

HELP US HELP YOU: THE CREATION OF A PERIOPERATIVE PATIENT EXPERIENCE SURVEY

Team Leader: Carolyn Dietrich, MS, RN, CPAN

University of Colorado Hospital, Aurora, Colorado

Team Members: Michelle Ballou, BSN, RN, CPAN; Tanya Beck, RN, BSN, CAPA

Background: Satisfying a patient is essential for increasing business and subsequently reimbursement in a modern health care model. Organizations rely on surveys and questionnaires to determine customer satisfaction ratings, but such surveys and literature reviews rarely include evaluation of inpatient perioperative units.

Objectives: The perioperative specific survey targets a patient's experience and perception by evaluating such categories as pain and comfort, communication and listening, promptness, overall proficiency of team members, and approachability of staff.

Process of Implementation: The Perioperative Patient Experience Survey was implemented in October 2011. A Likert scale measures satisfaction and questions elicit information about attitudes and preferences of patients. The survey includes questions about all three phases of perioperative care: pre-op, operating room, and post anesthesia care unit (PACU). Certain questions are directly related to employee performance evaluations.

Results/Outcomes: Post-implementation outcomes show patients' rate their overall experience averaging 93.8/100% satisfaction in a 12-month period. The goal is reporting a 90% or higher. Information and communication from care team members remain most important positive components; total duration of visit (no availability of a room) represents the most negative aspect. Changes from patient feedback include modifying furniture and allowing extended visitation in PACU. Volunteers bring free coffee to the waiting room, pet therapy canine teams visit, and a card from staff is included thanking the patient for choosing the facility.

Implications for Practice: The Patient Experience Survey is used to monitor satisfaction and understand requests, needs, and preferences of patients. Data provides an important source of direct feedback for changes and indicates quality of perioperative care delivered.