

# Why is the entire Inpatient experience measured through a single discharge unit?

For many hospitals, PRC uses stratified sampling at the discharge unit level to measure the inpatient experience. This sampling strategy ensures that all units are receiving adequate data on which to base action plans, monitor progress, and assess improvements. Even when sampling at the unit level, though, PRC still frames the questions on the survey to capture perceptions of the entire hospital experience.

PRC understands that many processes and interactions that happen outside of that discharge unit impact overall perceptions of that experience. A moment of compassion shown by a security guard, for example, could generate a positive story told by that patient and family for years and overrides any neutral or negative things that happened during the experience. On the other hand, poor communication by a few caregivers upon a patient's admission may override what went right during that experience and generate a negative story.

Some unit leaders may believe that their individual unit's scores are *polluted* by other areas in the hospital; others believe that their scores are *enhanced* by other areas in the hospital. Both of these groups are likely correct. All kinds of things within a hospital experience can impact your scores and the nature of how they do so is complex.

PRC's task is to measure these perceptions in a way that patients can provide them. A frequently suggested strategy is to ask about specific units and areas within the patient's stay, assuming that patients can recognize specific units and areas. In fact, the average respondent cannot segment unit from unit in their total hospital experience, and PRC must work within the confines of how patients can describe their experience, which is at a broader level.

Additionally, we understand that the discharge unit greatly impacts that total inpatient experience. The discharge unit is typically the last stop within an inpatient experience, and thus in the best position to make an impact on how that patient feels before they walk out the door. Care provided in the unit of a patient's discharge is the last chance to wow a patient before he or she leaves the hospital.

While many experiences in the hospital prior to the discharge unit can affect a patient's perception of the hospital, the discharge unit is in the best position to really put that "stamp" on the total experience and provides us a reference point to ask questions that patients feel comfortable answering.

Knowing this – that the discharge unit is highly important, but does not operate in a vacuum – makes a team approach most effective when it comes to improving scores. Consider going outside your own nursing unit to network with other players in the patient experience and seek to incorporate their ideas and solutions. The patient experience is a product of teamwork, so make improvements a product of teamwork, too.

