Overview & Problem Statement

ACCESS Community Health Network is a patient-focused organization that has made patient satisfaction a system-wide priority. A Patient Satisfaction staff of four (4) full time employees is responsible for collecting the patient surveys and generating quarterly reports. Approximately 1.5% - 2.5% of the patients across the organization are surveyed each quarter using a rating scale from 1 (very poor) to 5 (great). Senior management established Patient Satisfaction metrics that are monitored quarterly and is based on the percentage of "5" ratings received from patients in the areas of wait times, courtesy and caring of the staff (providers, receptionists and medical assistants), telephone answering and overall satisfaction.

A large percentage of the health centers have had problems meeting the patient satisfaction metrics, particularly with regards to wait times and telephone answering, resulting in the accuracy of the data being called into question by the health centers. ACCESS is interested in improving the effectiveness of the Patient Satisfaction data collection process.

Students in this IPRO worked as 4 independent teams to address the issue of patient satisfaction:
1. By redesigning ACCESS Community Health Network’s patient satisfaction survey.
2. Using alternate research methods to develop actionable design solutions that improve patient satisfaction.

New Ways to Interpret Data

ACCESS Community Health Network’s pursuit of the highest quality of health care is changing the way the uninsured and under-insured population of Chicago receive health care. Patient Satisfaction Surveys are used as a means of evaluating the quarterly performance of its clinic.

Our focus is on the process of how the clinics receive and interpret the Patient Satisfaction data collection process.

Our analysis of ACCESS’s current data collection process revealed inefficiencies and opportunities for increasing its effectiveness in terms of providing clinics with actionable solutions to improve patient satisfaction.

The new model incorporates more patient data collector interaction. The patient’s information would be captured electronically upon receipt and processed into design suggestions for the clinic by the data collectors; these suggestions would be available for clinics almost as soon as the data is collected.

Over time, collected data from all clinics could be compared and analyzed to uncover more design ideas, identify trends, and determine if the clinic’s collective patient experience is improving.

Design Ideas for Appointments & Scheduling

An effective and efficient system is at the top of the agenda at ACCESS Community Health Network. We have designed an improved method of scheduling patient appointments by developing a new tool that over time could be implemented in all the ACCESS Community Health Network clinics.

While exploring the everyday life cycle of one particular ACCESS Community Health Network clinic, our research goal was to gain a better understanding of the system and process to find areas of opportunity in terms of:
1. Reducing patient wait time
2. Improving the interface between clinic and patients
3. Making the atmosphere more hygienic and friendly for children.

We employed a number of research methods to achieve this including:
- On-the-ground observations
- Interviews with the staff and management
- Survey analysis
- Focus group with medical assistants
- Secondary research and industry surveys

We analyzed data collected from all clinics and compared and analyzed the results to determine patterns and cause-effect relationships.