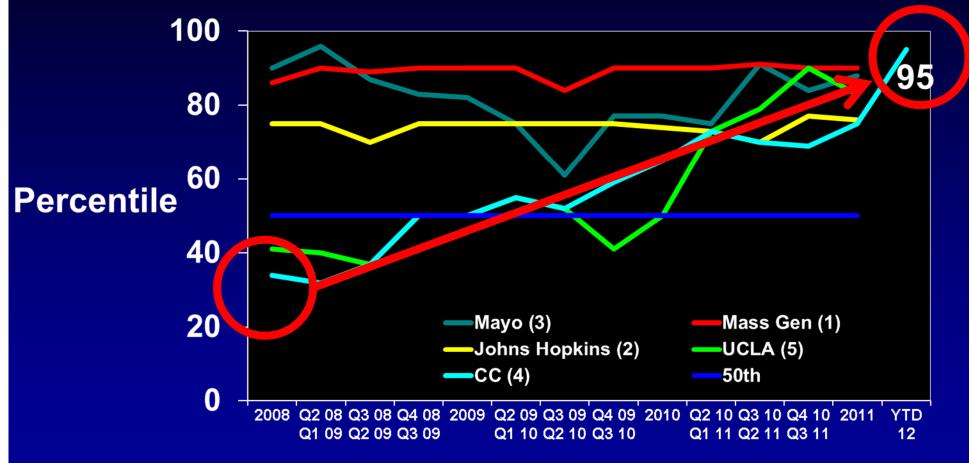


Doctor Communication



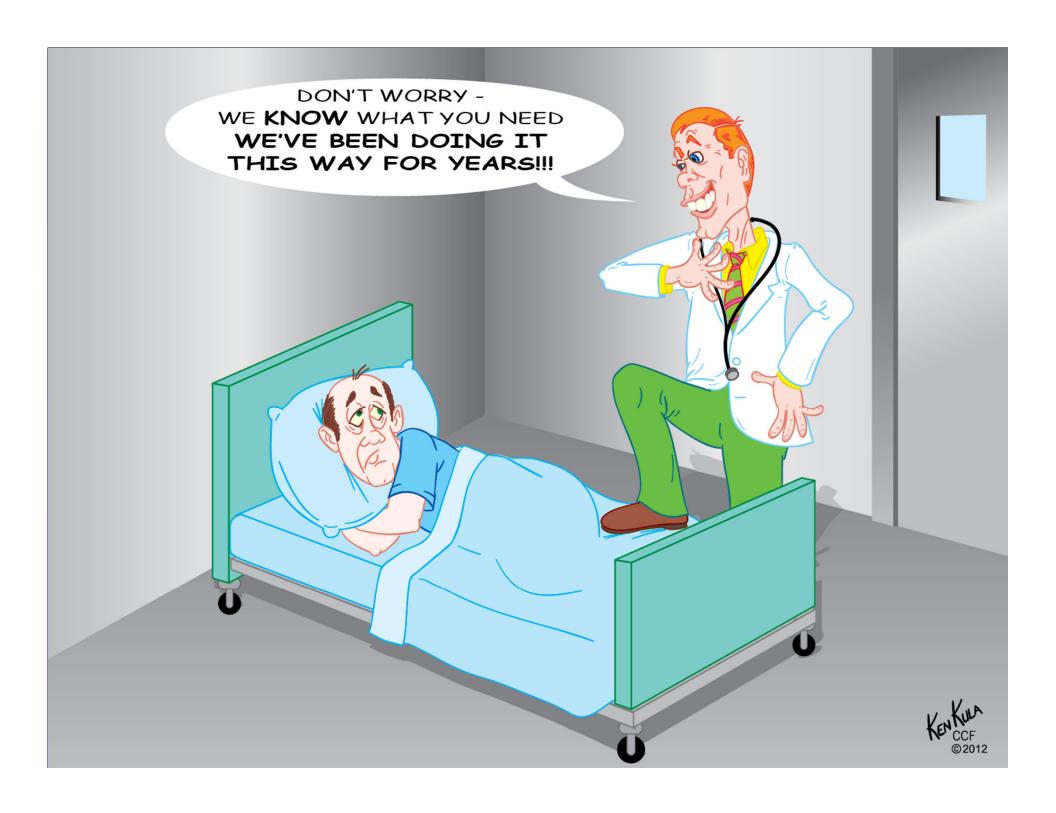
CMS Reported Periods

Discharge Instructions and Care



CMS Reported Periods

To become the global leader in patient experience



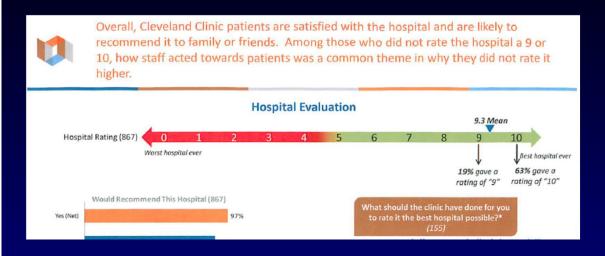
Leaders Survey

Top priorities

- New facilities
- Quiet-time to ensure rest
- Private rooms
- Food on demand
- Interactive bedside computers
- Eliminate visiting hour restrictions



How staff acts toward patients is important



867 interviews 82% 9/10 (712) 18% 8 or less (155)

- Treat patients with more respect
- Better communication between staff
- Listen to my needs / requests / concerns
- Cleaner rooms

Interviews – Importance to Patient

Care – 48%

• "Customer service, nice staff, cordial doctors, staff with a positive attitude at all times, people that talk to you like you are a real person, willingness to find out what is wrong, patience, being understanding and sensitive."

Communication – 29%

•"Letting me know what is wrong with me and keeping me informed on what they are doing to treat me and why."

Environment – 12%

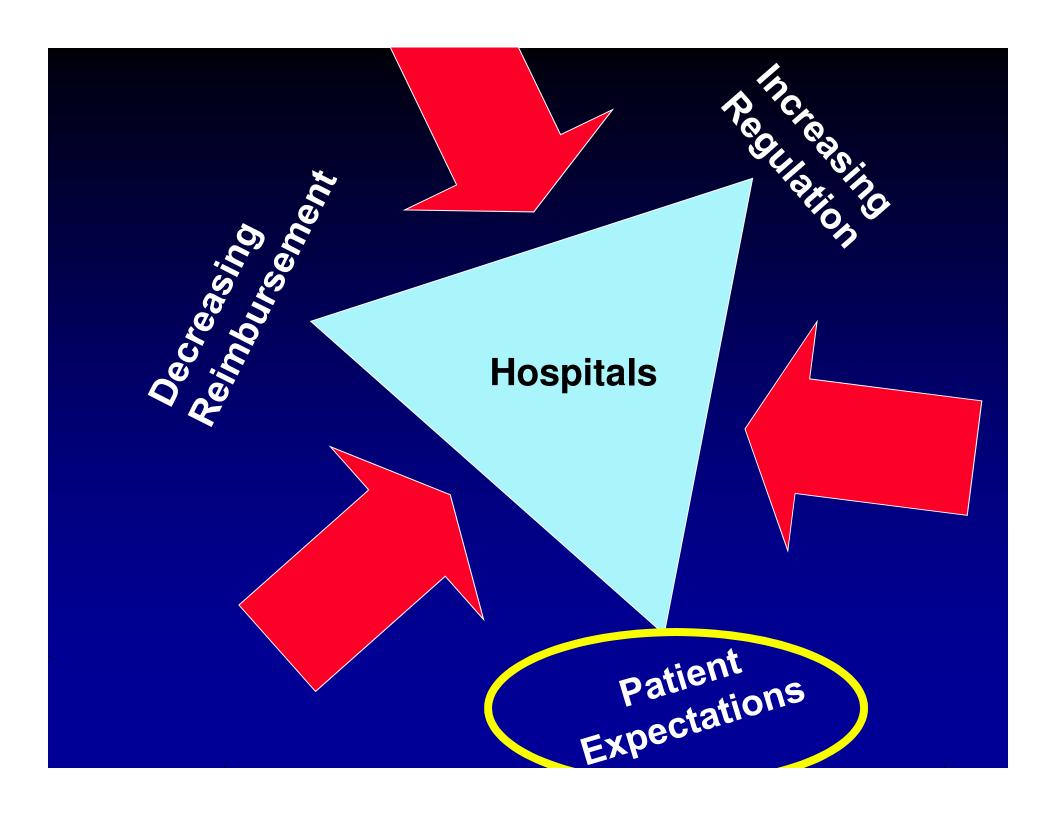
• "That it is clean and seems like a place where you can get better."



What is a patient?

- Have you ever been one ?
- Stressful
- Anxiety
- Fear Terror !>
- Uncertainty
- Confusion

...And the Family





Day # 1



Cleveland Clinic Health System Present State – then!

Lowest satisfaction scores for major health care system!

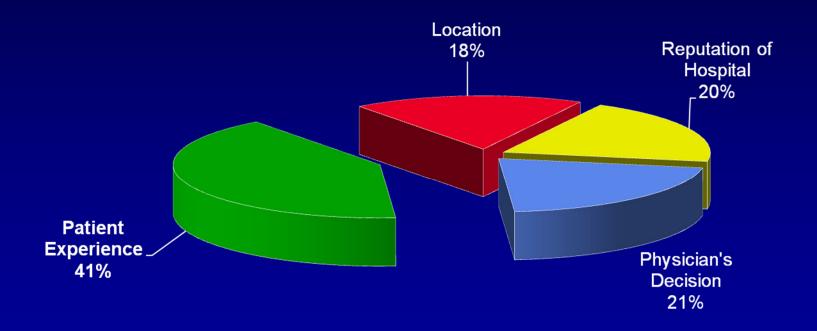
Below average employee satisfaction and engagement!

Patients came to us for our expertise – but they didn't like us!

Experience?

Patients Choose Experience

"What factors are the influence on your choice of hospitals?"



Quality ... according to Mom!

Valued Patient "Experience"

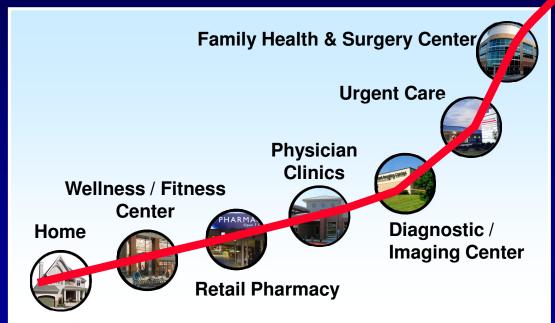
- Being informed
- On time
- Room appearance
- Simple access
- Better scheduling
- Food
- Value for money
- Billing concerns

- Staff Response
- Involved in Decisions
- Emotional support
- Spiritual support
- Supportive environment
- Convenience & comfort in common areas

Continuum of Care

Acute Care

Community-Based Care





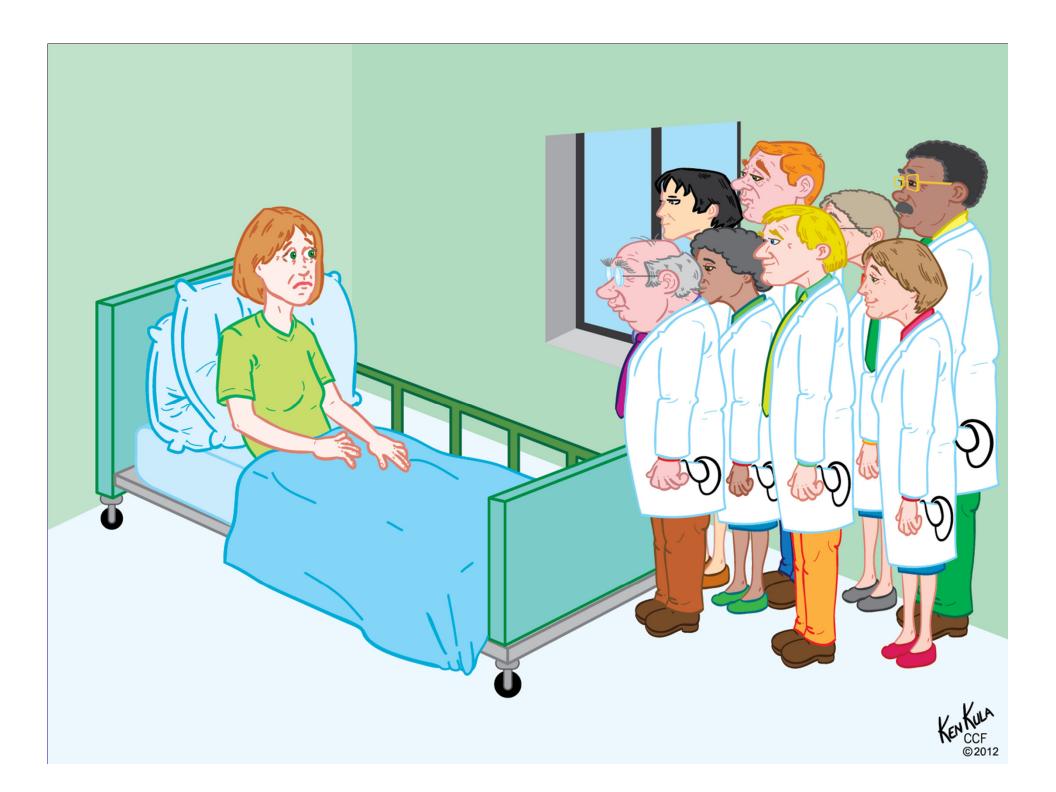
Recovery and Rehab Care

The "360"



Manage the 360 Continuum

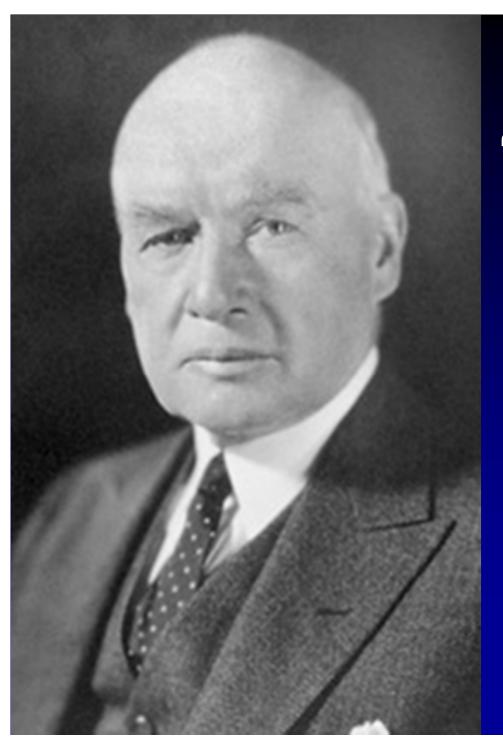








Our Journey



"A patient is the most important person in the institution.

It is our job to satisfy them."

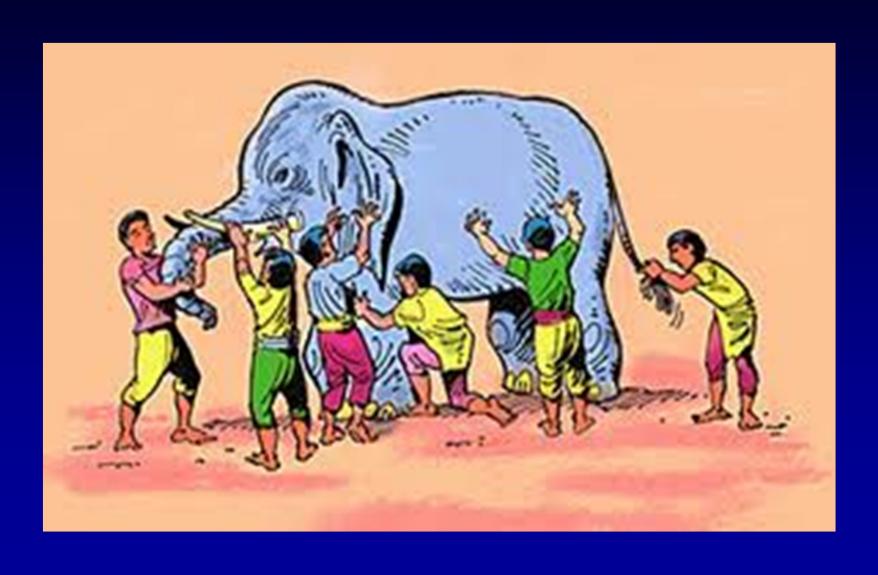
William Lower, MD
1921

"Patients First...."

"Providing the highest quality patient experience is a primary goal of the Cleveland Clinic Organization."

-Delos "Toby" Cosgrove, MD

Patient Experience



Patient Experience



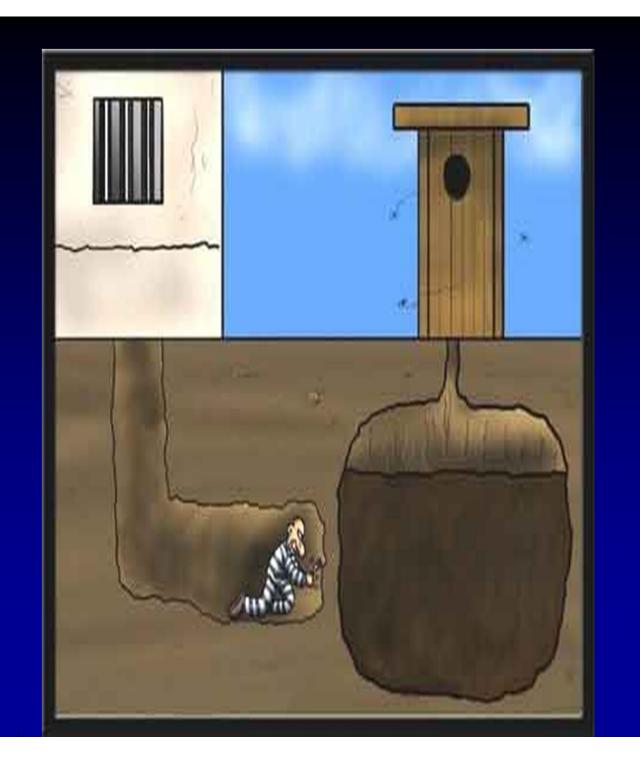
Patients First....

- Safe Care
- High Quality Care
- Patient Satisfaction
- High-Value Care

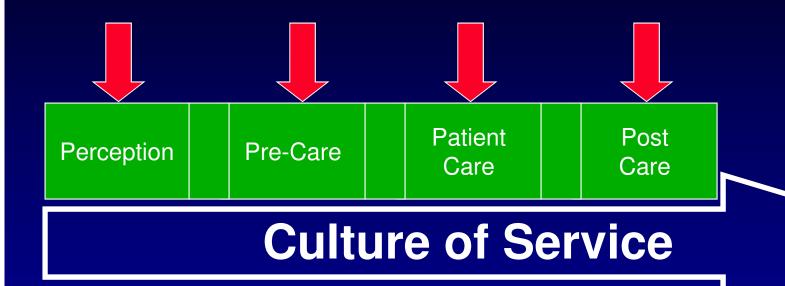
It's about

HCAHPS

Stupid!



Patient Experience Journey



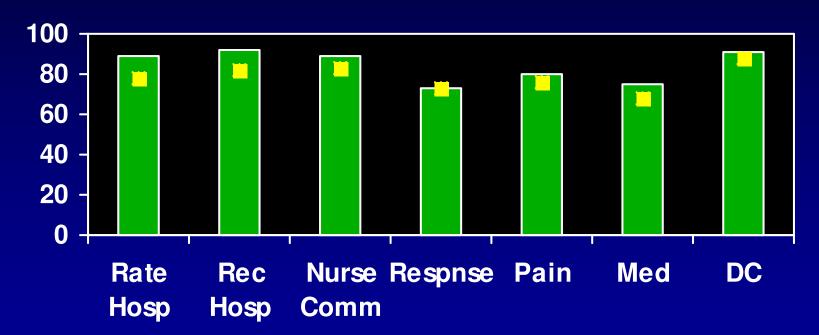
Process

People

Patients

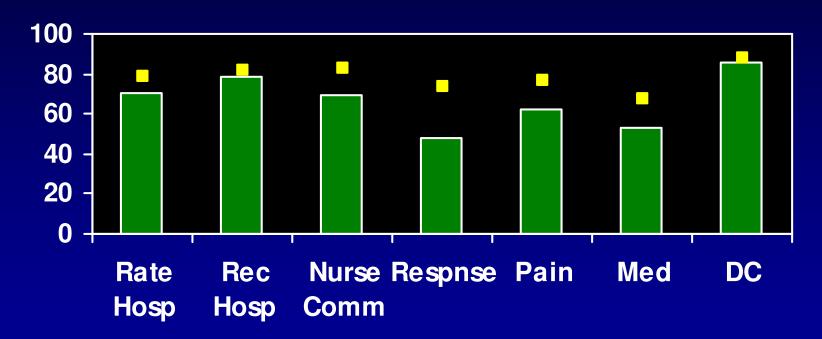
'Always' Rounded

Nurse Always Visited Q2 Hrs



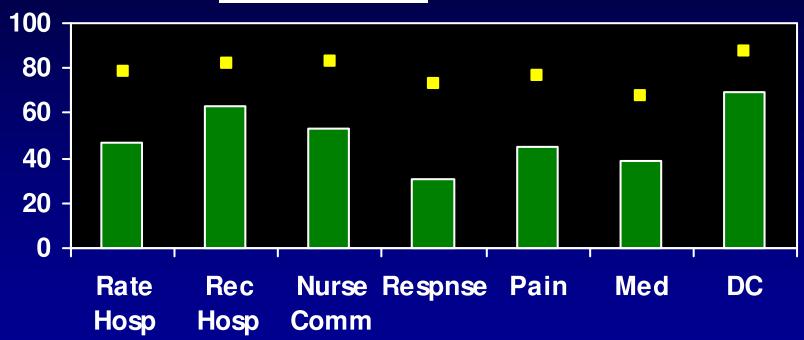
'Usually' Rounded

Nurse Usually Visited Q2 Hrs



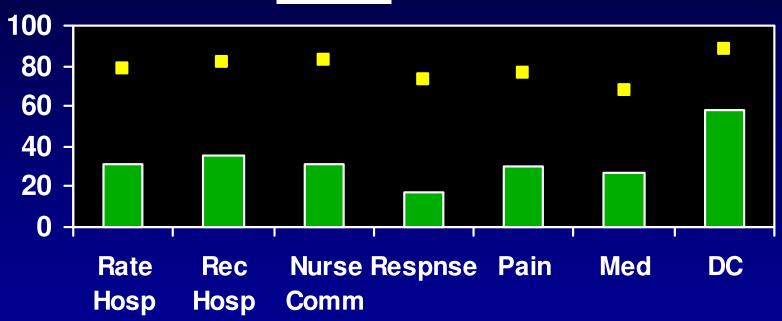
'Sometimes' Rounded

Nurse Sometimes Visited Q2 Hrs

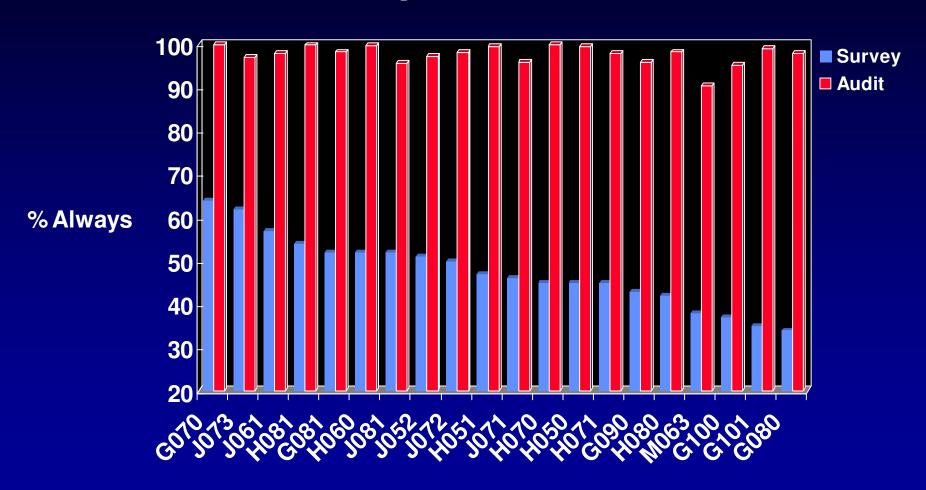


'Never' Rounded

Nurse Never Visited Q2 Hrs



Top 20 Units: Nurse Rounds Every 2 Hours



Doctor Engagement

Increasing Accountability





ConsumerReportsHealth

Special Report for Massachusetts residents

How Does Your Doctor Compare?

Doctor Communication

- Physician leadership
- Education and Communication
- Data transparency
- Task force
 - How do we "teach" improvement ?
 - Peer physician coaches
- Communication "guide"
- Best practice card
- House staff

Score - Scorecard

Taussig Cancer Institute Patient Experience Physician Report December 1, 2009 through November 30, 2010

| | | Describer 1, 2000 through Hovelinder 00, 1 | | | | | | |
|--|----|--|---|----------|-----------|-----------|--------|--|
| | Н | HCAHPS | | Medical | Practice | Ombudeman | | |
| | | | | Domain | Recommend | Patients | lecues | |
| Center Name | N | % Always | N | % V Good | % V Good | | | |
| Hematologic Oncology and Blood Disorders | 25 | 77% | 2 | 98% | 100% | | | |
| Hematologic Oncology and Blood Disorders | 29 | 63% | 3 | 4 91% | 91% | | | |
| Hematologic Oncology and Blood Disorders | | | 5 | 48% | 40% | | | |
| Hematologic Oncology and Blood Disorders | | | 3 | 78% | 100% | | | |
| Hematologic Oncology and Blood Disorders | 14 | 71% | 9 | 43% | 40% | | | |
| Hematologic Oncology and Blood Disorders | 23 | 86% | 1 | 83% | 84% | | | |
| Hematologic Oncology and Blood Disorders | | | 1 | 2 88% | 82% | | | |
| Hematologic Oncology and Blood Disorders | | | 1 | 100% | 100% | | | |
| Hematologic Oncology and Blood Disorders | | | 1 | 64% | 81% | | | |
| Hematologic Oncology and Blood Disorders | 19 | 86% | 1 | 1 85% | 82% | 1 | 1 | |
| Hematologic Oncology and Blood Disorders | | | 2 | 100% | 100% | | | |
| Hematologic Oncology and Blood Disorders | | | 2 | 9 87% | 80% | | | |
| Hematologic Oncology and Blood Disorders | | | 1 | 1 73% | 82% | | | |
| Hematologic Oncology and Blood Disorders | | | 5 | 68% | 80% | 1 | 1 | |
| Hematologic Oncology and Blood Disorders | 8 | 71% | 3 | 5 74% | 83% | 1 | 1 | |
| Hematologic Oncology and Blood Disorders | 5 | 73% | 1 | 4 87% | 100% | | | |
| Hematologic Oncology and Blood Disorders | | | 2 | 98% | 100% | | | |
| Hematologic Oncology and Blood Disorders | 7 | 100% | 5 | 89% | 80% | | | |
| Hematologic Oncology and Blood Disorders | 29 | 85% | 1 | 1 77% | 73% | | | |
| Hematologic Oncology and Blood Disorders | | | 1 | 1 87% | 91% | 2 | 2 | |
| Hematologic Oncology and Blood Disorders | 1 | 33% | 1 | 1 87% | 82% | 1 | 1 | |
| Hematologic Oncology and Blood Disorders | 21 | 71% | 1 | 3 90% | 82% | | | |
| Hematologic Oncology and Blood Disorders | 4 | 50% | 8 | 100% | 100% | | | |
| Hematologic Oncology and Blood Disorders | | | 4 | 100% | 100% | | | |
| Medical Genetics | | | 4 | 100% | 100% | | | |
| Medical Genetics | | | 3 | 69% | 67% | | | |

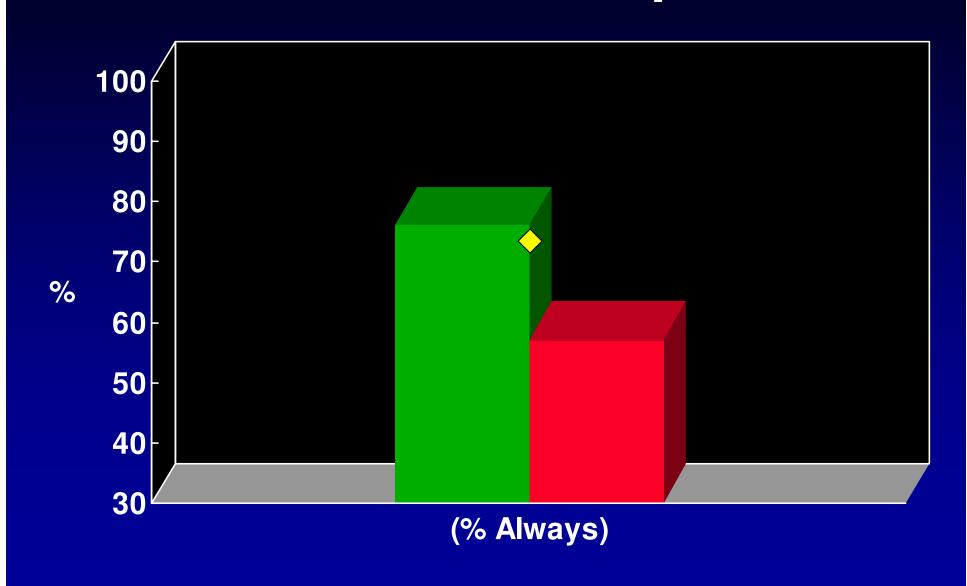
Verbatims

- "Never sure who my doctor was.."
- "Surgeon never saw me until I was very critical"
- "Never saw my surgeon only the fellow"
- "Doctor had attitude"
- "Doctor was rushed"
- "Too many doctors I never new who was in charge."
- " ----- group was backing out of the door as my wife was asking questions – very rude."

Patient as "Partner"

"One that is united with another in an activity of common interest"

HCAHPS Staff Response

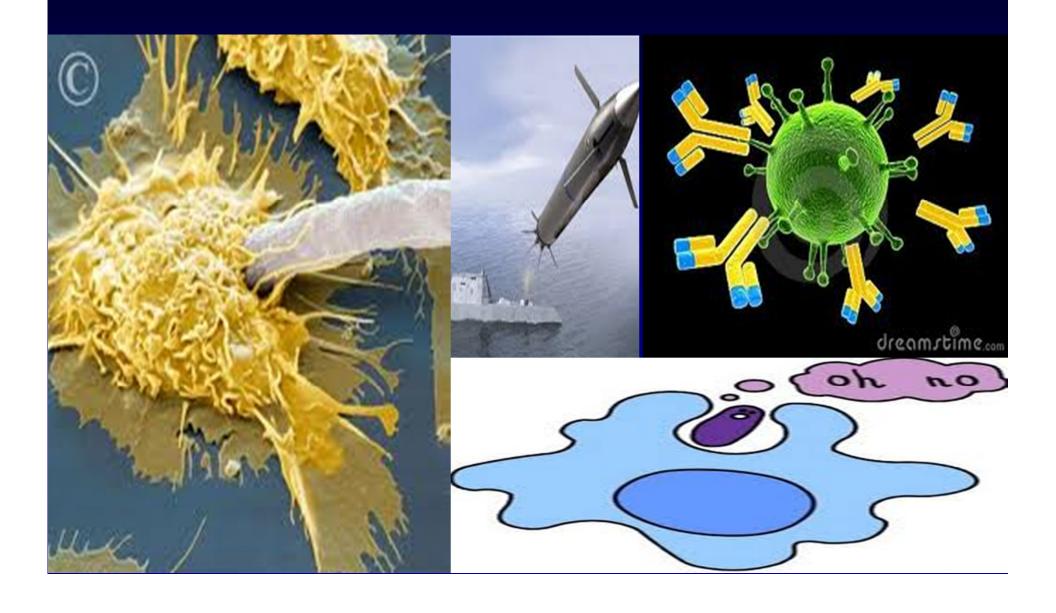


Changing Culture



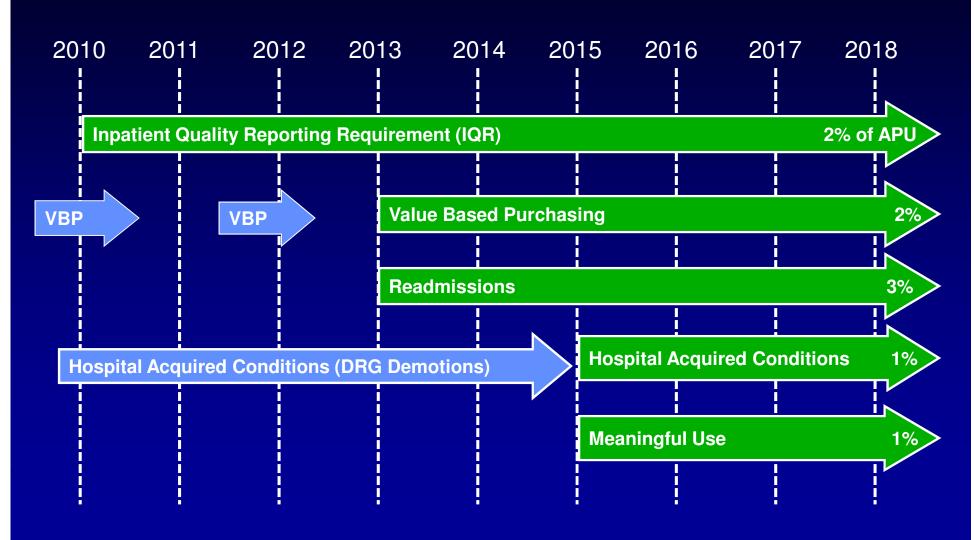


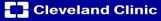
Organizational Immunity



Enter the era of payment tied to reported outcomes

Quality – Based Payment Reform Initiatives





2013 VBP Measures

| Fibrinolytic therapy received within 30 minutes of hospital arrival | | | | |
|--|--|--|--|--|
| Primary PCI received within 90 minutes of hospital arrival | | | | |
| Discharge instructions received | | | | |
| Blood culture performed prior to administration of first antibiotic(s) | | | | |
| Initial antibiotic selection for CAP in immunocompetent patient | | | | |
| Prophylactic antibiotic(s) one hour before incision | | | | |
| Selection of antibiotic given to surgical patients | | | | |
| Prophylactic antibiotic(s) stopped within 24 hours after surgery | | | | |
| Postoperative Urinary Catheter Removal on Postoperative day 1 or 2 | | | | |
| Cardiac surgery patients with controlled 6AM postoperative serum glucose | | | | |
| Surgery patients on a beta blocker prior to arrival who received a beta blocker during the perioperative period | | | | |
| Surgery patients with recommended venous thromboembolism prophylaxis ordered | | | | |
| Surgery patients who received appropriate venous thromboembolism prophylaxis within 24 hours prior to surgery to 24 hours after surgery | | | | |
| | | | | |
| HCAHPS survey results on patient interaction with doctors, nurses, and hospital staff; cleanliness and quietness of the organization; pain control; communication about medicines; and discharge information | | | | |
| | | | | |



Value Based Purchasing: FY2014

2nd Year of VBP Reporting:

- April December 2012: Performance period
- Measures:
 - 13 Core Measures
 - 8 HCAHPS
 - 3 Mortality
 - 8 Hospital Acquired Conditions
 - 2 Composite PSI
 - 1 Efficiency (spend per beneficiary)

New Measures For FY 2014

\$\$ impact 2014



CMS Direction....

"Measurement requirements and performance <u>expectations will be modified</u> <u>over time</u> to reflect the application of evolving technologies and care practices as they impact the quality and safety of care."

 Achieving a high performance on set measures not enough – Sustain Culture





Doctors Lemp Care Colvers ses

Enterprise Goals



- Patient Safety Indicators
- Readmission Rates

- Core Measures
- HCAHPS

- Hospital Acquired Infections
- Engagement Scores

Safety

Patient Experience

Quality

Employee Experience (Culture)



Communicate with HEART®

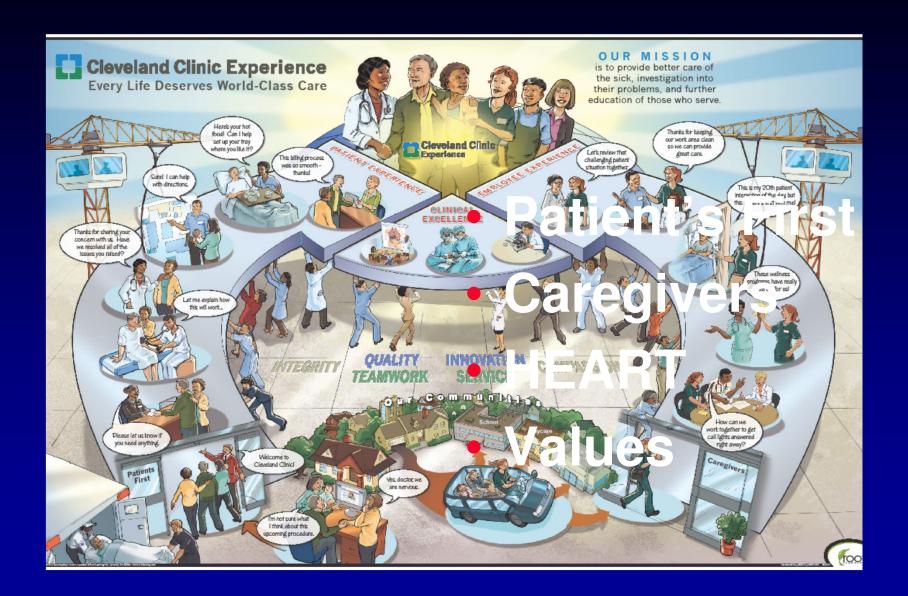
"Sunshine"

S.T.A.R.T. with Heart

- 5 mile and greet warmly (Sir / Ma'am)
- T ell your name, role, what to expect
- A ctive listening / Assist
- R apport / Relationship building (preferred name)
- T hank the person

Respond with H.E.A.R.T.

- H ear the story
- **E** mpathize
- A pologize
- R espond
- hank









Physical therapist

Why is this important

- Right thing to do
- The way we would want to be treated
 - Patient centered care
- Patient's want it their "Quality"
- Defines us as an Industry
- Government

Strategy

- Patient's first
- Leadership
- Focus the metric
- Journey
 - Process / Tactics
 - People (Culture)
 - Patient Engagement

Empathy Video



- YouTube: http://www.youtube.com/watch?v=cDDWvj q-o8
- Or Search: "Cleveland Clinic Empathy"

Cleveland Clinic

Every life deserves world class care.