

## *The Patient Experience Post*

Reflections from the Field  
July 2016



Since the mid-1990s, Baird has helped healthcare organizations nationwide improve the patient experience and enhance organizational culture. Baird's culture assessment and diagnosis include experience mapping, medical mystery shopping, and focus groups to reveal the real customer experiences within your organization. Using your patients' experiences, Baird and her team prescribe critical next steps for improving patient satisfaction and HCAHPS scores.

## Tactic Overload

by Angela Fieler, MPA, CMQ/OE  
Baird Group Consultant

Patient satisfaction, and the patient experience have been in the spotlight for several years now, resulting in the emergence of a new profession. In 2016, the Patient Experience Institute (PXI) certified its first group of Certified Patient Experience Professionals. The community of people working in the patient experience field, began developing the certification process in 2012. The process exam has been framed by the Beryl Institute's Patient Experience Body of Knowledge, and the content of the exam was derived from job analysis. Following a rigorous and standardized process, PXI has narrowed the focus to 4 domains, each containing 3 tasks. The end result is an impressive list of responsibilities; one that contains powerful phrases like "drive implementation...", "inform, motivate, inspire, encourage, and support action...", "champion...", "drive innovation and change...", and "focus...on driving performance excellence, organizational efficiency, and positive experience outcomes..."

Given these tasks, it comes as no surprise that Patient Experience Professionals (PXPs) are under immense pressure to make things happen. In our daily practice, we see evidence of this pressure across the care continuum. It manifests itself in many ways, but perhaps the most common sign of this pressure is what we call "tactics overload." In my practice, the most extreme example of this was a CNO who was frustrated that HCAHPS scores hadn't changed, despite the fact that she and her team had implemented 27 tactics over the last three months. And no, that is not a typographical error – the number of initiatives that organization had under development, was 27!

Nowhere on the PXI list of domains and job tasks will you find words like "at a reasonable pace" or "don't change too many things at once." But in *Domain IV: Organization Culture and Leadership*, there are key phrases that might have helped this CNO. In task 1, the need to translate experience strategy into measurable action plans, is spelled out very clearly. Had this CNO used a system to categorize her tactics into those that were in development, in testing, in roll-out, in assessment, and in full implementation, she would have realized that only one of her 27 tactics had actually reached the full implementation stage. And, that tactic had only been fully implemented for the last month, meaning it might be six to eight weeks before she started to see even the slightest impact on HCAHPS scores.

Task 1 also says the PXP is responsible for "supporting effective implementation, in collaboration with various stakeholder groups." Perhaps, if the CNO had consulted with other stakeholders, who were being overwhelmed by the volume of changes the CNO was producing, and simply couldn't keep up, together they might have been able to implement the 27 tactics more effectively over the course of time. Even if the stakeholders were unable to agree on a more realistic implementation timeline, the CNO still had a responsibility to support the development of both employees and stakeholders, in her organization. Task 2 in the Organization Culture and Leadership domain talks about the need to "promote employee engagement practices." Overwhelming employees with change is clearly not an effective employee engagement strategy. Task 3 in that same domain, also spells out the need to "support the development of stakeholders, to enhance individual and organization competency," suggesting that delivering an optimal patient experience is a group effort, and one that takes both time and energy.



Transforming culture. Shaping patient experience.

Take a moment to reflect on how you respond to the pressure to perform, and before you execute your tactical plan, remember that creating the best possible patient experience is a never-ending journey, and one that you should not take alone.

### Copyright Use

*Want to use this article in your e-zine, newsletter, or on your Web site? You may, as long as you include the following statement:*

Nurse, author, and consultant Kristin Baird, "Healthcare's Customer Service Guru," is the author of *Raising the Bar on Service Excellence: The Health Care Leader's Guide to Putting Passion into Practice* (Golden Lamp Press, 2008), *Reclaiming the Passion: Stories that Celebrate the Essence of Nursing* (Golden Lamp Press, 2004), and *Customer Service In Healthcare: A Grassroots Approach to Creating a Culture of Service Excellence* (Jossey Bass, 2000). The Baird Group provides consulting, mystery shopping, and training services for improving the patient experience. To learn more, please visit <http://baird-group.com> or call 920-563-4684.