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Patient experience established: One year later

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Abstract

Scholars and administrators have long dedicated themselves to centering healthcare conversations and debates on the experiences of patients and their families. Patient experience advocates view these experiences as critical to evaluations of healthcare quality. There have been a great multitude of important contributions, yet, for decades, these calls for patient-centric care experiences and healthcare systems have been confined to the fringes of disparate health policy and reform debates. This bygone reality created a diaspora of scholars and administrators dedicated to understanding, evaluating, and improving the patient experience. This article begins to explore a coalescing around patient experience research efforts citing where people have turned to find leading research and reinforcing the value for an emerging research home for patient experience found on the pages of Patient Experience Journal itself.

Key Words: Patient experience, patient experience research, Patient Experience Journal, defining patient experience

Introduction

Scholars and administrators have long dedicated themselves to centering healthcare conversations and debates on the experiences of patients and their families. Patient experience advocates view these experiences as critical to evaluations of healthcare quality. There have been a great multitude of important contributions, yet, for decades, these calls for patient-centric care experiences and healthcare systems have been confined to the fringes of disparate health policy and reform debates. This bygone reality created a diaspora of scholars and administrators dedicated to understanding, evaluating, and improving the patient experience.

As a field, much respect and gratitude is owed to the contributors that fought these battles to lay the foundations for the patient experience, foundations that enable an outlet such as the Patient Experience Journal (PXJ) to exist. In PXJ, the field now has an exclusive outlet in which scholars and administrators dedicated to advancing the patient experience can be a unified voice.

In an effort to acknowledge the strides that have been made and, yet, remain steadfast in our pursuit to understand and advance the patient experience, the purpose of this paper is to celebrate the patient experience's foundational scholars and establish how far the field has come. This examination of patient experience contributions will proceed by acknowledging patient experience's foundational works, classifying contributions from the inaugural issue, and identifying opportunities for further patient experience research. An analysis of the citations from the inaugural

issue will be used to establish the foundational contributions. An additional analysis will categorize new contributions from the inaugural issue of PXJ into patient experience themes and recurring constructs adapted from Wolf, Niederhauser, Marshburn & LaVela (2014). Finally, discussion of previous contributions will be used to show the aspects of the patient experience that warrant further scholarship.

Methods

A standardized search of the citations of each article included in PXJ volume 1 was executed to identify the most cited articles. A total of 914 citations were included in the sample. The sample was then examined for duplicates with 48 articles being cited multiple times in the volume. The top 10 articles cited were selected as the top cited articles. The results of this analysis are shown in Table 1.

To classify the contributions of the research articles included, the citations were categorized based on their contents as contributing to one or multiple of the themes and recurring constructs of the patient experience delineated in *Defining the Patient Experience* (Wolf et al., 2014). As this analysis is focused on the contributions to our collective understanding of the patient experience, it neither includes editorial articles nor book reviews. The themes and recurring constructs from Wolf et al. (2014) is replicated below in Figure 1. Figure 2 shows the relative number of research contributions made to each patient experience theme or recurring construct in PXJ volume 1.

Results

The 10 most cited articles in the premier volume of PXJ are displayed in Table 1. The most cited piece, *Crossing the Quality Chasm* by the Institute of Medicine (2001), was cited an impressive 6 times in the first volume. The earliest founding patient experience article was published in 1993 and the most recent in 2014. The top cited articles represent a variety of publishing outlets. These articles' publishers, although representative of the international focus on patient experience, validate concerns over the dispersion in the field prior to the establishment of PXJ.

The vast majority of the contributions in the premier volume of PXJ were aligned with the themes *Sum of All Interactions* and *Patient (& Family) Perceptions*, with 10 and 12 research articles contributing, respectively. Seven research articles contributed to the *Organization Culture* theme, and *Person Centeredness* and *Continuum of Care* each display 5 contributions. Only 3 contributions were made specific to the *Integrated Nature* of the patient experience and a solitary contribution was made to the *Patient (& Family) Partnership*.

Discussion

The results of these cursory analyses are encouraging for the improvement of the patient experience and the establishment of the field. Firstly, the fact that the final article on the most cited article list, *Defining the Patient Experience* (Wolf et al., 2014), is from PXJ suggests evidence that this outlet is becoming a centralized voice for the patient experience. The results acknowledge the foundations of the field and identify 10 keystone research articles pertaining to the patient experience. Identification of these top cited articles confirms both that the field lacked a centralized outlet prior to the establishment of PXJ and acknowledges that PXJ is now emerging as that outlet for the field of patient experience researchers and administrators. Categorization of the contributions made in the initial volume of PXJ further delineates the value inherent to having this centralized outlet.

In just one volume, PXJ articles have contributed greatly to our understanding of the ways in which the sum of the interactions during the overall healthcare experience relate to patient perceptions of those experiences. Still, looking ahead, much remains unknown about the ways in which person-centeredness, organizational culture, and the continuum of care influence the patient experience. In addition, there is an evident lack in our collective understanding of the role of the integrated nature of care and the degree to which patients and their families

are able to partner in creating and improving patients' experiences.

Conclusion

The results presented in this article can serve in multiple capacities. They can be viewed as a celebration as well as a call to action. Patient experience scholars and administrations should indeed celebrate how far the field of patient experience has come and acknowledge the establishment of PXJ as indicative that the future of the field is secure. In that same vein, there is still much we do not understand about the patient experience. As healthcare delivery systems continue to reform and innovate, the need to center conversations and innovations on the experiences of patients and their families will only heighten. The burden to understand and relate the issues most meaningful to the patient experience rests firmly on the shoulders of patient experience scholars, administrators, and policy makers.

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Table 1. Most Cited Research Articles in PXJ Vol. 1

Title	Author(s)	Publisher	Date	Times Cited
Crossing the Quality Chasm: A New Health System for the 21st Century	Institute of Medicine	The National Academies Press	2001	6
Patients' Perception of Hospital Care in the United States	Jha, A. Orav, E. Zheng, J. Epstein, A.	New England Journal of Medicine	2008	4
Effective Physician-Patient Communication and Health Outcomes: A Review	Stewart, M.A.	Canadian Medical Association Journal	1995	4
Using Thematic Analysis in Psychology.	Braun, V. Clarke, V.	Qualitative Research in Psychology	2006	3
A Systematic Review of Evidence on Links between Patient Experience and Clinical Safety and Effectiveness	Doyle, C. Lennox, L. Bell, D.	BMJ Open	2013	3
Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry	Francis, R.	The Stationery Office	2013	3
Through the Patient's Eyes: Understanding and Promoting Patient-Centered Care	Gerteis, M. Edgman-Levitan, S. Daley, J. Delbanco, T.	Jossey-Bass	1993	3
Physician-Patient Communication: The Relationship with Malpractice Claims among Primary Care Physicians and Surgeons	Levinson, W. Roter, D. Mullooly, J. Dull, V. Frankel, R.	Journal of the American Medical Association	1997	3
Promoting Patient-Centered Care: A Qualitative Study of Facilitators and Barriers in Healthcare Organizations with a Reputation for Improving the Patient Experience	Luxford, K. Safran, D.G. Delbanco, T.	International Journal of Qualitative Health Care	2011	3
Defining Patient Experience	Wolf, J.A. Niederhauser, V. Marshburn, D. LaVela, S.L.	Patient Experience Journal	2014	3

Figure 1. Definitional themes and recurring constructs for inclusion and consideration in patient experience improvement efforts (Replicated from Wolf et al. 2014)

Note: As mentioned above, the most consistent supporting themes are presented in this graphic, but we suggest other practices or concepts may also be proven to support patient experience improvement and performance.

Figure 2. Patient Experience Definitional Themes and Recurring Constructs