Personalized Multimedia for Neurosurgical Outpatient Engagement and Satisfaction

J S Lamprecht BS; Kenneth Court; David J. Langer MD

Lenox Hill Hospital, Northwell Health

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Introduction

Communication is an essential component of the patient experience. With innovations in multimedia applications clinicians can digitally communicate to their patients through text, pictures and videos. Two of the four attending neurosurgeons in our department and their staff used a pilot version of personalized multimedia patient engagement software to make videos for a portion of their outpatient office consults. Patients were able to replay the video to hear their care team's insight on their condition anywhere, securely on any device, at any time.

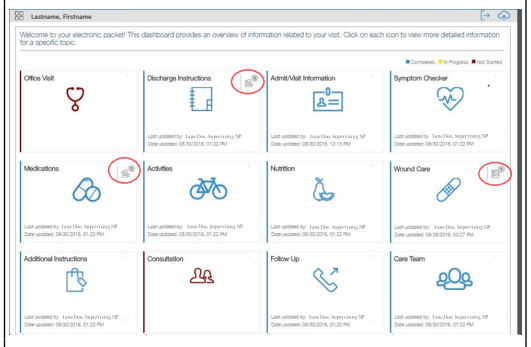
Diagnostic Imaging Review

Personalized videos overview case using patient's own diagnostic imaging

Methods

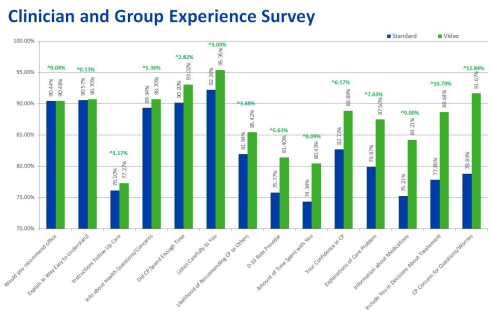
In a retrospective analysis Outpatient Press Ganey Clinic and Group Experience Survey scores were collected for all 4 neurosurgeons in the practice for dates from 2015-2016. Surveys were matched to patients through billing and hospital medical record numbers. Patients of all four surgeons (total: 363) were then grouped by the condition of having received the standard of care (316) or additionally receiving a personalized video (48).

Clinician View of Patient Engagement Software



This is the clinician's view of the patient's personalized multimedia patient engagement software. Blue icons indicate completed sections which show the clinician's name, title, and time that clinician finalized that section. Media icons are circled which show the presence of multimedia attachments in a chapter such as documents, pictures, and personalized videos.

Clinician Group Experience Survey Results



Frequencies of most positive answer shown for Press Ganey Clinician and Group Experience Survey Questions. Groups were patients who received a personalized video and those who received the standard of care.

Results

For all survey questions analyzed the frequency the most positive answer was selected was greater in the video group when compared to the standard group for fourteen out of fourteen questions (range +0.04-12.84%). The two neurosurgeons who used the software had a total most positive selection frequency of +4.85% and +3.84%, respectively in the video group compared to the standard group for all questions combined. For twelve out of fourteen questions the least positive answer was never selected by participants in the video group whereas it was selected in the standard group.

Conclusions

There is a pattern of overall increased satisfaction for outpatients who received a personalized multimedia packet when compared to those who received the standard of care.