

SOLUTION: Surveying and Improving the Patient Experience

When we only trust our gut in regard to the current status of the patient experience, we may not be armed with the knowledge needed to initiate, or continue, the drive to improve.

This Solution will be filled with our insights from many years of working with organizations to conduct and utilize such surveys to the benefit of their patients, employees, providers, and leaders. Even if your organization is already using a GOOD patient satisfaction survey process, within this Solution you will likely find some ways to enhance your current process.

Take your results from GOOD to GREAT!

By itself, a survey does not improve the patient experience. In fact, it is best if you use your survey system as a way to “listen” to the voice of the patients and their families, but not the only way. Surveys and data observations are simply one way to validate that the great work of your team is moving the needle in Service and you are meeting your goals and improvements! A well-designed process of surveying, reporting, goal setting, action planning and accountability can be a catalyst for change.

START WITH LEARNING HOW TO INTERPRET SURVEY RESULTS.

Likely, there is someone at your organization that is well versed in survey and data interpretation. It is **VITAL** you befriend this person, and also **VITAL** they feel reassured that an employee team who will be diving into data is not a threat to their position. We have seen many organizations where one person “owns the data”. They are the only ones who know how to read and interpret the data, therefore feel much ownership over it. Some survey interpretation and results are cumbersome! Be this person’s friend, embrace their inner data geek, and have them show you! Our best-case scenario is one where your team interprets and responds to data you are collecting on a quarterly basis, and each leader in the organization gets a **WEEKLY** report sent directly to their office printer so they can respond to issues in their own departments.

Ordinarily, survey vendors have in the fine print of your contract with them an offer for **FREE** (included) on site or virtual training for leaders and your team on how to create and run reports. Vital training from your data person, or the company is how to interpret what best to focus on.



CONNECT WITH US:
@scrubs2suite

info@capstoneleadership.net | 906.259.0542 | www.CapstoneLeadership.net



SOLUTION: Surveying & Improving the Patient Experience 1

This document, in part or total, is intended for the internal use of the contracted partner Individual or organization. Sharing outside of the individual or organization, without the written permission of a principal/co-founder of Capstone Leadership Solutions, Inc. is prohibited.

Copyright © 2020, Capstone Leadership Solutions, Inc. All rights reserved.

HOW TO *KNOW* WHAT TO FOCUS ON TO MOVE FROM GOOD TO GREAT.

Most survey companies will have that in their reporting to you. As a team, make sure you are carefully analyzing what you, as a team of employees from all over the organization can improve. We recommend you work to improve “one big rock” each quarter in your journey plans.

Some improvements may take longer! This is perfectly fine!

Make sure you communicate your plans to the Steering Team. Senior Leaders on the team will know what their individual department leaders are focusing on, so double work is not done.

Another great way to focus your efforts is to put together 12-week teams that simply work on “One Thing”. Maybe it’s admission time from the ED, maybe it’s Quiet scores, maybe way finding is an issue. You may add team members to work on the “One Thing” and then they leave you.

When interpreting your data and knowing how to move from GOOD to GREAT, a key element is the rating scale. We are fans of utilizing a five-point Likert scale and we find that this is what is most commonly used by survey vendors. An example of common wording and the corresponding points used in calculating a score for each element for a five-point scale is below.

1 = Strongly Disagree, Very Poor or Strongly Dissatisfied (0 points)

2 = Disagree, Poor or Dissatisfied (25 points)

3 = Neutral or Fair (50 points)

4 = Agree, Good or Satisfied (75 points)

5 = Strongly Agree, Very Good or Strongly Satisfied (100 points)

We have seen some organization-developed surveys in which a four-point scale is used by taking out the option to select a “neutral” response. This is in an attempt to have patients commit to being either satisfied or dissatisfied (or agree or disagree). While we prefer the five-point Likert scale, if organizations use another scale such as this, it is recommended that they use it consistently in their series of surveys so that they can have comparable trending of their results. Later in this Solution we will cover more on the topic of analyzing the results with the scale that is chosen.



CONNECT WITH US:
@scrubs2csuite

info@capstoneleadership.net | 906.259.0542 | www.CapstoneLeadership.net



**SOLUTION: Surveying & Improving the
Patient Experience 2**

This document, in part or total, is intended for the internal use of the contracted partner Individual or organization. Sharing outside of the individual or organization, without the written permission of a principal/co-founder of Capstone Leadership Solutions, Inc. is prohibited.

GETTING A HIGH SURVEY RESPONSE RATE

Several smaller organizations really struggle with a low “n” or number of survey responses so that one negative survey response skews your data for the month or quarter.

You want as many surveys filled out as humanly possible! Ask your Leaders rounding on patients to mention how closely the entire organization monitors the survey results. My key words to use with patients and their families were; “We are an organization that takes in the surveys and really listens to what they have to say. You will help us improve every aspect of our hospital if you send your survey back in for us”.

Your team could also devise a fun/cute reminder for patients as to the importance of returning their surveys. REMEMBER! Even Taco Bell is surveying now. Our patients are inundated with surveys. However, at some point all healthcare providers will be paid based partially on those survey results, and our patients do not know how important this is to us as an industry.

REACTING TO YOUR RESULTS

We want our patients to have a great experience – one that they will recommend to others, talk positively about to others and continue their loyalty to your organization.

So, we should not focus our efforts on our lowest scores and our lowest percentage of top box responses. That is a common mistake that teams make. Instead look at the highest percentage of GOOD results that you can move to GREAT. Moving the great number of people will serve your team better. Ignore the lowest scores- they are a small percentage, and likely a missed opportunity to Service Recovery.

Remember, if you are always better than your State and National average and better than your own results over time, you will win at the data game!

But how should we focus on the comments? We recommend that you look for trends in comments. Use comments to assist in understanding the why behind the data.

Often there can be isolated comments that are extremely negative and hurtful to individuals. Organizations and leaders need to avoid knee jerk reactions to isolated comments.



CONNECT WITH US:
@scrubs2csuite

info@capstoneleadership.net | 906.259.0542 | www.CapstoneLeadership.net



**SOLUTION: Surveying & Improving the
Patient Experience 3**

This document, in part or total, is intended for the internal use of the contracted partner Individual or organization. Sharing outside of the individual or organization, without the written permission of a principal/co-founder of Capstone Leadership Solutions, Inc. is prohibited.

Unfortunately, we have seen too many teams and leaders get stuck in the trap of focusing too heavily on isolated negative comments. If there is a trend of negative responses and it helps in understanding a low score on a particular survey element, then it is useful.

MONITORING YOUR IMPROVEMENT EFFORTS AT THE ORGANIZATION AND DEPARTMENT LEVELS.

At the team level, make sure you assess the data you are monitoring at every meeting.

At the department level, the status of patient satisfaction can be regularly monitored by a simple exercise at staff meetings.

If the department has a goal to work toward improving patient satisfaction, that topic and scores should open each staff meeting. Leaders can also communicate the action plan at daily huddles.

We recommend the organization's service goal and service initiatives are a topic of reporting by the [Voice of the CEO](#) at your CEO forums.

CALL TO ACTION

The commitment to the measurement and improvement of the patient experience is a testament to the organization's culture and values surrounding peak performance.



CONNECT WITH US:
[@scrubs2csuite](#)

info@capstoneleadership.net | 906.259.0542 | www.CapstoneLeadership.net



**SOLUTION: Surveying & Improving the
Patient Experience 4**

This document, in part or total, is intended for the internal use of the contracted partner Individual or organization. Sharing outside of the individual or organization, without the written permission of a principal/co-founder of Capstone Leadership Solutions, Inc. is prohibited.



CONNECT WITH US:
@scrubs2csuite

Info@capstoneleadership.net | 906.259.0542 | www.CapstoneLeadership.net



**SOLUTION: Surveying & Improving the
Patient Experience 5**

This document, in part or total, is intended for the internal use of the contracted partner Individual or organization. Sharing outside of the individual or organization, without the written permission of a principal/co-founder of Capstone Leadership Solutions, Inc. is prohibited.

Copyright © 2020, Capstone Leadership Solutions, Inc. All rights reserved.