



WHITE PAPER

# Effortless care experiences

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Health systems have always put their best foot forward in the exam room, and patients are grateful for it. This is starting to show in the data. National overall hospital ratings in HCAHPS surveys have increased by a full ten points since 2008.<sup>1</sup> That's quite a milestone—but healthcare leaders shouldn't be celebrating yet.

Satisfied patients aren't necessarily loyal patients. In fact, patients today are more likely to change providers than they've ever been. According to new research from NRC Health and The MetroHealth System in Cleveland, 80% of patients reported that they'd switch providers for "convenience factors" alone.

This could have startling ramifications for health-system operations. Losing just one patient can cost a hospital \$1.4 million over the patient's lifetime.<sup>2</sup> In a hyper-competitive landscape, where system consolidation and declining reimbursements are narrowing margins, no healthcare organization can countenance that loss.

If 80% of patients are willing to walk away for convenience, it behooves health leaders to ask: How can we decrease effort to increase retention?

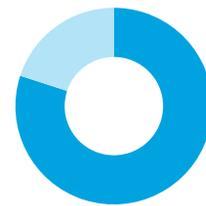
## Defining the problem

MetroHealth's Chief Experience Officer, Sara Laskey, MD, has studied the issue for some time. "We know that patients are demanding a more convenient way to acquire care," she says, "but what's not always clear is what 'convenience' means to them."

Dr. Laskey and her team long wrestled with that ambiguity before she found an effective way to reframe the issue. Instead of asking her staff about "convenience" or "patient experience," she captures what patients want with one, simple question: **"What can we do to make the care experience easier?"**

It's a small semantic shift, but for staff at MetroHealth, it captured the frictionless, pain-free experience that consumers want from their providers—and more importantly, it called attention to the moments when they could have made the care experience easier from the patient's perspective. This enabled them to systematically eliminate points of pain or friction and bring the overall experience closer to what patients expect.

### The importance of earning loyalty



**80% of patients** reported that they'd switch providers for "convenience factors" alone.

# \$1.4 million

is one patient's lifetime healthcare value

Dr. Laskey believes that every health system could benefit from drawing effortless care into their analytical framework. To achieve real change, however, they will have to be thorough.

Health leaders need to understand why their organizations may be overlooking ease, and identify the obstacles that prevent them from pursuing it. Only then can they target specific arenas for intervention and modernize their offerings to meet or exceed patient expectations.

## Why healthcare is hard for patients

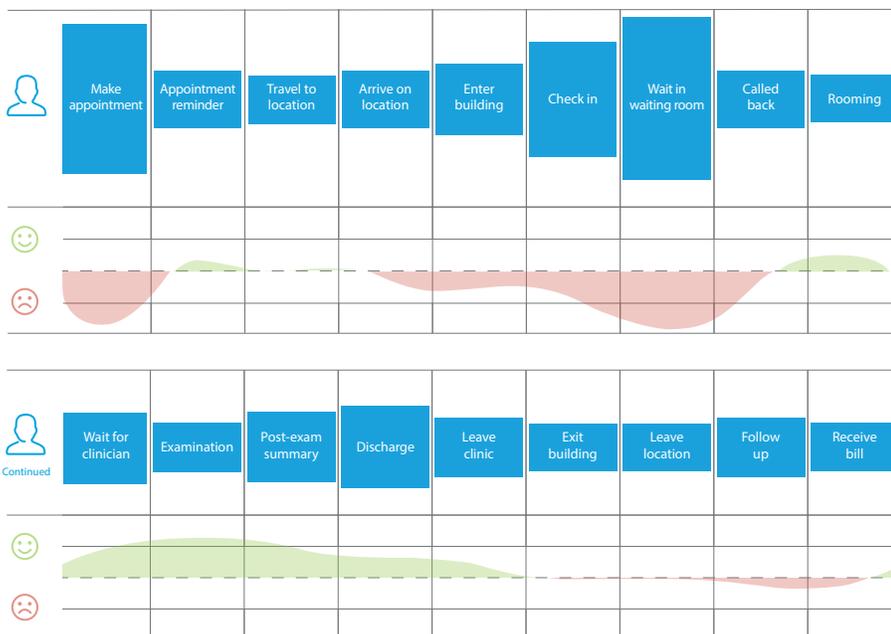
The advent of CAHPS surveys motivated a single-minded approach to improving the care encounter. Healthcare organizations made sure that patients felt well cared for once they stepped past the hospital doors. And overall satisfaction scores show that they've succeeded.

But healthcare's ancillary encounters have not shown the same improvement. Hospital websites, check-in procedures, appointment-setting, and post-discharge follow-up have all lagged behind.

To examine this phenomenon more closely, Dr. Laskey and her team created a journey map to spot the peaks and pits of MetroHealth's outpatient experience. The result is utterly unambiguous: MetroHealth patients loved the time they spent with their providers, but felt frustration with almost every other aspect of the healthcare experience.

**Figure 1.** Outpatient Journey Map

*Created by Dr. Laskey to detail the peaks and pits of MetroHealth's outpatient experience.*



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As Dr. Laskey puts it, “We now have data to show that we can’t ignore factors external to encounters with providers.”

Despite the clarity in the data, it’s not immediately obvious why patients should be so frustrated. The reasons become clearer, however, once you look outside the healthcare space.

In almost every arena of the economy, firms have made tremendous strides in providing a seamless customer experience. This is as true for the nimble online-services sector—companies like Amazon, Uber, and Facebook—as it is for staid, old-guard companies in banking or air travel. These companies give their customers fool-proof mobile apps, streamlined web design, and the information that matters most to them, when it matters. Truly, across most of their transactions, customers have never had it easier—and with all this innovation happening around them, patients can be forgiven for wondering, “Why can’t my hospital make their appointment-setting system work?”

### THREE FACTORS HAVE MADE HOSPITALS RELATIVE LAGGARDS IN CUSTOMER SERVICE INNOVATION.

First, healthcare innovation has rightly focused on improving clinical quality. A worthy pursuit, of course—but it may have come at the expense of simplicity in customer transactions.

Further, healthcare comes with unique entanglements that other industries needn’t wrestle with. Profound liability, privacy, and ethical concerns mean that healthcare organizations must move more deliberately than their disruptive contemporaries. Healthcare is not Silicon Valley; a hospital cannot and should not “move fast and break things.”

Another reason hospitals have not advanced their customer service is perhaps the simplest: there’s been relatively little pressure to change. In the past, many hospitals could depend on a captive audience. There were few credible threats to their market share. Further, whereas conventional firms are consistently assailed by disruptive upstarts, most healthcare firms enjoy nearly impassable barriers to entry.<sup>3</sup> The lack of competition has so far likely stymied the impulse to innovate.

But that’s beginning to change. Patient demands are beginning to upend industry conventions and threaten the hospital’s primacy in the landscape. Retail clinics have seen astonishing growth: the number of clinics has surged by 500% since 2006,<sup>4</sup> and over 30% of patients have come to rely on them for primary care.<sup>5</sup> 68% of patients are exasperated by healthcare billing processes, and are pressing for more convenience.<sup>6</sup> And 20% of them say that if they’re forced to continue waiting too long for care, they’ll switch providers.<sup>7</sup>

This confluence of trends suggests that patients are eager for easier care experiences. So how can health leaders overcome the inertia and give patients the effortlessness they’re asking for?

## Patients seek transparency and easier care experiences, fueling retail clinic growth



500%

retail clinic growth since 2006



30%

of patients have come to rely on retail clinics for primary care



68%

of patients are exasperated by healthcare billing processes



20%

of patients report that they will switch providers if forced to wait too long

# Three Steps to Ease

Dr. Laskey offers three suggestions.

## 01

### First, health systems should come to a thorough understanding of their patients.

This may not come naturally. For the most part, healthcare is an episodic business, and health systems ordinarily only see their patients as care needs arise. Such sporadic encounters often leave organizations with a fragmented grasp of their customers.

It's therefore imperative for them to broaden their perspective. A consumer's relationship with a health brand is not restricted to what happens in the exam room. A health system will do well to examine other points of interaction—a hospital's digital outreach, for example, or its philanthropic footprint in the community. Aside from forging better relationships with patients, these efforts can improve the state of care itself, according to the American Hospital Association.<sup>8,9</sup>

A journey map, like Dr. Laskey's depicted in Figure 1, can also be enormously useful. It identifies specific points of friction that customers encounter along their care journey. Once these have been identified, healthcare systems will know where to direct further investigation.

## 02

### If breadth informs the first step, the second step demands depth.

The above efforts will reveal *where* problems occur, but it's just as important to know *why*. For this, there's no substitute for in-depth feedback from patients.

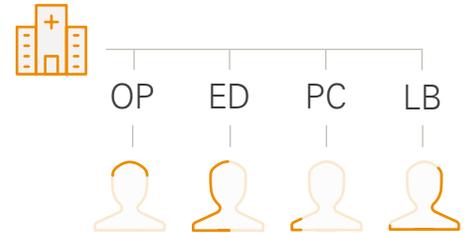
Conventional feedback mechanisms, however, fall short of what's required. Most surveys restrict themselves to closed, multiple-choice questions that don't always capture how patients really feel.

Dr. Laskey points out a good example. "For emergency-room patients, the question, 'Overall, how do you rate your satisfaction with your emergency department experience?' is not going to tell me what I need to know," she explains. "It doesn't break down their experience into meaningful steps, and it doesn't solicit candid answers. If their emergency was resolved, they'll say that they were happy with their experience. That's not necessarily useful to me."

Instead, she suggests that organizations take a more sophisticated approach.

## We need to think differently.

### TODAY



Today, healthcare organizations tend to be structured in silos, and operate in an episodic business approach. Each department may only have bits and pieces of information about each patient, and no one is sharing that information, giving the organization a fragmented picture of their customers.

### TOMORROW



Healthcare organizations should broaden their perspective and get a more holistic impression, examine other points of interaction, and put the patient at the center of their focus.

Open-ended questions, asked immediately after a care experience, tend to draw out what patients are really thinking. From there, natural-language processing, sentiment analysis, and pattern recognition pinpoint specific concerns that patients have about a system’s service.

Natural-language processing aggregates patient responses into a statistically parsable body of words. This enables efficient analysis of patient comments, making it easier to pinpoint specific arenas of customer frustration. Leaders will be able to see, for instance, how often words like “annoyed” or “angry” (as well as other, subtler terms) come up in patient comments—and more importantly, they’ll be able to see which service areas elicited those reactions.

**This allows a health system to gauge how its patients really feel, from their own candid responses—and points the way toward specific, effective interventions.**

It’s also important to consider not just the sentiment but the weight of the sentiment (i.e., how many comments of a certain kind have arisen, and from what sources), in order to fully develop a plan that aligns patient needs and wants with system values and targets.

**03 Finally, with this new intelligence in hand, health systems can reform their services to better provide the ease their patients crave.**

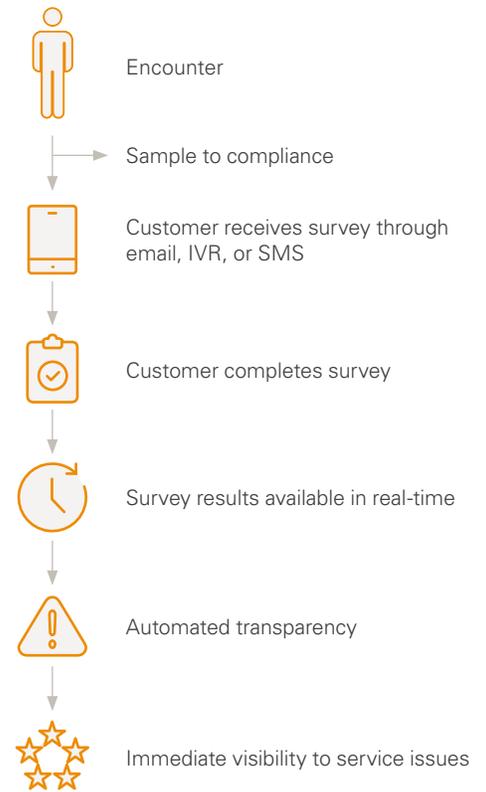
This could mean adopting platforms and services that improve the organization’s digital interface. Appointment-setting services and online billing are typical areas of concern, but organizations may also want to examine their websites’ overarching user interface—a common source of frustration for consumers.

Meaningful change might also entail shaving down wait times. As Dr. Laskey’s journey map shows, these are some of the most-cited sources of customer annoyance with providers.

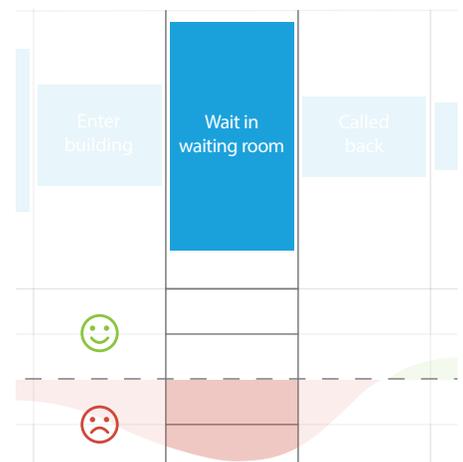
Of course, some waiting is inevitable. But in many cases, health organizations can shorten it or make it less painful. Patients will be grateful for any efforts in that direction.

And these considerations shouldn’t stop at the hospital or clinic’s doors. The period immediately after care can be extremely distressing for patients. Patients can also become confused about their post-discharge care instructions, which increases their risk of readmission. A well-planned transition clinic can mitigate that risk<sup>10</sup> and improve patient satisfaction.<sup>11</sup>

**The ability to get your patient feedback in real-time empowers you to understand and act on an experience while it still matters.**



**The most-cited source of customer annoyance with their provider:**



# Sustaining the Change

These solutions, of course, are only the beginning. Delivering effortless experiences to customers is a long-term objective, and the efforts to sustain it must be continuous—healthcare organizations’ futures may depend on it.

That’s why Dr. Laskey emphasizes the need to keep ease in the conversation when communicating with staff. **“I always ask them, ‘What’s one thing you can do today that will make care less challenging for your patients?’”**

She recommends that other organizations follow MetroHealth’s lead. Health organizations that make care easier to access, understand, and acquire will have a decisive advantage in the healthcare marketplace. And considering the competitive landscape, health leaders should be attentive to any advantage they can get.

## ABOUT THE AUTHORS

### Sara Lehman Laskey, MD, VP, Chief Experience Officer, MetroHealth System

Dr. Sara Laskey, MD, was named the first Chief Experience Officer at Cleveland’s MetroHealth System in late 2013. She is responsible for the leadership, design, and implementation of initiatives that fulfill MetroHealth’s people-centered mission and vision. Through innovative programs, Dr. Laskey and her team elevated and transformed the MetroHealth service experience, reaching new levels of system-wide consistency.

Dr. Laskey also serves on the Executive Board of The Beryl Institute and is an active attending physician in the Emergency Department at MetroHealth. Additionally, she is an assistant professor at Case Western Reserve University School of Medicine.

### Steve Jackson, President, NRC Health

Steve Jackson serves as President of NRC Health. He joined NRC Health in September 2014, bringing nearly 20 years of experience advising health systems in a variety of terrains including patient experience, physician engagement, and patient access.

As President, Steve oversees company strategy and NRC Health’s portfolio of solutions that bring Human Understanding™ to healthcare. Today, NRC Health enables more than 75% of the Top 200 U.S. health systems to better understand the people they care for and design experiences that inspire loyalty.

Prior to joining NRC Health, he held roles of increasing responsibility at Vocera Communications, The Advisory Board Company, Neoforma, and Stockamp & Associates.

## The Three Steps to Ease

- 01 Thoroughly understand your patients.
- 02 Understand, in detail, the feedback your patients are sharing with you.
- 03 Reform your services to achieve the ease your patients crave.

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