

**Culture Transformation at the VHA: Enhancing Patient Experience Through
Organizational Behavior**

by

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Submitted to the Graduate Faculty of the
Health Policy and Management
Graduate School of Public Health in partial fulfillment
of the requirements for the degree of
Master of Health Administration

University of Pittsburgh

2021

UNIVERSITY OF PITTSBURGH
GRADUATE SCHOOL OF PUBLIC HEALTH

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April 28, 2021

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2021

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Abstract

The Department of Veterans Affairs (VA) established the Veterans Experience Office (VEO) in 2016 in response to the growing need for a patient experience program. Former VA Secretary Robert Wilkie identified patient experience as the number one priority in the 2019 strategic plan. With the shift in focus on patient experience, it was determined that a massive cultural transformation was necessary to ensure that organization behavior would embrace this change. Focusing on the entire experience of a patient along their journey through care allows an organization to identify persistent problems that could be improved upon. Capturing this data and gathering the voice of the patient through moments that matter most to them also gives real insight into how the organization is performing. This is also significant to public health as patient's voices are heard and their preferences are taken into real consideration. Having a voice in their care with clear communication between the patient and provider has been proven to increase health outcomes.

The purpose of this advocacy paper is to highlight the efforts made by the VA, VHA, and VEO in improving patient experience through cultural transformation and change management. Two programs have been selected to demonstrate how thoughtful and meaningful research has led

to the creation of training that empowers the employee to be an agent of change in improving patient experience. The Patient Experience University and WECARE Behavior training programs are in development to give employees in-house certification in patient experience while aligning their own mission with the organization's mission of providing the best quality care and best possible patient experience. Since the inception of the VEO, patient trust scores and overall healthcare experience scores reported in the Survey of Healthcare Experiences of Patients and Veterans Signals survey instruments have increased year after year. VEO uses this data to identify attributable effects of those survey responses in order to give facility leadership tools to improve patient experience. As the VA continues its own journey of cultural transformation, efforts by leadership and employees at all levels to improve patient experience is being promoted with vigor and organization-wide support.

Table of Contents

1.0 Introduction.....	1
2.0 Literature Review	4
3.0 Veterans Experience Office.....	6
3.1 Patient Experience University	10
3.2 WE CARE Behaviors Training.....	12
4.0 Analysis	15
4.1 Survey of Healthcare Experiences of Patients (SHEP) Scores	15
4.2 Veterans Signals (VSignals) Trust Scores	17
5.0 Discussion.....	22
6.0 Application for Healthcare Executives	24
7.0 Conclusion	27
Bibliography	28

List of Figures

Figure 1 VEO Major Accomplishments	7
Figure 2 VA's Customer Experience Framework.....	8
Figure 3 Journeys of Veterans Map	9
Figure 4 SHEP Overall Rating Scores, All VA Facilities	16
Figure 5 CX Results for Q1 FY2021	18
Figure 6 Overall Survey Findings	20
Figure 7 VHA-wide trust scores	20

1.0 Introduction

The Veteran's Health Administration has been a leader in delivering world-class healthcare to our nation's veteran population for over 155 years. This efforts dates back to President Abraham Lincoln's promise to "care for him who shall have borne the battle and for his widow, and his orphan". At the core, the VHA's mission is to serve those who have served, and a wide variety of programs and services are offered to ensure the continuity of care for the veteran population. One of the most recent focuses from former VA Secretary Robert Wilkie is on delivering quality customer-service. As part of the 2019 VA Priorities and VHA Strategic plan, Secretary Wilkie said: "Our first priority is customer service. That's the prime directive. When Veterans come to VA, it is not up to them to get us to say yes. It's up to us, you and me, to get Veterans to yes. That's customer service. We're going to make sure you're trained and equipped to achieve that." (Health Services Research and Development, 2019).

Training and equipping the VHA to deliver this prime directive of customer service is less of a task requiring the ubiquitous implementation of programs considered vogue or "the next big thing", but rather a study in organization behavior and change management. All too often, organization leadership fails to engage employees on their corporate responsibility strategy or align directly with the company mission and this is part and partial to the failure of realizing the strength of employee empowerment. In order to achieve success with implementing a program aimed to increase metrics in customer service, a derived plan must be laid out to clearly identify goals and how to achieve them along the journey.

The Beryl Institute, one of the leading professional organizations for improving patient experience defines patient experience as "the sum of all interactions, shaped by an organization's

culture, that influence patient perceptions across the continuum of care.” (Beryl, 2020). Patient experience is not the same as patient satisfaction. The focus on the entire experience of a patient’s journey throughout their care is key in addressing all potential issues in various touchpoints along the way. Improving on those areas or correcting deficiencies empowers organizations to identify their strengths and weaknesses with granularity, giving them a chance to review and improve on their own delivery model. Historically, hospitals have relied on the value of their expertise in clinical service or high quality of care to drive a patient’s experience or satisfaction. Some conclusions that high quality care in the operating room equates to excellent patient experience fail to address the many vital steps leading up to the operation through recovery and billing. A hospital may have the very best surgeons and most state-of-the-art medical equipment and technology but may lack the customer service and soft skills in communication that could detrimentally impact the patient’s perceived quality of care.

The VHA has been continuing to make quality improvements in their delivery of services along with strengthening their commitment to providing the best customer service. Customer service has been emphasized throughout the organization and is touted as their number one priority as an organization. Improving patient experience as an organization requires buy-in from every employee and can be an incredibly difficult undertaking. Understanding organizational behavior and utilizing change management has been key in cultural transformation. Implementing change in an organization of almost 380,000 employees does not happen overnight or through mandatory training. Embracing change is also one of the hardest hurdles to overcome, especially in an organization with varying levels of turnover.

In 2014, the Office of Inspector General released a report in response to allegations regarding alleged patient deaths, patient wait times, and scheduling practices at the Phoenix VA

Medical Center (Office of Inspector General, 2014). Out of a need for organizational change, efforts were made to correct deficiencies and align the company on a path toward excellence. One of these efforts was the establishment of what eventually became the Veterans Experience Office, a dedicated program office with the charge of improving patient experience at every level of the organization.

The VHA has made tremendous progress as an organization seeking to ignite the path for change in improving the patient experience. Through careful and thoughtful planning, decisive and thorough deployment, the VHA and the Veterans Experience Office has made great strides in that direction of providing the best customer service to their veterans, their families and caregivers, and fellow employees.

2.0 Literature Review

Organizational Culture. The most critical aspect that influences how an organization enacts change and positively drives their business to their respective goals and mission is their culture. Organizational culture is the backbone for creating systemic changes where every employee matters. Healthcare organizations need to realize that they can no longer offer great end results alone but must also focus on providing exceptional experiences throughout the entire continuum of care. To achieve this, organizations must begin to put new emphasis on driving higher levels of engagement amongst their employees (Berrett).

Employee Engagement. Studies have shown that culture and employee satisfaction are highly correlated with excellent patient care and experience levels. The patient's satisfaction with the quality of care they received is directly tied to both employee engagement and clinical satisfaction. With high performing hospitals, they tend to have more satisfied employees, patients, and physicians by offering better quality service with lowers risks and claims potential. In return, this generated higher earnings for the facilities (The Beryl Institute, 2007).

Measurement of success. Measuring experience data is not just for collection but to be used as a key strategic resource on where to focus progress and overall improvement (Wolf). Although the voice of the patient tells us what influences their experience, that experience is also impacted by the organization's culture. Tracking the patient's experience across their entire continuum of care is more important when understanding areas for systems improvement, rather than through one instance or interaction.

The 2015 Assessment of Quality of VA Care study found that Veteran-reported experiences of care at VA hospitals was inferior to non-VA hospitals on most measures of the

CAHPS survey. Specifically, the average performance for VA facilities was significantly worse in 6 out of 10 patient experience domains, including communication with doctors and nurses.

Systems thinking. The current U.S. healthcare system is inherently fragmented, which lends to problems and barriers with patient safety and experience. The patient or condition-specific view should change toward a systems-view due to the complexities of the healthcare system including physicians, technicians, regulations, accreditations, and education institutions.

This type of systems thinking creates collective learning that enables health care organizations to adapt to new technologies and information as well as continually enhance their own capacity to generate learning (Shortell).

Dedicated patient experience roles. Patient experience is not a fad but a strategic consideration for organizations. Centralized structure and a dedicated patient experience role within the organization is key for success. No evidence exists indicating that creating large and complex structures will enable organizations to do more. Rather it is the intentionality reinforced by both a defined role and structure that begins to pave a healthcare organization's path to patient experience success (The Beryl Institute, 2012).

3.0 Veterans Experience Office

In 2015, The Department of Veterans Affairs established the Veteran Experience Office (VEO) in the Office of the Secretary to adopt and incorporate the best practices of customer experience (CX) learned from industry leaders. In 2018, Secretary Robert Wilkie made customer experience his number one priority, utilizing an enterprise-wide framework to embed an organizational commitment on delivering the most exceptional customer experience not only for Veterans, but also for their caregivers, families, survivors, and VA employees. The VA further institutionalized customer experience into their core values by establishing a CX policy, written into the Code of Federal Regulations (38 C.F.R. Part 0 Subpart A § 0.603) in 2019. Although incorporating these values into policy and regulation serves as a baseline for mission accomplishment, entrenching an organizational culture surrounding CX is unattainable without sustained employee engagement. Everybody in the organization, up and down the chain, needs to fully embrace and understand how improving and focusing on sustaining excellence in customer experience adds value to delivering excellent care, benefits, and services.

Since the deployment of the VEO and the Secretary's CX priorities, the VA has made major accomplishments using their strategic capabilities to include data, tools, technology, and engagement. This policy paper selected to review tools that were developed by VEO in the Patient Experience (PX) Directorate that focus on organization behavior and change management to implement the CX principles into the heart of the organization: the employee.

Utilizing their main capabilities of data, tools, technology, and engagement, the VEO has implemented various programs and have made significant contributions to improving patient

experience since their inception in 2015. Figure 1 notes their highlights in 2019 from their VA Customer Experience Accomplishments Report (Veterans Experience Office, 2020).

- » **Data**—such as the 65 VSignals surveys that have captured 5.8 million responses including 2.2 million free-text comments.
- » **Tools**—like the initial deployment VA’s “Own the Moment” CX training to over 100,000 employees, and the deployment of Red Coat Ambassadors to improve patients’ experience at VA health care facilities.
- » **Technology**—like the White House VA Hotline and 1-800-MYVA411 Contact Center that have answered nearly 2.8 million customer calls, and a redesigned VA.gov that has improved Veterans’ access to information.
- » **Engagement**—such as the #VetResources newsletter and #VetXL virtual events that have 238 million e-mail opens and video views, 44 million clicks to resources, and have answered more than 9,600 customer questions.

Figure 1 VEO Major Accomplishments

These are just a few of the key improvements and innovations that the VEO has accomplished between employees and community and strategic partners in their mission to earn the trust of their patients. Establishing trust and creating relationships with the veterans, their families, and caregivers is an essential element in providing the best patient experience. Trust is measured by how a patient feels about their care and if they entrust their care with the VHA. This measurement is a key performance indicator that the established programs are working. Although it may not give the entire picture of the patient’s experience, it provides practitioners with feedback on where they stand in delivering care. Utilizing other methods of measurement such as the Survey of Healthcare Experiences of Patients (SHEP) survey instrument as well as the Veterans Signals (VSignals) electronic, real-time survey tool, the VEO and stakeholders are able to provide thoughtful feedback and address any concerns or recommendations that patients make. This gives a voice to the patient and allows their needs to be met, whether it’s through service recovery, or to communicate how well the VA is doing through compliments.

The VEO utilizes a CX framework to show how they use their CX capabilities to capture data, analyze and listen to the voice of their patient. Figure 2 shows this process in detail (Veterans Experience Office, 2020).

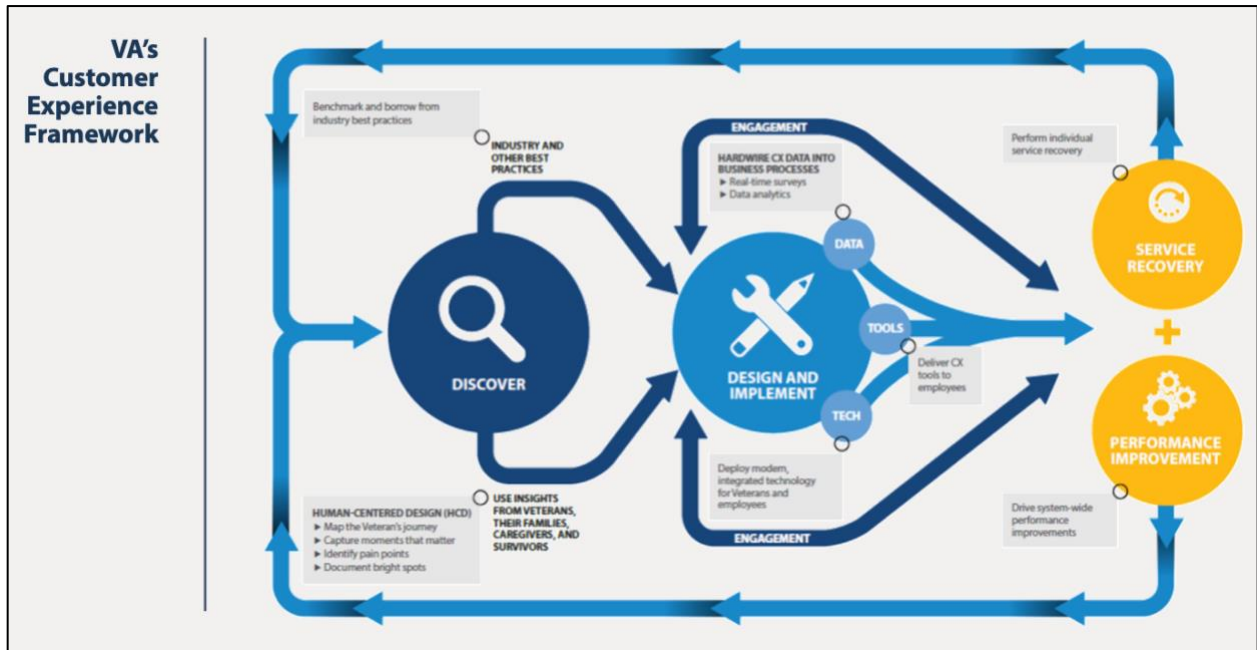


Figure 2 VA's Customer Experience Framework

Using Human-Centered Design (HCD), a problem-solving approach that develops solutions involving the human perspective in all steps along the process, VEO creates real-world instances of patient interaction to deliver custom solutions to persistent or recurring problems along the journey. They document insights and capture the moments that matter most to create journey maps for interactions. These journey maps are unique to specific processes such as outpatient care, inpatient care, or even sending care into the community. Understanding the patient's perspective by following them along the journey gives a unique opportunity to address issues in real-time rather than rely on reactionary feedback or historical data. This gives every

employee along that journey the opportunity to “own the moment” (OTM), a unique principle the VHA teaches to empower the employee to make sure care is delivered in the safest and most appropriate manner in aligning with the mission of delivering world-class care. VEO has created over 65 different journey maps by listening to the voice of the veteran along their journey. Figure 3 is an example of the Veteran Journey Map as it walks through various points throughout their experience in the military and after (Veterans Experience Office, 2020).

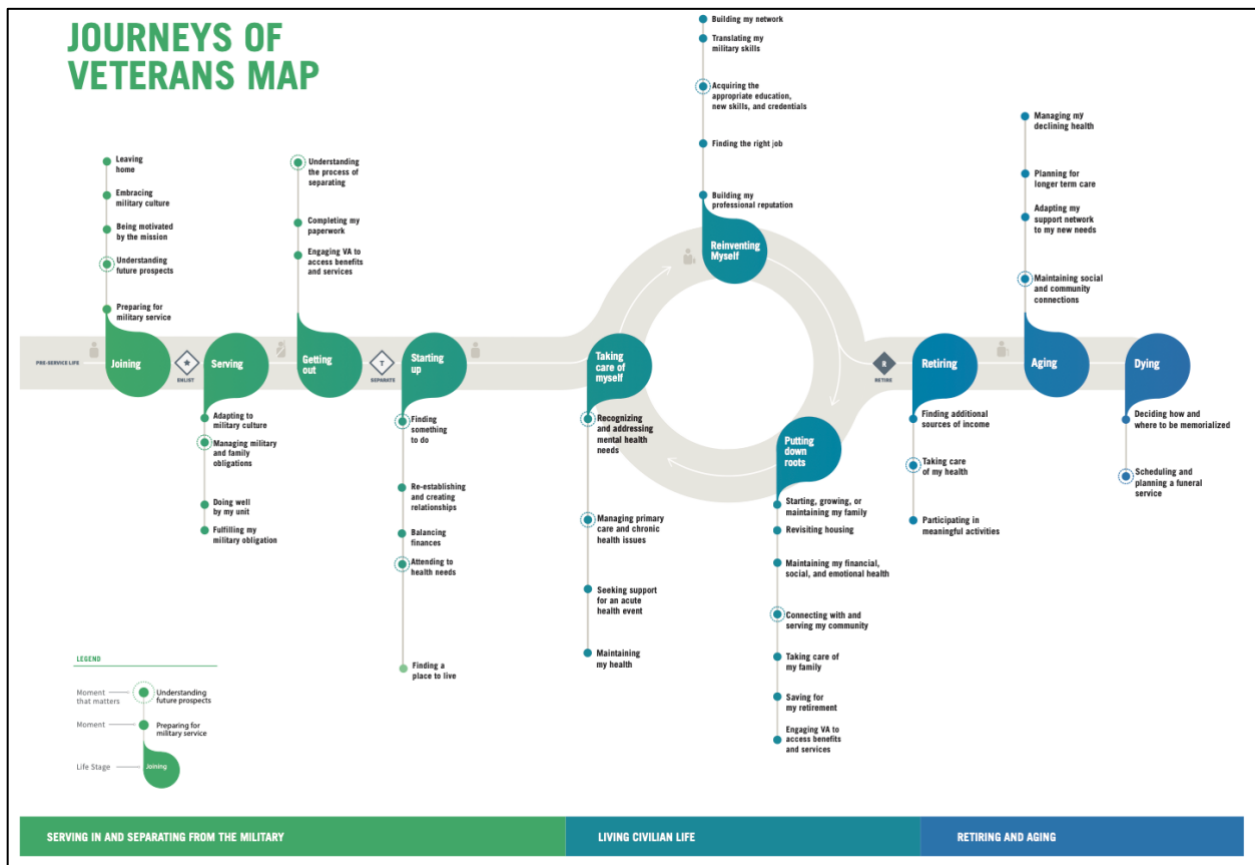


Figure 3 Journeys of Veterans Map

Utilizing these tools and capabilities has led to the creation of various programs and trainings for employees to take in their own journey to improve patient experience. This occurs

by developing reoccurring mandatory training modules that every employee must take annually to satisfy a specific training requirement. The training is intended to change the culture and provide resources to enhance and support change management. By instituting a cultural transformation and providing resources and support for employees, the VHA and VEO have doubled down on their commitment to providing the best customer service. Establishing the VEO as more than just consultative services has also provided the organization transparency in their mission and emphasized their mission to all stakeholders.

Two specific programs, Patient Experience University and WECARE Behaviors Training, are currently in development to provide the tools and training for employees to become agents of change and transform the culture of the organization. The core values of integrity, commitment, advocacy, respect, and excellence (ICARE) are embedded into the organization as one of the foundations in the VA Way. The VA Way is the shared purpose for all employees to bring meaning to their mission of service. This was established to inspire all employees to build trusted relationships with veterans, their families, caregivers, survivors, and fellow employees. The VA Way forms a nexus between the ICARE Values, WECARE Behaviors, and the guiding principles of Own The Moment as a framework for delivering the best customer service.

3.1 Patient Experience University

The Beryl Institute and Forrester are the leading private sector patient experience institutions that offer certification programs for patient experience. The Veteran Experience Office decided to create an in-house curriculum to certify VA employees in customer and patient

experience. This led to the development of the Patient Experience University (PXU) certification program which is being piloted at various Veteran Integrated Service Networks (VISN) around the country. The goal for this program is to build upon the foundational Own The Moment Training (OTM) and expand patient experience education to various service lines at the VHA. Any employee may attend the training although the pilot sites have begun with Veteran Experience Officers and patient advocates, or those who directly work with patient experience initiatives.

The PXU consists of a three-day seminar of training blocks comprised of various customer experience curriculum. Courses include change management, systems thinking, human centered design, servant leadership, service recovery, customer experience behavior training (WECARE), high performing teams, and on-stage coaching moments. This curriculum was designed to certify an employee who has pre-requisite training in customer experience on principles and education to help guide them to organizational change.

Conducting this type of training requires enrollment from dedicated employees who seek to improve in their customer experience skills. However, this training does not preclude those who are not directly involved with patient experience. This is open to all employees of all levels to maximize the awareness of patient experience and improve as an organization. Providing this type of in-house certification allows employees to gain relative experience and earn valuable education on techniques and both hard and soft skills. With emphasis on data and trending, this also provides employees the requisite knowledge or awareness of how to measure and quantify efforts in patient experience. Based on organizational behavior and created by experts in the field, this training is verified through rigorous research and proven methods. After graduating from PXU, employees are empowered to take on a project to improve patient experience through experiential design. Either through a systems improvement or requirement to obtain a VHA LEAN certification belt,

employees can utilize what they've learned through PXU to identify a process or method to improve. This is similar to LEAN and Six Sigma belt certification training in the private sector, a project management and systems design implementation program that aims to eliminate waste while improving on processes. They have the knowledge and tools to help them achieve success.

PXU uses pre and post tests to determine the efficacy of the curriculum, engaging with students to demonstrate their knowledge and grasp of concept throughout the seminar. The various exercises and activities within each module are accompanied by a workbook that allows students to keep notes and relevant materials for future use. Various toolkits are available for employees to use that accompany each training. Each module is also in development for refresher training, train-the-trainer, and various levels of experience (i.e., basic course curriculum to the advanced track). This allows flexibility for all learning stages to ensure maximum participation throughout the organization. Making this type of training accessible to a large audience to include leadership down to frontline staff enables the organization to move closer toward cultural transformation. Restricting access to education or resources for any reason would go against the principles of organizational change. The VEO identified the importance of making patient experience every employee's priority and established PXU to continue on that mission.

3.2 WECARE Behaviors Training

The "VA Way" is a collection of values, guiding principles, and customer experience behaviors that connect employees through a shared purpose: "the nexus for all employees to bring meaning to our mission of service" (WECARE). This shared purpose inspires all employees to

build trusted relationships with Veterans, their families, caregivers, survivors, and fellow employees. As part of the share purpose, VEO developed a set of behaviors to help guide employees in their interactions with Veterans. This led to the development of the WECARE Behavior framework, an acronym that helps employees remember and exhibit proper communication techniques when interacting with their patients. The acronym stands for Welcome, Explain your role, Connect, Actively Listen, Respond to their needs, and Express gratitude. Although this framework follows through like anormal conversation, it does not (and most times won't) always flow this way. Taking into consideration the wide variety of positions and different encounters an employee may have with a Veteran, VEO developed unique, service-line specific training for ten groups of positions. For example, a police officer would likely have a different interaction than an environmental service worker, or a call center medical service assistant would have a unique interaction compared to an inpatient nurse. This training allows employees to utilize custom tailored role-playing to engage in interactions that they are most likely to actually encounter. Using this system narrows the focus on the behaviors to move away from the broad strokes of annual training that seems too impersonal to consider effective.

The goal behind WECARE behaviors is not to tell or teach an employee on how to greet a Veteran but rather to empower them to realize and understand when they stray away from proper communication and social engagement. Occasionally employees find themselves too busy or stressed to take time and focus on how they should properly interact with their patients. This can sometimes lead to saying or doing things that abandon the principles of customer experience. Saying phrases like “that’s not my job” or “we are short staffed today” leads the patient to a dead end on their request for service. Being cognizant of how these phrases and negative behaviors can affect customer experience can help to identify potential areas for improvements, be that at the

bedside or the front desk. The VEO developed this training to empower employees to put their principles into action, upholding the mission and directive on delivering the best customer experience.

Giving an employee a directive without providing them a method or set of standard procedures to achieve success is bound to create communication or performance issues. VEO established WECARE Behaviors to maintain a sense of accountability on delivering the best possible patient experience. Although the training may seem rudimentary, it allows employees to focus on their interaction with the patient and be cognizant of the correct and incorrect behaviors to display. This is not meant to dictate the exact way an interaction should go, but to give a framework. When interacting with a patient, the employee can personalize by filling in gaps or meeting needs that may not have been known prior to the conversation.

In addition to creating this customer experience training, VEO has developed toolkits and coaching guides to help reinforce these behaviors. These can be used by every employee as a way to remind them of the behaviors that align with the guiding principles and core values. Being held accountable for actions and communication keeps employees on track for delivering the highest quality care with the best possible experience.

4.0 Analysis

4.1 Survey of Healthcare Experiences of Patients (SHEP) Scores

The Survey of Healthcare Experience of Patients (SHEP) is a survey tool designed after the Hospital Consumer Assessment of Hospital Providers and Systems (HCAHPS) set of questions designed to gain valuable insight and feedback on a variety of measures in relation to the patient's experience. As of 2021, there are four focuses of health care: inpatient care, primary care, specialty care, and care in the community. The information gathered along with other data such as wait times and direct observation of talking to patients helps to rate and rank VHA hospitals with their private sectors counterparts by region, state, or county. This helps to provide a picture of the facilities strengths and weaknesses and to identify areas to highlight or room for improvements. This instrument includes patient experience questions that have attributable effects where systems improvement efforts can be made to either improve or maintain scoring and satisfaction. The VEO monitors the SHEP data on a regular basis and consults with field representatives (normally the Veteran Experience Officer for the facility) to identify action plans and assist with any sort of improvements.

The VA uses a consolidated website to track and monitor SHEP survey results quarterly called Why Not The Best VA (WNTBVA). WNTBVA is a system for comparing hospital system performance with U.S. national benchmarks. This report also includes quality measures available on CMS Hospital Compare. The VHA uses this data via their Strategic Analytics for Improvement and Learning (SAIL) reporting platform as a basis of where their strengths and weaknesses lie. By having this data readily available for each and every Veterans Affairs Medical Center (VAMC),

this allows leadership to focus efforts on a variety of domains. The patient experience portion allows focus on publicly reported measures compared to private sector hospitals. Using this tool along with others such as CMS Hospital Compare can help improve patient experience from a practical view. Figure 4 shows the progression in SHEP scores for overall inpatient hospital rating, and overall provider rating for primary care medical home (PCMH), and specialty care (SC).

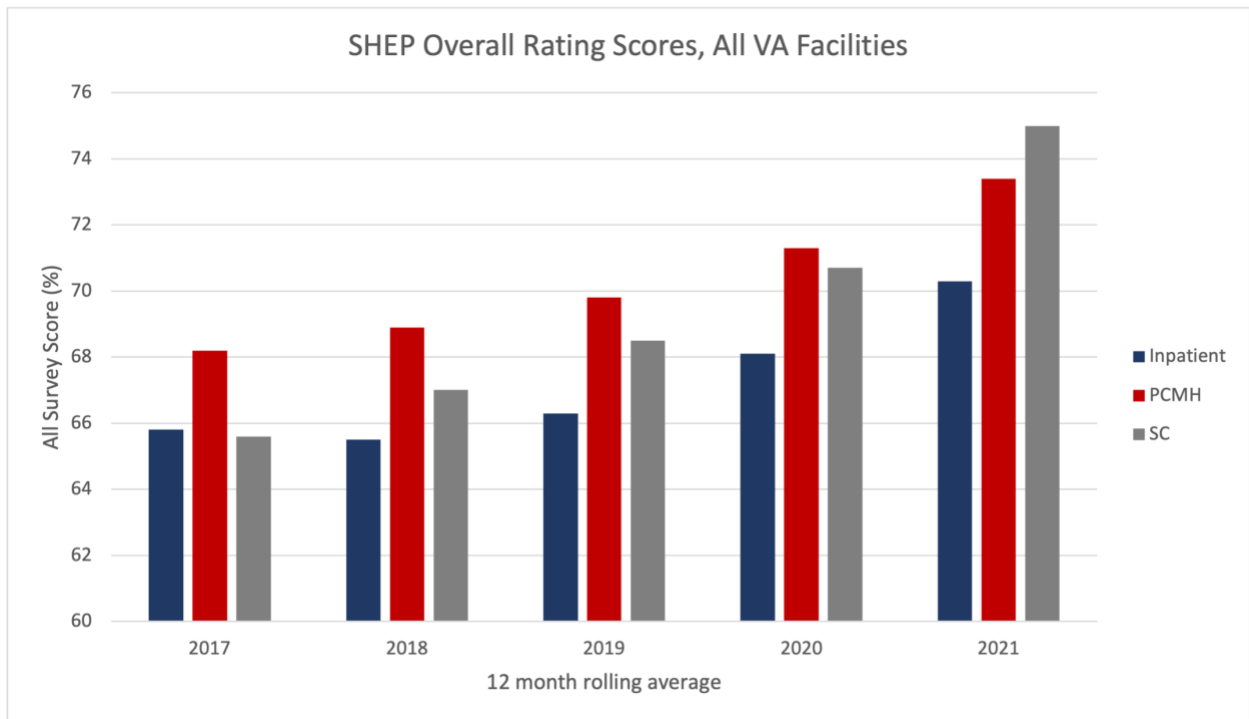


Figure 4 SHEP Overall Rating Scores, All VA Facilities

Recent studies have shown that the VA provides equal if not better quality of care than non-VA hospitals. They publish comparative results quarterly via the WNTBVA tool and consistently (if not always) rank higher than the private sector in patient experience scores. Although this data has some limitations, it is still considered to be scientifically valid when comparing patient experience scores in the SHEP surveys. Some variance exists by region and

hospital complexity, but these studies included that in their analysis to better capture an accurate comparison.

The VA recently implemented the Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act of 2018 in order to address access concerns for eligible veterans to continue to receive care in the community due to rurality or wait time restrictions. Upon analyzing the data with the expectation that eligible veterans would choose to utilize options outside of VA care, studies found that veterans preferred to stay within the VA system. A report from the Center for New American Security, released in May 2020, collected data pre-MISSION Act and post to measure the predicted movement from VA to privatized care. The report aimed to predict this potential by first measuring how the VA compared to non-VA care in terms of clinical and patient experience quality (Inderstrodt).

Another independent survey from the Veterans of Foreign Wars indicated that overall, veterans choose VA care over non-VA care with high satisfaction. The report demonstrated that 82% of respondents gave highest rating for satisfaction and would recommend VA care to fellow veterans (Veterans of Foreign Wars, 2019). Although there were a few negative views around VA care, the data indicated that a majority of the survey respondents who receive care from the VA are satisfied overall.

4.2 Veterans Signals (VSignals) Trust Scores

Since 2017, the VA has been tracking the measure of trust that the patient has in using the VHA as their source for care. Trust is a key performance indicator on how the VHA is doing with delivering world-class care with the best possible patient experience. In a 2020 Directive, the

Veterans Experience Officer stated that they measured trust scores on ease, effectiveness, and emotion by using surveys with the statement “I trust VA to fulfill our country’s commitment to Veterans.” (Department of Veterans Affairs, 2020). Trust is not measured by how well the surgery went or whether or not the food was acceptable, but how the patient chooses to go to the VA for their care, knowing that they will receive the best treatment in the safest environment. Trust establishes relationships between patients and providers and allows communication of needs to be heard with care and respect.

The Office of Management and Budget (OMB) released the OMB A-11 Circular, a United States government circular that addresses budget preparation for federal agencies (Vint). The document contains seven Customer Experience (CX) drivers that are measured within as a baseline to improve the veteran’s experience. These seven OMB CX drivers are: Satisfaction, Confidence/Trust, Quality, Ease/Simplicity, Efficiency/Speed, Equity/Transparency, Employee Helpfulness. Utilizing the Likert scale, these drivers are measured and reported through performance.gov (General Services Administration & the Office of Management and Budget).

Figure 5 shows CX results for quarter 1, FY 2021.

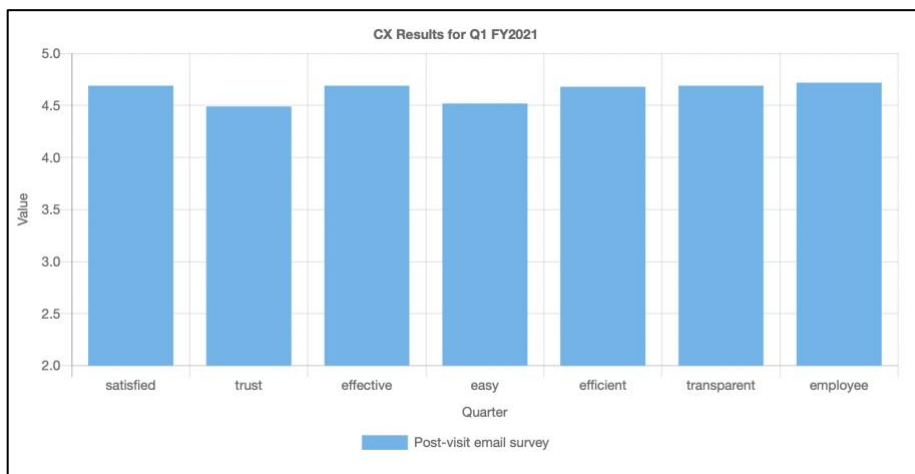


Figure 5 CX Results for Q1 FY2021

The Office of Management and Budget has set a goal that by September 30th, 2021, veteran's seven CX drivers scores related to their experience will be 90% or higher compared to an FY2020 baseline as a percentage of "top box" scores, or scores on the Likert scale of 4 or 5 with 5 being the highest.

The VHA has been monitoring the trust of their patients through the use of the Veteran Signals (VSignals) survey system. Immediately following the completion of an appointment, a VSignals survey is electronically sent to the veteran via email or text (if the information is provided). This real-time survey capture system provides VA employees the opportunity to address the concerns, recommendations, and compliments of their patients. They can immediately use service recovery or route to the specific service line to ensure all concerns were met, or proper compliments were given to the right department/employee. Having this rich and timely data enables employees to make it easy for their patient's concerns to be addressed while still fresh on their mind. In comparison to other standard forms of survey tools to include the HCAHPS survey which asks patients about their experience sometimes from months prior, the VSignals survey decreases recall bias.

Since its inception in late 2017, VSignals has been compiling data on trust scores amongst other metrics and has seen increase year over year. These survey instruments include questions similar to the CAHPS surveys patient experience set of questions. Trust in the VA increased by 2.4% in the first year through 2018. Figure 6 shows how many surveys were sent and received "top box" or the highest rating of scores for trust.

Overall Survey Findings	
Trust in VA at 92.1% (128 of 139) of all VA Medical Centers increased according to Outpatient Services survey respondents from 2017 to 2018 (FY2018).	
Trust in FY18:	
BLUF: 86% of Veterans indicated they trust the VA in FY18.	
Total Responses Where Veterans Answered "Agree" or "Strongly Agree" to the Trust Question in FY18:	1,434,224
Total Responses in FY18	1,660,563
FY18 Trust Score:	86.4%

Figure 6 Overall Survey Findings

Recent reports have shown that these figures continue to rise, even with the COVID-19 pandemic affecting hospital operations. Trust scores are now at an all-time high, averaging around 90% as of August 2020 (Kime). Since the department started reporting the trust scores, they have risen 5% from late 2017 to early 2020. VA officials have attributed this from hard work promoting customer service principles through the creation of new training programs and employee support initiatives. Although the trust question has been removed from the SHEP survey as of mid-2019, it is still being monitored and tracked through the VSignals instruments of surveys. Figure 7 shows trust score improvement from FY19 to 2nd quarter FY21.

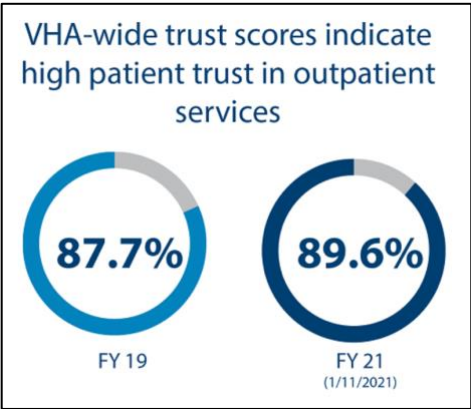


Figure 7 VHA-wide trust scores

While it may be difficult to pinpoint the exact program or effort to improve patient experience in relation to the trust scores, using this metric is an important performance indicator for the efficacy of the VEO and the VA's patient experience efforts. The organization has invested heavily into patient experience and continues to see higher trust scores. Although it may be tempting to say that those efforts solely contributed to the improvement in trust, it is worth noting the enormous effect of patient experience as a number one priority has on the organization. Whether or not that leads to improved health outcomes or whether employee engagement is higher is something to be measured in the future as efforts continue.

5.0 Discussion

The data collected from the SHEP surveys provides a scientifically valid and standardized approach to measure the patient's perception of care, and yet it is very difficult to identify quality improvement measures to address low scores. The efforts made by the VEO and VHA to seek understanding of those scores and identify ways to improve patient experience has been remarkable through the tenure of the initiative. As the administrative resident at the Network Director's office in the Veterans Integrated Service Network (VISN) 4, I have had the opportunity to immerse myself in projects to improve patient experience. I have led improvement efforts that align with national priorities and utilized the VSignals system along with thorough analysis of the SHEP and SAIL data to help identify ways to improve patient experience from varying levels of complexity. I have witnessed the impact of training programs and employee engagement efforts in the journey for culture transformation. The impetus for improving patient experience at all levels of the organization is through cultural transformation is very real and timely.

As access to care is one of the major social determinants of health, the VA has improved tremendously since the Office of Inspector General investigation of the Phoenix VAMC in 2014. Born out of the need for organizational change, the VEO has firmly established their guiding principles and have found creative ways to implement the change. Implementing training programs and measuring outcomes on attributable effects of their efforts to improve patient experience scores is key to their success. The organization utilizes their data to perform systems redesign with the goal of improving in both small and large ways. Consultative services are offered by subject matter experts to promote the use of the data by staff at the facility to identify short- and long-term goals.

Leading an organization to change is inherently one of the most challenging tasks in the efforts to improve patient experience. This is especially so for the VA, an organization that is perpetually under scrutiny due to a wide variety of factors to include the recent OIG investigation in 2014. In the response to the recommendations made by the OIG report, the VA committed to making positive change to address access, employee, and culture issues. Leadership identified that it was necessary to make a strong investment in patient experience by establishing the Veteran Experience Office. Having the support and clear mission was a key driver for success in steering the organization toward cultural transformation. Embedding patient experience as a number one priority from department leadership effectively stood up the initiative as a foundational principle.

The excitement of enacting positive change in any environment is not necessarily a shared feeling amongst every employee. The reluctance to change is a more than likely the common feeling as it is easier to complete a well-known task with an expected result. Improving patient experience is not simply responding to the needs of the patient in what is clinically appropriate but also taking their preferences into consideration, communicating all pertinent information, addressing the needs of their families, caregivers, or support, and providing supportive services for employees to be fully engaged. Improved communication between patients and providers has been proven to increase health outcomes. Simple and thoughtful gestures (smiling, holding the elevator door etc.) are easy enough for everybody to remember and yet sometimes easier to forget. The VA, VHA, and VEO have been making tremendous efforts to drive that cultural change so these small gestures and efforts become second nature. The mission to provide the most exceptional patient experience is steadily becoming the gold standard and is spreading like wildfire.

6.0 Application for Healthcare Executives

The pedagogy behind organization behavior and culture transformation is only as good as its practical application when aiming to provide actual change. In organizations as large as the VHA, this monumental task needs firm buy-in from every employee, starting with the frontline worker. As an administrative resident, I was able to immerse myself from varying levels throughout the organization at various stages in the change movement. From helping to shape policy, to building actual curriculum through validated research and deploying training while navigating hurdles, I was able to feel the growing pains throughout the process. Leadership challenges, a common sentiment of a resistance to change, and the overall feeling of refusing to fix what isn't broke were just a few instances of these growing pains. Although some may have felt stifled by these challenges, I sought to dig deeper into how to navigate through them by providing solid evidence of why this culture transformation was so important. As an agent of change, I wanted to empower colleagues to realize the importance of improving patient experience as a grass roots movement. I wanted to utilize my studies in organization behavior and change management to build relationships with those who wanted to do more. I was also afforded the opportunity to work with other agents of change to build a coalition to drive the transformation.

The shift into pay-for-performance and the value-based care purchasing model really ignites the need for an organization change. Patients now more than ever have the option of where to receive their care and hospitals can no longer rely solely on clinical effectiveness. High quality care is seen as the bare minimum which forces organizations to explore ways to maintain operations while capturing market share. The unique position the VHA has is that it maintains a common patient demographic (veteran) and positions itself in a preventative-care delivery model

where keeping the patient out of the hospital is more financially beneficial. However, with the implementation of the MISSION Act of 2018, there is still the goal of keeping patients within the VHA system for continuity of care and continuing to provide world-class service. Now that access to healthcare in the private sector is more readily available due to the MISSION Act drive-time and wait-time requirements, that goal for keeping them in the system is even more important.

What keeps a patient within a system? Some are bound by network provider restrictions or insurance packages, and others seek only the best care as highlighted through national reports or advertisements. The leakage of patients to other competing hospitals should be concerning in today's landscape where not only does the patient have a greater say in where to receive their healthcare but is willing to shop around. In response to the MISSION Act potential watershed moment of losing patients to the community, I witnessed a proactive movement to help keep veterans within the VHA system. From webinars, to poster competitions, to a dedicated annual patient experience week, I participated in a real movement toward organization culture transformation and improving patient experience. I utilized the VSignals survey reports to identify trends and conduct root cause analysis to uncover the real issues. Instead of finding systemics issues or recurring problems, I found a majority of compliments and outliers in concerns. The concerns were triaged appropriately and followed through until a resolution was met and done so in a timely manner. This spoke volumes to the veteran in how they were being treated and cared for. They felt respected as their needs were met. Employees and frontline staff made it their own personal mission to deliver the best possible care as they "owned their moment". I had the fortunate opportunity to witness this from numerous perspectives and relay the pertinent information to leadership at different levels. There was a very real connection between leadership and employees through the shared purpose of providing excellent patient experience.

The peril of groupthink is common when attempts at a large organization movement occur. Fortunately, the empowerment for employees to be creative and think differently enables innovation while continuing that movement. When I worked independently with individuals to help identify ways to improve patient experience in their own service lines, I noticed the drive and ambition to utilize the tools they were given to come up with creative ways to drive patient experience. In my consultative experience, I saw these individuals had varying levels of data analytic confidence and yet all commonly sought to learn more. They knew how the VSignals platform produced robust and actionable data, something that data can rarely replicate without tremendous cleaning and analyzing. They could take immediate action with service recovery meaning they could swiftly address concerns that were fresh on the veteran's mind and ultimately created satisfaction on both ends. This empowered them to see quick-wins and refocus on the bigger picture.

This also spread into other areas of the hospital as employees were publicly recognized for their excellence in work and dedication to the mission. Leadership used the compliments data from VSignals to give recognition awards to deserving employees, services lines, or departments. At a higher level, the VEO held friendly competitions to improve patient experience scores amongst facilities and continues to have an annual patient experience awards ceremony to formally recognize top facilities in front of VA leadership (to include the Secretary himself). Employees see the value they provide and how going the extra mile impacts the patient's perception of care. Improving employee engagement goes hand in hand with patient experience. It was amazing to stand back and see from a systems perspective how this organization behavior was changing, even in the short time I spent in my role. The movement is still on track and continues to gain speed as the VHA works toward improving patient experience.

7.0 Conclusion

The VHA and the VEO have established the need for cultural transformation to an organization dedicated to delivering the best customer experience. As the number one priority, customer experience is at the forefront of every employee's mind. Leadership determined the importance customer experience has on the patient throughout their journey of care and created a demand for change. Moving any organization in one direction can be a monumental task and the VHA has set the right path for doing so. By starting with one of the most important stakeholders, the employee, the VHA has established its sincerity in providing the necessary tools, resources, and support for improving patient experience. Using organizational behavior and change management theory, the VHA is able to conduct cultural transformation from thorough research and proven methods.

The VEO was established in response to a growing need to address patient experience at the VHA. Now five years down the road since its establishment, VEO has seen tremendous accomplishments and achievements toward a unified sense of the shared purpose. Creating the Patient Experience University and WECARE Behavior training programs has empowered employees to seek resources to improve on patient experience by owning the moment. VEO has listened to the voice of the veteran to identify what moments matter most to them and captured and analyzed those moments to create journey maps amongst other tools to be used by the employee. Supporting patient experience initiatives and ensuring that the entire culture at the VA embraces patient experience as a core mission enables cultural transformation.

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