Highlighting the Patient Perspective: Assessing the Impact on Staff of Videos that Convey the LVHN Patient Experience

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Hypothesis:
If LVHN nursing directors and senior administrators are shown two videos portraying the typical patient’s experience, then the majority of those surveyed will agree that the videos had at least some impact on them and increased their understanding of the patient’s perspective.

Abstract:
This study aims to answer the research question: Does observing the hospital experience through the patient’s eyes impact hospital professionals and increase their understanding of the patient’s perspective? Healthcare in the United States is becoming more patient-centered, and LVHN is attempting to facilitate this shift. HCAHPS, a government-led patient-satisfaction survey system, provides valuable data about what patients want from their healthcare providers. The researchers analyzed Lehigh Valley Health Network’s HCAHPS data and created two videos that attempt to humanize this raw data and therefore make it meaningful to staff. These videos were shown to Senior Administration and Nursing Directors, and both groups were surveyed about how much of an impact they felt the videos had on them personally. The results showed that 90% of staff surveyed felt the videos had between “Some Impact” and “Significant Impact” on them. Additionally, there was an overall increase in how “in tune” they felt they were with the patient’s perspective. This study has implications for successfully promoting patient-centered care in the future. According to the results, conveying the patient perspective to hospital employees through videos could increase awareness of what is important to the patient and improve patient-satisfaction overall.

Introduction:
Healthcare in the United States is currently experiencing a fundamental shift towards patient-centered care. Many hospitals around the country are actively making changes to foster a patient-centered attitude throughout their inpatient and outpatient facilities (Hibbard, 2014). The US government’s Center for Medicare and Medicaid Services (CMS) is promoting patient-focused healthcare as well through the implementation of a system known as HCAHPS. Hospital Consumer Assessment of Healthcare Providers and Systems, or HCAHPS, is the first ever initiative to create a “national standard for collecting and publicly reporting information about patient experience of care” (CMS.gov, 2014). Because of HCAHPS’s uniformity across the board, hospitals can now compare their patient satisfaction ratings to other hospitals locally, regionally, and nationally (CMS.gov, 2014).

Lehigh Valley Health Network is no exception to the patient-focused trend. LVHN is currently reporting HCAHPS scores monthly, which tell of whether or not the hospital’s patients are satisfied with the care here. Lehigh Valley Health Network’s HCAHPS scores have the advantage of communicating what is important to
the patients, as told by the patients. However, often times what is important to the patients according to these surveys is not always effectively communicated to hospital staff. Unfortunately, the data that HCAHPS provides to the hospital is a spreadsheet with thousands of individual scores and comments, which can be overwhelming and difficult to ascertain what the patients are really trying to say about their care.

Here at LVHN, EJ Rovella recognized this gap between just receiving and reporting the overwhelming HCAHPS raw data to staff and actually making this patient satisfaction data meaningful to them. EJ enlisted two research scholars to undertake a project that attempts to bridge this gap by taking pieces of HCAHPS data and humanizing it. This project was done with the goal of allowing the staff to come to the realization that HCAHPS data is not just meaningless numbers, but real patients who have the answers of how to make our hospital stays not only bearable but exceptional.

Methodology:

The first half of the project was to create two accurate and effective videos which portray a typical hospital stay from the patient’s perspective, based on HCAHPS data. The first video was titled “Through the Eyes,” and portrayed a typical patient’s stay from the perspective of the patient. Care was taken during the outlining, scripting, filming, and editing process in order to ensure that the video reflected factual data. In order to do so, the researchers utilized HCAHPS data obtained from patient satisfaction surveys sent out by the federal government to recent LVHN patients. In particular, the researchers used Lehigh Valley Health Network Cedar Crest Campus HCAHPS data from April and May 2015 (LVH Inpatient Comments, 2015, Rovella 2015). This information was gathered, analyzed, and provided by E.J. Rovella.

From this data, the following subjects were determined to be the seven most prevalent patient satisfaction complaints:

- Emergency Department wait times
- Use of hallway beds in the Emergency Department
- Nurse communication
- Pain management
- Coldness
- Doctor communication
- Quietness at night

The video was then scripted from a fictional patient’s point of view and filmed as if looking through this patient’s eyes, in an effort to allow staff to visualize what it is like to be in the patient’s shoes. The second video was titled “Patient Quotes” and featured a mixture of HCAHPS survey data quotes, as well as quotes from patients that the researchers spoke to in the Emergency Department throughout the month of June (LVH Inpatient Comments, 2015, LVH ER Comments, 2015). This video consisted of pictures of Emergency Department patients holding up a whiteboard stating a positive or negative comment they had about their stay, accompanied by audio recordings of their statements. Note that audio and visual recording consent forms were first obtained. Also included in the video were typed quotes from real HCAHPS surveys with an audio recordings of the quote being read. Varying voices were used to read the quotes from the HCAHPS data.

The second half of the project was to show this video to two different audiences which consisted of LVHN staff members, and measure the amount of impact they felt the videos had on them personally. The video was shown first to a group of 48 hospital
administrators at a meeting held on July 8, 2015. The researchers introduced themselves and gave a brief explanation of the purpose of the study, asked the administrators to fill out two preliminary questions via paper survey, then played both videos. After the videos, the administrators were asked to answer the remainder of the questions. The survey utilized a Likert scale, allowing the responder to choose from a scale of 1 to 5, with 1 meaning “None” and 5 meaning “Significant” (Losby, 2012). The survey was as follows:

1. How in tune do you think you are with the typical LVHN patient’s perspective?
2. How aligned is LVHN with the patient’s perspective?
3. How much of an impact did the “Through the Eyes” video have on you?
4. How much of an impact did the “Patient Quotes” video have on you?
5. Which video do you think would better increase staff morale and promote positive changes?

Note that the first two questions were asked both before and after viewing the video in order to see if viewing the videos changed the staffs’ responses. Using the same procedure, on July 17, 2015 the videos were shown to the Nursing Directors meeting, in which 39 nursing directors were surveyed.

Results:

A total of 87 hospital staff were surveyed, broken down into 48 administrators and 39 nursing directors.

Figure 1 demonstrates the responses to the question, “How much of an impact did the Through the Eyes video have on you?” This histogram shows that 1 person reported a Level 1 impact (None), 8 people reported a Level 2 impact, 28 people reported a Level 3 impact (Some), 37 people reported a Level 4 impact, and 13 reported a Level 5 impact (Significant). The mean response to this question was 3.6.

Figure 2 demonstrates the responses to the question, “How much of an impact did the Patient Quotes video have on you?” This histogram shows that 0 people responded with a Level 1 impact (None), 9 people responded with a Level 2 impact, 26 people responded with a Level 3 impact (Some), 32 people responded with a Level 4 impact, and 20 people responded with a Level 5 impact (Significant). The mean response to this question was 3.7.

Figure 3 demonstrates the responses to the question, “How in tune do you think you are with the typical LVHN patient’s perspective?” This line graph shows that the mean response, between both administrators and nursing directors, before viewing the videos was 3.9. The mean response after viewing the videos was 4.1.

Figure 4 demonstrates the responses to the question, “Which video do you think would better increase staff morale and promote positive changes?” This pie chart shows that 49.4% of those surveyed chose Patient Quotes, 26.4% chose Through the Eyes, 18.4% chose Both, and 5.7% chose Neither.

Discussion:

The data supports the hypothesis that if LVHN nursing directors and senior administrators are shown two videos portraying the typical patient’s experience, then the majority of those surveyed will agree that the videos had at least some impact on them and increased their understanding of the patient’s perspective. Figures 1 and 2 show that the average staff surveyed felt that both videos had more than “Some” level of impact on
them personally. Additionally, 90% of the responses for both videos fell in the “Some Impact” to “Significant Impact” range. Therefore, Figures 1 and 2 support the claim that “the majority of staff surveyed will report that the videos had at least some impact on them personally.” Figure 3 supports the claim that the videos increased staff’s understanding of the patient’s perspective. This figure shows an increase of 0.2 between before viewing the video and after viewing the videos, meaning that how “in tune” staff thought they were with the patient perspective increased because of the videos.

Figure 4 shows that staff generally liked the Patient Quotes video better, presumably because it had a positive theme. Although the research project did not attempt to test which style of video is more effective, the implication from many survey comments was that positivity improves morale, but negativity is necessary to cause change. This information does not necessarily pertain to the hypothesis, but the researchers found it interesting and perhaps helpful for those creating patient-satisfaction videos in the future.

Although the project went smoothly and attained the expected results, a few errors and limitations were encountered throughout the course of the summer. First, some of the staff did not realize that the survey purposefully asked the same questions twice, in an attempt to see if any change had occurred. Some staff thought that this was a mistake and therefore answered the same level of impact both before and after. Regardless, the results show a positive change, so this error did not significantly skew the data. One limitation was that only two staff meetings could accommodate the scholars’ video presentation. Future research could be done testing physicians, nurses, and other hospital employees as well. Would physicians report being less impacted by the videos than administration? Would the results change if 1,000 employees were surveyed instead of 87?

The data gathered by this project can be used at Lehigh Valley Health Network and beyond in order to promote patient-centered care. Going forward, videos such as the ones made for this study can be shown to staff audiences to effectively convey the patient experience and communicate what is important to LVHN patients. Hopefully, videos such as Through the Eyes and Patient Quotes will make an impact on staff in the future and ultimately inspire change that benefits the patient.

Sources:
HCAHPS: Patients’ Perspective of Care Survey. (September 2014). Centers for Medicare and Medicaid Services. CMS.gov. Website


Powerpoint