



PATIENT EXPERIENCE BOARD OF TRUSTEES

DATE: DECEMBER 6, 2017

PLACE: K-107

CHAIR: MAUREEN DEE

CALLER: Akram Boutros, MD, FACHE

SECRETARY: Johanna Hamm, PFA

INVITED:

CHAIR: THOMAS M. McDONALD

START TIME: 10:08 A.M.

SECRETARY: Michael Stern

Terence Monnolly

RECORDER: MJ CARTER

ADJOURNED: 11:10 A.M.

SECRETARY: Dan Lewis

Dr. J. B. Silvers

SECRETARY: Bernard Boulanger

Vanessa L. Whiting

SECRETARY: Sara Laskey, MD

Mr. Mitchell C. Schneider

SECRETARY: Jane Platten

SECRETARY: Melissa Kline

SECRETARY: John Moss

PRESENTER:

SECRETARY: Nabil Chehade, MD

Michelle Mencke

SECRETARY: Patricia Morgan, PFA

Patricia McClain

SECRETARY: Laurel Domanski Diaz, PFA

TOPIC	DISCUSSION	ACTION ITEM/FOLLOW UP
Review of Minutes	Minutes from the September 13 th meeting approved as written.	
Emmi Update	<p>51% of patients who receive an Emmi start the program proceed to start 2 or more Emmi programs. Only 12% of patients who receive program notifications via email go on to start their Emmi program.</p> <p>Emmi is proven to improve our cancellation rate which results in year to date recovered revenue of \$726K.</p> <p>Creative messaging to diabetic patients, in the form of Emmi calls, informs them of diabetic eye exam they should schedule as part of their care and shows we care about them.</p> <p>Patients are satisfied with Emmi. 87% of patients said that Emmi answered questions they would have called their provider about, perception of MetroHealth improved for 76% of patients and 90% of patients felt more comfortable with scheduled procedures after viewing their Emmi.</p> <p>Thirty-day readmission rates for Medicare patients was 39.4% lower for patients who engaged in an Emmi. Patients who did not engage in an Emmi call had a 20.4% readmission rate while Medicare patients who did engage in an Emmi call only had a 12.4% readmission rates.</p> <p>Partnering with pharmacy, we have engaged MetroHealth's Warfarin patients, by initiating an Emmi program specifically for them. Patients have reacted positively.</p>	<p>X</p> <p>X</p> <p>X</p>

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Food Services Update	<p>Patricia McClain, Director Food and Nutrition services brought in new menus the hospital has instituted the second week of October. Menu options rotate on a two- week cycle and incorporate items such as Southwest chicken breast and frittatas. The entire cycle has run three times.</p> <p>Items such as corn are prepared with salt-free seasonings. Our rehydrated potatoes and pasta have reduced sodium content. Whole grains have been increased across the board. Liquid eggs are a combination of whole eggs and egg whites.</p> <p>Positive patient feed-back has been shared with Food Services via Humm, the hospital's real-time feedback program.</p> <p>The new hospitals at Parma Snow Road and Cleveland Heights will have room service. Patients will be able to phone the main campus when they're ready to eat. The order will be directed to appropriate kitchen and then the meal will be sent back to the patient within 45 minutes of ordering. Visitors will be able to order off the same menu, at a charge, so family members can eat with the patient. Snacks will be available on the floors as well. Room service ordering ensures the patients will eat when they are hungry and will result in a reduction in food waste.</p>	
OPX – Year in Review	<p>Dr. Laskey presented department highlights from 2017 for Survivor Recovery Services, Patient Experience, One Metro Experience, Language Access, Pastoral Care, Arts in Medicine, and Volunteer Services. Specifics can be found in the Board book published for the December 6th meeting.</p>	
Data – OPX Year in Review Data – Complaints and Grievances	<p>Patient Relations Overview:</p> <ul style="list-style-type: none"> • Katerina Dubovikova, data analyst, presented data that shows continued decrease in complaints and grievances. • Forty percent of grievances have been resolved in seven days. While only thirty-four percent require seven-day extension letters. Eighty percent of total grievances are resolved in twenty-eight days. • There have been notable improvements in phone access to the system as seen in the decrease in complaints; with a total of 772 complaints in 2016 we are projecting to receive only 215 by the end of 2017. <p>Top 5 Patient Concerns, per 100,000 patients:</p> <ol style="list-style-type: none"> 1. Access to Care – Unable to Reach Clinic/Staff/Live Person 	

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	<p>2. Access to Care – Excessive Wait on Hold/Long Recording</p> <p>3. Service – Excessive Wait for Prescriptions</p> <p>4. Access to Care – excessive Wait at Clinic</p> <p>5. Communication – Staff Not Helpful</p> <p>Ambulatory Network Preliminary Results, 94,929 surveys</p> <ul style="list-style-type: none"> • Fourteen clinics were over the goal of 90.7%. These clinics scored between 91.7 – 96.2% • Eight clinics made target of 90.7%. These clinics scored between 90.7 – 91.6 • The balance of the clinics were either at minimum or below target, scoring between 87.4 – 90.6% <p>Hospital Patient Experience:</p> <p>Nurse Communication: Careful listening, Courtesy and Respect, and Patient Education:</p> <ul style="list-style-type: none"> • Target percentage for 2017 is 81% of top box. Overall score is 77.5%. Forty-four percent of units were at target or higher. <p>Discharge planning: Knowledge of Symptoms, Availability of Help After discharge from the Hospital:</p> <ul style="list-style-type: none"> • Target percentage for 2017 is 89% of top box. Overall score is 84.1%. • Thirty-three percent of units were at target or higher. 	

Next Meeting: 2018 Calendar February 14, 2018; D K-107; 10:00 a.m. - Noon