Improving Patient Journey in the Obstetrics and Gynecology Emergency Department: A Comprehensive Analysis of Patient Experience

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Abstract: Introduction: Improving the patient experience is a fundamental pillar of healthcare's quadruple aims. Recognizing the importance of patient experiences and perceptions in healthcare interactions is pivotal for driving quality improvement. This abstract centers around the Patient Experience Program, an endeavor crafted with the purpose of comprehending and elevating the experiences of patients in the Obstetrics & Gynecology Emergency Department (OB/GYN ED). Methodology: This comprehensive endeavor unfolded through a structured sequence of phases following Plan-Do-Study-Act (PDSA) model, spanning over 12 months, focused on enhancing patient experiences in the Obstetrics & Gynecology Emergency Department (OB/GYN ED). The study meticulously examined the journeys of patients with acute obstetrics and gynecological conditions, collecting data from over 100 participants monthly. The inclusive approach covered patients of different priority levels (1-5) admitted for acute conditions, with no exclusions. Historical data from March and April 2022 serves as a benchmark for comparison, strengthening causality claims by providing a baseline understanding of OB/GYN ED performance before interventions. Additionally, the methodology includes the incorporation of staff engagement surveys to comprehensively understand the experiences of healthcare professionals with the implemented improvements. Data extraction involved administering open-ended questions and comment sections to gather rich qualitative insights. The survey covered various aspects of the patient journey, including communication, emotional support, timely access to care, care coordination, and patient-centered decision-making. The project's data analysis utilized a mixed-methods approach, combining qualitative techniques to identify recurring themes and extract actionable insights and quantitative methods to assess patient satisfaction scores and relevant metrics over time, facilitating the measurement of intervention impact and longitudinal tracking of changes. From the themes we discovered in both the online and in-person patient experience surveys, several key findings emerged that guided us in initiating improvements, including effective communication and information sharing, providing emotional support and empathy, ensuring timely access to care, fostering care coordination and continuity, and promoting patient-centered decision-making. Results: The project yielded substantial positive outcomes, significantly improving patient experiences in the OB/GYN ED. Patient satisfaction levels rose from 62% to a consistent 98%, with notable improvements in satisfaction with care plan information and physician care. Waiting time satisfaction increased from 68% to a steady 97%. The project positively impacted nurses' and midwives' job satisfaction, increasing from 64% to an impressive 94%. Operational metrics displayed positive trends, including a decrease in the "left without being seen" rate from 3% to 1%, the discharge against medical advice rate dropping from 8% to 1%, and the absconded rate reducing from 3% to 0%. These outcomes underscore the project's effectiveness in enhancing both patient and staff experiences in the healthcare setting. Conclusion: The use of a patient experience questionnaire has been substantiated by evidence-based research as an effective tool for improving the patient experience, guiding interventions, and enhancing overall healthcare quality in the OB/GYN ED. The project's interventions have resulted in a more efficient allocation of resources, reduced hospital stays, and minimized unnecessary resource utilization. This, in turn, contributes to cost savings for the healthcare facility.

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