Improving the Patient Experience Through the Development of a Radiology-Specific Patient and Family Advisory Council

Stacy R. Schultz; Kathleen R. Brandt, MD; Karl N. Krecke, MD; David B. Jasperson, MA; and Jonathan M. Morris, MD
Department of Radiology
Mayo Clinic, Rochester, MN

Purpose
The purpose of this work is to share our experience developing and maintaining a Radiology-specific Patient and Family Advisory Council as a tangible means to ensure the voices of the patients and their families are appropriately represented; and to enhance the safety, satisfaction, and quality of care encounters in our large, specialized Radiology practice.

Methods
In 2010, our Department recruited Patient and Family Advisory Council members by placing marketing material throughout the department as well as spreading the word through our frontline staff. Each potential candidate was interviewed, given a department orientation, and asked to complete HIPAA training. The Council meets monthly and interacts with members of the practice providing important voice-of-the-customer feedback to let us know if we are managing the value equation properly and effectively.

Results
The Council is made up of 10 patient/family members and 7 radiology staff members. It is led by two radiologists and facilitated by one member of the Radiology Quality Office. Since inception of the group in the fall of 2010, the Council has provided the following:
- Feedback and assessment for a CT Lean improvement project, volunteering to observe processes and providing 32 opportunities for improvement
- Editorial recommendations for a patient education brochure on CT radiation dose
- Feedback for direct delivery of Radiology reports to patients via an online portal
- Recommendations regarding our radiology-specific patient satisfaction survey, specifically the need to reduce the number of questions, shorten the questions, and the need to make the survey more exam specific
- Feedback regarding 6:30 a.m. MRI appointments
- Input regarding radiology staff asking patients to perform hand hygiene upon entering radiology exam rooms
- Editorial recommendations (i.e. word usage, formatting, sequencing) to the patient appointment guide (itinerary) for Radiology examinations. Specifically, improvements to the attached addendum for CT and MRI examinations resulted in a 50% reduction in the number pages.

Vertebroplasty —
A Pain-Relieving Procedure
for Fractures of Spinal Bones

Conclusion
As we are challenged to carefully manage costs over time, we are equally challenged to insure that outcomes, safety, and service increase in the eyes of the patient. Encouraged by The Joint Commission, state legislative bodies, Institute for Clinical Systems Improvement (ICSI), Institute for Healthcare Improvement (IHI), and the Baldrige National Quality Program to improve the patient experience, patient and family advisory councils are a way to better understand the patient perspective and make improvements based on the needs of the patient. This open and effective format provides honest and thoughtful suggestions from our patient and family consumers and has enhanced the delivery of services provided by our Department.

Mayo’s Value Equation:
Value = Outcomes + Safety + Service / cost over time. Value increases when Outcomes, Safety and/or Service are increased and cost is decreased.