



New York State Department of Health AIDS Institute

Healthcare Stories Project

Activity Two Instructional Guide

Healthcare Stories Project

Welcome to the second installment of the Healthcare Stories Project (HCSP), an initiative of the NYSDOH AIDS Institute to provide concrete tools for healthcare users to be integral participants in the delivery of quality HIV care.

Poster and Activity Two: How is Today's Visit Going?

Healthcare User Visit Experience Mapping

For this activity, we will use **Healthcare User Visit Experience Mapping**, a method to explore how healthcare users experience services. The tool will help you record users' reactions to the elements that make up a medical visit. The process is conducted in 'real time' during the visit to pinpoint where in the service delivery process users react and why. With this information, your organization may be able to identify areas of service delivery that need improvement.

This instructional guide goes through a six-step process to conduct, analyze, and identify improvement strategies. You may notice that this activity resembles HCSP Poster/Activity One that invited organizations to make a word cloud based on health users feelings about "quality of care." If your organization participated, this activity should be easy to implement as many of the steps are the same. However, the two activities are independent and you can still participate now, even if you haven't before. To try the first activity, go to www.hivguidelines.org/hcsp.

Activity Two builds on the Consumer Lens Study

Poster and Activity Two build on findings from the qualitative study called: *Through a Consumer's Lens: Examining Ideas and Experiences of Quality in New York State HIV Healthcare Programs*. Participants shared stories about their experiences with healthcare and findings showed how they made sense of, felt, and acted within their healthcare settings. See www.hivguidelines.org/hcsp for more information about the study.

The Consumer Lens Study showed that each part of a medical visit has the power to generate intense feelings for health users. The Healthcare User Visit Experience Mapping poster that accompanies this instructional guide illustrates that stations where vitals were taken, or where a provider was seen, elicited feelings of pleasure or concern. Feelings are positive and negative "touch points," defined as deeply felt moments in healthcare service delivery. In some instances, touch points can be so powerful that they shape a user's overall feelings about the quality of a healthcare visit, or even the healthcare program. These reactions may have implications for linkage and retention in care.

There is now a sizable body of research showing a link between how people feel about their healthcare and their health outcomes. Feelings are generated in reaction to several aspects of care, from staff treatment to the influence of a clinic's spatial design. HCSP activities can help your organization probe healthcare users' feelings about various service elements; such learning may enable meaningful improvements that ultimately improve health outcomes. See Appendix for background resources.

Healthcare User Experience Mapping will help your healthcare organization:

- ✓ **Gain relevant information about the service delivery process:** Healthcare users provide the "what, how, where, when, and who" of services because they are on the receiving end of how care is actually delivered.
- ✓ **Identify services that critically shape user experiences of "quality of care":** Healthcare User Visit Experience Maps reveal the meaningful points in a visit – positive and negative – and identify what changes can have a big impact.
- ✓ **Fully engage healthcare users in quality improvement processes:** This activity strengthens your quality improvement program by learning from and collaborating with healthcare users.

Let's begin!

STEP ONE (WEEK 1): Identify Space to Display the Enclosed Poster

Please designate space to display the Healthcare User Visit Experience Mapping poster included with the instructional guide. You can hang it in the waiting room, or anywhere easily viewed by healthcare users and staff.

STEP TWO (WEEK 2): Assemble a HCSP Team and Hold a Planning Meeting

Assemble (or reconvene) your HCSP planning team comprised of healthcare users (ideally 2-3) and several multi-disciplinary clinic staff. The team should choose an enthusiastic team leader with project management experience and the time to see the activity through.

Choose a meeting time and format that suits your organization's composition and weekly routine. Team meetings might occur as spin-offs of regularly scheduled quality improvement, performance management, or consumer advisory board meetings.

During the initial meeting, the leader should convey to the team the importance of capturing healthcare users' experiences.

The team can then plan out how to implement **Healthcare User Visit Experience Mapping** that:

- 1) uses open-ended methods and an information collection tool to capture healthcare users' feelings about services in real-time;
- 2) lets healthcare users and providers discuss findings, compare interpretations, and jointly strengthen the quality of the healthcare program.

The team should develop a timeline and assign the following responsibilities to team members:

- Inform and Generate Support Among Healthcare Staff for the Activity (reassure staff that it will gather organizational and not individual performance information)
- Distribute and Collect Experience Mapping Forms (Step Three)
- Display Experience Mapping Forms (Step Four)
- Analyze and Discuss Mapping Forms (Step Five)
- Create an Ideal Visit Map and Action Steps to be Shared with the Community (Steps Five and Six)

Please note: All aspects of this process should be adapted to fit your program. Consider collecting and analyzing information that is appropriate (and efficient) in your setting.

Key Terms

Healthcare User Visit Experience Maps:

A method that asks users to offer reactions to the elements of their healthcare visit.

Healthcare User Experiences:

Personal stories told by healthcare users about their experiences receiving healthcare.

Touch Points:

Deeply felt moments, positive or negative, in healthcare delivery.

Experience Mapping Form:

An information collection tool to capture healthcare users' touch points and meaningful observations during their healthcare visits.

STEP THREE (WEEKS 3–11): Distribute Healthcare User Experience Mapping Forms

For approximately 8 weeks, ask healthcare users to fill out the Healthcare User Visit Experience Mapping Form (Attachment 1, or download at www.hivguidelines.org/hcsp). The team should decide at the outset their optimal number of responses based on the patient population and the time the team will be able to devote to the analysis. Even if the target is small, as many healthcare users as possible should be aware of the activity and given the opportunity to participate.

The mapping form should be given to healthcare users when they come in for a visit. Staff may need to provide guidance on how to complete the form and processes to support the population, especially if serving individuals with lower literacy skills.

Form Completion Guidelines:

- Ask healthcare users to write down meaningful reactions (their “touch points”) at the stations during a visit that generate reactions, starting with the moment they feel their visit starts, until it ends.
- Comments can be positive, express challenges, or provide observations about what is happening.
- It’s okay if health users do not have a reaction to write down at each stop designed on the experience mapping form. Also, it is okay if they want to write down reactions at points other than the ones listed.
- It is okay to use emoticons (😊😐😞) to express how they are feeling about their encounters (particularly if literacy is an issue) along with, where possible, longer descriptions.
- Be sure to tell healthcare users that their *responses are anonymous* and that the only information they are being asked to write down is the date of their medical visit, which may be helpful for the analysis.
- Healthcare users who agree to participate need to return the experience mapping form before they leave your organization at the end of their visit.

It may be important to reassure staff that this activity will not evaluate individual performance, but gather information to enhance the organization’s quality of care overall.

STEP FOUR (WEEKS 3–11): Display Experience Mapping Forms

Designate space in close range to the location where your organization displayed the poster to put up some or all of the forms. The purpose of hanging the forms is for users and staff to be aware of the activity. Forms can be posted on a rotating basis if there is not enough space to display them at one time.

Please take pictures to memorialize the display over the 8-week period. Post your photos at www.hivguidelines.org/hcsp, or send them to post to Daniel Tietz at daniel.tietz@health.ny.gov.

After 8 weeks, take down the forms and get ready to map!

STEP FIVE (WEEKS 12-13): Mapping and Discussion

Call an HCSP meeting to map healthcare user experiences captured through the activity. A minimum of 4 hours will be needed for Step Five, and may require convening two or more meetings.

At the first meeting, the leader should begin by placing the completed forms around a room for team members to view. The team should begin by reflecting on the activity including what worked well or what could be improved.

Next, team members should begin compiling the material collected through the forms. This can be accomplished by splitting up the team into three subgroups, using Worksheets 1-5 to undertake the following tasks:

Subgroup One -- Information Subgroup: Read through all of the forms and, using *Worksheet 1: Mapping Positive, Challenging, and Observational Touch Points*, record in column three the “observations” healthcare users made about their visits. These are emotionally neutral, but informative insights from health users based on their perceptions of the services provided. Determine and record three similar responses for each stop on *Worksheet 2: Common Observations Touch Points*. Then, go on to *Worksheet 5: Discussion Questions*.

Subgroup Two -- Challenges Subgroup: Read through all of the forms. On *Worksheet 1: Mapping Positive, Challenging, and Observational Touch Points*, record in column two the challenges users experience and the stations where they occur. The group can determine similar concerns, and on *Worksheet 3: Touch Point Challenges*, fill in the five most common at each station.

If possible, use other information your organization collects to consider what was happening in your clinic on the dates when healthcare users experienced challenges. Factors like high user volume or low staffing levels may have influenced health user experiences. Write down whether the group thinks these are normal or unusual occurrences. Then move on to *Worksheet 5: Discussion Questions*.

Subgroup Three -- Positive Experiences Subgroup: Read through all of the forms. On *Worksheet 1: Mapping Positive, Challenging, and Informational Touch Points*, record all of the positive responses and where they occurred. Then go to *Worksheet 4: Touch Point: Positive Experiences*, to explore how your program supports and produces positive touch points. The group should discuss ways to harness such experiences and move to *Worksheet 5: Discussion Questions*.

All subgroups should reassemble, present findings to the HCSP team and collectively work on *Worksheet 6: Action Steps - Making Ideal User Visits*.

More Suggested Adaptations: Feel free to adapt worksheets to better fit your healthcare program. The subgroups may want to meet separately, and then report back, discuss findings, and collectively undertake the Action Steps Worksheet.

STEP SIX (Weeks 14-16): Create and Share an Ideal Healthcare User Visit Map

After completing Step Five, the team can create an organization-level ideal visit map to be shared with healthcare users and staff within your organization. The ideal map can be made with an editable pdf found at www.hivguidelines.org/hcsp, or create your own display of your findings.

Plan an event to share insights with everyone involved in the Healthcare Stories Project and your HIV program. During the event, a team member should summarize the activity, findings, and action steps. Everyone should discuss how they will test action steps using a PDSA cycle (a quality improvement process to determine if a program change should be implemented at an organizational level). Collectively charting next steps is a way to sustain momentum, encourage integration of findings into the program, educate healthcare users and staff on improvement strategies being tested and implemented, and achieve internal buy-in to continue to involve healthcare users in quality improvement activities.

It is important to recognize team members and healthcare users who participated for their contributions and hard work on the Healthcare Stories Project!

Finally, record the process to identify and explore potential adaptations to your organization’s service delivery portfolio to sustain healthcare user-oriented activities in your quality program.

The AIDS Institute will be hosting instructional and coaching webinars to assist providers across New York State to implement the activities. If you need technical assistance or on-site coaching, please contact Daniel Tietz, Consumer Affairs Manager, New York State Department of Health AIDS Institute at (877) 874-0776 or daniel.tietz@health.ny.gov. If you would like more information or coaching on quality improvement as well as work flow tools, please contact Daniel Belanger, Director of the New York State Quality of Care Program, at daniel.belanger@health.ny.gov.

Stay tuned for poster and activity three, which will show how users and providers contribute to strong healthcare systems!



Healthcare User Visit Mapping Activity Check List

- _____ Display Poster Two in a public space
- _____ Assemble and hold a team meeting comprised of: team leader, healthcare users (ideally 3) and staff from a diversity of disciplines
- _____ Assign team member roles/responsibilities
- _____ Hand out, collect, and display healthcare user mapping forms
- _____ Memorialize display through photos (and send to Dan Tietz)
- _____ Hold team meetings to map and discuss findings
- _____ Create an ideal healthcare user visit map and an action plan; go to www.hivguidelines.org/hcsp
- _____ Host an event to share findings and gather momentum to implement an action plan
- _____ Try out a quality improvement strategy to improve healthcare user experiences in your healthcare program!

Appendix – Background Literature

John Bate and Glenn Robert. *Bringing User Experience to Healthcare Improvement* (Oxford: Radcliffe Publishing, 2007).

Health Foundation. *Improving Patient Flows* (London: The Health Foundation, 2013).

Trisha Greenhalgh and Iona Heath. *Measuring Quality in the Therapeutic Relationship: An inquiry into the quality of general practice in England*. (UK: The Kings Fund, 2010).

Ronen Rozenblum, Marianne Lisby, Peter Hockey, Osnat Levizion-Korach, Claudia Salzberg, Stuart Lipsitz, and David Bates. "Uncovering the Blind Spot of Patient Satisfaction: an international survey." *BMJ Qual Safety* (2011). 20: 959-965.

ATTACHMENT 1: Experience Mapping Form

Your experiences are valued as a patient of this healthcare program. Use words and faces to tell us about each part of your visit today that makes a difference to you.

Date: _____

The form consists of a central horizontal bar with eight smiley and frowny face icons. On either side of this bar are five vertical boxes, each labeled 'Station:'. Each box is connected to the central bar by a thick, colored line that loops around the bar. The colors of these lines are teal, pink, purple, yellow-green, and green. Each 'Station:' box contains several horizontal lines for writing.

WORKSHEET 1: Mapping Positive, Challenging, and Observational Touch Points

Record touch points by type (Positives, Challenges, Observations).

STATION	POSITIVE EXPERIENCES	CHALLENGING EXPERIENCES	OBSERVATIONS
Pre-registration			
Registration			
Waiting Room			
Vitals			
Exam Room			
Support & Specialty Services			
Lab Work			
Check Out			

WORKSHEET 2: Common Observations Touch Points

STATION	TOP THREE OBSERVATIONS
Pre-registration	1. _____ 2. _____ 3. _____
Registration	1. _____ 2. _____ 3. _____
Waiting Room	1. _____ 2. _____ 3. _____
Vitals	1. _____ 2. _____ 3. _____
Exam Room	1. _____ 2. _____ 3. _____
Support & Specialty Services	1. _____ 2. _____ 3. _____
Lab Work	1. _____ 2. _____ 3. _____
Check Out	1. _____ 2. _____ 3. _____



WORKSHEET 3: Touch Point Challenges

Investigate what factors influenced the challenges users recorded during their visits. Use extra sheets if necessary.

CHALLENGES	STATION	DATE	WHAT HAPPENED THAT DAY?
1.			<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
2.			<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
3.			<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
4.			<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
5.			<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

WORKSHEET 4: Touch Point Positive Experiences

Investigate how your program enables positive touch points. Use extra sheets if necessary.

POSITIVE EXPERIENCES	STATION	QUALITY SERVICES ALREADY: WHAT DID WE DO?	QUALITY SERVICES ALREADY: CAN WE DO MORE OF IT?
1.		<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
2.		<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
3.		<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
4.		<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
5.		<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
6.		<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>



WORKSHEET 5: Discussion Questions

For Observations Touch Points Subgroup:

1. What new information about your services have you learned from healthcare users?
2. What strategies would you use to solicit users' observations on a regular basis?
3. What steps can you take to improve services, based on the feedback users have provided?

For Challenges Subgroup:

1. What do you think are the central challenges users are facing, and at what points in delivery?
How do the findings require you to rethink user expectations and interpretations of your services?
2. Were you able to identify factors that may have influenced user experiences? If so, what's causing them and are they common?
3. What can be done to minimize health user challenges? Identify a few critical points and/or strategies to intervene and improve experiences based on user feedback.

For Positive Experiences Subgroup:

1. How do you think your health program has been able to deliver the services users identify as positive?
2. How has your program been able to concretely generate positive feelings about services, and in what ways do you think you can enhance what you are doing?
3. In answering question 2, consider: Is it more helpful to focus on improving services in a particular way (for example, building in more flexibility across services), or at a particular stop (for example, the check-in desk is the most important stop for patients so focus efforts there)? How will you go about implementing your chosen improvement strategy?

For All Groups:

1. Compare findings and consider: What are the main principles that you would like to see guiding the design of an ideal healthcare user visit, and how can you concretely develop each stop in a visit to go along with these principles? Go to *Worksheet 6: Action Steps – Making Ideal User Visits*, to develop your action plan.

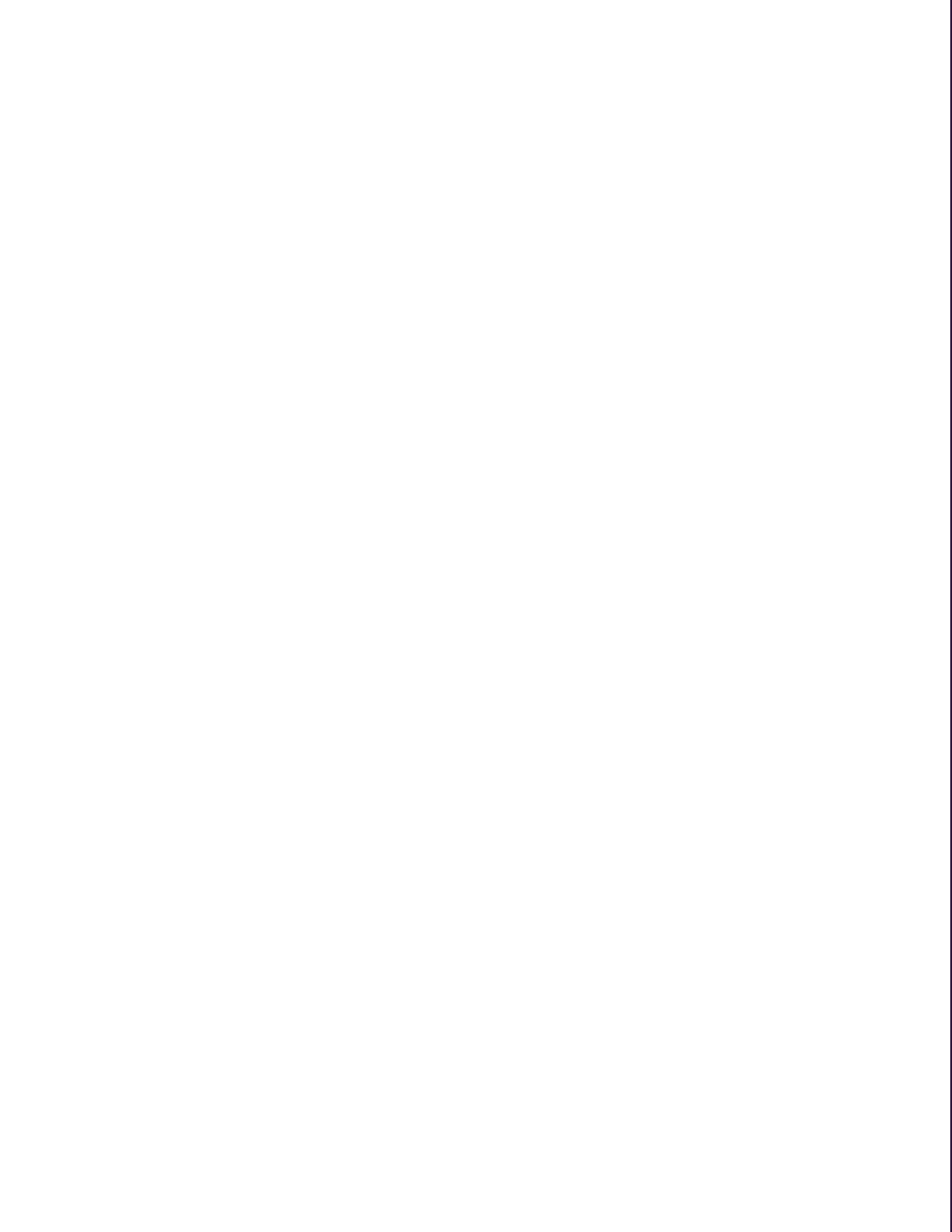
WORKSHEET 6: Action Steps - Making Ideal User Visits

Use extra sheets for additional stations.

Station	Positives to Achieve	Concerns to Minimize
<p>Assessment</p> <p>This station is generally considered _____ by users; we'd like to be _____.</p>		<p>Action Plan</p> <p>Consider improvement strategies and steps to implementation.</p>

Station	Positives to Achieve	Concerns to Minimize
<p>Assessment</p> <p>This station is generally considered _____ by users; we'd like to be _____.</p>		<p>Action Plan</p> <p>Consider improvement strategies and steps to implementation.</p>

Station	Positives to Achieve	Concerns to Minimize
<p>Assessment</p> <p>This station is generally considered _____ by users; we'd like to be _____.</p>		<p>Action Plan</p> <p>Consider improvement strategies and steps to implementation.</p>



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www.hivguidelines.org/hcsp