Designing for Doctor and Patient Interactions in the Leave-taking Experience



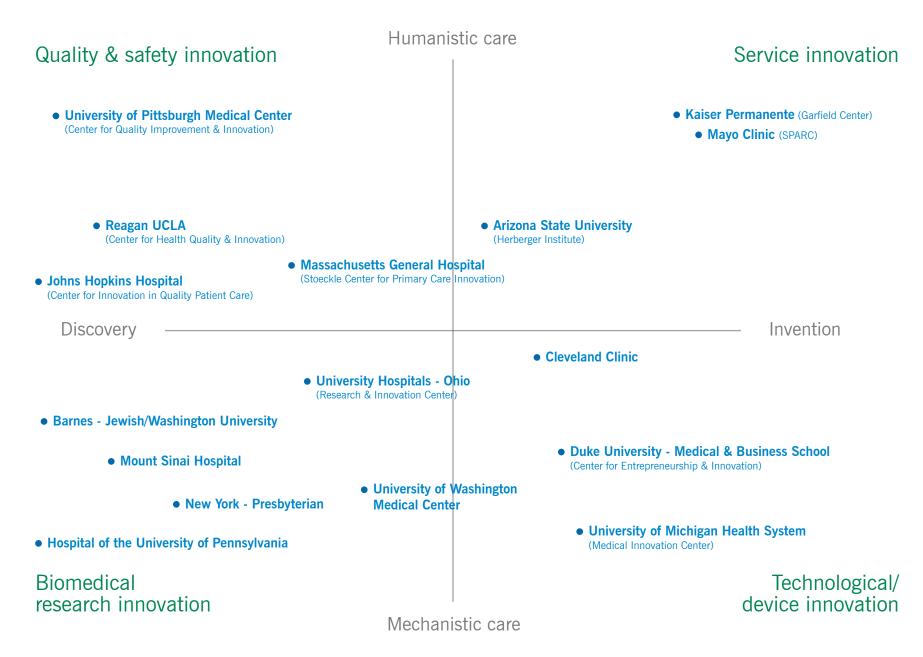


A founding principle: innovation

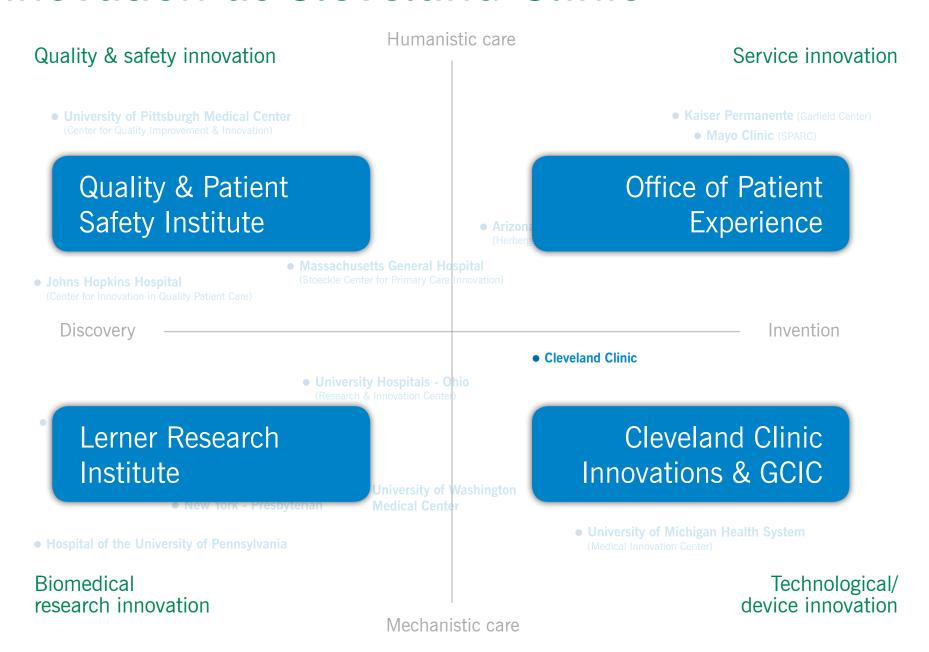
"The future belongs to those who seize the opportunities created by innovation."

Delos M. Cosgrove, MD CEO & President

Kinds of healthcare innovation



Innovation at Cleveland Clinic



HCAHPS themes

PROBLEM

Totality of hospital experience

Communication

(Interaction/behavior)

Information

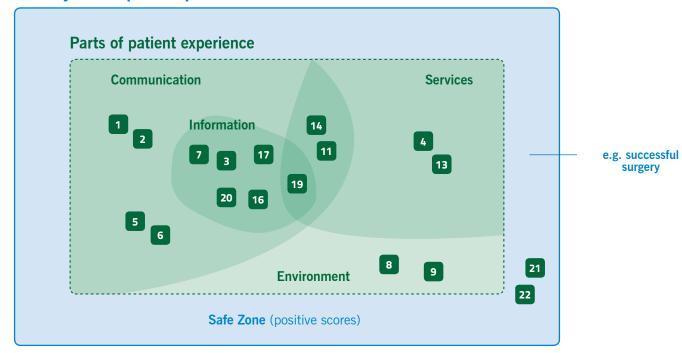
(Knowledge)

Services

(Response/tasks)

Environment

(Physical space)



HCAHPS Questions:

- 1. How often did nurses treat you with courtesy and respect?
- 2. How often did nurses listen carefully to you?
- 3. How often did nurses explain things in a way you could understand?
- 4. During hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?
- 5. How often did doctors treat you with courtesy and respect?
- 6. How often did doctors listen carefully to you?
- 7. How often did doctors explain things in a way you could understand?
- 8. How often were your room and bathroom kept clean?
- 9. How often was the area around your room quiet at night?
- 11. How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?

- 13. How often was your pain well controlled?
- 14. How often did the hospital staff do everything they could to help you with your pain?
- 16. How often did hospital staff tell you what the medicine was for?
- 17. How often did hospital staff describe possible side effects in a way you could understand?
- 19. Did hospital staff talk with you about whether you would have the help you needed when you left the hospital?
- 20. Did you get information in writing about what symptoms or health problems to look out for after you left the hospital?
- 21. Using any number from 0-10, where 0 is the worst hospital possible and 10 is the best, what number would you use to rate this hospital during your stay?
- 22. Would you recommend this hospital to your friends and family?

Caregiver-patient communication

Totality of hospital experience

Communication (Interaction/behavior)

Information (Knowledge)

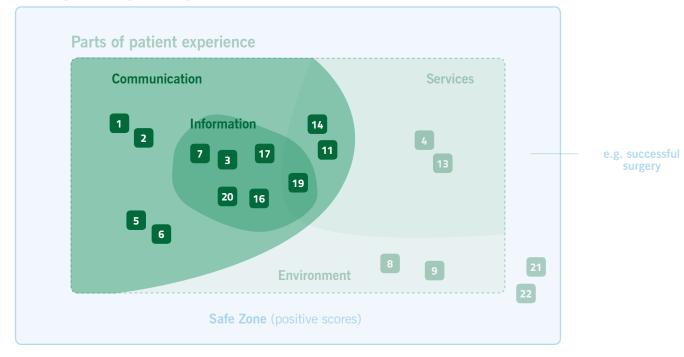
PROBLEM

Services

(Response/tasks)

Environment

(Physical space)

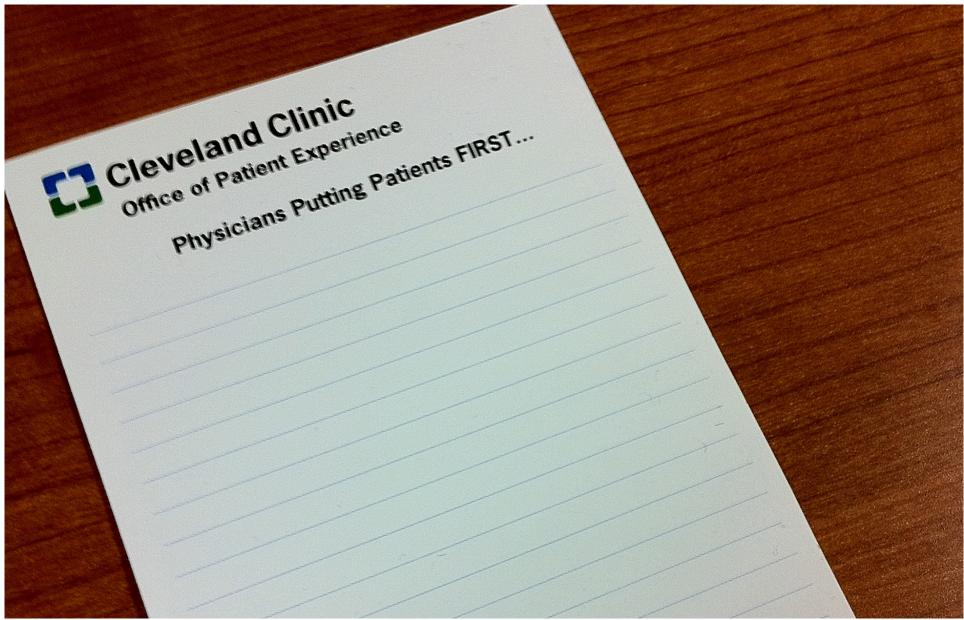


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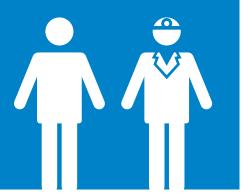
Physician-led organization



INTRODUCTION

Problem statement

It is difficult for Cleveland Clinic caregivers to change the **behaviors** of physicians with patients (and also their families).



Entire patient journey



Hypothesis

Focusing on building quality encounters between physicians & patients during the discharge phase makes a memorable impression and will benefit an important part of the patient journey.

PREARRIVAL INTRODUCTION TREATMENT DISCHARGE TRANSITION



Patients



Patients

Families

PREARRIVAL INTRODUCTION TREATMENT DISCHARGE TRANSITION

Patients

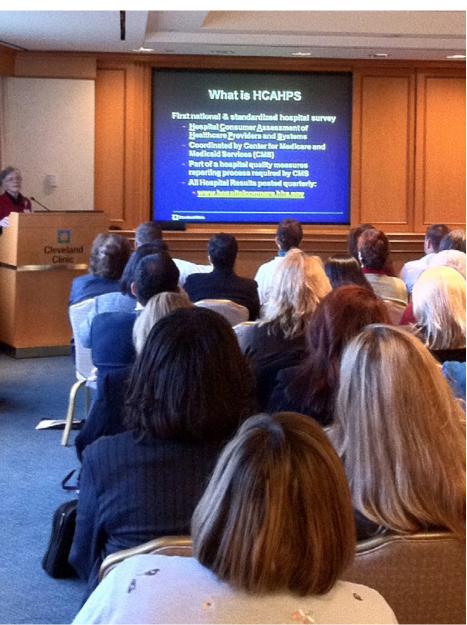
Families

Caregivers

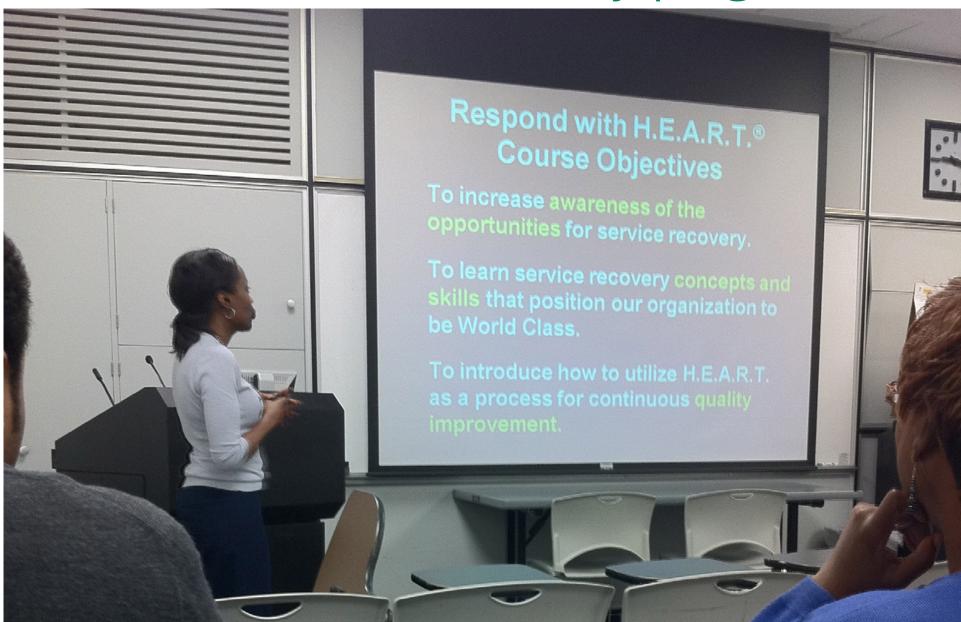
Conference participation

HYPOTHESIS & RESEARCH

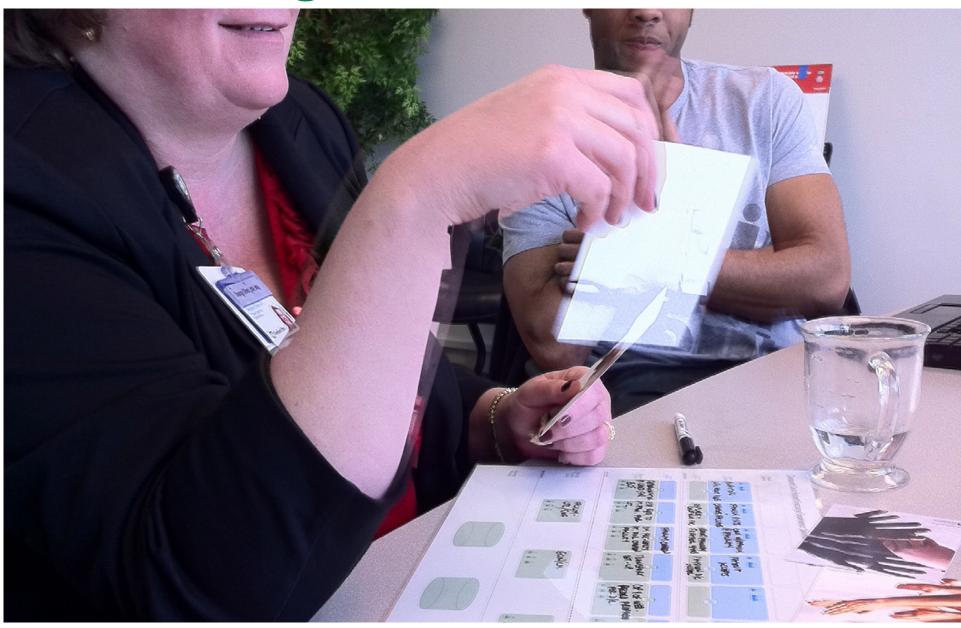




H.E.A.R.T. Service Recovery program



Brainstorming with the OPE



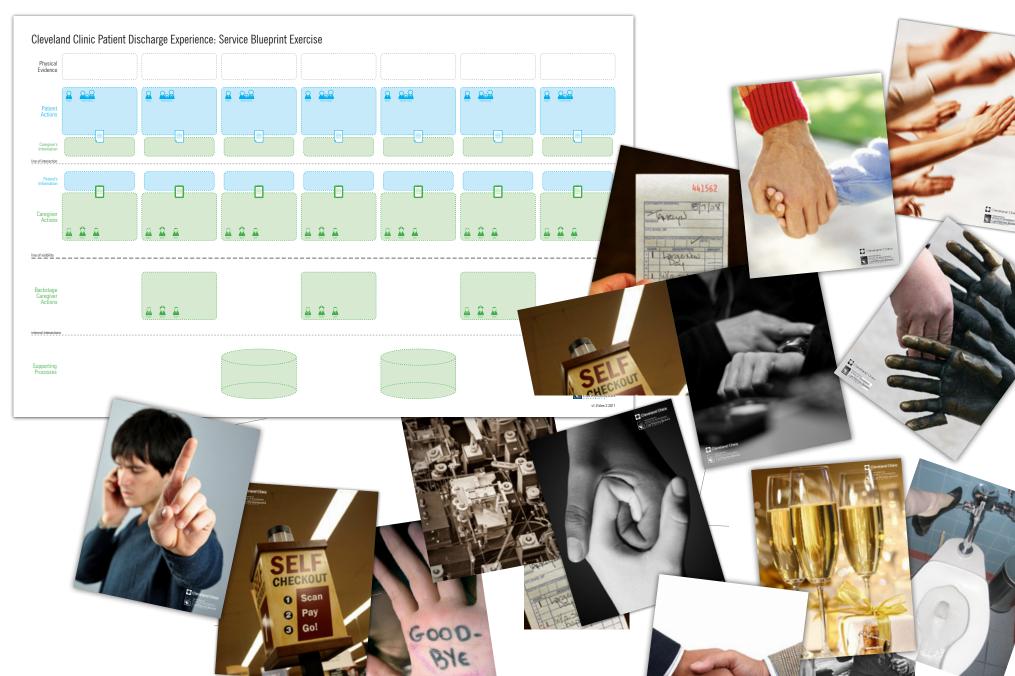
Observations

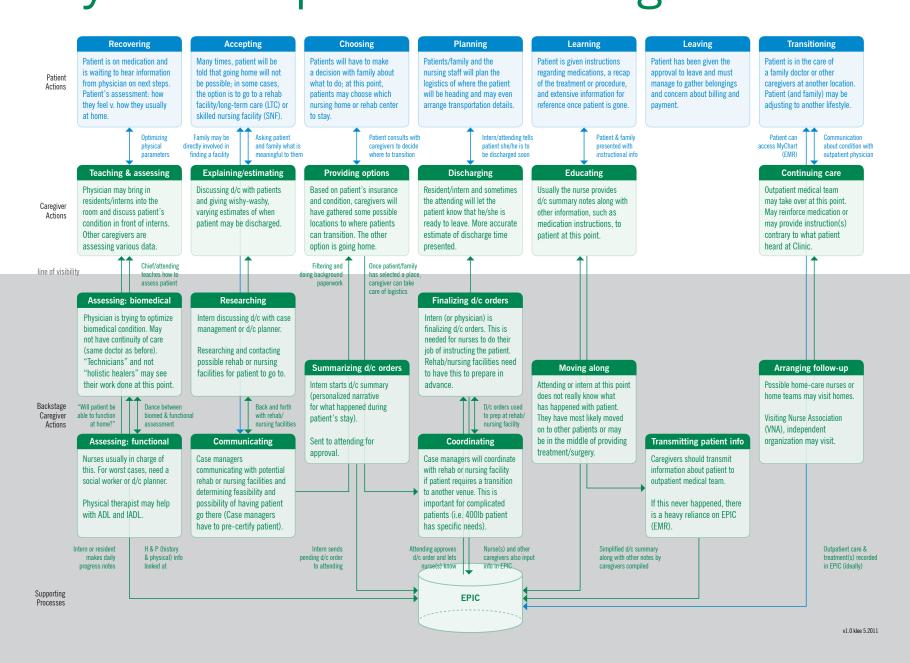


Interviews

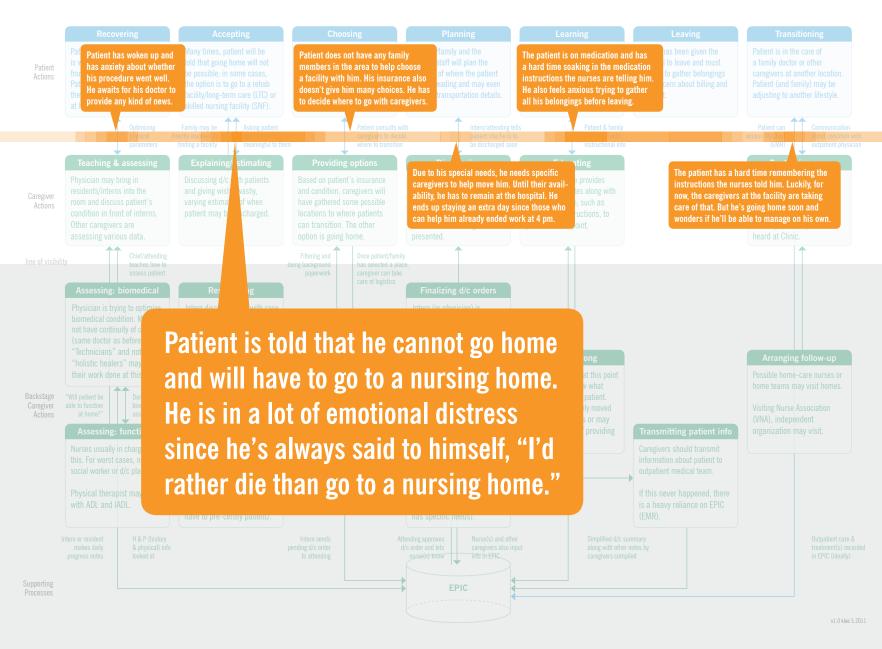


Research tools & methods



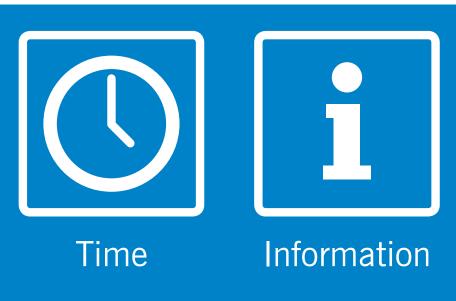


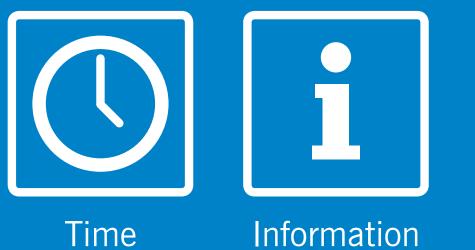
Analysis: emotional narrative





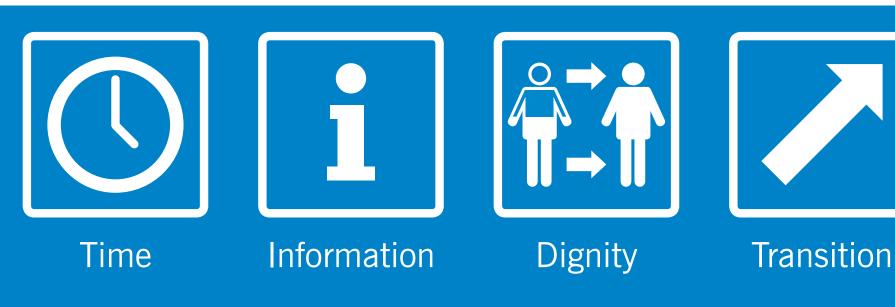
Time



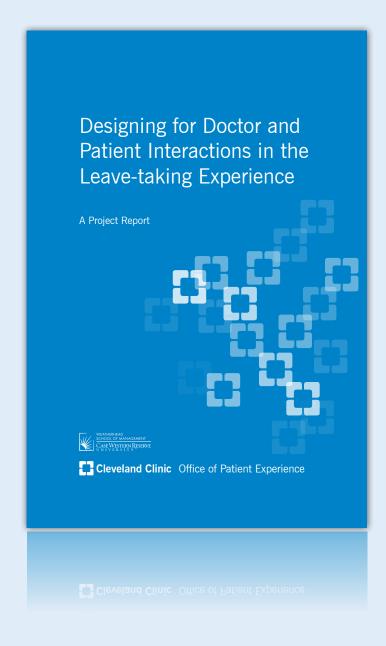




Dignity

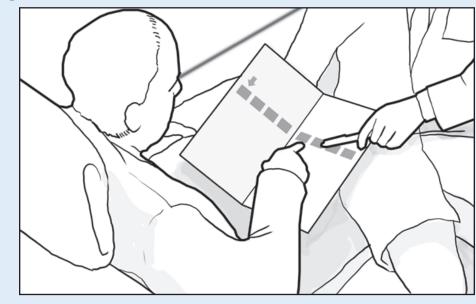


Product: interaction guide



Discharge journey map





THEMES









INSIGHTS FROM RESEARCH

- Patients view the discharge phase as a very complicated process
- It's hard for patients to see that various parts of the discharge experience are connected
- Patients treasure what doctors give them even if it's something small

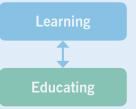
Recovering

Teaching &
Assessing













Dignity blanket







THEMES









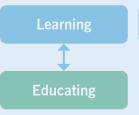
- Patients lose their sense of dignity when they can't go to the bathroom on their own, can't wear their own clothes, and have to expose their body parts
- Some doctors provide preferential treatment to people they know when they think patients and families are not looking















Top three kit





THEMES





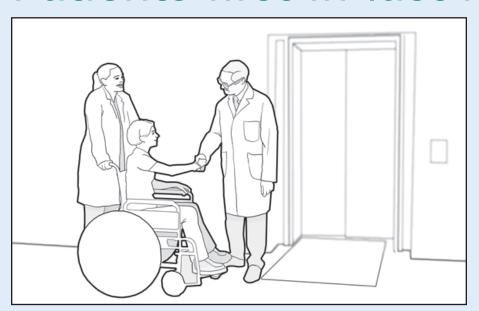




- Patients don't remember a lot of things
- It's better to provide the second best thing patient should do if it means patient will comply with
- it rather than the best thing that is complicated
- Patients treasure what doctors give them even if it's something small



Patients first in last moments





THEMES









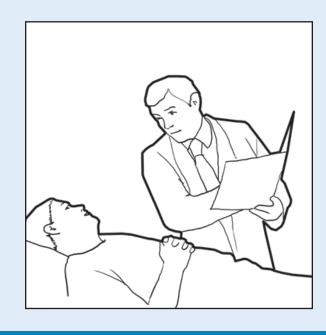
- In many cultures, it's rude to say goodbye and then close the door people are expected to walk out to where the guest's car is and wave goodbye as the guest leaves
- There is no real interaction between doctors and patients as patients are leaving the hospital



Decorated doctors







THEMES









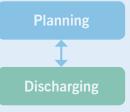
INSIGHTS FROM RESEARCH

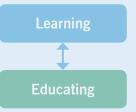
- Physicians are competitive at Cleveland Clinic
- When mandates from the top of the organization are enforced, physicians comply reluctantly
- Dr. Cosgrove's story at Harvard Business School when audience member asked him if Cleveland Clinic teaches its doctors empathy

Recovering
Teaching &
Assessing





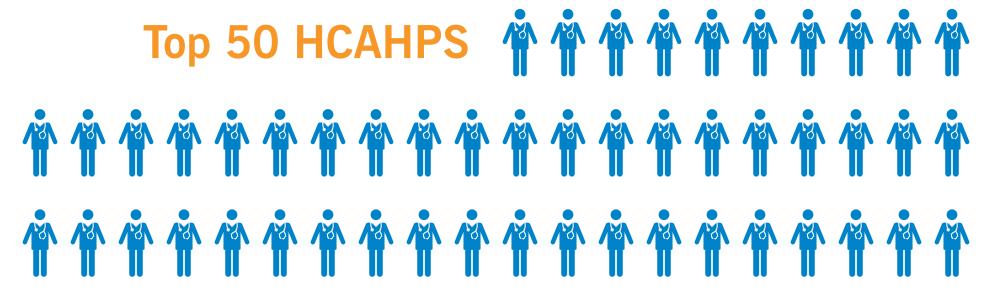


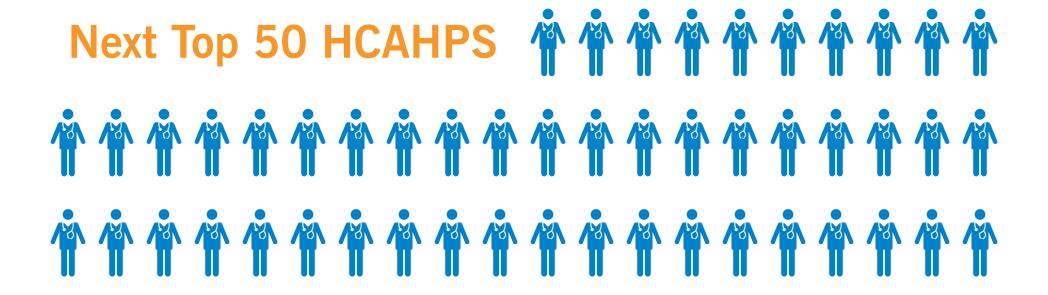




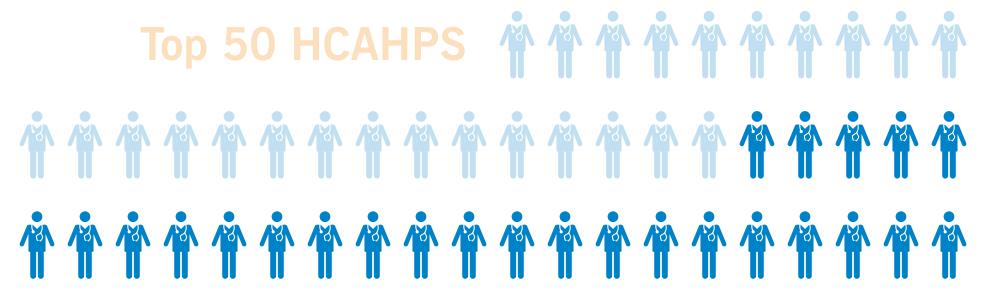


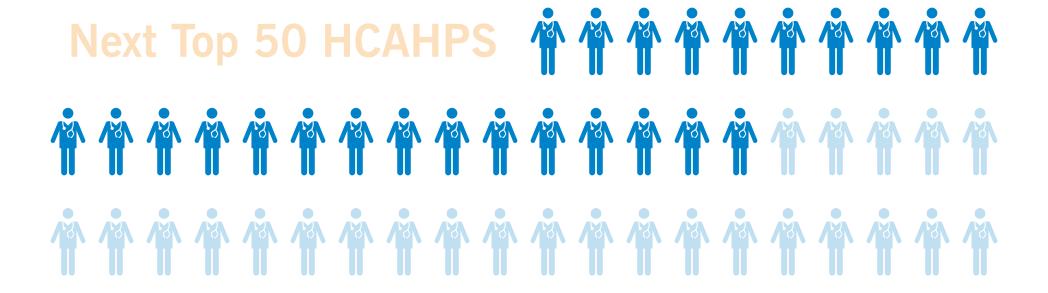
Implementation





Implementation



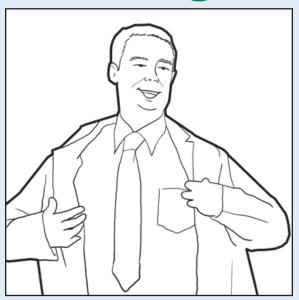


Thank you

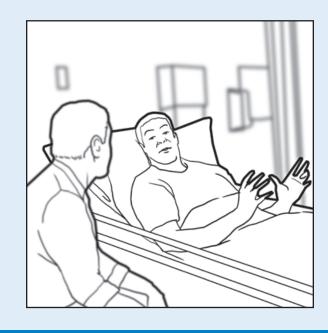
Questions?



Vesture gesture







THEMES









INSIGHTS FROM RESEARCH

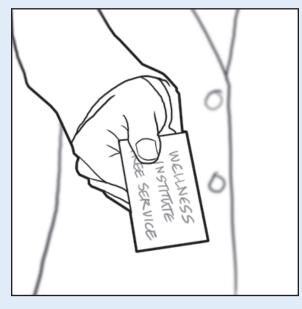
- Some patients consider doctors unapproachable because they always seem very busy
- Patients also feel like it's not appropriate to ask questions

even though they may have a list of questions since they don't want to be rude by asking for some personal time with doctors



Guaranteed gifts







THEMES



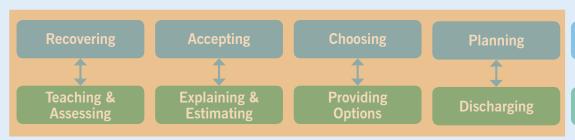






INSIGHTS FROM RESEARCH

- Discharge is usually confirmed on the day of and it's really a moving target - therefore, during most of the discharge, caregivers can't make guarantees
- Patients treasure what doctors give them even if it's something small
- Small activities of daily living matter to patients



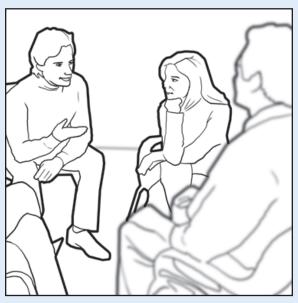
Learning

Educating

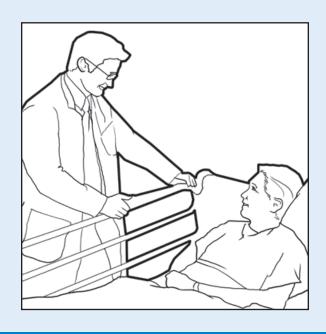
Leaving



Words, words, words







THEMES









INSIGHTS FROM RESEARCH

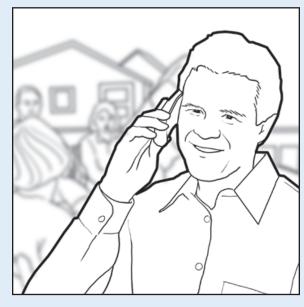
 Doctors with great communication skills use cues from their environment or previous interactions with patient to follow up with something happening in

- patient's life outside the hospital (e.g. family vacation)
- Patients have concerns about things happening outside the hospital, such as home and family



Dialing doctors







THEMES







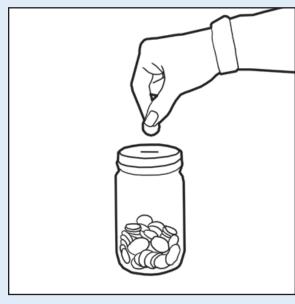


- One great way for doctors to spend time with patients is through a simple follow-up phone call when they have more time and when away from the stress of the
- hospital environment
- Patients appreciate this simple gesture that is not often practiced and are surprised if it ever happens



Jargon jar & Cleveland Clinic coins







THEMES









INSIGHT FROM RESEARCH

 Patients don't know when to let the physician know that they don't understand what he/she is saying. If medical jargon is used by physicians, patients may feel embarrassed to ask physicians to dumb down the language

