



**Qminder**

# **Digitizing Queue Management in Healthcare**

# Contents

Credits	1
Foreword	2
<b>Chapter 1:</b> Putting the care back in healthcare	3
<b>Chapter 2:</b> Making your staff feel awesome	15
<b>Chapter 3:</b> A shining beacon: case study of a technology-backed experience	25
<b>Chapter 4:</b> HIPAA: Separating myths from reality	30
<b>Chapter 5:</b> Final thoughts	39
About Qminder	40

# Credits

*Digitizing Queue Management in Healthcare* offers guidance on how to create a positive experience for both patients and medical staff.

For more bite-sized insights on improving patient experience, healthcare staff management, hospital waiting line management and more, check out [our blog](#).

We thank Beacon OHSS for their assistance and for being all-round great people to talk to.

Author: Kirill Tšernov

Designer: Magdalena Ataman

Feel free to share this ebook with friends and colleagues, but be sure to give *Qminder* a shoutout.

© 2019 **Qminder**

# Foreword

Creating an ebook, especially one that focuses on healthcare experiences, implies that you are talking from the position of authority, which is a hard sell for us — a queue management company that has seemingly nothing to do with healthcare.

(This, incidentally, stopped us from calling this book *Healthcare 101* or something equally grandiose.)

At first glance, it is true: we don't have anyone in our company with an MD to their name, and our experience beforehand is limited to occasional hospital visits. What we do have, however, is a number of clients who work in the industry and have helped shape our view of what patients are looking for.

The articles compiled here were as much of a learning experience for us as they, hopefully, will be for you.

**Rauno Rüngas**, co-founder of *Qminder*

## Chapter 1

# Putting the care back in healthcare



Strange though as it may sound, we have to stop thinking about healthcare as an industry that exists in a vacuum. Healthcare is part of the modern-age “*experience economy*,” where personal comfort becomes a bargaining chip when deciding between two service providers. This means that patient experience is no longer an afterthought, but rather part and parcel of the medical service package, and it’s only recently that the healthcare industry has caught wind of it.

### The numbers speak for themselves:

**49%**

of hospital executives say customer experience will be a top strategic priority over the next 5 years.

**81%**

say their company is investing in technology to improve visitor experience.

**91%**

say that patient engagement services will increase over the next 10 years.

The trend is clear as day; the only question is “*What exactly is patient experience?*” Is it at all related to patient satisfaction?

The terms “*patient satisfaction*” and “*patient experience*” are often used interchangeably, and though they do overlap somewhat, they still describe different concepts within healthcare. Patient satisfaction describes purely the level of contentment with the health services provided, while patient experience describes more tangible concepts.

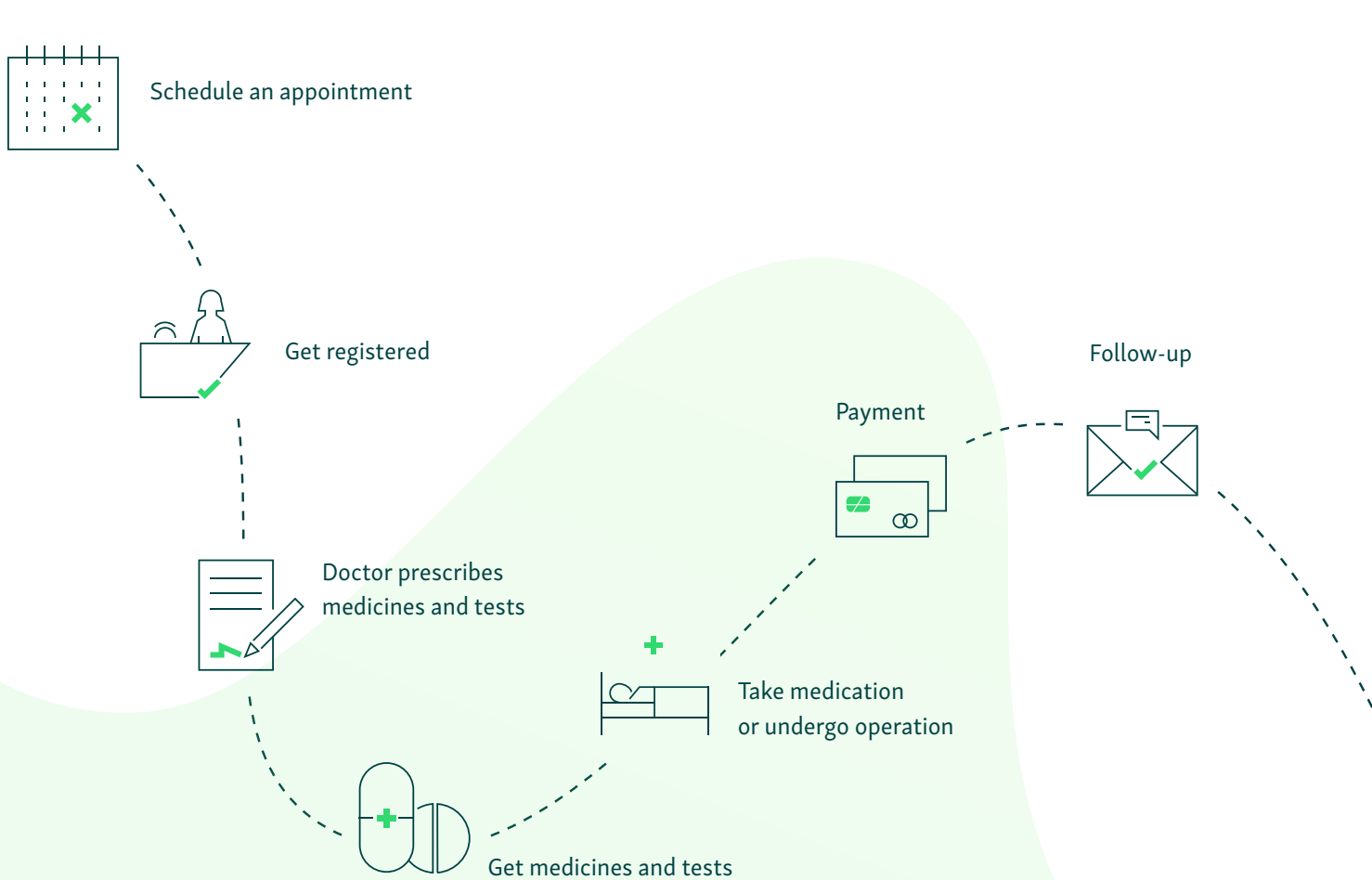
Patient satisfaction can be measured, but at the end of the day, it is still subjective. Patient experience — defined as access to, and quality of, medical services — is an objective measure. Without discrediting the importance of patient satisfaction, the issue of subjectivity vs. objectivity ultimately makes patient experience more conducive to improving healthcare quality.

Now that we’ve gotten to terms with terms, it’s time to get to the meat of things: **how to improve patient experience.**

# Embarking on a patient journey

To start improving patient experience, we need to start from the very beginning, i.e. from the patient journey.

Patient journey describes exactly that: *a path the patient needs to take to be treated at a medical facility, by going through key nodes of interactions called, topically enough, pain points.*



As you can see, the word “journey” is not accidental: *from scheduling an appointment to dealing with hospital staff, visiting a hospital is like planning a cross-continental trip.*

Connected to patient journey is the concept of **patient flow**, i.e. the movement of patients through a healthcare facility. Patient flow involves the medical care, physical resources, and internal systems needed to get patients from the point of admission to the point of discharge while maintaining quality and patient satisfaction. Improving patient flow is a critical component of process management in hospitals and other healthcare facilities.

Optimizing patient flow encompasses quickly, efficiently, and effectively meeting the demand for care by moving patients through care pathways while improving coordination of care, patient safety, and health outcomes.

## Good patient flow is mainly characterized by:

### Efficiency

It goes smoothly from one point to another. Everything is straightforward, and there are no extra steps to take.

### Speed

In healthcare, there’s precious little of time. Fast admission and discharge means you can treat more patients.

### Clarity

It’s not always obvious where one should go next, especially in multi-storied hospitals with several wings and departments. Good patient flow takes care of that.

### Cost-effectiveness

Unfortunately, healthcare tends to be underfinanced. Budgets go mostly toward medical equipment and salaries, so the fewer resources patient flow demands, the better.

There are several factors that affect patient flow, such as patient volume, available resources (including human resources), and efficiency of logistics. Poorly managed patient flow may result in adverse effects on patients’ health and even in higher mortality rates.



The problem may lie in a facility's chaotic logistics as well as inefficient scheduling. Overbooking plagues not only airlines and hotels but also, and perhaps more concerning, hospitals. Moreover, disorganized patient handoffs can negatively affect the flow of patients. When one patient is handed over from one practitioner to another, there may be enough obstacles along the way to create patient flow bottlenecks.

## Wait times in healthcare

Patients have enough problems on their hands, but a thoughtlessly implemented waiting process can be very trying on patients', well, patience and overall experience.

Why is it important to pay attention to waiting processes at hospitals? According to a study by healthcare consumer engagement group Vitals, the less time patients wait, the better the satisfaction scores become. There is a strong correlation between wait times and doctors' ratings.

**There is a strong correlation between wait times and the doctors' rating.**

In the same study, physicians with five stars, which is the highest rating assigned within the study, had wait times that were over 20 minutes shorter than wait times of doctors with a one-star rating: *12 minutes, 33 seconds* versus *33 minutes, 4 seconds*.

Naturally, it might be argued that it's the other way around — that wait times are the byproduct of poorly organized, less professional doctors.

Wait time affects how patients view the level of care they receive: *84% of patients say that a reasonable wait time is somewhat or very important for a quality patient experience*. The reason for that



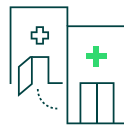
is that wait time is often considered a part of the “*service package*” rather than pre-service. The longer a patient needs to wait, the worse their outlook is on the level of care they receive.

There are also some negative financial consequences when mismanaging wait times in hospitals. Quite simply, patients don’t want to deal with hospitals that don’t respect their time:



**20%**

of patients experiencing long wait times leave before seeing the doctor.



**30%**

change their healthcare providers altogether.

Moreover, to compensate for no-shows, some clinics and hospitals opt to double-book patient appointments. Basically, they give two patients the same time slot for an appointment. Overbooking (adding more visits per day) and double-booking can lessen the impact of no-shows, but these practices are looked down upon by medical experts as they also lead to patient backlogs, overworked staff, and a decrease in quality of care.

Lastly, more than lost revenue, long wait times are also about missed opportunities.

**20% of patients are willing to pay an extra fee for quicker service.** On a more concerning note, waiting times have a negative effect on patients’ health.

According to the Veterans Health Administration’s study on geriatric veteran patients, patients aged 70 to 74 are almost 10% more likely to have a stroke when visiting facilities with longer wait times. At around 30 days of appointment wait time, older patients experience higher mortality rates and hospitalization. Additionally, patients with diabetes are 2-4% percent less likely to use primary care when appointment wait times increase to three weeks.

For younger patients, wait times are a nuisance. For older patients, however, they are a more serious matter.



## Waiting room

A large part of how waiting is experienced depends on the level of comfort one feels when waiting. That's why waiting rooms shouldn't just be areas where you pass the time. Designing waiting rooms, especially in healthcare, requires more in-depth thinking.

Many medical facilities are still clinging to outdated concepts when it comes to making patients wait. If they want to stay ahead of the competition and provide an excellent patient experience, they need to take steps to improve their waiting rooms.



### Update the layout

First things first, if your patients find your waiting room experience lacking, perhaps it's time to update the layout. **An open room** with a lot of space is a surefire way to create an inviting atmosphere. So many hospital waiting rooms are guilty of making patients feel cramped, locked-in and uncomfortable.

Good lighting is also an important part of improving the layout of your waiting room, especially **natural light**, as it helps put people at ease and create a sense of comfort and serenity. **Nature and greenery** also positively impact well-being and relieve stress: a couple of flower pots, while not much, might help create a more positive atmosphere.

Another thing that can give your facility a distinct and positive look is artwork. Barren walls are the bane of any hospital visit: there's nothing to hold your attention, and it looks oppressively sterile. Hang some **calming pictures** of landscapes and animals. At the very least, they would surely make your waiting room stand out.



## Add comfy furniture

Plastic chairs are cheap to get, but they're also synonymous with discomfort. Couple that with excruciating wait times until you get treated, and a simple piece of furniture becomes a torture device for the modern age.

As hospitals are, generally, under tight budget constraints, it might seem more logical to opt for cheaper options; however, **comfort is the keyword** here. So much so that some dentist waiting rooms even have massage chairs to provide that extra bit of comfort.

A sensitive topic to keep in mind is that a significant portion of the population is, well, overweight. This means that healthcare furniture needs to account for specialized needs by providing extra large and durable chairs. Aesthetics play a major role, too. Your choice of colors and fabric may reinforce a branded look and create a consistent visual experience.



## Provide entertainment

The reason entertainment is important is that our perception of the passing of time differs quite a bit from the actual passage of time. What is in reality five minutes may feel like hours when we're bored out of our minds. But dangle shiny objects before us and we, like kids, forget everything else. Providing a distracting activity, no matter how trivial it is, is how hospitals can **make wait times feel shorter** and keep patients from nervously checking the clock twice a minute.

At first glance, a simple TV may significantly improve the quality of life for those who wait their turn. However, a study in *Clinic Design: Enhancing the Patient Experience through Informed Design*, by Gary A. Nyberg and Christine Guzzo Vickery, found out that:

## Only 41%

of patients expressed a wish to watch TV.

## 95%

of patients spend their wait time reading.

## 57%

of patients prefer to use mobile phones to entertain themselves.

In the days of old, waiting rooms offered magazines, newspapers and books. Though we are in the 21st century, the activities don't have to change that drastically. Modern waiting rooms may offer the same good ol' magazines, newspaper and books — only now in a digital format.

Tablets not only let you read publications or browse the Internet, they also come equipped with apps and games. Whether a kid or a kid at heart, no one can say “no” to quick, meaningless entertainment in the face of long waiting.

## Make use of technology

If TVs don't cut it anymore as entertainment, perhaps there is another use for them?

Although reducing wait times should be a top priority, long waits are sometimes unavoidable. As we've mentioned before, providing entertainment is one way to alleviate the pains of waiting. The other is even simpler: provide accurate wait times.

Studies show that **over 55% of patients want access to estimated wait times on a screen in a waiting room.** Additionally, **61% of patients would like a text message notification** to alert them about their turn.



Some practices go the way of fancy restaurants now, by giving patients a pager that buzzes when their turn comes. This way, you can go outside or to the bathroom without worrying about missing your cue.

As the number of patients is often overwhelming, however, keeping so many pagers handy can be problematic. Phones, on the other hand, are much more accessible solutions:



A patient enters their phone number upon sign-in via an iPad station.



The patient joins the waiting line and can monitor the queue progress on the TV screen.



As the patient's turn comes, they get a notification no matter where they are.

As a result, patients are given peace of mind as there's one less thing to stress out about.

## Personalizing the patient experience

There's nothing quite as insulting as receiving a letter that starts with *"to whom it may concern,"* don't you agree? It's a surefire way to communicate to a person that you do not care about him or her all that much.

The same applies to pretty much any industry or field where there are interactions between an agent and a service recipient. The importance of **personalization in healthcare** cannot be understated: in the same way that you don't measure the average body temperature of all patients, you shouldn't be targeting the average visitor.

Every patient is an individual, and though their main goal is to get cured, they also want to feel respected and catered to along the way. That's why personalizing healthcare services is so important. The good thing is that there are enough minor, inexpensive ways in which hospitals and healthcare providers can start providing more personalized care right now.

For example, how about starting by greeting your patients? While you're at it, **don't forget to address them by their first name**. Most patients, especially under the age of 65, prefer their doctors to call them by their first names. In fact, the younger the patient, the more positively they react to hearing medical staff using their given name.

Despite that, doctors don't use first names in half of their first-time visits, and that's something that should change if you wish to make your services more personalized and enjoyable. This is what retail is already doing, and there's nothing that says that healthcare can't do the same.

**Every patient is an individual, and though their main goal is to get cured, they also want to feel respected and catered to along the way. That's why personalizing healthcare services is so important.**

**Clear communication is one of the main ingredients of personalization.** A recent West study found that only 12% of patients feel that their healthcare provider is doing a good job of delivering information specific to their needs and conditions.

Connecting all the technologies can help deliver a customized patient journey that takes into account the patient's needs and preferences.

# Lessons to learn



1. Patient satisfaction depends on how well patient flow is maintained, i.e. how many obstacles the patient needs to overcome during a visit to your hospital.
2. Wait times are invisible markers of the quality of patient service. Long waits can exacerbate patient's poor wellbeing and make your care seem more impersonal.
3. Since waiting rooms constitute a big chunk of a patient's visit, they need to alleviate the adverse effects of waiting by providing comfort, adequate information about the state of the visit, and aesthetic pleasure.
4. Personalized patient experience is what sets great, patient-oriented medical facilities apart. Personalization does not necessarily require enormous investments, as it can begin with greeting a patient in a more personal manner.



## Chapter 2

# Making your staff feel awesome



Clinics are there to improve the wellbeing of patients, so why shouldn't the health of medical staff also be the focus of healthcare? How bad are things for medical employees, anyway?

If you're one of the people whose run-ins with doctors are limited to rewatching George Clooney on ER and who think all practitioners in real life look like Clooney clones, you should definitely pick up *This Is Going to Hurt* by Adam Kay. It is a fantastic, funny read that offers a sneak peek into the supposed glamor of working as a doctor.

Written as a disjointed journal, *This Is Going to Hurt* lists day-to-day situations the young doctor comes across with almost rebellious disregard for tonal consistency. One minute, Kay is writing about a misinformed patient mixing up doctor's recommendations, another he's describing the misery of working on your own birthday.

In one of the journal entries, he remembers how a house officer attempted suicide by overdosing on antidepressants. Exhaustion and the extreme stress of responsibility, coupled with "*minimal supervision and absolutely no pastoral support*", does a number on the human psyche.

The only surprising thing, Kay admits, is that this kind of situation does not occur more frequently in hospitals. According to a 2015 UK study, 85% of doctors have experienced mental health issues, and 13% admitted to suicidal thoughts. What's more disturbing, young female doctors in the UK are 2.5 times more likely than women in other professions to commit suicide.



Kay's assessment of healthcare's disregard for its own practitioners' wellbeing is unapologetic:

*"In any other profession, if someone's job drove them to attempt suicide, you'd expect some kind of inquiry into what happened and a concerted effort to make sure it never happened again."*

This is why improving medical staff's experience matters, as it's a question of more than simple convenience. The lives of doctors and nurses are under constant attack with the only way out being improved medical staff experience.

## The importance of feeling important

When talking about medical staff's experience, it's never wise to forget about nurses. They're not just small cogs in the complex healthcare machine.

It's no secret that patients tend to trust nurses more than doctors. In fact, nurses are among the most trusted professional all around, coming second only to firefighters. Quite often, nurses are the first faces patients see, which makes them the face of the entire medical facility.

**It's no secret that patients tend to trust nurses more than doctors. In fact, nurses are among the most trusted professional all around, coming second only to firefighters.**

Then, there's the matter of engagement influencing, either directly or indirectly, the effectiveness of treatment. A Gallup study shows how higher nurse engagement scores are inversely proportional to patient mortality. What's more, the National Database of Nursing Quality Indicators (NDNQI) highlights that higher nurse satisfaction results in an 87% decrease in infection rate.

With that in mind, what can be done to improve the satisfaction of medical staff? The most common reasons for unhappiness among doctors and nurses are the same as for any other employee out there.



## Feeling underappreciated

Individual recognition is not the easiest thing to pull off. The more employees you have, the harder it is to keep track of who did what. For hospitals with multiple wings and departments, this is all the more daunting.



## Undefined responsibilities

It's easier for doctors, who have a clear set of duties — for the most part, anyway. But if we look at nurses, they often have to juggle multiple tasks, not all of which they have signed up for. Being a healthcare provider is difficult enough, but when you have to clock in as a reception desk agent, things are sure to go awry.

Knowing what you're responsible for lets the pressure off your employees and lets them not worry about things that aren't related to their line of duty.



## Lack of continued education

No room for advancement, or a feeling thereof, is another thing that contributes to employees thinking they're stuck in a rut — or, more aptly, trapped in a hamster wheel. It's not about the career ladder, necessarily. Further education and advancements can come in the form of special courses at management's expense, which would help medical staff become better at their job.

Self-improvement is especially important for Millennials. Work not meeting their expectations is one of the chief reasons why this generation (Gen X - born 1965-1980; Millennials - born 1981-1996) may quit the job.



## Being underpaid

No matter who you ask, everybody will claim they are being underpaid. Although research shows that most people have no idea whether they're paid fairly, our most natural instinct is to always complain about our salary.

That's where a performance monitoring tool can, once again, be of great help, as it clearly shows how efficient each employee is. When an employee can provide solid evidence for being an overachiever, there's that much more ground for renegotiating the salary.



## Having to work with outdated equipment

The thing with obsolete technology is that it not only brings the overall efficiency down but is also a major killjoy. There's nothing wrong with being a fan of the good old-fashioned ways — unless people's health or even lives depend on you sticking to state-of-the-art technologies.

Just ask any person that has to operate fax machines or a primitive printer that coughs up one page an hour. The question on the employee's lips is, *"Why can't we finally join the 21st century and leave these godforsaken Stone Age tools behind?"*

On the one hand, hospitals are quick to embrace recent medical advancements. On the other, they tend to lag behind when it comes to anything non-medical. For example, although sign-in sheets have been proven to be highly ineffective, many a hospital is still using them.

# The effects of overworking doctors and nurses

Overworked medical staff is a topic worthy of its own separate section, as it is among the chief reasons behind poor medical staff experience. But the negative effects of enforcing unreasonable working schedules are even more dramatic than that and can lead to disastrous consequences.

## Safety hazard

A 2013 study by the Journal of Patient Safety found that 210,000 to 440,000 patients die at hospitals each year as a result of medical errors. Medical errors are often caused by nurses who are too fatigued to pay attention.

**It's no surprise that many hospitals trick their nurses into overworking.**

In an infamous case in 2007, an obstetrics nurse at St. Mary's Hospital in Wisconsin mistakenly gave a pregnant 16-year-old an anesthetic that wasn't prescribed. As a result, the woman died from cardiac arrest, but her baby lived.

How can these amateur mistakes be made? It turns out that the day before the incident, this nurse volunteered to work an extra eight-hour shift. She ended up sleeping at the hospital for a few hours before starting work again at 7am the next day.

The nurse was suspended and lost her job. Although this may seem like a fitting comeuppance, **there is an argument to be made that the management should've taken the fall, too.** It's no surprise that many hospitals trick their nurses into overworking.

Low salaries are the reason why financial incentives, aka additional shifts, are an industry-wide practice. Low-paid nurses simply have no other option than to keep signing up for additional shifts.



## Lower engagement

Employee engagement is the emotional commitment an employee has to the organization and its goals, resulting in the use of discretionary effort.

The key phrase here is discretionary effort. Earlier, we identified employee engagement as one of the key factors that lead to improved patient experience. A salary is simply not enough to keep an employee motivated to perform every day under high-stress situations.

Successful modern businesses attract the best talent from all over the world because of the work culture they invest in. Employees do want a salary — but unless they feel fulfilled at a personal and professional level, it's unlikely that they will put too much effort into delivering excellence.

**Modern workplaces put an emphasis on health and flexibility.** A tech company from Oregon offered their employees unlimited vacation or paid time off (PTO). Surprisingly, they found that on average, people took the same number of days off. Then why was this a valuable exercise? Their CEO says:

*“Unlimited vacation policies convey trust, making employees — not their managers or HR directors — responsible for making sure their tasks and projects still get done regardless of the time they take away from the office.”*

# Finding the solution



Of course, Silicon Valley's perks are notorious and not replicable across industries. From on-demand yoga classes to unlimited beer and everything in between, what is the lesson here? Unless you value your employees as individuals, they will not become their best selves while working for your organization.

A report by the Corporate Leadership Council found that employees with lower engagement levels are four times more likely to leave their jobs than those who are highly engaged. The nursing profession is broken at a more fundamental level; nurses have far more immediate concerns about their wellbeing.



**Unless you value your employees as individuals, they will not become their best selves while working for your organization.**

A survey conducted by the Vickie Milazzo Institute in Houston interviewed over 3,300 nurses. Over 64% of the nurses said they rarely get seven to eight hours of sleep per night. Overworked nurses almost seem to be the norm rather than the exception. There's one other factor that consistently causes nurses to be unhappy in their jobs: in the same survey, 75% of nurses said they feel they don't have enough authority or autonomy.

It can be tempting to overwork nurses and doctors for short-term gains. Eventually, though, this decision can adversely affect the functioning of the entire hospital can cause unforeseen disasters. Nurses are the cornerstone of hospitals; without them, the hospital health sector is practically non-existent.



Overload is cited by 61% of nurses as the reason they are unable to give patients the care they wanted. A Royal College of Nursing (RCN) survey revealed that 62% of nurses have thought about quitting due to being overstressed.

The burden keeps growing — or at least the way it's perceived. In the same survey, 83% nurses have reported feeling their workload has increased in the last 12 months. Whether this opinion is fact-based or anecdotal doesn't matter. What matters is that nursing staff feels as if though they're being used.

*So what's the solution?*

First of all, **minimize nurses' workload wherever and however possible**. Having them greet every patient while guiding through sign-up process is exhausting and oftentimes demeaning. Nowadays, we've got digital solutions that can take care of that without a hitch. By providing patients with means for self-service, a queue system effectively relieves nurses of the burden. As a result, healthcare providers are free to pursue other, more meaningful activities.

Secondly, nurses need to have **strictly defined responsibilities**. It's no good if a nurse needs to play the role of a reception desk agent as well as healthcare provider. Then there's the matter of payment. It goes without saying that taxing jobs such as nursing should have **adequate compensation**.

Sadly, this is often not the case, which leads to unpleasant, though logical, consequences: low salary is cited to be the chief reason for having poor experiences and ultimately quitting the job.

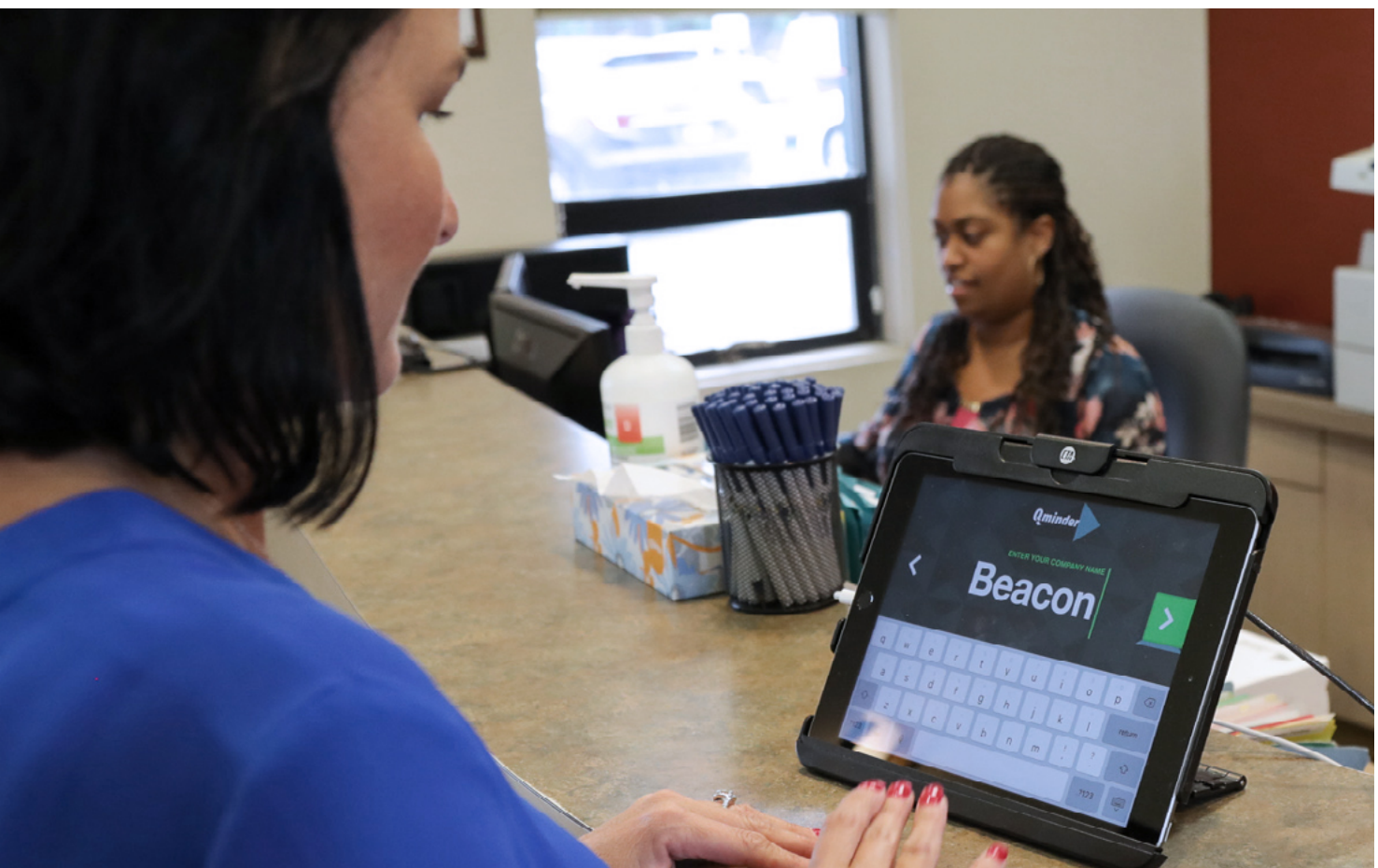
# Lessons to learn



- 1.** Hospital employee experience is as important as patient experience, because the wellbeing of hospital staff may affect the efficiency of their work and medical outcomes.
- 2.** Overworking medical staff leads to unnecessary stress that dampens the experience for everyone involved.
- 3.** Digital technologies are a key to improving the critical situation around healthcare employees.

## Chapter 3

# A shining beacon: case study of a technology-backed experience





*How can technology help with both patient and staff experiences? To answer that, we will be taking a look at how a medical service provider uses Qminder to not only cut down on its wait times but also guarantee consistently pleasant service.*

Despite the rising number of visitors, *Beacon Occupational Health & Safety Services (OHSS)* still aims to provide the same level of rockstar customer service that's been the cornerstone of their operation. To make sure that their customers encounter no service roadblocks, *Beacon OHSS* trusts *Qminder* **to manage visitors in a way that is smooth, fast, and personal.**

## Meet the Beacon OHSS Team

As the name suggests, *Beacon Occupational Health & Safety Services, Inc.* is a company that takes the matter of occupational health seriously. Founded in 1999, *Beacon OHSS* offers health-checking services as well as various tests aimed at measuring employees' fitness for duty, including drug and alcohol testing.

The core value of *Beacon* is so succinct it can fit into a single tweet: If you spend 30% of your weekday at work, shouldn't you feel safe and happy? This philosophy applies to both *Beacon's* clients as well as their own employees.

**If you spend 30% of your weekday at work, shouldn't you feel safe and happy?**

## Humble beginnings

*Beacon's* vision is that all employees are able to "go home in the same condition (or better) as when they clocked in". That's why, when reviewing their customer service, **they pay attention to every detail, even the least significant.**

A poor craftsman blames his tools, but poor tools can only get you so far. *Beacon* had a great idea of where they wanted their customer service to go, but they lacked the proper tools to make the most out of their vision.

Prior to *Qminder*, *Beacon* used sign-in sheets for registration. The cons were numerous: it's a cumbersome, slow and inefficient method of managing visitors. Not to mention, for a company that looks to the future, paper-based queue management was so last-century.

As they decided to further digitize their operation, they knew they wanted something better and started looking into more sophisticated queue management solutions.

Having reviewed several options, the administration ultimately decided to go with *Qminder*, as it offered more in terms of record-keeping, analytics, and backend. What's more, the new tool looked more aesthetically pleasing and left visitors with positive vibes.



## Improving visitor experience with technology

As clients are always in the center of *Beacon's* attention, customer experience is something they use their best efforts to keep modernizing. From the way patients fill out forms to the way clients manage their accounts, *Beacon* strives to make their service as innovative and visitor-friendly as possible.

As such, it is no surprise that they turned their attention to modernizing, above all else, their customer sign-in and queue management approach. After all, **queues are among the first things a visitor sees and interacts with** — it is the face of *Beacon*.



**Qminder has brought transparency and efficiency to our check-in process for both our service delivery team, as well as the client employee.**

**Amanda Johnson**, Vice President  
Beacon OHSS

One of the more frequent issues with the queuing setup *Beacon* had previously was that when companies would call in to check whether their employees have visited *Beacon*, the customer service technicians had to check sign-in sheets before calling back with an answer. This meant a lot of wasted time and effort on the technicians' part, which is why the sign-in form was the first thing on the chopping block.

Having implemented the *Qminder* system, *Beacon* technicians now have all the visitor information at their fingertips. A simple search function saves service staff a lot of pain when looking for a particular visitor and their visit history.

This, in turn, **allows them to serve their visitors better and faster while taking into account their specific needs and preferences.**

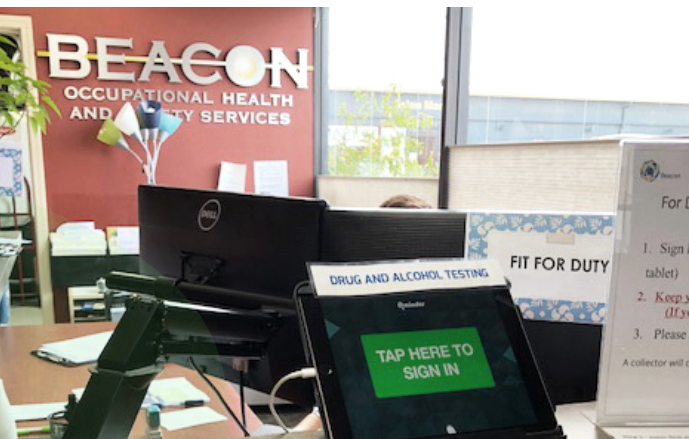


## **A data-backed customer experience strategy**

The people at *Beacon* pride themselves on what they call their “rockstar customer service.” Although the main ingredient is the go-getter attitude that the *Beacon* Team has, great customer service cannot be accomplished without backing your actions up with numbers.

*Qminder*'s Service Intelligence proved to be a great find for *Beacon OHSS*, as it provides crucial numbers that help feed their customer service strategy. There can be no improvement in visitor queuing without knowing wait times, service times, busy hours, or daily activity.

The information that *Qminder* gathers throughout the day is processed and stored for later use, in the form of weekly reports. These reports are delivered straight to *Beacon* technicians' emails, and help track average customer service metrics.



The reports are then put together by an IT analyst, to create a bigger picture of where *Beacon's* customer service strategy is headed and whether their visitor experience efforts have paid off. Which, so far, they certainly have.

“

**Qminder has increased visibility from a management level to ensure we are meeting key internal metrics for wait times by providing the data we need to manage staffing levels at our various locations based on patient volumes.**

**Amanda Johnson**, Vice President  
Beacon OHSS



## Chapter 4

# HIPAA: Separating myths from reality





To answer the question of “*What is HIPAA*”, let’s pretend we’re Wikipedia for a moment.

HIPAA is the acronym for the *Health Insurance Portability and Accountability Act*. It was signed by then-President Bill Clinton and passed by Congress in 1996. HIPAA is a list of legislative requirements that oversee data privacy and security provisions for private medical information.

HIPAA has several specific goals, from providing continuous insurance to reducing administrative burdens. But the goal we’re most interested in right now is protection against fraudulent access to, abuse, and mishandling of confidential patient information.

### There are five separate sections in HIPAA:

- 
1. Health Insurance Reform
  2. Administrative Simplification
  3. Tax-Related Health Provisions
  4. Application and Enforcement of Group Health Plan Requirements
  5. Revenue Offsets

That’s a lot of dry bureaucratese, and we don’t blame you if you skimmed through some of the sections above. There’s but one section we should pay attention to, though — Title 2.: *Administrative Simplification*.

What kind of compliance requirements does Title 2 include? Basically, we can narrow it down to three rules: **Privacy Rule**, **Security Rule**, and **Enforcement Rule**.

The **Privacy Rule** — or the Standards for Privacy of Individually Identifiable Health Information, if you feel like falling asleep mid-sentence — sets national standards to protect patient health information.

Likewise, the **Security Rule** sets standards for patient data security, and the **Enforcement Rule** outlines the process for investigating violations of HIPAA compliance.

So in short, *Administrative Simplification* of HIPAA sets special standards for securing and confidential handling of healthcare information that is stored or transferred electronically.

*Taking in all of the above, what's the big idea about HIPAA? Why was it necessary to put into law this act?*

## The importance of HIPAA



HIPAA gained extra prominence after several cases of information breaches in some healthcare institutions across America. It was clear that something needed to be done by these institutions, and the reality pushed them towards certifying for HIPAA compliance.



The rule requires the placement of safeguards, both physical and electronic, to ensure the secure passage, maintenance and reception of protected information.

The protected information mostly concerns sensitive and individually identifiable information including:

- ✓ A patient's name, address, birth date, social security number, and other information that could be used to identify the patient.
- ✓ The patient's physical/mental health condition.
- ✓ The specific services and care provided to the patient, as well the payment for said services.

(It needs to be added that employment records are not considered private healthcare information under HIPAA.)

So now that we now which information need to stay protected, the next question is, *"How do we make that happen?"*

Title 2. of HIPAA lays out some requirements for healthcare facilities to follow.

Firstly, there needs to be a person responsible for implementing procedures at the facility, including handling the complaints. Employees must be trained on said procedures, and appropriate safeguards needs to be instituted and maintained.

Oh, while we're at it, patients have the right to receive, upon request, their own protected information. It's self-explanatory and self-evident, but well, there you have it.

### Myth #1: **HIPAA does not apply to our specific healthcare provider**

HIPAA-Schmipaa, who cares! It's just another pointless set of regulations that doesn't concern our healthcare facility. It's a waste of money, is what it is.

**FACT:** *HIPAA applies to any and all healthcare providers that transmit, store or handle protected health information.*

HIPAA regulations apply to healthcare facilities of all sizes and purposes. Protected health information (PHI) — which includes a patient's name, social security number, address, etc. — is a subject to the HIPAA privacy rule. As long as you handle PHI, you need to comply with HIPAA.

This also applies to any of your subcontractors that can also access your patient data. Any entity this data goes through — for example, a cloud database provider — needs to be HIPAA-compliant as well.

Otherwise, in case of a breach into a non-HIPAA-compliant database, expect to lose patients — and that's to say nothing about litigation costs.

## Myth #2: **HIPAA's Privacy Rule applies only to electronic records**

As long as medical records are on old-fashioned paper, there is no need to comply with HIPAA privacy regulations that apply to electronically stored and transmitted electronic.

**FACT:** *HIPAA covers all patient records, regardless of their nature.*

Paper sign-in records and medical records do not make your healthcare facility exempt from adhering to the HIPAA Privacy Rule. HIPAA privacy requirements do not cover only electronic health information.

As long as the information can be stored, handled, transmitted, breached or stolen, it needs to be protected by HIPAA. So even if you only have paper patient records, you must be compliant with the HIPAA Privacy Rule.

Also, it's the 21st century. Paper medical records are so last millenium.

Myth #3: **HIPAA prohibits email correspondence between doctors and patients**

Emails get a lot of flak for being easy to breach and steal. Naturally, this means HIPAA doesn't allow healthcare providers to use them when corresponding with a patient, right?

**FACT:** *The HIPAA Privacy Rule allows providers to use many different means of communication, up to, and including, emails.*

Of course, HIPAA expects healthcare providers to use appropriate safeguards, such as encryption, to communicate with patients. The confidentiality of patient health data must be secured, especially when transmitted electronically.

In other words, emails are a reasonable way of communicating with patients as long as adequate safeguards are in place.

Myth #4: **Healthcare providers can share health information with employers**

Employers must have the ability to research health information about their current or potential employees. It's on the same level as information about their labor experience, education, skills, driving licence, etc.

**FACT:** *HIPAA prohibits healthcare providers from disclosing personal health information to employers without the patient's consent.*

In most cases, employers are not allowed to access a patient's medical records.

The employer may obtain access to an employee's medical records but only explicit, written permission. However, HIPAA does not cover healthcare information collected separately — for example, through HR surveys.

Myth #5: **Patients can sue healthcare providers for violating HIPAA**

Power to the people! You break the law, and you get sued. It's common sense. Common folks need to have the ability to sue healthcare providers for not complying with HIPAA regulations, right?

**FACT:** *Even in case of a violation of the HIPAA Privacy Rule, patients cannot sue healthcare providers.*

It's all about steady justice. If a healthcare provider fails to comply with HIPAA privacy regulations, you must file a written complaint. If there are reasonable grounds to investigate the complaint, the Department of Health and Human Services may do so at its own discretion.

Best-case scenario, there may be some civil penalties and criminal sanctions imposed on the healthcare provider. But you, as a patient, don't have as much of a say as you might've hoped.

Myth #6: **A Doctor Cannot Send Medical Records to Another Doctor**

As the source and the supposed owner of your medical records, it should go without saying that this information cannot be transferred to another doctor without your consent.

**FACT:** *A doctor can send medical records to another doctor without your explicit consent.*

As long as the goal of sharing the protected information is in the patient's best interests, no consent is necessary.

The Privacy Rule of HIPAA states that healthcare providers are allowed to disclose protected health information to other providers for the purposes of treatment, payment, or healthcare operations with or without the patient's permission.

And while we're on the subject, a healthcare provider may also disclose medical information to a family member, relatives, or any person identified by the patient. The medical information, however, needs to be directly relevant to this person's involvement with the patient's care or payment.

### Myth #7: **Hospitals are required to give you your records**

Since it's your healthcare information, it only makes sense that you should have unlimited access to it, right? You should be able to obtain it as you please, no questions asked.

**FACT:** *It's a bit more complicated than that.*

You absolutely have the right to request medical records, but this doesn't guarantee you getting all, or even any, of your records.

Some records may be deemed too harmful for you — for example, mental health records — and as such, you may be denied access to them. Then again, there needs to be a reasonable assumption that exposing you to this information may prompt you to harm yourself.

Otherwise, as long as you follow all of the required steps, you're more than likely to get copies of your medical records. And if you don't, healthcare providers are obligated to notify you in writing.

### Myth #8: **HIPAA prohibits calling out patients' names**

Is there more personal information than an individual's name? Surely, HIPAA must discourage healthcare providers from calling their patients using their own names.

**FACT:** *The Privacy Rule explicitly permits certain incidental disclosures that occur as a by-product of an otherwise permitted disclosure.*

The disclosure of a patient's identity to other patients in a waiting room is treated as one example of such incidental occurrences. Naturally, there still need to be reasonable safeguards to protect confidentiality, and the purposes of such disclosure need to be strictly related to treatment.

Certain types of treatment — such as psychiatry, fertility treatment, etc. — require additional focus on protection of confidentiality. However, this still doesn't mean that HIPAA requires changing treatment or waiting areas to accommodate these regulations.

You can also debunk this myth with the fact that Qminder has been HIPAA-certified, despite the use of visitor names being the central focus of its technology. Displaying names, especially when limited to first names and/or initials, does not breach the Privacy Rule — nor, for that matter, do sign-in logs, patient names on hospital doors, or publicly available treatment schedules.

All of these cases are well within the application of HIPAA privacy regulations.



# Final thoughts

Focusing on both patient and medical staff experience is no longer a luxury but a necessity for medical service providers if they are to stay competitive.

When it comes to providing comfort and experiences to patients, there isn't a single aspect that you should overlook. From the way you greet your patients to the way you treat your staff, everything affects how your service is portrayed as a result. Even something as unlikely as waiting lines can have disastrous butterfly effects on the overall picture.

Although this may sound quite intimidating — *"Take ownership of everything!"* — there's no need to go through the nine circles of Hell to see it through. Remember the title of this ebook? Bringing healthcare into the digital age is what it's all about.

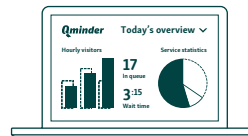
Embracing digital technologies and incorporating them into healthcare experiences is the only way forward, especially for an industry whose wellbeing is so closely linked to technological advancements.

This love for innovation is what inspired *Qminder* in the first place.

# About Qminder

*Qminder* is a digital queue management tool that helps companies attract and retain customers through smooth queuing and customer service experiences. In the context of hospitals, this means a higher level of care, right from the moment your patients first step in.

*Qminder* is a 2-in-1 package that focuses both on queue management and the Service Intelligence behind it.



## Queue Management

- ✓ Greet, inform and interact with your patients
- ✓ Cut the waiting times of your patients
- ✓ Guide and notify patients via TV and SMS
- ✓ Monitor patient traffic

## Service Intelligence

- ✓ Empower your staff with visitor data
- ✓ Identify and resolve service issues before they arise
- ✓ Feed all the data into your CRM or BI system with the API integration
- ✓ Personalize your service to patients based on their individual history
- ✓ Employee performance reviews based on service quality

All of that — and more! — is packaged into an easy-to-use design fit for the modern day. Simplicity is behind every facet of *Qminder*, as it requires no training and no tech support team to handle it. This makes it perfect for staff that want a hands-on approach to servicing visitors without investing too much time and effort.

## What our clients say

Over the years, we have worked with healthcare leaders and innovators:



Here's what some of our clients in healthcare think of *Qminder*:



**Qminder has been the perfect solution. It helps us accurately identify the time between when patients actually walk in the door to when they finish their paperwork.**

**Jamey Felsing**, Director of Information at Children's Specialty Center of Nevada



**Simple, straightforward, had the features that we were looking for initially but also, there's no install, and didn't have interference with our system.**

**Bryan Lords**, Business Analyst at St. John Medical Center



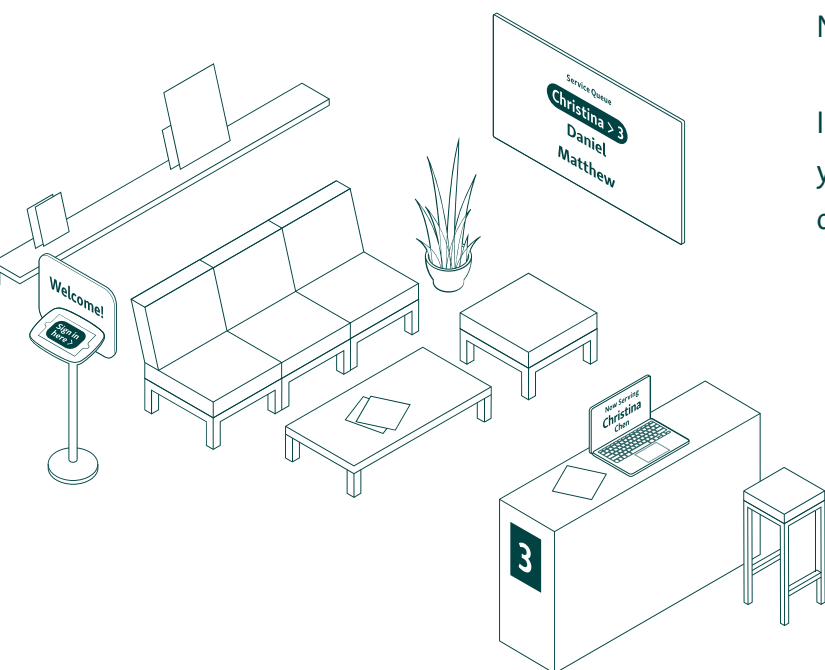
**Qminder has brought transparency and efficiency to our check-in process. We are now meeting key internal metrics for wait times and successfully manage staffing thanks to the the data based on patient volumes.**

**Mark Hylen**, Vice President at Beacon Occupational Health and Safety Services



**Qminder has most drastically improved the workflow of our phlebotomy draw station. There are no more patients waiting in line to sign in on a paper sign-in sheet. Plus, Qminder allows us to triage patients, which was not possible before.**

**Christina Lathrop**, LIS Analyst at Day Kimball Healthcare



Not a bad company to hang out with, right?

If you want to achieve the same results and give your patients and staff the experience they really deserve, **give our free 14-day trial a try.**