Voice of the Customer Program

A Patient Experience Initiative at KFMC

Dr. Ali T. Asery Executive Director of Patient Experience

28th February, 2016





King Fahad Medical City

- 1,200 beds and expanding to
 1,800
- 4 hospitals, 4 specialized centers and FOM
- More than 8,000 employees
- Tertiary/quaternary services
- Recognized residency and fellowship training center
- The major referral center for MOH







KFMC Strategic Themes





Strategy House

KFMC

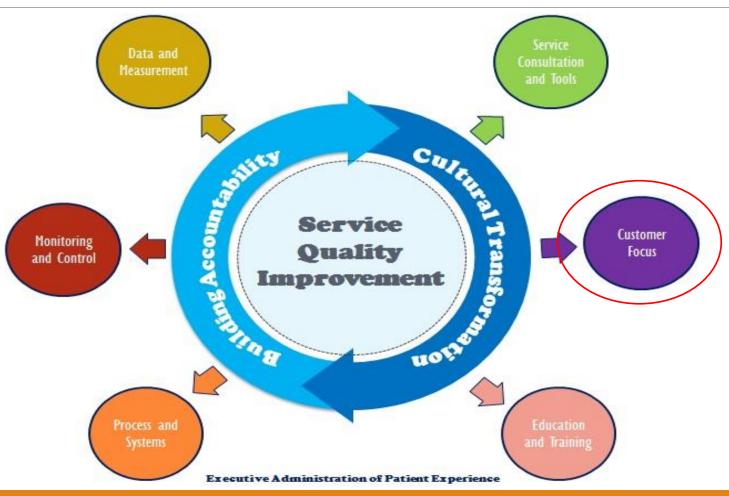
PATIENT EXPERIENCE

The patient experience is everyone and everything patients encounter throughout the continuum of care.

	NOISIV	To be the regional benchmark in Patier Experience by 2016	nt sta pos	keholders to p	to partner with KFMC rovide a safe and ce for patients &	MISSION	
STRATEGY	 Raise awareness abou caregivers Engage caregivers – W 	Partner with and reach to all levels Raise awareness about patient experience to all caregivers Engage caregivers – Winning hearts & minds Improve patient satisfaction levels			 Apply best-in-class data management systems Enhance & harmonize internal processes 		
•	TACTICS	PATIENT PROJECTS		EGIVER DJECTS	PROCESS PROJECTS	CULTU ANSFORI	
	VALUES	EMPATHY / COMPASSION RESPECT				TR	



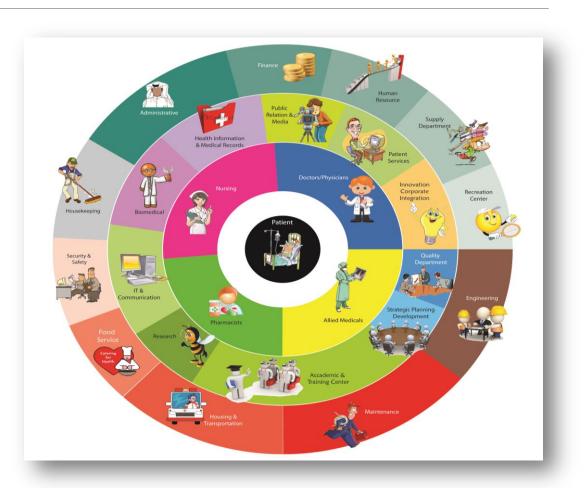
KFMC Patient Experience Operating Model





Patient-Centered Care

- Patient first
- Patient is the reason of our existence
- We are all care givers





What Do Patients Want/Need?

- Communication/Trust
- Information
- Education
- Self-care & empowerment
- Engagement/involvement
- Support (psychosocial, emotional,....)
- Safe and high quality care (best practice)
- Respect & dignity
- Prompt access to care



VOC as a Patient Right

Every patient has the right to voice his/her concerns about the care provided. And it is the

responsibility of the healthcare facility to provide multiple, easily accessible channels through

which those concerns can be communicated.

* "Your most unhappy customers are your greatest source of learning." Bill Gates



Why VOC?

Voice of Customer (VOC)

provides insights on the customer's wants, needs, expectations and preferences that are essential to any business or service. Thus, involving the customer throughout the Quality Improvement process makes it possible to deal with the issues that directly impact customer experience as they come up, rather than allowing a final product, service or process to be completed and then finding that it must be reworked.

Patient-Centered Care

"Providing care that is respectful of and responsive to the patient's preferences, needs, and values, and ensuring the patient values guide all clinical decisions."



VOC and Customer Loyalty/Retention

While loyal and satisfied are not synonymous, having satisfied customers is critical to building a loyal base. One strategy that helps build a loyal customer base is to implement a Voice of the Customer (VOC) program. With a well implemented VOC program, best-in-class organizations are able to grow their loyal customer base **by listening** and **deeply understanding** the needs of their customers. When you're able to tease out insights from customer feedback and make meaningful changes, the effects are seen in customer retention rates and top-line revenue numbers.



Impact/Achievements of VOC

- Patient Engagement (PFAC)
- □ Wi-Fi Connectivity/waiting areas renovation
- Patient Advocacy Service
- Support Groups
- □ Interpreters Project
- Physician Communication skills courses
- Patient Experience Awareness Course for Employees(PEACE)
- Cultural transformation & value based care



Complaints, Surveys and Customer Loyalty/Retention

If your patient complains on a real-time survey, you still have a chance to win them over. Of those who complain, most will come back if you can resolve their issues quickly and courteously. **Speedy complaint resolution** can help you keep present customers and attract new ones by changing word-of-mouth advertising from negative to positive.

A high level of patient satisfaction leads to greatly increased customer loyalty thus retaining them, which is an important driver of long-term financial performance in a medical practice. **Satisfying your current patients costs less time and money than attracting new ones** – not to mention that the best form of advertising to attract new patients is **positive word-of-mouth** from existing customers.



Effective Listening to Voice of Customer



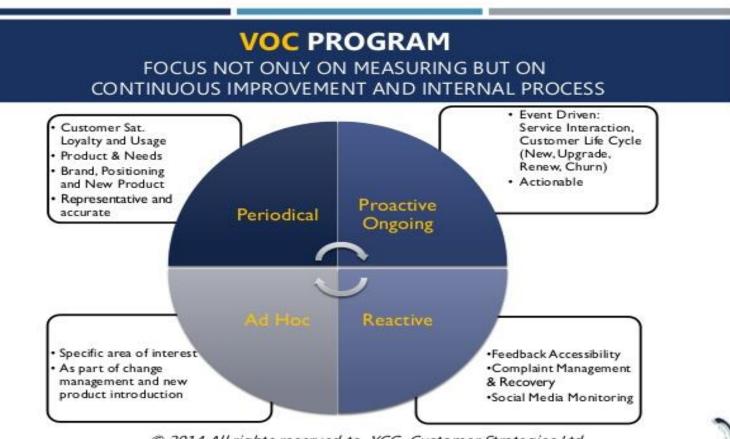


Effective Listening to Voice of Customer





VOC Program



© 2014 All rights reserved to YCG Customer Strategies Ltd



Successful VOC Program

 Customer experience and feedback data should be seen as fundamental to the maintenance and improvement of care at the facility.

- Organizations should invest significantly in systems and processes to gather and monitor this information.
- Organizations should establish a multi-dimensional approach to utilize a broader 'basket' of measures based around emotional, affective, behavioral and cognitive themes.
- Listen to all; every body counts
- Be scientific and use best practice
- Compare and use benchmarks
- Develop action plans and report results
- Transparency is key; share data and results

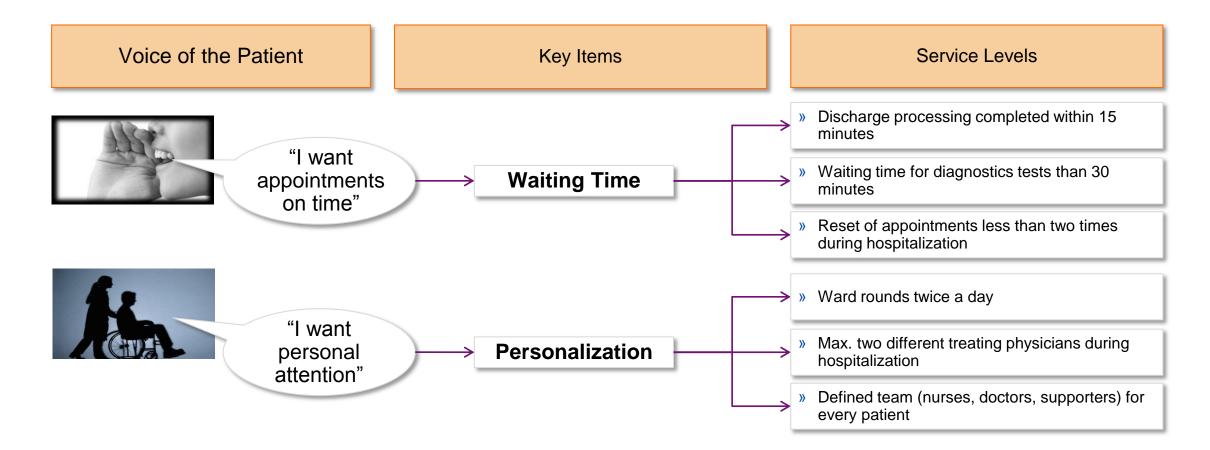


VOC Program Components

- 1. Surveys
- 2. Leadership Rounds
- 3. Patient Complaints
- 4. Patient and Family Advisory Council
- 5. Live with the CEO
- 6. Community Meeting
- 7. Focus Groups
- 8. Patient Stories

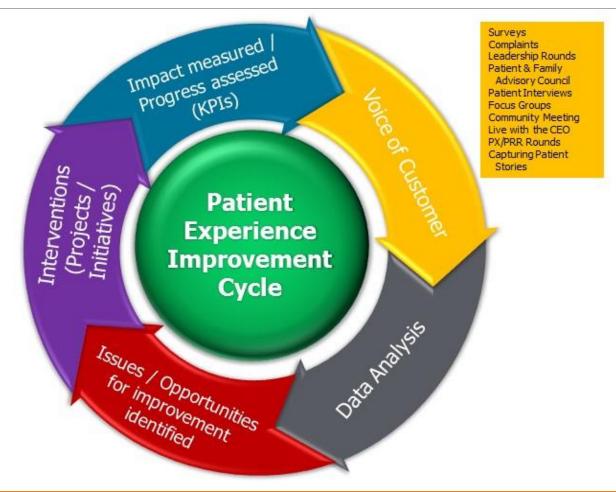


Voice of the Patient – Critical to Quality



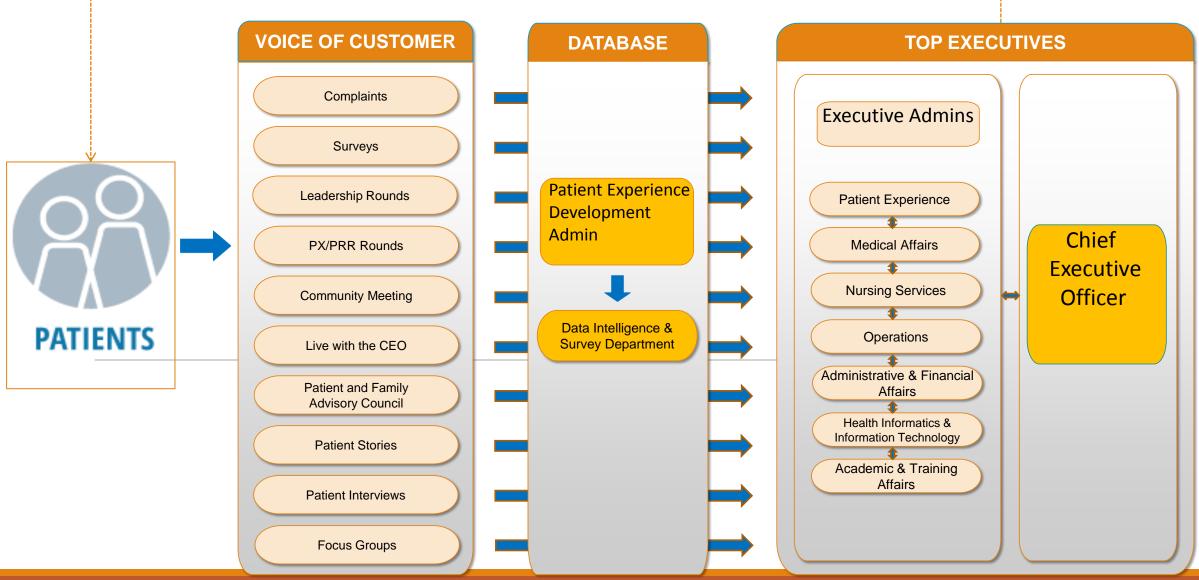


VOC Cycle at KFMC





VOC Framework





Surveys

✤ KFMC established survey and data intelligence department.

Multiple 3rd party surveys were conducted (inpatient X3, outpatient, surgical, ED, staff engagement, organization culture,...)

- Data are analyzed and compared with national and international benchmarks
- Results are communicated with leaders and stakeholders
- Improvement plans and interventions are established by the related area/service
- Impact of interventions is measured



Complaints

Different channels are available to receive complaints

There is a defined time scale for response and escalation process

- There is an electronic complaint documentation system
- Trends are identified and addressed.
- The style is being changed from reactive to proactive.



Patient and Family Advisory Council





Some issues raised by patients in (PFAC)

- Welcome (1st touch point) by front line staff needs improvement
- Patient concerns are considered seriously(compassion/empathy)
- Breaking bad news in a non-professional way
- Lack of psychological/emotional support services/groups
- Poor signage & way finding
- Long waiting times for appointments
- Lengthy process in consultations/initial assessment upon arrival to KFMC-ED
- Difficulty in transportation of patients with special needs from and to KFMC
- Language barrier



Live with the CEO

- An internally broadcasted direct interview with the CEO and EDPX.
- Conducted quarterly.
- Patients can call from their rooms and raise any concern or suggestion.
- The issues are forwarded to the concerned department/services for action.





Leadership Rounds

- A quarterly activity where KFMC leaders are distributed in small groups to visit patients and explore their concerns and experiences.
- It is an opportunity to discuss the issues first-hand with the patients and staff.
- ✤ Walk the talk.



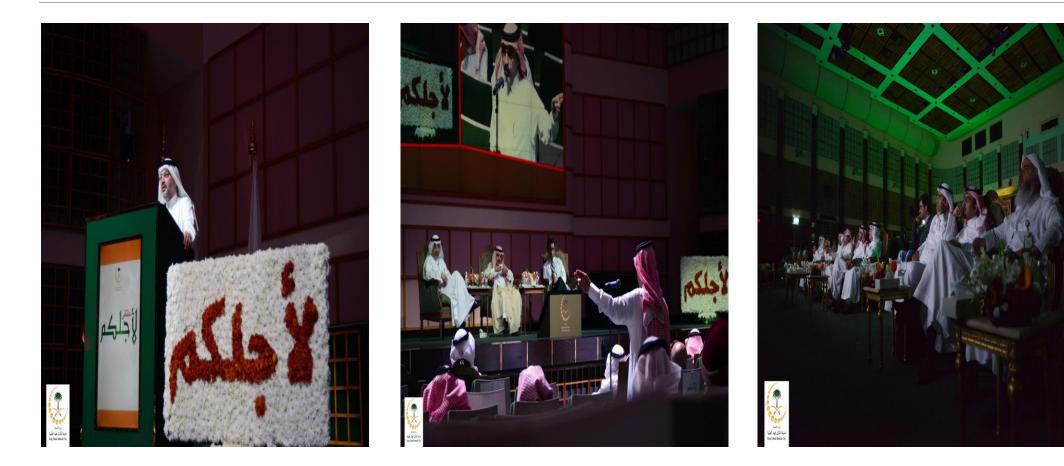


Leadership Rounds – Action Plan

	в	C	D	E	F	G	н	E
				PX Lo	adership Rounds			
No.	Theme	Domain	Issue	Notes	Stakeholders	Urgency	Stakeholders notes/Feedback	Action
1			 It takes long time to transfer patients from other hospitals to KFMC (11 days for one patient). 					
	S		 Delay in admission because the register staff wrote the number wrong and patient was unhappy that he did receive an apology 					
	ACCESS	Steel	 ER services were reported to be quick, excellent, and to demonstrate good communication with patients. 					
	AC	4	Patients requested more orientation to the unit from the nursing staff for example on what to do if there is a S. Some patients complained that their rights vere not.		_			
			Explained		1			-
	· · · · ·	-	7. Flehabilitation patients wanted more rehabilitation time/sessions.					
		c c	Delag in doctor consultation in some areas. Some communication problems and lack of empaths when communicating news about closing a					
2	NO	nication unicatio unicatio	Datient file. 3. One patient commended physicians for informing her of the plan of care.					
	CAT	1 Nuse Commu 2 Doctor's Comm 3. Medicine Comm	Nurses did not always report patient requests, to other departments especially maintenance. Sinformation not provide d registerly about patient's					
	MMUNICATION		health. 6. One complaint about <u>lack of empaths</u> with patient while telling her that she will lose her baby.					
			 Health professionals were not consistent in the amount of information they communicated to patients. Translation problem reported where the patient was 					
	- ā		up able to up depart and the information provided			and the second second		
	0	Good points		2. Other Patients	diacoatient said " nursing or said " explanation was provi its commented that some pri	ded and communica	ation v as excellent"	
	-		1 Blankets are not replaced frequently.					-
	ES		2 Trash is full and not replaced frequently					
	5		3. Bathrooms are frequently wet with bad smell.					
	AMENITIES		4 Bathrooms were not repaired quickly by the maintenance					
	8		5. Cleanliness in some rooms was problematic. 6. Moise due to TV being watched by other patients.					
			7. Shared room caused some problem with noise.					
3	<u> </u>		8. Most wards were reported to be quite.					
3			10. Some patients complained that the food is cold.		_			-
3	NN							
3	VIRONME		11 Kitchens in the wards are not supplied with coffee, tea, cold drinks snakes (24h)					
3	ENVIRONMENT		Kitchens in the vards are not supplied with colfee, tea, cold drinks snakes (24h) 12 TV remotes are not working. 13. Lack of entertainment for patients and families, patients particularly arked for sport channels.					
3	-		Kitchens in the wards are not supplied with coffee. tea. cold drinks snakes (24b). Iz TV remotes are not working. Ia. Lack of entertainment for patients and families.					
3	HERS		Kitchens in the wards are not supplied with <u>colfee</u> . tea. cold drinks snakes (25h) <u>12. TV remotes are not working.</u> <u>13. Lack of entertainment for patients and families,</u> <u>patients particularly asked for sport channels.</u> <u>1. In Children's Hospital the mother's bed is not on the</u> <u>same level as the child's bed which makes it difficult</u>					
	ERS	s CARE	11: Kitchens in the wards are not supplied with golfee, tea, cold drinks snakes (24h). 12: TV remotes are not working. 13: Laok of entertainment for patients and families, patients particularly acted for sport channels. 1. In Children's Hospital the mother a bed is not on the same level as the child's bed which makes it difficult 2. Complaint about short ulsitting time especially for witters coming from outside Flyadh. 3. Most patients appear to be initially happy and only discussed their concerns when prompted further.				107	



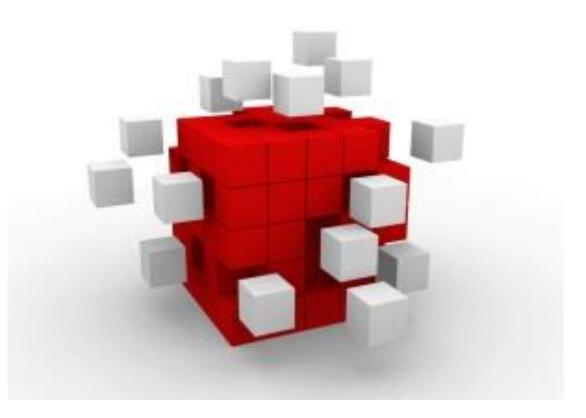
Community Meeting (For You)





"Customers don't expect you to be perfect. They do expect you to fix things when they go wrong." –Donald Porter, British Airways







Thank You

