

# PATIENT ENGAGEMENT

The Patient Engagement section of the survey assess an HCO's performance in four topic areas:

1. Leadership/Structure
2. Patient Engagement – Tools
3. Patient Engagement – Utilization
4. Patient Engagement – Promotion

## Section 1: Leadership/Structure

**(PDF-055) Whom on your executive team is primarily responsible for leading your organization's patient engagement/experience efforts?**

**(Check one) (Acute/Ambulatory)**

- A. Chief Experience Officer, Vice President of Patient Experience or similarly titled role in your executive suite
- B. An executive other than a Chief Experience Officer (e.g., CFO; COO; CIO)
- C. A non-executive team member (e.g., Director of Patient Engagement/Experience)
- D. We outsource this function (external leader/vendor)
- E. No patient engagement/experience leader

The intent of this question is to ascertain if the HCO has a dedicated person overseeing the HCO's patient engagement efforts.

**(PDF-056) Whom on your executive team is primarily responsible for leading your organization's telehealth efforts? (Acute/Ambulatory)**  
**(Check one)**

- A. A clinical executive (e.g., Chief Medical Officer)
- B. A non-clinical executive (e.g., CIO, Vice President of Telehealth)
- C. A non-executive team member (e.g., Director of Telehealth)
- D. We outsource this function (external leader/vendor)
- E. No telehealth leader

**Telehealth (a.k.a. virtual care):** *the use of telecommunication technology for patient/physician office, hospital visits and other services that would generally occur via an in-person setting.*

The intent of this question is to ascertain whom within the HCO leads the organization's telehealth effort.

**(PDF-057) Which of the following reflect how telehealth services are provided at your organization? (Acute/Ambulatory)**

**(Check one)**

- A. We outsource our telehealth program in its entirety to a third party
- B. We only operate our own telehealth program
- C. We operate our own telehealth program AND leverage the services of an outsourced telehealth program
- D. We do not have a defined telehealth program

**Telehealth (a.k.a. virtual care):** *the use of telecommunication technology for patient/physician office, hospital visits and other services that would generally occur via an in-person setting.*

The intent of this question is to ascertain the approach the HCO assumes in offering telehealth services to their market.

## Section 2: Patient Engagement – Tools

**(PDF-058) How would you characterize the adoption of technologies used to support the following capabilities available to patients through your organization’s web site or patient portal?**

**(Check one per row)**

**Fully Adopted:** A condition where the technology/solution has been implemented organization wide and the relevant users are generally utilizing the technology/solution as intended per industry expectations and organizational policy.

**Partially Adopted:** A condition where the technology/solution has been implemented in at least one area of the organization but not organization wide, or the technology/solution has been implemented organization wide but the relevant users are not utilizing the technology/solution as intended per industry expectations and/or organizational policy.

**Not Adopted:** A condition where the organization has not yet implemented the technology/solution in at least one area of the organization and has no intention of implementing the technology/solution at this time or has not yet achieved funding approval for the acquisition of the technology/solution.

	Fully Adopted	Partially Adopted	Not Adopted
A. Parking assistance and payments			
B. Asynchronous provider visits			
C. Complete questionnaires that can be directly included into EHR			
D. Access patient specific education in non-English language(s)			
E. Access family (or care team) education in non-English language(s)			
F. Symptom checker (Acute/INTL Acute/Ambulatory/INTL Ambulatory)			
G. Ability to share electronic copy of medical record with external organizations			
H. Ability to create and/or edit a personal health record			
I. Comparison of prices based on insurance network (Acute/Ambulatory/LTPAC)			
J. Comparison of prices based on insurance plan/types (Acute/Ambulatory/LTPAC)			
K. Filter and compare price information based on types of procedures/services (Acute/Ambulatory)			
L. Provide definitions of key terms related to pricing, insurance, and/or service types (Acute/Ambulatory/LTPAC)			
M. Ability to estimate patients’ cost burden based on insurance type without human intervention			
N. Provide access to education regarding services listed, price estimates, patient estimates, co-pays etc.			

O. Access to patient gifting/fundraising tools that integrates patient bills with social media to help with healthcare fundraising efforts and transparency			
P. Family/caregiver collaboration tools			
Q. Transportation arrangement			
R. Filter and compare price information based on hospitals/health systems (Acute)			
S. Visit summary (Ambulatory/INTL Ambulatory)			
T. Self-check-in (Ambulatory/INTL Ambulatory)			
U. Appointment self-scheduling tool (Ambulatory/INTL Ambulatory)			
V. Appointment reminders (Ambulatory/INTL Ambulatory)			

The intent of this question is to ascertain the array of functionalities patients can access via the HCO's website or portal, and if available, the extent of their availability throughout the system.

**B. Asynchronous provider visits**

Asynchronous telehealth, also known as “store-and-forward,” is often used for patient intake or follow-up care. For example, a patient sends a photo of a skin condition that is later reviewed by a dermatologist who recommends treatment.

**F. Symptom Checker**

Symptom checkers empower patients by sharing with them the likelihood of having certain conditions. Moreover, they share thorough information on the suggested course of action and the urgency of taking the next steps.

**(PDF-059) How would you characterize the adoption of technologies used to support the following services designed to empower patients and their families outside your facility? (Check one per row)**

**Fully Adopted:** A condition where the technology/solution has been implemented organization wide and the relevant users are generally utilizing the technology/solution as intended per industry expectations and organizational policy.

**Partially Adopted:** A condition where the technology/solution has been implemented in at least one area of the organization but not organization wide, or the technology/solution has been implemented organization wide but the relevant users are not utilizing the technology/solution as intended per industry expectations and/or organizational policy.

**Not Adopted:** A condition where the organization has not yet implemented the technology/solution in at least one area of the organization and has no intention of implementing the technology/solution at this time or has not yet achieved funding approval for the acquisition of the technology/solution.

	Fully Adopted	Partially Adopted	Not Adopted
A. Orienting patients and families to the care environment			
B. Introduce the patient and family to the services that will be delivered			
C. Review the education and other materials provided to the patient and family during a visit			
D. Where applicable, exchange secure e-mails with their care team members			
E. Continue the care pathway that was initiated prior to or during the clinical encounter			
F. Use videos to educate patient and family about procedures			
G. Use videos to educate patient and family about medications			
H. Use videos to educate patient and family about lab tests and results when available			
I. Participate in virtual patient visits (clinician and patient)			
J. Email appointment reminders			
K. Participate in virtual visits (patient and family)			
L. Remote patient monitoring			
M. Self-scheduling (Acute/INTL Acute/Ambulatory/INTL Ambulatory)			
N. Automated check-in on arrival/self-check-in (Acute/INTL Acute/Ambulatory/INTL Ambulatory)			
O. Wayfinding via wireless guidance (Acute/INTL Acute/Ambulatory/INTL Ambulatory)			

The intent of this question is to ascertain the array of patient empowerment tools the HCO offers patients/consumers specifically while outside the walls of the HCO, and if available, the

extent of their availability throughout the system.. These tools do not necessarily need to be tied to the HCOs website or portal (as in PDF-058).

**(PDF-060) How would you characterize the adoption of technologies used to support the following services designed to empower patients and their families inside your facility? (Check one per row)**

**Fully Adopted:** A condition where the technology/solution has been implemented organization wide and the relevant users are generally utilizing the technology/solution as intended per industry expectations and organizational policy.

**Partially Adopted:** A condition where the technology/solution has been implemented in at least one area of the organization but not organization wide, or the technology/solution has been implemented organization wide but the relevant users are not utilizing the technology/solution as intended per industry expectations and/or organizational policy.

**Not Adopted:** A condition where the organization has not yet implemented the technology/solution in at least one area of the organization and has no intention of implementing the technology/solution at this time or has not yet achieved funding approval for the acquisition of the technology/solution.

	Fully Adopted	Partially Adopted	Not Adopted
A. Complete patient satisfaction/feedback surveys			
B. Recognize staff who have performed above satisfaction			
C. Real-time patient satisfaction tools			
D. Use videos to educate patient and family about procedures			
E. Use videos to educate patient and family about medications			
F. Use videos to educate patient and family about lab tests and results when available			
G. View health education videos			
H. Voice assistants/activated devices (e.g., Amazon Echo Dot, Google Nest, etc.) to streamline some patient/exam room tasks			
I. Staff video introductions (Acute/INTL Acute/LTPAC/INTL LTPAC)			
J. Control the environment such as reporting problems that are not clinical in nature such as room temperature (Acute/INTL Acute/LTPAC/INTL LTPAC)			
K. Order meals and snacks subject to dietary restrictions (Acute/INTL Acute/LTPAC/INTL LTPAC)			
L. View patient care functions on the traditional "white board" (staffing identification, schedule, patient goals, family goals, contact information) (Acute/INTL Acute/LTPAC/INTL LTPAC)			
M. Participate in the discharge/checkout planning process (Acute/INTL Acute/LTPAC/INTL LTPAC)			
N. Use e-mail, browsing, and entertainment (Acute/INTL Acute/LTPAC/INTL LTPAC)			



The intent of this question is to ascertain the array of patient empowerment tools the HCO offers patients/consumers specifically while inside the walls of the HCO, and if used, how extensively they are used throughout the HCO. These tools do not necessarily need to be tied to the HCOs website or portal (as in PDF-058).

**C. Real-time patient satisfaction tools**

Real-time patient satisfaction tools leverage interactive, integrated hospital smart room technology to help HCOs conduct real-time patient experience surveys (also known as point-of-care surveys). Real-time, point-of-care patient surveys can be customized to give the hospital insight into specific aspects of the patient's hospital experience, from general nursing care to food service.

**L. View patient care functions on the traditional "white board" (staffing identification, schedule, patient goals, family goals, contact information)**

Hospitals have long used whiteboards to organize the staff and nurse schedule and any recent changes that have been made. Magnetic glass whiteboards allow hospitals to save markers and time by designating magnets and nametags to each staff member. The boards can double as message or reminder boards.

**(PDF-061) Which of the following functionalities are included in mobile apps your organization provides to your patients? (These should be apps created for a mobile handheld device and should NOT include responsive designed websites)**

**(Check all that apply)**

- A. Alerts/notifications from mHealth devices
- B. Click-to-call contact directory
- C. Electronic insurance card
- D. E-visit/virtual assistant
- E. Health library
- F. Personal health record
- G. Personal health tracker
- H. Real-time news and blog feed
- I. Renew prescription
- J. Wayfinding with floor plans and maps
- K. Price list for different services (Acute, Ambulatory, LTPAC)
- L. Location Sharing for assistance
- M. Health Maintenance Campaigns
- N. Mobile Check In
- O. Telemedicine Integration
- P. Event Alerts
- Q. Alerts/notifications from mHealth devices
- R. ER wait times (Acute/INTL Acute)
- S. Text appointment reminders (Ambulatory/INTL Ambulatory)
- T. Schedule visit (Ambulatory/INTL Ambulatory)

The intent of this question is to ascertain the array of patient empowerment tools the HCO offers patients/consumers specifically via a mobile app. The question specifically requires that these tools are built for mobile apps and are not merely tools offered via the HCOs website or portal (as in PDF-056).

**A. Alerts/notifications from mHealth devices**

*mHealth* (mobile health) is a general term for the use of mobile phones and other wireless technology in medical care. The most common application of mHealth is the use of mobile devices to educate consumers about preventive healthcare services.

**B. Click-to-call contact directory**

Click-to-call or click-to-dial empowers website visitors to tap a phone number, button, or image to call an HCO from a cell phone or computer.

**C. Electronic insurance card**

A digital insurance card (or digital insurance ID) is an electronic copy of your proof of insurance. It has all the same information that the typical printed version has - your name, policy number, vehicle type, how long the card is valid for, etc. You can use this digital insurance card when you need to provide proof of insurance to anyone.

#### **D. E-visit/virtual assistant**

An E-Visit is a two-way online chat often times without a specific meeting time, so there is no need for an appointment. During e-visits, patients send messages back-and-forth with their provider so they can help diagnose and provide patients with a plan for care. It does not involve speaking on the phone or over video.

A Virtual assistant is a face-to-face video conference with a provider. It is a remote alternative to an in-person appointment with one's physician.

#### **E. Health library**

Personal Health Libraries (PHLs) provide a single point of secure access to patients' digital health information that can help empower patients to make better-informed decisions about their health care.

#### **F. Personal health record**

A personal health record (PHR) is an electronic application through which patients can maintain and manage their health information (and that of others for whom they are authorized) in a private, secure, and confidential environment. It refers to the collection of an individual's medical documentation maintained by the individual themselves, or a caregiver, in cases where patients are unable to do so themselves.

#### **G. Personal health tracker**

An activity tracker, also known as a fitness tracker, is a device or application for monitoring and tracking fitness-related metrics such as distance walked or run, calorie consumption, and in some cases heartbeat.

#### **J. Wayfinding with floor plans and maps**

Wayfinding is the process of embarking upon a purposeful, intentional, and self-regulated journey that takes an individual from an intended region in one landscape to another. It involves indoor GPS for healthcare settings (e.g., hospitals) that leverages provide turn-by-turn navigation designed to guide patients, visitors, and staff to their destination, quickly and efficiently.

#### **L. Location Sharing for assistance**

An application that keeps track of the physical location of the user via a combination of GPS and local cellular and Wi-Fi networks.

#### **M. Health Maintenance Campaigns**

The purpose of a health campaign is to inform, remind, and educate patients about their ongoing healthcare and make it easy for them to take steps towards their providers.

#### **O. Telemedicine integration**

Integrating telehealth into the EHR system can help providers improve clinical workflows. Most telehealth providers now design solutions that integrate into common EHR systems, which enhances patient care and increases interoperability.

#### **P. Event Alerts**

A special, urgent notification about the occurrence of a specific event (or series of events) that is sent to responsible parties to initiate an action.

**(PDF-062) How would you characterize the adoption of technologies used to support the following patient interactive capabilities your organization provides your staff members to help to promote patient and family engagement in your facility?**

**(Check one per row) (ACUTE/INTL ACUTE/LTPAC/INTL LTPAC)**

**Fully Adopted:** A condition where the technology/solution has been implemented organization wide and the relevant users are generally utilizing the technology/solution as intended per industry expectations and organizational policy.

**Partially Adopted:** A condition where the technology/solution has been implemented in at least one area of the organization but not organization wide, or the technology/solution has been implemented organization wide but the relevant users are not utilizing the technology/solution as intended per industry expectations and/or organizational policy.

**Not Adopted:** A condition where the organization has not yet implemented the technology/solution in at least one area of the organization and has no intention of implementing the technology/solution at this time or has not yet achieved funding approval for the acquisition of the technology/solution.

	Fully Adopted	Partially Adopted	Not Adopted
A. Initiate a patient pathway that uses HIT to follow a care plan specific set of processes			
B. Monitor patient and family engagement in real-time so that adjustments can be made during the clinical activities			
C. Perform data analysis that will assess efficacy and facilitate engagement			
D. Training the family on patient interactive devices			

The intent of this question is to ascertain the array of tools the HCO offers staff to help promote the empowerment of patients.

**A. Initiate a patient pathway that uses HIT to follow a care plan specific set of processes**

Patient pathway refers to all the stages a patient experiences in the management of his or her disease, from pre-diagnosis to discharge.

**B. Monitor patient and family engagement in real-time so that adjustments can be made during the clinical activities**

A tool allowing HCOs to collect feedback, conduct patient rounds, schedule follow-ups, and manage other processes on a centralized platform. Staff members can customize text or email alerts to create appointment reminders and remote care plans.

### Section 3: Patient Engagement – Utilization

**(PDF-063) Please indicate the percentage of your organization's...**

**Telehealth (a.k.a. virtual care):** The use of telecommunication technology for patient/physician office, hospital visits and other services that would generally occur via an in-person setting.

- A. Associated physicians/clinicians who have integrated telehealth services as part of their face-to-face practice
- B. Total patient visits conducted via telehealth during the last 12 months

The intent of this question is to ascertain the usage of telehealth by

- A. Providers
- B. Patients

**(PDF-064) Of the following diagnostic and therapeutic appointments between patients and providers in your organization this past year, which of the following best reflect the percentage volume of appointments conducted via telehealth (verses in-person appointments)?**

**Example: Of 1,000 Behavioral Health appointments, what percent were conducted via telehealth?**

**(Check one per row)**

	<b>&gt;=10%</b>	<b>&gt;0% and &lt;10%</b>	<b>0%</b>	<b>Not Applicable to our Patient Population</b>
A. Regularly scheduled consultations/visits with a Primary Care provider				
B. Behavioral Health provider (to include Addiction treatment and counseling)				
C. Rehabilitation				
D. Stroke care				
E. Maternity provider (Acute/INTL Acute/Ambulatory/INTL Ambulatory)				
F. Genetic counselor (Acute/INTL Acute/Ambulatory/INTL Ambulatory)				

**Telehealth (a.k.a. virtual care):** *the use of telecommunication technology for patient/physician office, hospital visits and other services that would generally occur via an in-person setting.*

The intent of this question is to ascertain the usage of telehealth by the type of medical interaction.

**F. Genetic counseling**

Genetic counseling is the process of investigating individuals and families affected by or at risk of genetic disorders to help them understand and adapt to the medical, psychological and familial implications of genetic contributions to disease.

**(PDF-065) Please indicate the percentage of unique patients your organization serviced during the last 12 months who have accessed your organization's patient portal at least once this last year?**

**Patient Portal:** Patient portals are healthcare-related online applications that allow patients to interact and communicate with their healthcare providers, such as physicians and hospitals.

The intent of this question is to ascertain the usage of the HCO's patient portal by patients. The denominator in this case should be the total number of unique patients seen by the HCO during the past year (not the total number of patient visits).



**(NEW-066) How would you characterize the utilization of data analytics to monitor/assess the following Patient Engagement related functions in your organization?**

**Used Extensively:** A condition where authorized clinical staff generally leverage the technology/solution on a routine basis.

**Used but not Extensively/Limited Use:** A condition where authorized clinical staff generally leverage the technology/solution as an exception or few authorized clinical staff leverage the technology/solution on a routine basis.

**Use Not Authorized:** A condition where the organization does not authorize the use of employee-owned devices in the care of patients.

	Used Extensively	Used but not Extensively/Limited Use	Not Used
A. Effectiveness of the digital health resources available to patients through your organization’s web site or patient portal			
B. Effectiveness of the digital health resources available to patients outside of your facility			
C. Effectiveness of the digital health resources available to patients inside of your facility			
D. Effectiveness of the digital health resources available to patients through your organization’s mobile app(s)			
E. Effectiveness of the digital health resources available to staff designed to promote patient and family engagement			
F. Effectiveness of telehealth visits			

The intent of this question is to ascertain the usage of data analytics to support the HCO’s Patient Engagement activities.

## Section 4: Patient Engagement – Promotion

**(PDF-067) Which of the following tactics does your organization use to promote your organization’s digital health tools to patients (patient portal, mobile app and telehealth services)?**

**(Check all that apply)**

- A. Capture email addresses for every patient
- B. Train your staff and providers so they understand the benefits to the patient and to the organization
- C. Provide informational handouts to patients
- D. Promote digital health tools on video displays within the facility (e.g., patient rooms, exam rooms, lobby, etc.)
- E. Place a computer kiosk or tablet in key locations (e.g., lobby; waiting areas; etc.) allowing patients to register for the portal and then use it to complete necessary registration forms
- F. Send postcards to patients introducing the patient portal, mobile app and/or telehealth services
- G. Add a promotional tag line to appointment cards, statements, newsletters, and other communication
- H. Use the organization’s telephone on-hold messaging system to promote the patient portal, mobile app and/or telehealth services
- I. Display a link to the patient portal, mobile app and/or telehealth services on your organization’s website
- J. Make the patient portal and/or mobile app your organization’s preferred way of sending information to patients

The intent of this question is to ascertain the varied ways the HCO encourages patients to adopt digital health technologies.