

MENDS

Resource Sheet

Collecting patient experience data

This document provides additional information and resources about the following community-generated recommendation for hospitals:



“Constantly review patient feedback. Use a tablet with nurse/provider pictures and names to collect patient feedback during the discharge process (“feedback tablet”). Feedback can be anonymous or not.”

The Current Challenge:

Collecting patient feedback is essential to understand how patients experience care. Obtaining high quality patient experience data on maternal care is an emerging state-wide and federal priority. The California Maternal Health Strategic Plan, published July 2025 by the California Maternal Quality Care Collaborative (CMQCC), emphasizes the importance of collecting hospital patient feedback after labor and delivery.¹ However, **currently there is no widely accepted best practice for measuring patient experience in perinatal care²⁻⁹ and response rates for widely-used patient satisfaction surveys (e.g., the current HCAHPS) historically under-survey patients from minoritized backgrounds.** As such, most hospitals lack the robust high-quality patient experience data they need to guide care improvement efforts.^{10,11}

How the MENDS Community Recommendations could help:

During our sessions, community members emphasized the importance of being able to share both positive and negative feedback not only on their experience overall, but also about a specific provider or nurse – something that current measures of perinatal care do not include. Specifically, they recommended that hospitals deploy a “feedback tablet” – a digital device such as an iPad or similar – with provider pictures and names to collect patient feedback during discharge.

While there is no published precedent that we are aware of for tablet-based provider feedback in the inpatient perinatal space, tablet-based surveys have been shown to improve the collection of patient experience data among lower literacy patient populations in primary care settings.¹² Real time feedback delivered using digital technology has been well accepted by patients and staff.¹³ Additionally, research shows that patients can better remember and identify their providers when they are provided with a photo of them.^{14,15} Embedding such practices into feedback collection efforts may make evaluation more accurate and actionable, particularly

for meeting the needs of patients from communities most burdened by inequities.

Implementation Considerations & Strategies

We recommend that hospitals explore both how to collect accurate, timely feedback on perinatal care experiences and how to ensure that providers review and take action on the feedback they receive. We suggest the following strategies:

- **Identify ways to integrate tablet-based feedback collection, featuring pictures of the clinical team, at discharge:** Our community experts strongly recommended that hospitals collect patient feedback via a tablet that includes photographs of providers and nurses who cared for patients, so patients can provide clinician/staff-level feedback if desired, and to do so anonymously per their preference. Patients preferred that this survey be delivered at discharge as they were concerned that giving feedback earlier in the course of care may have impacted the quality of care they received. Your hospital may have internal resources or existing partnerships to facilitate digital survey development and implementation. If it does not, scholarship on the development of one tablet-based feedback survey identifies [Tickit Health](#) as a vendor for such work.¹²
- **Select a compelling measure of patient experience:** In addition to inviting patient feedback on the care of the clinical team members, hospitals may wish to collect data on the overall patient experience of the maternity care received. A number of promising measures of patient experience of perinatal care exist, or are in development, but there is to date no widely accepted best practice for measuring patient experience in perinatal care.²⁻⁹ (A helpful overview of validated tools to measure patient experience of respectful maternity care can be found in Table 3 of Cantor et al, 2024.² Other patient-reported measures shown to affect childbirth hospital satisfaction are included in the Childbirth Experience Survey [CBEX]).¹¹ Additionally a forthcoming inpatient maternal health care survey from the Agency for Healthcare Research and Quality (AHRQ) may provide new insights for quality improvement.¹⁶ As these instruments do not elicit the clinician- or clinical team-level feedback that community experts recommend, hospitals will need to ensure such questions are added separately. Hospitals should work with community partners to select an experience measure that is acceptable and useful to the local context.
- **Ensure that clinical teams and individual members review feedback:** Unit leadership may choose to review and improve existing workflows when implementing new feedback protocols to ensure that clinical team members, managers, and leaders have the opportunity to review and take action based on patient feedback.

Note: *This is a dynamic resource sheet that will evolve as more evidence becomes available on interventions that support this recommendation. Last updated January 2026.*



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