Voices of the Future: Student Perspectives on the Patient Experience

Britney A. Garr
Health Policy and Communications Intern, The Beryl Institute
MPH Health Policy Candidate, George Washington University

Jason A. Wolf, Ph.D.
President, The Beryl Institute
The Beryl Institute is the global community of practice and premier thought leader on improving the patient experience in healthcare. The Institute serves as a reliable resource for shared information and proven practices, a dynamic incubator of leading research and new ideas and an interactive connector of leaders and practitioners. The Institute is uniquely positioned to develop and publicize cutting-edge concepts focused on improving the patient experience, touching thousands of healthcare executives and patients.

The Institute defines the patient experience as the sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care.

© 2013 The Beryl Institute
You can follow The Beryl Institute on LinkedIn, Facebook, and Twitter (@berylinstitute) or visit www.theberylinstitute.org.
The Beryl Institute remains focused on a clear vision to serve as the global community of practice and premier thought leader on improving the patient experience. As an independent, non-vendor or provider related community, it is our intent to ensure the broadest level of collaboration and the widest range of voices are included in this critical dialog. This may be no more fundamental than in engaging the voices of the future – those students and others, who are committing their learning, education and development to a future career in healthcare.

It is with this realization that in 2011, the Institute launched the Education Outreach Program, as a means to provide the vast and growing resources available on the issues, opportunities and challenges in addressing patient experience to healthcare students. The educational outreach program provides content and programming designed to support the development of the next generation of patient experience leaders, a core commitment of The Beryl Institute. To ensure students can access Institute Resources, current graduate and university students in healthcare related fields are invited to take advantage of complimentary membership provided through their respective school.

If we are to build a healthcare field that understands the importance of patient and family voice- that recognizes the power of sharing voices of practice- then we must listen and engage the voices of the future. This paper, based on research by one of our own student interns, Britney Garr, reveals that there remains great opportunity for increasing the content and reinforcing the context through which patient experience is part of any healthcare education. As the study reported here suggests, we believe that future leaders must recognize that the conversation on experience is not one simply of policy, or even passing fancy, but rather one fundamental to the healthcare system and its future.

Jason A. Wolf
President
The Beryl Institute
INTRODUCTION

Patient Experience is a topic at the center of discussions throughout the healthcare community. In fact, in a number of recent studies, including The Beryl Institute’s State of Patient Experience in American Hospitals Benchmarking research, it has been identified as a top priority for healthcare leaders. Discussions around the patient experience are expected to continue and even expand as new reforms to the healthcare system reward doctors for high patient satisfaction rates and as consumers of health care provide feedback on their health care experiences using various reporting channels, which will influence things ranging from reimbursement to reputation.

The patient experience is a topic that current health professionals are working to understand and improve; however, it is also a topic worth introducing to future health professionals in an educational setting. Future health professionals will be able to better plan for and respond to challenges in their professional careers if they are equipped with an understanding of the patient experience.

DESIGN & METHODOLOGY

To better understand the frequency and depth of the patient experience currently included in health curricula, a Student Perceptions of the Patient Experience survey was developed and administered to healthcare students in the United States and England (See Appendix A). The results of the survey will be used to not only determine existing teachings around the patient experience, but also to explore student perceptions of the patient experience and its role in their future careers as health professionals.

The survey was administered electronically to student members of The Beryl Institute community as well as participating organizations and institutions. It was designed to reach students across the various healthcare settings from the clinical perspective (Nursing and Medical), operational perspective (MHA, MBA, etc.) and public health and policy perspective (MPH, MPP, etc.).

The survey consisted of eleven free-response and multiple-choice questions. Students were asked to provide optional demographic data to identify their field of study, educational institution, and years of professional experience. Additional questions focused on students’ definition of the patient experience, the importance of understanding the patient experience, the current resources available on the patient experience, and the extent to which the topic is included in their educational curricula.
WHAT WE DISCOVERED

A total of 125 students from universities across the United States and England responded to the survey (for a profile of the respondents, see Appendix B). The majority of respondents were nursing students and graduate level public health students. Overall trends were identified in the survey; however, major distinctions in perceptions of the patient experience and its role in health care were noted between nursing and public health students.

A LOOK AT THE DATA

How do you define the patient experience?

The respondents used a variety of closely related or synonymous words to define the patient experience (see Figure 2). The open-ended nature of the question allowed students to creatively phrase a seemingly ubiquitous concept. The popular key words included: interaction, quality of care, and perceives, in regards to the healthcare staff, the care setting, or patient sentiment. Furthermore, nearly every student definition suggested that the patient experience is a patient-centered concept that is defined from the perspective of the patient during their journey through the health care system.
In exploring the phrases that students used to define the patient experience, they all emerged as variations around a common theme of interaction, perception and continuum. This is interesting because these words all closely align with The Beryl Institute’s definition of patient experience – the sum of all interactions shaped by an organization’s culture, that influence patient perceptions across the continuum of care. Yet many of these students had not been exposed to the definition prior to this research. Some of their phrases included:

- All interactions a patient experiences along a continuum of care
- Patient’s view of the quality of the health care they receive
- The various instances in which patients react to quality of care
- The overall feeling of care and well-being a patient feels

**Do students value understanding the topic of the patient experience?**

Overall 90.4% of all respondents said understanding the topic of the patient experience was at least moderately important.

- Nursing students: All respondents (i.e. 100%) suggested the topic was at least moderately important and over half (53.8%) actually identified the topic as very important.
- Public Health students: 83.3% suggest the topic was at least moderately important, but only 16.7% overall identified the topic as very important.

Both clinically-focused and non-clinical students value the understanding of the topic of patient experience. A stronger emphasis from nursing students could be tied to their planned career working directly with patients; therefore, they may value understanding approaches to improve the patient experience more than those in fields of study that may not directly lead to day-to-day interactions with patients. Patients are the main stakeholders in the nursing field, whereas non-clinical professionals take several stakeholders into consideration. Nevertheless, the topic is valued by both clinical and non-clinical students alike.

**How often does the topic of “patient experience” or “patient satisfaction” come up in classroom discussions?**

- The majority (79.5%) reported these topics come up half the time or less.
- Nursing students: 66.7% said that these topics come up at least half the time or usually.
- Public Health Students: 75% said that these topics come up seldomly or never.

There is a continuous distinction between nursing students and public health students. Nursing students receive greater exposure to the topics of “patient experience” or “patient satisfaction” than public health students. This could be due to the primary focus of a career in nursing; being trained to serve patients in a healthcare setting, versus a career in public health that may focus on devising policies, regulations, or interventions that affect groups of people. However, the gap in frequency of discussion between public health and nursing students should not be overlooked. Educating all students of healthcare on the topic of patient experience has the potential to improve the ability of clinical and non-clinical staff to work together towards a common goal. It is important for hospital and medical administrators to be knowledgeable on patient related topics so that they can efficiently manage and direct their clinical staff as well as be active members of the care coordination process. Public health students value understanding the patient experience, yet they indicated the topic rarely comes up during classroom instruction.

Educating all students of health care on the topic of patient experience has the potential to improve the ability of clinical and non-clinical staff to work together towards a common goal.
**What resources do you use to help you understand the patient experience?**

Students use a wide range of resources to understand the patient experience. The classroom is the most often used resource among nursing students. Public health students utilize popular press as a resource for understanding the patient experience. However, about half (51.9%) of public health students report the classroom as a resource. Nevertheless, public health students are seeking information independently. This is supported by public health students reporting that the topic of patient experience comes up less than half of the time or seldom in the classroom.

Policy (publications or entities) is the resource used least to help students understand the patient experience. This may be an indicator that there is not a substantial governance or public policy base promoting this topic. This also suggests there is room for policy minded organizations, hospital management, or government entities to focus on and promote this topic, as patient satisfaction will be tied to methods of measurement and reimbursement, potentially transforming how care is delivered.

**What do you view as the biggest obstacles to improving patient experience?**

Nursing students and public health students indicated that time and money are the biggest obstacles in improving patient experience. Digging deeper into each obstacle reported by respondents, it is clear that time relates closely to staffing issues. Nurses are expected to perform many duties and often without a complete or sufficient team to distribute the workload. Money was associated with available resources, which creates constraints in the ability to carry out functions of their jobs. Insufficient funding or resources are also tied to staffing and training opportunities (career development).

Furthermore, money also relates to methods of payment. Some respondents reported the current payment system encourages nurses to care for many patients. The fee-for-service payment system reimburses medical professionals for services delivered without taking into consideration the quality or necessity of the service. Nursing students reported this payment system as an obstacle to improving the patient experience that should be revisited after payment reforms in the Affordable Care Act go into effect.

A noticeable difference in responses from public health students was the heavy presence of “policy, regulations, and processes.” This difference in views may relate to the curriculum taught to each group of students, with policy and management courses appearing in the public health curriculum, often as a tool to effect change and also a barrier to implement change.

**Who will have a central role in improving the patient experience?**

Overall, respondents stated that the entire healthcare team is responsible for improving the patient experience. However, varying viewpoints are indicative of student perceptions of what a healthcare team looks like and who is in charge of implementing concepts.

Nursing students placed a great emphasis on nurses’ central role in improving patient experience, as they have the most contact with patients. Nursing students report the inclusion of the patient experience in classroom discussions at much higher rates than public health students; however, nursing students do not reference policymakers or members of management having a key role. Without sufficient knowledge of the patient experience, policymakers and administrators will not be able to craft policies that adequately reflect the needs of their stakeholders.
role in improving the patient experience. Therefore, it is worth exploring if improving the patient experience is seen as a responsibility of clinical professionals and if the patient experience is being taught as the responsibility of the entire medical team.

Public health students recognized health administrators and policymakers as having a role in improving the patient experience. However, the lack of the topic in classroom discussion only allows public health students to paint a partial picture. Public health students may become hospital administrators or policymakers and need to fully understand the topic of the patient experience in order to execute the duties of their job properly. The patient experience has already influenced national policy and will be tied to provider reimbursements, as well as hospital and medical facility ratings. Without sufficient knowledge of the patient experience, policymakers and administrators will not be able to craft policies that adequately reflect the needs of their stakeholders.

To what extent do you anticipate issues regarding patient satisfaction and patient experience will be central to your career as a healthcare professional?

- Nursing students: Example: 97.4% of respondents said somewhat to a great extent; 2.6% said very little; 0 said not at all
- Public Health students: Example: 63.2% of respondents said somewhat to a great extent; 36.8% of respondents said very little to not at all

Nursing students recognize that they will be on the frontline and have day-to-day interactions with patients. Therefore, they anticipate patient experience issues to be a central theme in their careers. Public health students will enter a variety of professions, some of which may involve rare interactions with patients. Therefore, they are further removed from the instance of care and cannot picture or anticipate these issues arising often or being central to their careers.
DO YEARS OF WORK EXPERIENCE IN HEALTH CARE AFFECT THE RESPONSES?

During the data review process, common definitions and themes appeared. However, similar to the divergence in answers from students in different fields of study, there were also variations in answers from students with years of work experience, compared to students with little to no work experience. Unlike the differences in perceptions found between students in different fields of study, the answers from students with various levels of work experience were similar. The distinction here is that students with greater amounts of work experience offered an expanded perspective. Note: To analyze the data, answers were distinguished by those with “Less than 1 year” of experience and with “5 or more years” of experience.

How do you define patient experience?

Overall, both groups placed an emphasis on the patient perspective.

Less than 1 year: The majority of respondents identified the patient’s perspective as the definition of the patient experience. Fewer respondents were able to identify measures and components that influence the patient experience, such as: the clinical environment, the attitudes of attending staff, and the quality of care delivered.

5 or more years: The majority of respondents with work experience in healthcare cited the patient perspective as the main definition of the patient experience. However, respondents with experience working in healthcare also defined the patient experience as a holistic experience that is influenced by many factors. Recurring themes that contribute to the patient experience as provided by this group included: the patient’s relationship with their provider and medical staff, the medical environment, and the ease of access to necessary services.

What do you view as the biggest obstacles to improving the patient experience?

The majority of respondents with less than one year of experience listed time and staffing shortages as the biggest obstacles to improving the patient experience. The majority of respondents with five or more years experience listed time and money as the biggest obstacles to improving the patient experience. The implications of these obstacles are explained in the analysis of the entire respondent pool.

This question yields interesting insight into the differences between experienced professionals and future professionals. Although there are similarities between the answers given by the two groups, it is apparent that the experienced professionals responded after years of facing the obstacles cited, whereas respondents with less experience working in healthcare answered from an anticipatory perspective. While time constraint is an obstacle that is both experienced and anticipated, the experienced professional respondents were able to link the source of many obstacles back to lack of or shortages in funding.
CONCLUSION

The Student Perceptions on Patient Experience Survey captured the views, values, and expectations of future healthcare professionals. The survey also identified obstacles that future leaders will face and be challenged to address. Gathering perceptions on patient experience from students across healthcare professions is just the first step of a long journey to incorporate the patient experience in the training and practice of our healthcare workforce.

The survey revealed that students are aware of the patient experience and the role it will play in their careers as health professionals. However, the data suggested that the frequency in occurrence of patient experience in classroom discussions and educational curricula is not aligned with the magnitude of value the students place on it nor the extent that students expect the topic to be central to their careers. This misalignment is exacerbated in non-clinical curricula, as students of public health reported using publications, or other sources of secondary data, as the main source for understanding patient experience versus the power of personal interactions themselves. This gap is stifling the opportunity for the future healthcare workforce to be educated on a topic that will significantly impact various aspects of the healthcare market.

In examining the current state of the patient experience in educational curricula, we find much room for reformation and integration. This leads us to a few final observations that should influence the education of future healthcare leaders.

- The occurrence of the patient experience in classroom discussions/educational curricula is aligned neither with the amount of value the students place on it, nor the extent that students expect the topic to be central to their careers.
- There is also a gap in the occurrence of the topic in curricula taught to future clinicians and future non-clinical health professionals.

The data suggested that the frequency in occurrence of patient experience in classroom discussions and educational curricula is not aligned with the magnitude of value the students place on it nor the extent that students expect the topic to be central to their careers.

Based on the data, the topic is not well known enough by students to paint a full picture of who is responsible for improving the patient experience.

So, what implications does this have for educating future healthcare clinicians and leaders? In a post healthcare reform world, the topic of patient experience is vital to the success of every health professional and medical institution. A transformation at the federal level in the United States and other national policies globally, they recognize that patient experience is a valid measure of how to reimburse clinicians and how to rate medical institutions. This validates the necessity of including this topic in educational curricula. In addition to educating all health care students, it is important to standardize the topic so that students are learning the same thing so that when they begin their professions, they are ready to work as a part of a coordinated healthcare team with common understanding and language.

The data also led us to offer two recommendations for action that will impact and influence the future perspectives of students focused on improving the patient experience:

1. Colleges and universities must include the patient experience as a topic in their educational curricula (to both clinical and non-clinical health majors). The classroom needs to be a resource for all students,
but students must also be exposed to the direct interactions at the core of experience and see, hear and feel the voices of patients and families themselves in order to understand the true scope of this issue and the ability their actions have in influencing outcomes.

2. Schools, associations, and affiliated organizations should initiate a means to work together in crafting a standardized message and learning module(s) on the patient experience to ensure future health professionals are able to work together seamlessly in delivering the best of quality, safety and service; the best patient experience overall. We offer The Beryl Institute as a place and host for this critical dialogue.

While recognizing the importance of this issue as identified by leaders and caregivers across the continuum of care, a true opportunity remains to address this issue at its very roots. Providing the opportunity for students to not only learn about the critical issues that impact patient experience, but also begin to speak in a common language and shared ideas with which to address this issue is a fundamental opportunity we cannot miss.
APPENDIX A - STUDENT PERCEPTIONS OF THE PATIENT EXPERIENCE SURVEY

1. What area of healthcare are you studying?
   □ Medicine/Medical School (MD)
   □ Nursing/Nursing School (BSN, MSN, etc.)
   □ Public Health (MPH)
   □ Health Policy (MPP)
   □ Healthcare Administration (MHA, MBA, etc)
   □ Other:

2. What is the name of your school/institution?

3. How many years experience do you have working in healthcare (in any capacity)?
   □ None
   □ Less than 1
   □ 1-2
   □ 2-5
   □ 5-10
   □ 10-20
   □ >20

4. How do you define patient experience?

5. What roles (job/position) in healthcare do you see as having the central responsibility for improving the patient experience?

6. What do you view as the biggest obstacles to improving patient experience?

7. How often does the topic of “patient experience” or “patient satisfaction” come up in your classroom discussions?
   □ Never
   □ Seldom
   □ About half the time
   □ Usually
   □ Always

8. How important is it to you to understand approaches to improve patient experience?
   □ Unimportant
   □ Of little importance
   □ Moderately Important
   □ Important
   □ Very Important

9. What resources do you use to help you understand the patient experience? (Check all that apply)
   □ Academic Journals
   □ Popular Press
   □ Policy
   □ Institutes/Organizations
   □ Classroom
   Other (please specify) ________________

10. To what extent do you anticipate issues regarding patient satisfaction and patient experience will be central to your career as a healthcare professional?
    □ Not at all
    □ Very small
    □ Somewhat
    □ To a great extent

11. On a scale of 1-10 from 1 (“not at all”) to 10 (“of greatest importance”), how important do you believe patient experience is in healthcare?
    1 2 3 4 5 6 7 8 9 10
## APPENDIX B - PROFILE OF RESPONDENTS

<table>
<thead>
<tr>
<th>Major</th>
<th>Percentage of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine/Medical School (MD)</td>
<td>1%</td>
</tr>
<tr>
<td>Nursing/Nursing School (BSN, MSN, etc.)</td>
<td>38%</td>
</tr>
<tr>
<td>Public Health (MPH)</td>
<td>56%</td>
</tr>
<tr>
<td>Public Policy (MPP)</td>
<td>3%</td>
</tr>
<tr>
<td>Healthcare Administration (MHA, MBA, etc)</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Years of Experience</th>
<th>Percentage of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>20%</td>
</tr>
<tr>
<td>Less than 1</td>
<td>22.4%</td>
</tr>
<tr>
<td>1-2</td>
<td>15.2%</td>
</tr>
<tr>
<td>2-5</td>
<td>16.8%</td>
</tr>
<tr>
<td>5-10</td>
<td>16.8%</td>
</tr>
<tr>
<td>10-20</td>
<td>4.8%</td>
</tr>
<tr>
<td>&gt;20</td>
<td>4.8%</td>
</tr>
</tbody>
</table>