

## PATIENT EXPERIENCE BOARD OF TRUSTEES

DATE: FEBRUARY 14, 2018

CHAIR: MAUREEN DEE

CHAIR: THOMAS M. McDONALD

RECORDER: MJ CARTER

PLACE: K-107

CALLED TO ORDER: 10:06 A.M.

ADJOURNED: 11:35 A.M.

X Akram Boutros, MD, FACHE

X Michael Stern

E Bernard Boulanger

X Sara Laskey, MD

X Jane Platten

X Melissa Kline

X Larry Chadwick

X John Moss

E Nabil Chehade, MD

X Seona Goerndt

Patricia Morgan, PFA

E Laurel Domanski Diaz, PFA

X Johanna Hamm, PFA

### Invited:

Terence Monnolly

X Dr. J. B. Silvers

Vanessa L. Whiting

Mr. Mitchell C. Schneider

### Presenter:

X Diane Suchetka

X Jennifer Lastic

TOPIC	DISCUSSION	ACTION ITEM/FOLLOW UP
Review of Minutes	Minutes from the December 6 <sup>th</sup> meeting approved as written.	
Overall Strategies	<p>Dr. Laskey introduced the new director of Patient Experience, Seona Goerndt, and new board member Larry Chadwick to the board.</p> <p>Dr. Laskey presented overall Patient Experience strategies to the board. To align with a 2017 system goal, MetroHealth ambulatory clinics reached a target for <i>recommend this practice</i> with an accumulative rating of 90.6%. Several clinics reached the stretch target of 91.7%. Credit is given for scores of 9 or 10.</p> <p>MetroHealth as seen an increase in the number of returned/answered surveys. The current number of returned/completed survey stands at 95,540.</p> <p>Patient loyalty progress. Many clinics made improvements moving their patient loyalty scores. Bedford who now serves the Lee Harvard patient population after Lee Harvard closed, has managed to improve their score while taking on the additional patient load. This is a very impressive achievement.</p> <p>Complaints and grievances overall went down. Per 10,000 visits there were 22 complaints and grievances as compared to 2016 where we received 37 complaints and grievances per 10,000 visits. The initiative to respond to our patients within 7 days target 14 days outside limit. Year was at 74% by Dec we were at closure in 28 days we were at 100%. By Q4 at 100%.</p>	

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	<p>Decrease in <i>access to care issues</i> especially in phone and wait times at the clinics. There was an increase in complaints and grievances about billing and the billing statement issues, specifically what people are seeing in the statement. Patient Experience is working with Revenue Cycle and Financial Services on how the billing statement can be improved.</p> <p>Internal goals: Nursing communication. With help from Melissa Kline and her team, we increased over half of in-patient nursing units to move above the 50<sup>th</sup> percentile</p> <p><b>2018 Initiatives for Consumer Customer Experience:</b></p> <p>Patient Experience will be focusing on four key areas in 2018:</p> <ul style="list-style-type: none"> <li>• Monitor access</li> <li>• Living our brand, Welcome. Listen. Care.</li> <li>• Reputation Management</li> <li>• Communicating with our customers for ongoing loyalty, retention and share of wallet</li> </ul> <p><b>Monitoring access:</b> Expansion of HUMM real-time feedback throughout inpatient units. Improved service recovery response via real-time email and phone survey methodology. Happy or Not stands in all outpatient facilities and clinics will provide immediate feedback.</p> <p>We're initialing post-discharge phone call pilot with the emergency department. Our plan is to phone every patient discharged from the main emergency department and see if we can understand and improve any ED scores. Goal 1 have immediate touch point with patient to find out if there is service what was it and how can we change it. 2. Getting right discharge instructions or post-med or appointment or med clarification and they are also access issues we want to address. The information will help the ED focus on one item, work on it, address it and make a positive change.</p> <p>We'll be utilizing the happy or Not in all the outpatient facilities and clinics which will enable us to have immediate feedback on patient visits. We will then be able to address concerns and be able to change them in the moment. Utilizing Happy or Not will help us improve the ED scores.</p> <p><b>Welcome. Listen. Care. (WLC):</b> WLC focuses on living our brand, <i>Welcome. Listen. Care. Caring People Caring for People, every encounter is an opportunity.</i> Two newly created videos were shown and Dr. Laskey discussed</p>	

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	<p>how they will be utilized in the roll out of WLC. WLC was piloted at the W150th ambulatory surgery center and at West Park. Employee feedback was positive. The pilots are moving to Parma State Road, and the Broadway sites.</p> <p>This training emphasis how we all welcome, listen and care in our unique way. This is part of a personal and bigger brand that we need to emphasis to our employees. One of the things we're doing is capturing the stories of how our employees are doing that. These stories did become part of the basic training. The videos will reside on YouTube and available for multiple viewings.</p> <p><b>Reputation Management:</b></p> <p>In her new role as Manager Reputation Management, Diane Suchetka is focusing on management of MetroHealth's reputation. Reputation management can mean helping with crisis situations to someone tripping in a crack in the side walk. All situations effect our reputation.</p> <p>Diane is working to improve MetroHealth's Improve Glass Door ratings. Average rating on Glass Door is 3.3. MetroHealth is at 3.7 as of Jan 1, 2018. As of February 14, our rating is up to 3.9. The highest rated companies are at 4.5 and if MetroHealth's ratings would move higher any faster it would look suspicious and we don't want our credibility questioned. Glass Door is predominantly viewed by millennials and out-of-towners. GD is becoming more important.</p> <p>Our next goal is to improve MetroHealth's ratings on Yelp. Yelp reviews are not great for MetroHealth. Individual providers get good ratings but the system doesn't. Getting a negative review retracted is near impossible. A labial comment or threats are some of the few instances where negative comments will be removed. Yelp will ding an institution if you panhandle recommendations.</p> <p>Reputation management and Patient Experience are working together to write a response protocol. We want the responses to be well written</p> <p>Patients who score us high on <i>rate this hospital</i> or <i>recommend to friends/family</i> are being asked to also add a review on Google, Facebook, HealthGrades, and Vitals.</p> <p>We will be responding to compliments and complaints on our own website in Q2; and we will consider responding to targeted issues on external websites in Q3 and Q4. We believe less than two other health systems in the country are currently doing this. Under our current system traffic to individual provider pages increased 17% in the first year. The new website will allow for better</p>	

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	<p>Google analytics.</p> <p>The OPX goal for 2018 is to increase provider reviews by 5-20%. If in Q2 we see negative reviews we will have to solve the problem. We will evaluate effectiveness and move forward in Q3 and Q4.</p> <p>Improving communication with our patients will be reached via working with our Patient and Family Advisors, working with Patient Experience and other resources. Our goal is to understand and develop a comprehensive outreach plan by Q4.</p>	
Humm Feedback	<p>Jennifer Lastic Supervisor gave the committee an update on Humm. Humm is a real-time feedback platform where patients are invited to share feedback on a touchscreen tablet while in our care.</p> <p><b>Humm Implementation:</b></p> <p>Humm was piloted on 6C and 8C in November of 2016. Medicine floors were added in August of 2017 followed by the Surgery floors. Starting in 2018 Critical Care units were added and the Medical centers at Parma and Cleveland Heights were added in February. As of 2017 there have been a total of 8,300 feedback session.</p> <p>The Humm program offers service recovery opportunities. When the patient gives negative feedback, it allows the manager to follow up with the patient and work to resolve all concerns while the patient is still receiving care.</p> <p>Humm dashboards are located the nursing stations on all the floors. Only positive comments and feedback can be seen by staff which bolsters staff and keeps staff engaged. Responses from both our patients and staff have been overwhelming positive.</p> <p><b>Humm: Real-time Feedback for Residents:</b></p> <p>Patient Experience approved Humm to create a program designed specifically to obtain patient feedback on our residents. In collaboration with Marcie Becker, Drs., Zack, Magliola, Laskey and Jennifer Lastic worked to create a milestone-based question bank and the initial process/structure of the program. Pilots launched in Family Medicine and Emergency Medicine Resident programs.</p> <p>In Q1 of 2018 Humm will launch in OB/GYN, Med/Peds, Pediatrics, PM&amp;R and the ENT Resident</p>	

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	programs.	

Next Meeting: 2018 Calendar May 9, 2018; D K-107; 10:00 a.m. - Noon