Voices Behind the Data

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Provided a brief outline of what will be covered in the session.

Listen.....
What are your first reactions?
What words stuck out for you?
What messages did you hear?
Learning Objectives

1. Understand the importance of connecting data with individual experiences of customers.
2. Use the *First Voice* of patients to reinforce the themes presented by traditional data reports.
3. Make data practical and relevant to the work done every day by front-line staff.
Loyalty Drivers - Press Ganey 2019 white paper: “A Unified Approach to Driving Patient and Physician Loyalty”

- Caregiver teamwork (IP and CG)
- Staff cared about them (ED)
- Respected by physicians
- Treated courteously by physicians and nurses
- Caregiver responsiveness

- …the why not the how
  - “People don’t buy what you do, they buy why you do it.” Simon Sinek’s 2009 “How Great Leaders Inspire Action” TED talk

- **Outpatient**
  - Confidence in provider
  - Worked together
  - Concern for worries

- **Inpatient**
  - Staff worked together
  - Room clean
  - Nurses listen

- **Emergency**
  - Staff cared about you as a person
  - Provider kept you informed
  - Informed about delays
Loyalty Drivers

- From those studies and what you know about your data.....

What major themes emerge?
On the street interviews

Powerful and honest
On the street interviews

How do the First Voice words tie to patient satisfaction/HCAHPS info on what is important to the customer?

What do you hear that they are not saying?
Practical Application

- Start with the data – know your greatest opportunities for improvement.
- Gather *First Voice* information that centers on those areas.
- Either in person or on tape, present **real people with real stories** to drive home the data to your staff.
- Ask for feedback from staff – “How does this story make you feel? How does it fit into your daily work?”
MMC’s story

- *First Voice* feedback works well when paired with other best practices.
- Remember you are in this for the long haul – the changes will not happen overnight.
- Often the changes are one staff person at a time – “lightbulb moment.”
- Slow and steady increases are what you want and need. Not peaks and valleys.
MMC’s story

- Patient Family Advisory Councils
  - Get first hand information
  - Give them key messages to spread in your community
  - Ask them to talk with people about key issues
- Rounding
- Discharge phone calls
- Bedside shift report
- Employee Engagement
- Physician Input
MMC’s story

Service Pillar of Success
Data Comparison on HCAHPS Voice of Our Patient

- HCAHPS Global “Rate the Hospital” Top Box
  - 2013: 71.8
  - 2015: 77.6
  - 2018: 83.8

- HCAHPS Global “Recommend the Hospital” Top Box
  - 2013: 66.7
  - 2015: 72.6
  - 2018: 81.2

- HCAHPS Global Overall Top Box
  - 2013: 70.1
  - 2015: 74.8
  - 2018: 81.5
On the street interviews

The voices are powerful. And honest.

How do the *First Voice* words tie to patient satisfaction/HCAHPS info on what is important to the customer?

What do you hear that they are not saying?
Practical Application
“Realities of Consumer Healthcare Choice in America”

Five Drivers:
- Compassionate care and customer service are significant choice drivers. One in five who switch, change because of poor service experience.
- “Every day” health guidance is a significant opportunity, but local providers face significant challenges from awareness issues and new competitors.
- Millennials are more sensitive to service issues and more open to utilizing other resources for health information.
- Healthcare costs are secondary drivers for choice, but there is high anxiety around the future costs of healthcare.
- The primary care physician is still the most used and influential source for healthcare decisions—by a wide margin.
One last question:
If your health care provider really knew you, they would know what?

Over 800 respondents took the time to share their feelings with us, so we made a book.
If you only knew—

voices from the thin white (backless) gown
1,233 patients from across the United States gave us permission to listen—to the emotional and complex factors affecting the relationship they have with their healthcare provider. —to the deep feelings that can occur when they sit on an exam table (in that gown) waiting for their turn to get answers about their health.

We asked: If my healthcare provider REALLY knew me, they would know that...?
We heard from the young and old. The vulnerable, worried, frustrated, strong and hopeful. From patients who turn to you to keep them (and their families) healthy, to return them to health when they are injured or ill, and to help them maintain their dignity when their health is declining. They told us—
I like

My impression and confidence in you starts at the door.

To be called back promptly.

To be treated like a person—not just the next patient.

To have the final say in my treatment.

To be talked to in a language I can understand.
Listen

I want to make sure I understand everything you are saying.

I don't like to be patronized.

I worry, but I'll talk if you'll listen to me when I describe what's going on.

I want people that care about me.
I like the truth

Trust

We don't always believe what they say.

It is hard to gain my complete trust in their knowledge and treatment recommendations.

I trust her.
I am loyal

Devotion

My doctor has the ability to make me feel as if I am the most important person she is dealing with if I'm happy with a provider I will stick with them for life.
I like the truth

We don't always believe what they say.

Trust

It is hard to gain my complete trust in their knowledge and treatment recommendations.

I TRUST HER.
I am loyal

Devotion

If I'm happy with a provider I will stick with them for life.

My doctor has the ability to make me feel as if I am the most important person she is dealing with.
I have feelings
I need compassionate doctors

Mental Health

I have more mental health issues than they think
I am bipolar
I have a lot of anxiety
Not all anxiety is the same
I tend to get sad often
See me in totality

I want a strong say in my own healthcare—I am my best advocate.

I am seeking the most natural, low-intervention option possible.

I like being part of a team that solves the problem.

Research everything.
Ten Steps to hearing the *First Voice*

1. Trust them.
2. Stop talking.
3. Give up the controlled messages. Trust that you will get better work if you just…
4. Listen.
5. Let staff find their answers.
6. Really listen.
7. Let the data give you feedback, and *First Voice* give you direction.
8. I mean “you gotta listen.”
9. Sort through the noise and clutter to find the essentials.
10. ____________!
Marketing Application

- What does First Voice mean in your marketing efforts?
- How do we create an efficient way to find patient stories and patients willing to tell their story?
- How to get physicians to share?
- How do we handle negative experiences?
When your child is sick, your mama bear instincts are on full blast. You want to be seen as soon as possible, preferably by a pediatrician—a doctor specially trained to oversee the health of children from minor problems to serious illnesses. Now it’s possible, no growling needed on your part.

Call 218-739-2221 for your same day appointment in Fergus Falls. If you don’t have a pediatrician, find one today at LRHC.org.
Three Key Take-Aways

1. Find ways to gather and incorporate *First Voices* directly in your work – both in staff education and marketing. *First Voice* gets you the closest to real.

2. Tie opportunities in your data with real like experiences – both positive and negative.

3. Ask staff “how do *First Voices* fit into your day to day work?”
Questions?

Please be sure to complete the session evaluation on the mobile app!
When trust happens, voices rise.

(MMC Telestroke Video)
Kevin Stranberg, CPXP

- **Director of Strategy & Patient Experience | Memorial Medical Center**

- Kevin is highly regarded and recognized for his work as a speaker, strategist, trainer and facilitator. He serves as the Director of Strategy and Patient Experience for Memorial Medical Center; President of Stranberg & Associates; and Senior Consultant with The Baird Group.

- He has served in leadership roles for the Wisconsin Healthcare Public Relations and Marketing Society (WHPRMS) and the Society of Healthcare Strategy and Market Development, (SHSMD), an AHA affiliate. He has presented at conference for the Beryl Institute, the Society for Healthcare Strategy and Market Development and the Forum for Healthcare Strategists. Kevin is the recipient of the Professional Excellence Award from the WHPRMS and is a Certified Patient Experience Professional (CPXP).

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Marsha Hystead is chief creative officer and partner at Hailey Sault (hay-lee-soo) in Duluth, MN. Hailey Sault specializes in healthcare and cause-related marketing and exists to create a healthy world. Its clients include healthcare organizations and nonprofits across the country.

- Hystead has presented at SHSMD, ISHMPR, MASHMD, WHPRMS, the National Hospital Marketing Conference, AMA’s National Non Profit Marketing Conference She is the recipient of the American Advertising Federation’s Silver Medal for lifetime achievement.

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Bibliography/References

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  - Download at haileysault.com/SHSMD2019

- “Voices from The Thin White Backless Gown” booklet
  - Download at haileysault.com/SHSMD2019

- Press Ganey white paper: “A Unified Approach to Driving Patient and Physician Loyalty” 2019