



Utilizing the Voice of the Customer

Medallia



Michael Renfrow





Department of Veterans Affairs Patient Experience (VA PX) Journey

Presented by:
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Veteran Experience Office (VEO)
U.S. Department of Veterans Affairs

VA



U.S. Department
of Veterans Affairs

Department of Veterans Affairs

Veterans Health Administration:

- 9.1M Veterans Enrolled in VA Health Care
- 172 VA Medical Centers
- ~1,200 Outpatient Clinics
- ~ 300 Vet Centers
- ~75% of all Nurses and Medical Providers trained at the VA
- ~340k employees.
- FY21 Budget Request, \$~92b for Medical Care

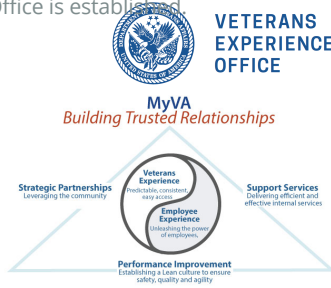
Additionally, the Benefits and Cemetery Administrations:

- 56 VA Benefits Offices
- 136 VA Cemeteries

THE VA PATIENT EXPERIENCE TRANSFORMATION JOURNEY

MyVA Transformation

SecVA McDonald launches the MyVA Transformation to rebuild trust with Veterans, their families and survivors and the American people. The Veterans Experience Office is established.



2016

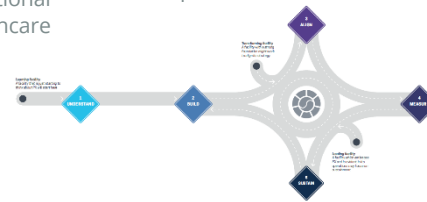
PX Foundational Toolkits

VEO deploys the PX foundational Toolkits across 147 healthcare systems.



VA PX Roadmap to Excellence

VEO provides tools, data, and technology to support VA's Patient Experience Roadmap to Excellence.



PX Consultation and Self Assessment

PX Directive and PXO PD

The Directive serves as the national VHA policy on Veteran Patient Experience and provides a framework for comprehensive, standardized PX practices across the system.

2020

2015

Diffusion of EXCELLENCE
Diffusing Best Practices Across VHA



Patient Journey Mapping

VEO produces tools to highlight important moments Veterans experience during their journeys. It also identifies measurement opportunities to assess how Veterans experience VA healthcare service delivery.

Medicare.gov
The Official U.S. Government Site for Medicare
Hospital Compare

COMMISSION ON CARE
June 30, 2016

2017

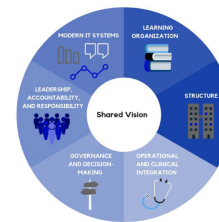


Customer Service Prime Directive

SecVA Wilke announces customer service as the #1 Prime Directive. The first ever VA PX Symposium took place to build the capacity to establish a uniformed, foundational patient experience across VA.

2019

PXU and Inpatient Solutions



Goal - Ensure Consistent Exceptional Experience Across VHA

Phase 1 FY17: Build

Define PX

Design PX for VHA

Gain Trust & Pilot Toolkits

Phase 2 FY18: Deploy

Leadership Engagement

Employee Engagement

Orchestrated Touchpoints

Phase 3 FY19- 21: Mature

Assess Facility Needs & PX Maturity

PX Culture

Accountability & Outcomes



Currently Featured VA PX Initiatives



WECARE Rounding
Medical Center Leader make "rounds," speaking directly with staff and visitors about the care and services they received



Own the Moment
This customer experience workshop encourages VA staff to connect with, understand, and help guide Veterans through the moments that matter on their VA journey



Standard Phone Greeting
Creates a uniform way to greet patients and to let them know they have reached the right number



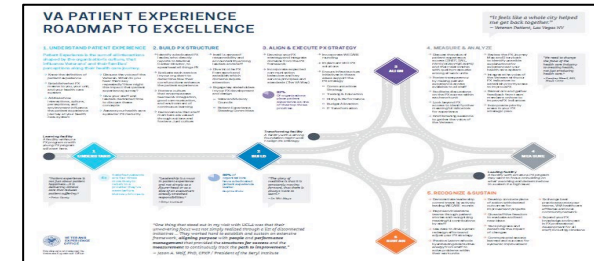
"I Choose VA" Employee Badges
Standardized VA staff badges that include helpful and interesting information such as individual connections to VA, branch of service, and hometown



Red Coat Ambassadors
These amazing ambassadors welcome Veterans and their families at medical center entrances and direct them to their destination



Green Glove Initiative
A program that encourages staff to help ensure their facility is clean and safe by picking up litter



Utilizing The Voice of the Veteran

WITHOUT HCD



WITH HCD



ARE WE SOLVING THE
RIGHT PROBLEM?

ARE WE ASKING THE
RIGHT QUESTION?

ARE WE TALKING TO
THE RIGHT PEOPLE?



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JOURNEYS OF VETERANS MAP

Not all Veterans are the same and there is no "one" veteran. There are, however, a broad set of shared moments many Veterans will encounter and live through. Different Veteran personas will experience and navigate these moments in varied and disparate ways. Using this journey as a guide to organize and align around, VA can plan for and design better experiences for Veterans.

[illegible]

Developed by the VA Veterans Experience Team
For more information contact Sarah Brooks,
Director, Inpatient & Services, Sarah.Brooks@va.gov

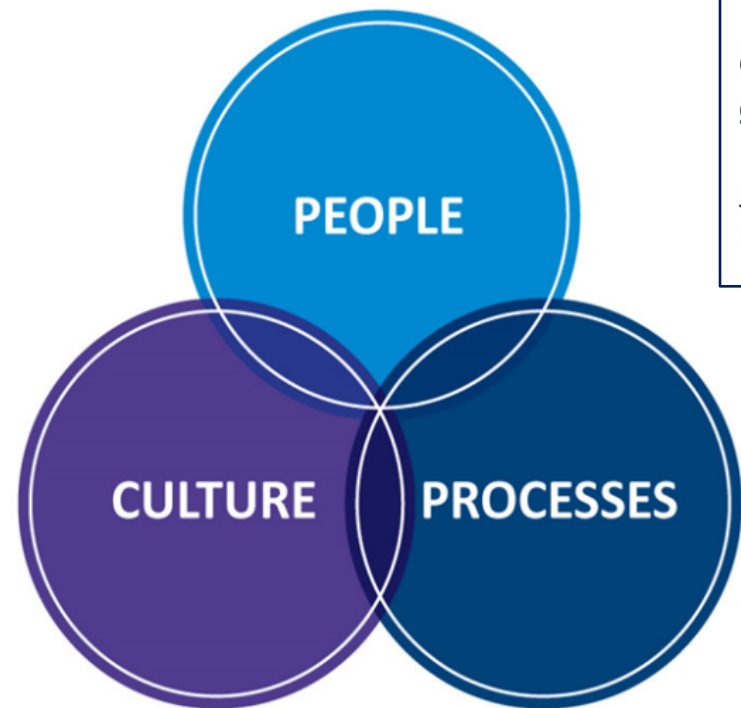
Identifying PX Moments that Matter



Thinking about PX as a paradigm...

“Patient Experience isn’t a program. It’s the organizational alignment of people, processes, and culture towards the common goal of improving patient experience at a health care system.”

Jennifer Purdy
Executive Director of VA PX



People - Refers to the individual employees’ behaviors, skills and abilities, and roles that impact the Veterans’ patient experience.

Processes - To improve the experience means the innovative and improvement platforms for creating structures and systems that address the needs of employees and Veterans, their families, caregivers, and survivors to achieve positive outcomes.

Culture - Represents the values, beliefs, attitudes, and behaviors that make up the overall atmosphere in the facility to effectively deliver quality healthcare services in a safe environment or reliable setting. When staff shares a culture of excellence, it drives consistent behaviors in the delivery of care, improving the overall Veteran and employee experience.



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Designing a PX Framework



The Patient Experience framework was developed by VHA and VEO to align PX campaigns, initiatives, and programs.

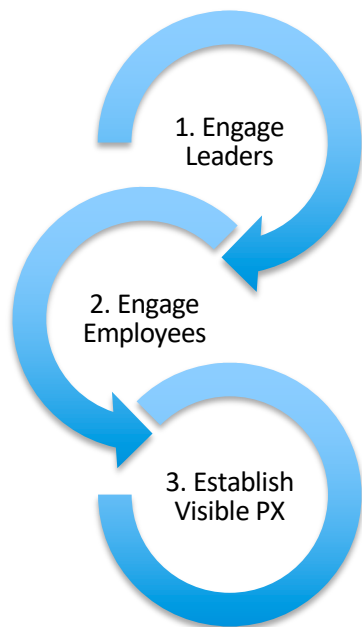
The framework consists of seven interconnected and interdependent domains. PX tools can target one or many of the domains.

The center of the framework displays how the employee experience and Veteran experience are complementary.



Phase 2: Design PX Initiatives and Tools

Deployment Strategy:



Currently Featured VA PX Initiatives



WE CARE Rounding

Medical Center Leader make "rounds," speaking directly with staff and visitors about the care and services they received



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Red Coat Ambassadors

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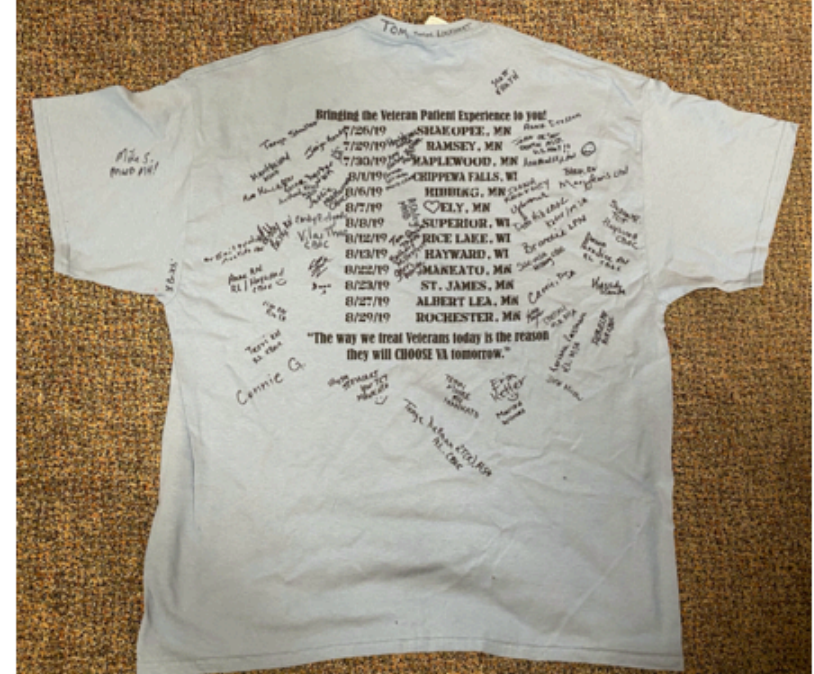
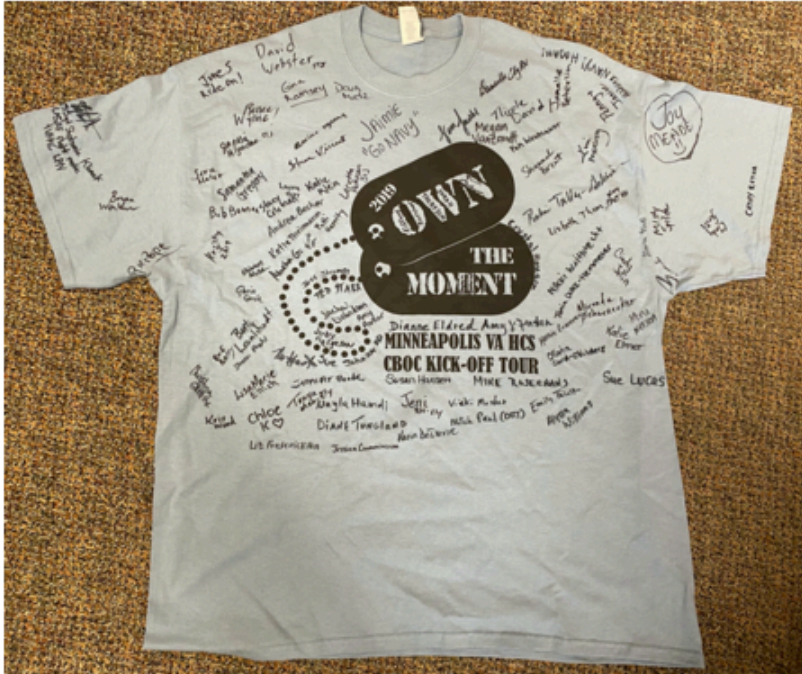


Green Glove Initiative

A program that encourages staff to help ensure their facility is clean and safe by picking up litter



OTM In Action



Red Coats in Action



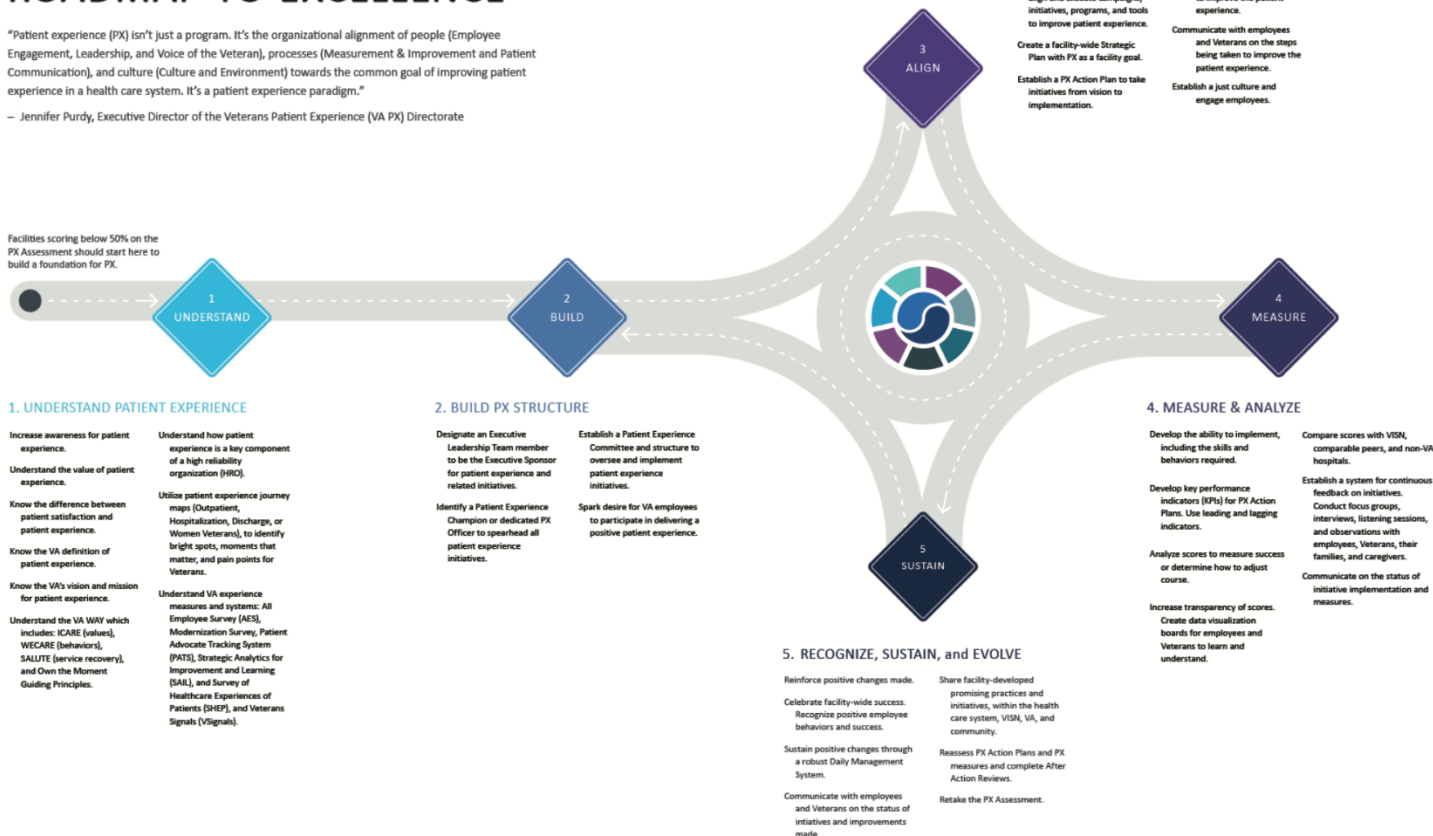
Phase 3: Coach and Mature PX in VHA

VA PATIENT EXPERIENCE ROADMAP TO EXCELLENCE

"Patient experience (PX) isn't just a program. It's the organizational alignment of people (Employee Engagement, Leadership, and Voice of the Veteran), processes (Measurement & Improvement and Patient Communication), and culture (Culture and Environment) towards the common goal of improving patient experience in a health care system. It's a patient experience paradigm."

— Jennifer Purdy, Executive Director of the Veterans Patient Experience (VA PX) Directorate

Facilities scoring below 50% on the PX Assessment should start here to build a foundation for PX.



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Steps for PX Maturity

<p>4d. Excellence in Customer Experience (CX)</p>	<p>Improve Patient Experience (Customer Service Experience)</p> <p>Exceeds FS. Successful implementation of the facility/VSO action plan.</p> <p>Outstanding: Demonstrated effectiveness of the facility/VSO Patient Experience Action Plan by Improved Patient Experience and Employee Satisfaction (Best Places to Work) metrics as measured by SKIL.</p>	<p>See DECA Policy Statement of August 22, 2018 https://www.industrydocuments.ucsf.edu/docs/ncntn/coupled/2018/06/customer-service-patient-experience DECA Signed.pdf</p>
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Step 1:
Create SES
Performance
Plan to Prioritize
PX work

[illegible]

Step 2:

Facilities

Complete the PX Self-Assessment

GOAL 3

Objective 1

Objective 2

Objective 3

Patient Experience (PX) Guidebook

Building the Foundation for Patient Experience at a VA Facility

Step 4:
Use PX
Guidebook to
assist in
Improvement

Inpatient Hospitalization Journey Map



U.S. Department
of Veterans Affairs
Veterans Health
Administration

VA INPATIENT HOSPITALIZATION EXPERIENCE JOURNEY MAP

The VA Inpatient Hospitalization Experience Journey Map represents a common set of moments Veterans experience while they are an inpatient at a VA Medical Center. The moments represented here are not linear. Rather, the map aims to capture a generalized experience, highlighted by the key moments that matter, as well as bright spots and pain points. By understanding the inpatient experience from the Veteran's perspective, VA can better understand where to focus time and resources to maximize Veteran trust.

Moments that Matter: Moments that are likely to have a more significant negative or positive impact than others within the hospital inpatient experience.

V7.5 DRAFT 10/10/18

KEY

JOURNEY PHASE



	ADMISSION	ORIENTATION	TREATMENT, ASSESSMENT & RECOVERY				DISCHARGE PREPARATION		
	1 Assessed by clinician	2 Get oriented	3 Understand care plan	4 Treatment	5 Bedside care	6 Talk to care team	7 Room activities	8 Prepare to leave hospital	
WHAT OCCURS IN THIS MOMENT	The moments leading up to a Veteran's inpatient stay; arriving at the hospital and the process of being admitted.	The Veteran is getting settled in their new environment and becoming familiar with people and surroundings.	The Veteran's first opportunity to engage with their health care team about their care plan. This engagement can either strengthen a foundation of trust or damage it.	This moment encompasses the medical treatment of the Veteran throughout their stay, including: tests, procedures, consults, recovery and observation.	Receiving the care determined by the care plan. This may include: monitoring, medication, pain management, bed comfort and fluid management.	The Veteran is able to interact with their interdisciplinary care team to discuss their health and next steps.	How the Veteran may use their time in their room; visiting with their support network, eating meals, therapy sessions and recreation.	Conversations with the Veteran about planning for their discharge.	
BRIGHT SPOTS	<ul style="list-style-type: none">A positive arrival to the medical center is more likely to set a good tone for the rest of their stay.	<ul style="list-style-type: none">Veterans want to know the daily routine. In some medical centers, a white board communicates essential information and updates in an easy-to-read way.Veterans appreciate when the nurse asks for their preferences.	<ul style="list-style-type: none">Veterans value having a cohesive understanding of their care plan."The caregivers recognized me from my last visit. They were all so friendly."	<ul style="list-style-type: none">Having a well-defined plan and clear instructions reduces confusion about next steps.When a procedure goes well, the Veteran is more likely to feel positive about their experience.	<ul style="list-style-type: none">Small interactions with the nursing staff make a big impression on the Veteran; such as ensuring that gowns are fully wrapped around the Veteran and being spoken to by name.Veterans appreciate being treated with dignity while toileting.	<ul style="list-style-type: none">Veterans want autonomy about their health status. This means directly discussing recovery, needs and pain assessment with the care team.Veterans value regular interactions with their staff."It is all about the small things! They knew what I needed before I did and I never had to ask for anything!"	<ul style="list-style-type: none">"My time here has been relaxing so far. I watch TV and movies for the most part.""Talking with other Veterans on the floor keeps me grounded."Having the guidance of dietitians helps build healthy habits."The people. They know you. They don't wait for you to ask. They will offer to help."	<ul style="list-style-type: none">Hearing "discharge" is exciting and relieving.Veterans appreciate when their care team considers their well-being past their inpatient stay.Veterans often want one trusted point person for their discharge plans.	
PAIN POINTS	<ul style="list-style-type: none">Veterans often arrive to the medical center feeling vulnerable, both physically and emotionally. They may struggle in coming to terms with their situation.	<ul style="list-style-type: none">When there aren't immediate rooms available in inpatient units, the Veteran feels in limbo.Veterans don't want to feel rushed in talking to their nurse for the first time. They want to have access to nurses as they get settled in their rooms.	<ul style="list-style-type: none">If family and friends of the Veteran are left out of care plan conversations, the Veteran feels less supported."My podiatrist was out the door before I could ask him a question.""I am sometimes confused because I hear different things from my day and night nurses, as well as doctors, and this information does not always add up."	<ul style="list-style-type: none">Veterans can get frustrated when specialty tests delay their progress or speed of discharge.	<ul style="list-style-type: none">The beds that alleviate pressure ulcers are uncomfortable for some Veterans. They often choose to sleep in their chair as a result."I asked the team when they were going to check my vitals so I know if I have a block of time to sleep.""My bathroom in the ICU felt like a prison toilet."	<ul style="list-style-type: none">"You have too many middle men."A Veteran may miss doctor interaction if they are asleep during rounding.Medical students sometimes make the Veteran feel like a test subject.Lack of specialty medical support can mean a more complicated care plan and complex daily communications."I talked to so many doctors. I didn't know who was who."	<ul style="list-style-type: none">Physical items such as table and bed don't always work together, causing discomfort and potential danger for Veterans.Veterans can be frustrated with their hospital diets, particularly when it comes to flavor and quantity.TV controls and keyboards can be difficult to understand or operate.Veterans with longer-term stays seek ways to counter boredom in the hospital.	<ul style="list-style-type: none">Once a Veteran hears the word "discharge" they might think they are immediately ready to leave and then become frustrated with perceived delays in their discharge process.Veterans are often uncertain of where they are in the discharge process.	
THIS IS A MOMENT THAT MATTERS BECAUSE...	<p>MOMENT THAT MATTERS Being in the hospital is overwhelming. Everything is unfamiliar. I don't feel good and I'm worried about my health.</p> <p>Making certain a Veteran is well-oriented to their new surroundings can provide the foundation for an easier, less stressful inpatient stay.</p>	<p>MOMENT THAT MATTERS I need to know what tests or procedures are going to be done and why they are being done.</p> <p>Establishing a trusted relationship between Veterans and providers is essential to a positive experience. Clear and transparent communication is key to alleviating fears and vulnerability.</p>			<p>MOMENT THAT MATTERS I want time to speak with my nurses and doctors so that I can ask them about my treatment and prognosis.</p> <p>When a Veteran is able to directly interact with their care team, trust is built, understanding increases and the Veteran feels more in control.</p>	<p>MOMENT THAT MATTERS If I'm going to spend the night, I want to be comfortable and choose how I pass the time.</p> <p>Veterans value having control over their daily activities, such as: meal quality and regularity, dignified toileting, bed comfort, and access to entertainment.</p>			
WHAT THE SURVEY WILL ASK	<p>MEASURING EMPLOYEE HELPFULNESS & QUALITY The staff was helpful when I settled into my hospital room.</p>		<p>MEASURING EQUITY & TRANSPARENCY I understood what care I would receive while I was in the hospital.</p> <p>MEASURING SATISFACTION I was satisfied with the care I received in the hospital.</p>			<p>MEASURING EMPLOYEE HELPFULNESS & QUALITY My care team was there for me when I needed them.</p>	<p>MEASURING QUALITY The hospital provided things for me to do in my down time (TV, internet, reading materials, etc).</p>		
+++++									

Developed by the Veterans Health Administration and the Veterans Experience Office.
For more information contact Jennifer Purdy at jennifer.purdy@va.gov.



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Inpatient Discharge Journey Map



U.S. Department
of Veterans Affairs
Veterans Health
Administration

VA INPATIENT DISCHARGE EXPERIENCE JOURNEY MAP

The VA Inpatient Discharge Experience Journey Map represents a common set of moments Veterans experience while they are preparing to leave a VA Medical Center. The moments represented here are not linear. Rather, the map aims to capture a generalized experience, highlighted by the key moments that matter, as well as bright spots and pain points. By understanding the discharge experience from the Veteran's perspective, VA can better understand where to focus time and resources to maximize Veteran trust. This map is meant to be read in continuation from the Hospitalization Experience Journey Map.

Moments that Matter: Moments that are likely to have a more significant negative or positive impact than others within the hospital inpatient experience.

V7.5 DRAFT 10/10/18

KEY

JOURNEY PHASE

Moment that matters
Journey moment

○ Bright Spot
● Pain Point

	DISCHARGE PREPARATION							DISCHARGE FROM FACILITY		HOME		
	1 Hospitalization	2 Ready for discharge	3 Consults & training	4 Set up follow-up appointment	5 Discuss transit & destination	6 Review Discharge Instructions	7 Pick up supplies	8 Exit facility	9 Travel home	10 Arrive home	11 Follow-up phone call	12 Follow-up appointment
WHAT OCCURS IN THIS MOMENT	Veteran health care and discharge needs assessment.	Veteran is eager to change into "street clothes" and go home within the day.	Veteran interacts with support services to prepare for discharge.	Schedule follow-up for soon after discharge.	Talk about discharge travel to home or other options.	Discharge instructions reviewed with the Veteran.	Pick up supplies or receive them in the room before discharge.	Veterans exit the facility.	Travel with support network or VA-affiliated transport to home or other facility.	The next stage of the Veteran engaging in their own health care.	Primary Care RN calls Veteran within 24-48 hours.	PCP or Specialist appointments.
BRIGHT SPOTS	<ul style="list-style-type: none"> Feel cared for by their medical staff. One trusted person to tie everything together. 	<ul style="list-style-type: none"> Hearing "discharge" is exciting and relieving. 	<ul style="list-style-type: none"> Support staff conveniently available in the facility can help solidify recovery procedures. 	<ul style="list-style-type: none"> When appointment is scheduled before the Veteran leaves, anxiety is minimized. 	<ul style="list-style-type: none"> "I really appreciate how they take the time to go through everything." Veterans appreciate that the Social Worker values their whole health. 	<ul style="list-style-type: none"> Support network included in discharge review. Care teams are thorough and patient. 	<ul style="list-style-type: none"> Supplies delivered to the room. Bypass the outpatient pharmacy line (wrist-band, "golden ticket"). 	<ul style="list-style-type: none"> Well prepared and educated about follow-up care. Staff/Volunteer helps the Veteran. 	<ul style="list-style-type: none"> Ride home or to another facility with support network. Public or VA-affiliated transit options. 	<ul style="list-style-type: none"> Being home. Acting upon their discharge instructions in a more comfortable setting. 	<ul style="list-style-type: none"> "I was surprised I was called so quickly." Waiting 24-48 hours after the Veteran has returned home allows them to take stock of their situation. 	<ul style="list-style-type: none"> Physician seen within a few weeks of discharge. Phone consultations. Appointments scheduled prior to discharge.
PAIN POINTS	<ul style="list-style-type: none"> "Talked to so many doctors, I didn't know who was who." Receive (or perceive that they are receiving) conflicting information. Veterans are uncertain of where they are in the discharge process. Support network may lack information. 	<ul style="list-style-type: none"> Mentioning "discharge" primes Veterans' expectation to leave now. "They say I'm leaving, but no one can tell me when." Hours may pass while Veterans sit dressed, waiting to leave. Delay in discharge orders due to provider availability. 	<ul style="list-style-type: none"> Rush of consultation instructions can be difficult to retain. Time spent training on equipment prior to discharge is not always enough. Equipment at home is not always the same as in the medical center. Equipment room closures on the weekends. 	<ul style="list-style-type: none"> When scheduling falls to the Veteran it can cause support network anxiety and inconvenience. Lack of social/support services may impact discharge planning or safe transition to home. Ambiguous or late discharge times can impact options. 	<ul style="list-style-type: none"> Home or support challenges not always disclosed. Veterans not always eligible for Beneficiary transport. Lack of social/support services may impact discharge planning or safe transition to home. Ambiguous or late discharge times can impact options. 	<ul style="list-style-type: none"> Instructions are not always easy to read or follow. Support network not always involved in discharge review. Veteran may be dissatisfied if they do not have a follow-up appointment scheduled. 	<ul style="list-style-type: none"> "Wish they had asked me before filling my meds, I have bottles of this prescription at home." Weekend or late discharges may hinder prescriptions being filled. Provision of necessary supplies upon discharge can be challenging. 	<ul style="list-style-type: none"> Different discharge protocols at different facilities can confuse Veterans. When support network is solely responsible for escorting the Veteran, it can be overwhelming and at times, dangerous. 	<ul style="list-style-type: none"> Time of discharge impacts transportation availability. "My ride is waiting on me and has waited for hours." Without transportation a longer stay may be required. 	<ul style="list-style-type: none"> Realization of the lack of Discharge Instruction understanding. May start to question how to take care of themselves at home. Not prepared for physical limitations. Lack of a support network. Readmission could occur due to multiple factors. 	<ul style="list-style-type: none"> For some, too many calls (specialty and PCP) after discharge can feel intrusive, repetitive, and annoying. Friday discharges limit contact until the following Monday. 	<ul style="list-style-type: none"> Unnecessary in-person appointments. "My doctor could have addressed it over the phone." Appointments scheduled too soon to be beneficial.

THIS IS A MOMENT THAT MATTERS BECAUSE...

MOMENT THAT MATTERS

I heard the word discharge and assumed I was about to leave.

When Veterans hear different members of their care teams mention discharge, they develop certain expectations. Not effectively managing these expectations leaves Veterans and their support network angry and frustrated.

WHAT THE SURVEY WILL ASK

Questions are asked on a Likert scale of 1 to 5

1 2 3 4 5

MEASURING EQUITY, TRANSPARENCY & EFFICIENCY

When I was notified that I would be leaving the hospital, it was clear what needed to be done and how much time it would take.

MOMENT THAT MATTERS

I'm overwhelmed with all the information. How am I possibly going to remember this at home?

Veterans know the instructions they are receiving are important, but are typically overwhelmed or distracted. They are not always in the mindset to register the deluge of information or think through what care they will require at home.

MEASURING QUALITY & EASE

Efforts were made to have my family, friends, or caregivers involved in the explanation of my discharge instructions, when desired.

The instructions that I received before I left the hospital were easy to understand.

MOMENT THAT MATTERS

I need to let my family know when to pick me up. I wish the doctor could give me a day and time.

Getting the method, timing, and destination correct can separate a good discharge from one riddled with frustration. Having a good hospitalization experience, followed by a poor facility departure, can damage a Veteran's entire experience.

MEASURING EMPLOYEE HELPFULNESS & QUALITY

I understood my transportation options before I left the hospital.

MEASURING TRUST

I trust VA for my healthcare needs

Developed by the Veterans Health Administration and the Veterans Experience Office.
For more information contact Jennifer Purdy at jennifer.purdy2@va.gov.



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All PX Toolkits

SharePoint

VAPX Home Page PX Toolkits PX Resources PX Calendar PX Symposium PX Good News Stories





PX Toolkits


+ New Page details


PX Toolkit Library


Click a link below to access a toolkit:

 Caregiver Support Guide
(PCMH, IP, SC)


 I Choose VA Employee
Badges (PCMH, IP, SC)


 PX Road Show (PCMH, IP,
SC)

 Change of Provider Letter
(PCMH)

 Interdisciplinary Team
Rounding (IP)


 Commit to Sit (IP)

 Messages for the Moment
(PCMH, IP, SC)

 PX Week (PCMH, IP, SC)

 Discharge Checklist (IP)


 My Life My Story (IP)

 Red Coat Ambassadors
(PCMH)

 Journey to Discharge
Hospitalization Journal (IP)

 Own the Moment (PCMH, IP,
SC)


 Standard Phone Greeting
(PCMH, IP, SC)


 Employee Recognition
(PCMH, IP, SC)

 Patient Communication
Whiteboards (IP)

 Take Five (PCMH)

 Green Gloves (PCMH, IP, SC)

 Pre-visit Checklist (PCMH)

 WECARE Leadership
Rounding (PCMH, IP, SC)

 Hourly Nurse Rounding (IP)



"The way we treat Veterans today is the reason they ChooseVA tomorrow"



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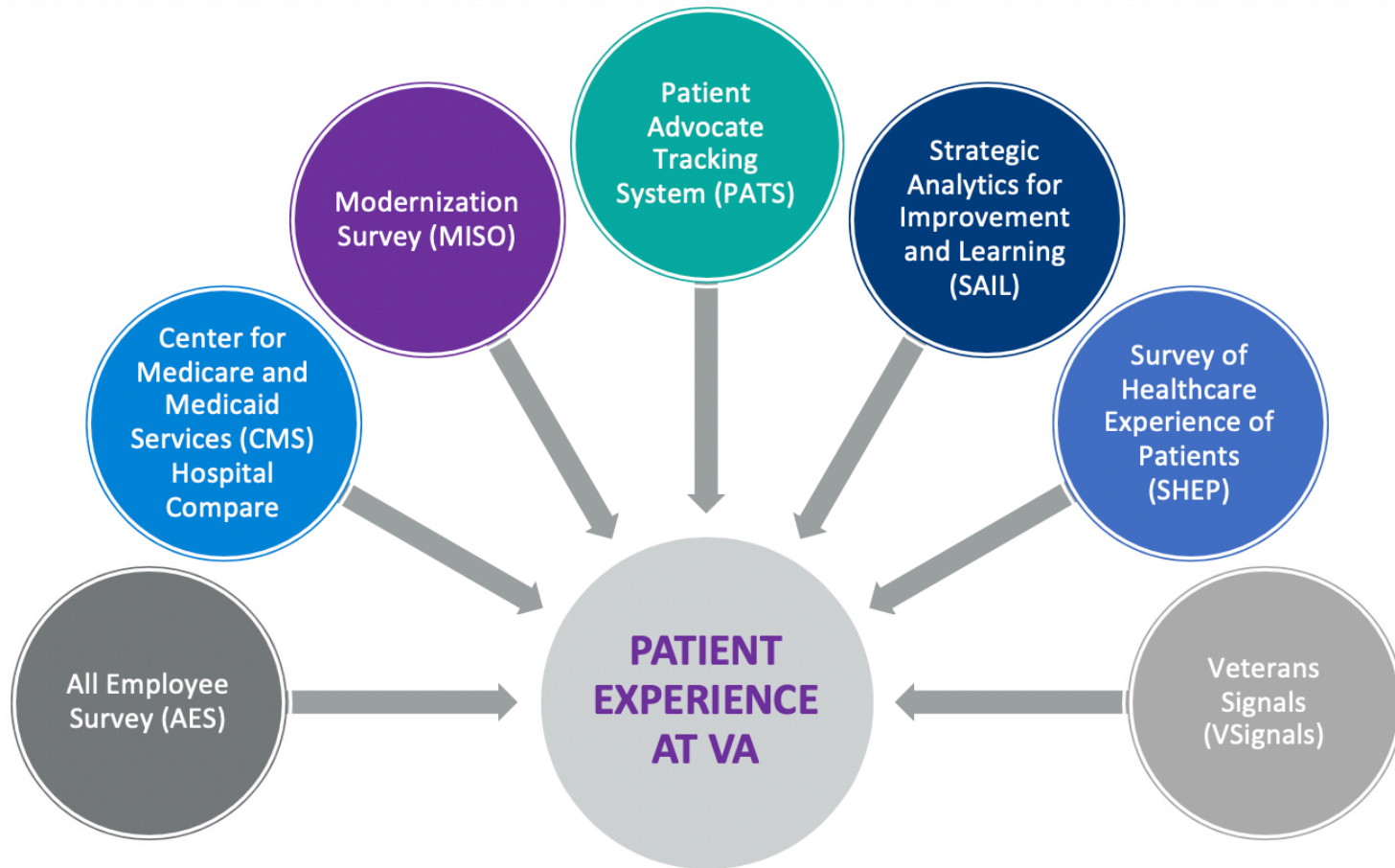
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How Do We Measure Success?



VSignals

Veteran trust in VA health care rises above 90 percent for the first time


April 30, 2020, 11:41:00 AM

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Veteran trust in VA health care rises above 90 percent for the first time

WASHINGTON — The U.S. Department of Veterans Affairs (VA) today released survey results showing Veteran trust in VA health care outpatient services has increased more than 5% since 2017, reaching 90.1% as of April 12.

VA received surveys from 4,030,438 Veterans since June 2017 to the present via the [Veterans Signals customer feedback program](#)  which asks Veterans about their care experience and to rate their trust in VA.

"These improvements are a testament to not only VA's investment in patient experience programs but also the dedication of our employees," said VA Secretary Robert Wilkie. "Even during a pandemic, our VA team has continued its steadfast commitment to delivering the highest quality care for our nation's Veterans."

This delivery of quality care reflects VA's priority mission of customer service and its goal to ensure a positive patient experience. In the past three years, more than 95,000 Veterans Health Administration employees have been trained on VA's customer experience training program called Own the Moment. VA has also implemented programs like [Red Coat Ambassadors](#) nationwide to improve the Veteran's navigation of care facilities across the country. Initiatives such as VA Patient Experience Week (April 27-May 1) share best practices in culture changing patient experience tools, technology and training with institutions and providers across the country.

According to the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS), the results of these and other improvements, has been an increase in the VA patient experience by 4% in the past four years while private sector's national average has increased by only 1%.

Since the VA began offering Veterans the option to respond to Veteran Signals surveys with free-text feedback, 68% (918,873) of their comments have been complimentary, 18.9% (255,351) have been concerns and 13.3% (179,902) are recommendations. VA uses this feedback at the national, regional and local levels to make improvements in the way VA provides care and services.

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VHA PX Improvements FY17Q1-FY19Q4

Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)

- 127 VA Health Care Systems participate in HCAHPS
- 67% (85) of VA Health Care Systems have improved in their HCAHPS

Consumer Assessment of Healthcare Providers and Systems (CAHPS)

- All (144) VA Health Care Systems participate in CAHPS for Primary Care
- 76% (109) of VA Health Care Systems have improved in CAHPS

Phase 4: Alignment and PX Next Steps

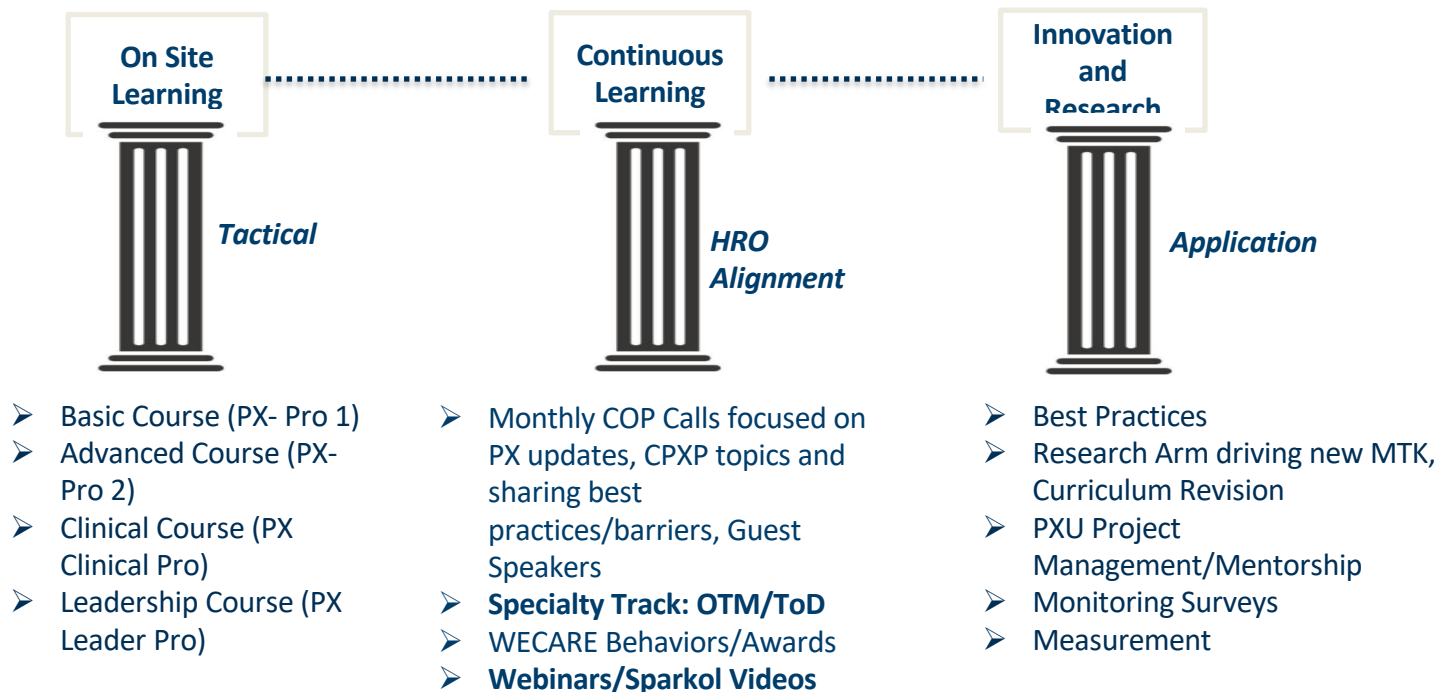
Deepening PX Culture by:

- Implement PX Behaviors for all VHA employees (WECARE Behaviors)
- Embed PX into performance standards
- Develop Patient Experience University (PXU) and Simulation Labs
- Ensure Own the Moment sustainment
- Deploy inpatient hospitalization and discharge tools
- Develop additional journey maps (Emergency Medicine, Telehealth, Community Care, etc.)
- Host FY20 PX Symposium (Virtually)

*Recognized as the best health care experience anywhere!
Anyone can go to a hospital, but only Veterans can go to a VA!*

PX University

Hardwiring PX into Veterans Health Administration



COLLABORATION: PXU Advisory Board, COP Calls, PXU Awards



Choose **VA**

DRAFT- PRE DECISIONAL

VA



VETERANS
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Development of WECARE Behaviors

SHEP data and the literature show that Communication is the key driver of PX.



- Call for Field Collaboration: 100 VAMC Directors distributed to workforce, data refined into 10 discipline specific WECARE Behaviors

- Initial Testing of Concept: Phoenix PACT retreat
- Conducted WECARE Focus Groups
 - ✓ 08/13 - Indianapolis
 - ✓ 08/28 - Long Beach
 - ✓ 08/29 - Pittsburgh

- ✓ 09/10 - Wilmington
- ✓ 09/18 - VEO Call Center, Lexington
- ✓ 09/27 - Columbia
- ✓ 10/02 - Dallas
- ✓ 10/08 - Chillicothe
- ✓ 10/09 - Sacramento
- ✓ 10/22 - San Diego
- ✓ 10/23 - Omaha
- ✓ 10/25 - Miami
- ✓ 10/29 - Prescott
- ✓ 10/30 - San Antonio
- ✓ 11/05 - Des Moines
- 11/19 - Salisbury

- Pilot at Jackson and Shreveport VAMC
- Build training videos Education tools
- Negotiate with Labor

- Preview at PX Symposium
- Soft Launch
- Add to FY21 performance evaluations

WECARE BEHAVIOR	WHAT THIS LOOKS LIKE IN ACTION		
Welcome	Say	•Offer a Warm Greeting	What is one thing I will do different when I WELCOME
	Do	•Smile •Make Eye Contact •Watch Veteran's Body Language	
	Vet Feels	•At Ease •Welcomed	
Explain my VA Role	Say	•Introduce myself and my role •Explain what they can expect	What is one thing I will do different when I EXPLAIN
	Do	•Use open body language	
	Vet Feels	•Confident •Reassured •Informed	
Connect	Say	•Build a Relationship •Ask questions about them •Express confidence in my VA and talk up my team.	What is one thing I will do different when I CONNECT
	Do	•Show Empathy •Listen to their story	
	Vet Feels	•Connected	
Actively Listen	Say	•Ask follow-up questions	What is one thing I will do different when I Actively Listen
	Do	•Nod •Take notes •Keep eye contact	
	Vet Feels	•Validated •Heard	
Respond to their key needs	Say	•Summarize what they said •Explain how I can help	What is one thing I will do different when I RESPOND
	Do	•Do what I said I was going to do	
	Vet Feels	•Understood •Cared for	
Express Gratitude	Say	•Make sure their needs are met •Say thank you in my own way •Restate who I am	What is one thing I will do different when I EXPRESS GRATITUDE
	Do	•Smile •Make Eye Contact	
	Vet Feels	•Valued •Appreciated	

Discipline Specific Behaviors:

MSA, Police, Call Centers, Outpatient Clinical, Inpatient Clinical, EMS, Community Care, Food Service, Leadership, All Employee/Generic



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Q&A with Dr. Calvin Chou and Michelle Hayes

Questions?

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