

## PHYSICIAN DENTIST SUPPORT STAFF

## **Patient Experience Coordinator (PEC)**

## **Annual Competency Assessment**

Name of PDSS Member:	
----------------------	--

JOB SUMMARY: The Patient Experience Coordinator (PEC) is an important member of the clinical care team and ensures patients and their families experience exceptional customer service in the Emergency Department. The PEC will provide on-going patient advocacy and customer service by completing customer service rounds to assigned patients and families, surveying patients on their experience, gathering patient responses into a database, making post-discharge phone calls to patients, and performing other tasks as needed that are focused on improving the patient experience. As the primary point of service recovery for patients, the PEC will effectively communicate any questions or negative patient experiences to the healthcare team. The PEC actively participates in all phases of the patient advocacy process with excellent customer service.

## **GENERAL RESPONSIBILITIES**

GENERAL RESPONSIBILITIES	<u>MEETS</u>	<b>DOES NOT MEET</b>	NOT APPLICABLE
	<b>EXPECTATIONS</b>	<b>EXPECTATIONS</b>	
Consistently demonstrates the			
Hospital's core values and patient care			
expectations			
Improves patient satisfaction survey			
scores and increases survey response			
rates			
Conducts customer service rounds			
Effectively communicates complaints,			
questions and patient issues to the			
clinical care team			
Proactively ensures patient and family			
needs are met			
Collaborates in navigating patients			
through the complete continuum of			
care (needs ranging from minimal			

to complex), and looks to identify			
areas of opportunity to improve the			
process		_	
Identifies opportunities for improving			
the process and incorporates it into			
the feedback process for operational			
team to address			
Develops appropriate relationships			
with ED staff and the clinical care team			
to maximize the patient			
experience across departmental and			
physician/provider lines			
Evaluation Date:			
PDSS Member Signature:	 		
Sponsoring Physician Name:			
Sponsoring Physician Signature:			