

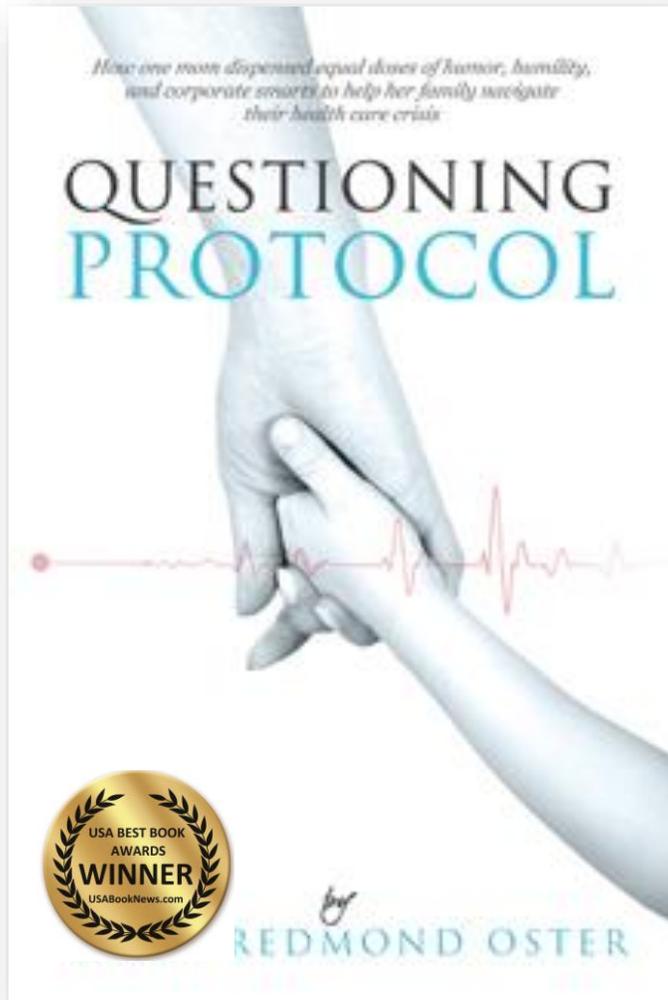
Engaging Healthcare Employees in Reimagining the Patient Experience

A Transformational Learning Experience that Ignites Change

“Reading my book to jump-start your patient experience culture shift is a start. But, it won’t do all you need it to do.

Now, the lessons of the book can come to life for your team.”

Randi Redmond Oster



THE CASE FOR ENGAGING EMPLOYEES IN THE PATIENT EXPERIENCE

Research shows:

High employee and physician engagement correlates to higher scores on every HCAHPS dimension¹

High engagement correlates to lower readmission rates²

The quality of patient experience is strongly linked with engagement³

Increased staff feeling of empowerment is associated with decrease in infection rates⁴

**ENGAGED EMPLOYEES ↔
IMPROVE PATIENT EXPERIENCE ↔
DELIVER POSITIVE OUTCOMES**

PATIENT / WANTS© RESULTS

- 95% of participants rated the workshop “highly effective”
- 94% were moved to action by the workshop
- 94% generated new ideas at the workshop to improve the patient experience (px) in their work environment
- 61% implement an idea that improves the px within 30 days of the workshop

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**Help Me
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HELP ME HEALTH® TRANSFORMATIONAL PATIENT / WANTS© WORKSHOP

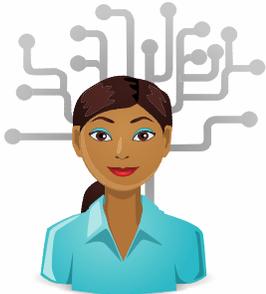
Learn about the patient's *emotional end frame* and how it affects satisfaction and outcomes.



Confused



Savvy



Connected



Frustrated



Knowledgeable



Supported

Here's what workshop participants had to say:

"I had no idea this is how the staff was handling patient access issues until I participated in the workshop with them side-by-side." Dr. B.

"Patient / Wants training is buzzing around and people are energized and excited to implement their ideas." Alice C.

Objectives

The purpose of this dynamic interactive session is to introduce participants to innovative tactics for rapidly implementing strategies for patient-centric culture change.

- Understand how the current experience causes patients and their support network to feel.
- Learn how the experience can affect outcomes.
- Understand that improving the patient experience increases job satisfaction, improves business results, and is good for the patient.
- Feel empowered to make changes.
- Be ready to put immediate actions into practice to shift the culture at your healthcare facility.

Workshop Content

Part One: The Patient Journey

Participants examine the patient's experience through the eyes of the patient and discuss how it differs from the provider's perspective.

Part Two: The Patient Experience Matters

Explore a real-life case study about one patient's experience. Discover how emotions impact behavior and outcomes along the journey. Identify powerful statistics connecting patient-centered care to improved patient outcomes, patient and employee satisfaction, and your organization's bottom line.

Part Three: What Patients Want

Identify the gaps in your organization's patient journey and how they cause patients to feel. Learn how patients want to feel and explore ways to fill the gap between how patients want to feel and how the organization's policies, procedures and people cause them to feel.

Part Four: Synthesis and Action

Reimagine the patient journey at your facility, incorporating your Patient / Wants© discoveries. Make specific commitments to improving processes, ongoing training and, most importantly, *changing culture*.

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Research Citations:

¹“Every Voice Matters: The Bottom Line on Employee and Physician Engagement,” Press Ganey Associates Inc., 2013, p. 2

²Ibid., p. 5

³“Employee Engagement and NHS Performance,” Michael A. West and Jeremy F. Dawson, The King’s Fund 2012, p. 18

⁴Ibid., p. 19

Other References:

West MA, Borrill CS, Dawson JF, Scully C, Carter M, Anelay S, Patterson MG, Waring J (2002). “The link between the management of employees and patient mortality in acute hospitals.” *International journal of Human Resource Management*, vol 13, pp. 1299-1310

West MA, Guthrie JP, Dawson JF, Borrill CS, Carter MR (2006). “Reducing patient mortality in hospitals: the role of human resource management.” *Journal of Organizational Behavior*, vol 27, pp. 983-1002.

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