

4 Ways C.A.R.E. Programming Can Help Improve HCAHPS Scores

Patients make meaning of their hospital experience through what they see and hear. The C.A.R.E. Channel's beautiful nature video and soothing instrumental music conditions the visual and auditory environment to serve as a most personal level of caring and comfort. It calms suffering and enhances the longer-term perception of caring, contributing to a more positive patient experience and helping to improve HCAHPS scores.

Here are 4 ways C.A.R.E. Programming can impact the patient experience measured by the HCAHPS survey questions:

1. Increases Perception of Respect (Related to Questions 1-7):

How physicians and nurses address patients, communicate with them, and treat them is perhaps the most important part of the patient experience. What's key here is that communication, comprehension, and meaningful dialogue are each dependent on the environment in which people are engaged. Replacing the drone of commercial television, C.A.R.E. Programming provides a soothing, consistent auditory and visual background that is appropriate for recovery. Rather than competing with important dialogue and communications, C.A.R.E. masks both continuous sounds and erratic noises.

2. Improves Hospital Environment (Questions 8-9):

How often the hospital room and bathroom are kept clean and how often it's quiet at night are also important issues. If patients have no alternative or positive focus during the many hours that they are awake, they will see and hear more - and they will only think of their discomfort and circumstances. While it is not a substitute for tending to the room, The C.A.R.E. Channel is a positive focus, assuring patients that they are not alone. Its midnight starfield, which is introduced

with a sunset, provides cues that night is for sleeping and that daytime is over. By masking unwanted noise, it also promotes sleep, increasing the perception of quiet at night.

3. Reduces Perception of Waiting Time (Related to Questions 10-17):

Waiting time, perceived time, and, again, patients' perception of being cared for can be the difference between a good and bad patient experience. For example, asking for assistance and receiving help in using a bedpan or going to the toilet involves waiting time. The sense of helplessness for patients who need such assistance is made worse by extended waiting time. For patients who are in pain, suffering and waiting extends time far beyond clock time. A chaotic environment reduces the ability of patients to cope with their pain and also contributes to learned helplessness. The C.A.R.E. Channel is non-programmatic - patients are able to watch it anytime. The content library is robust, with over 80 hours of non-repetitive original content. With subtle motion and fluid editing, the programming engages patients without confusing or frustrating them. The beautiful nature imagery and soothing music distracts them from focusing only on their own discomfort, thus reducing the need for pain medication.

4. Supports Discharge & Recovery (Questions 23-25):

Patients' expectations and understanding of their condition upon discharge and the confidence they have continuing their recovery at home are also a key aspect of the patient experience – especially if it can help prevent readmissions. Often discharge is stressful, with last minute directions being done either in a hurry or in a perceived rush to get patients out of their rooms. A noisy environment is a stressed environment; words spoken to the patient that compete with babble coming from outside the room are often neither understood nor accurately recalled. The C.A.R.E. Channel helps with discharge planning by providing an auditory backdrop that is supportive of focused listening. Also, C.A.R.E. Connect gives hospitals the ability to provide patients a healing environment at home, which may also reduce readmissions.

Excerpted from “HCAHPS, The Patient Experience, and C.A.R.E.” whitepaper by Susan E. Mazer, Ph.D., President and CEO, Healing HealthCare Systems. To download a full version of the paper, please visit the Resources area of our website.



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