# CONSUMER
# ENGAGEMENT
*Leading the way to innovation in health care*



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# CONSUMER ENGAGEMENT
## Leading the way to innovation in health care



*As part of its continuing series of Critical Conversations on the Changing Health Care Environment, the American Hospital Association (AHA) and its strategic business enterprise AHA Health Forum invited hospital administrators and staff to the AHA offices in Chicago to talk about consumer engagement in health care. Presenters included representatives from the AHA as well as hospital administrators who have introduced innovations in consumer engagement.*

Powered by the internet and other technology, and enabled and encouraged by changing attitudes and expectations as well as evolving payment systems, the rise in chronic illnesses and the growing realization of the importance of preventive health, consumer engagement is rising to the fore in health care.

Each year the AHA conducts an Environmental Scan to take the pulse of the health care field and explore trends that affect how hospitals and health systems deliver quality care in an environment of limited resources, competing priorities, and ever-evolving technology. For 2017, consumerism emerged not only as a key trend in and of itself, but also as a component or factor in other trends:

● **AFFORDABILITY** | Rising out-of-pocket costs mean that patients must make decisions about where and when to seek care. Making those choices requires consumer engagement.

● **COVERAGE GAPS** | High deductibles and other coverage gaps send consumers in search of health care prices — not an easy task. Choosing health care is much more layered and complex than choosing groceries or appliances.

● **HOLISTIC FOCUS ON HEALTH** | To treat patients more effectively, providers need to look beyond health care to other determinants of health and take a more integrative approach that combines nutrition, physical activity, and non-traditional health care services.

● **PAYMENT FOR VALUE** | Reimbursement increasingly relies on outcome and quality measures. Patients who are engaged in their own care generally get better faster while incurring lower costs, which adds up to the best value in health care.

● **NEW TECHNOLOGIES** | Technology plays a key role in the clinical and administrative sides of medicine. It also is a key force in engaging consumers in their own health care.

● **CHRONIC CARE MANAGEMENT** | Effective management of chronic conditions such as diabetes and asthma require direct involvement of patients and their families. Meeting the needs of these patients can result in better health outcomes and lower health care costs.

● **COMMUNITY BENEFIT** | Hospitals are learning more about their service populations than ever before. They're looking at their communities and assessing duplicative care as well as gaps in services. How can we make the health care system work better for our communities?

As a result, the conversation about consumer engagement in health care involves a growing cross section of departments: nursing, service line development, marketing and communication, imaging services, community relations, ambulatory services, patient safety, strategy, clinical integration, hospitality and telehealth. Crystal Vasquez, DNP, MS, MBA, RN, director, solution innovation at AHA Health Forum, sees this as a positive development: "Patients have always had a voice with the nurse," she said, "but now more people are interested" in what patients have to say about treatment choices and health care delivery.

## CONSUMER ENGAGEMENT IN HEALTH CARE

It's a common myth that consumerism doesn't affect health care like it does other fields, Dr. Vasquez said. It's true that people don't shop for arthroscopy or gallbladder removal like they do for a car. But increasing choices in the retail industry have raised expectations about health care choices. According to the 2015 McKinsey Consumer Health Insights survey, consumers have similar expectations for customer service — including delivering on expectations, making life easier and offering value — in health care as in other buying choices. Consumers want hospitals to provide great customer ser-

vice just like they do at the Apple store, Dr. Vasquez said.

"Consumers are driving the business. We can't assume that we know better," she added.

The health care field is catching on. Consumer preference is one of the factors spurring health care delivery beyond the traditional hospital walls. The goal of innovations such as "bed-less" hospitals, same-day care, outpatient chemotherapy and telemedicine is to meet patients' needs in more effective and accessible ways.

## CULTURE SHIFT

Making this shift isn't easy. Individual departments may make headway, but others may not. Different departments even within the same hospital may have very different consumer profiles — divergent demographics, habits and comfort levels with technology. What works to reach and attract consumers interested in the maternity department will be different from the audiology department.

As a result, one department may not know what the other is doing. "Different departments are working on different initiatives, and they're not as coordinated as you would like them to be," says Michael Busky, director neuro/CV and imaging services at Advocate Good Samaritan Hospital in Downers Grove, Ill.

The challenges expand in larger, multi-hospital health systems, especially those with facilities in more than one state. Just like individual hotels in a national chain, it's a tricky balance between meeting local needs and regulations, while recognizing central control. "Health care delivery is localized," one participant observed. "Corporate headquarters may have no clue how a 60-bed hospital in southern Indiana runs."

Commitment from top leadership is critical to making the culture and other shifts necessary to recognize and respond to consumer preference. But with all the competing priorities in health care today — cost saving, quality reporting, technology upgrades, population health, patient safety — it can be difficult to get on the radar. Some administrators will talk about the importance of the patient and meeting community needs; the real test is what happens to that line item during a budget crunch.

"Many of us work in an environment where physicians and administrators are still questioning the power of the consumer," said one hospital administrator.

But that's changing as patient engagement starts making an impact on reimbursement. Getting leadership on board is key to co-

ordinating efforts, getting staff buy-in, and building patient voices into how the organization works.

Many hospitals and health systems are creating patient advisory committees, conducting town halls, and recruiting community members to serve on different committees to ensure the patient's voice is built into policy and programs. Some hospitals are consulting with patients when planning new service lines or even designing new facilities. Another tactic is to employ data science models to analyze and understand local markets.
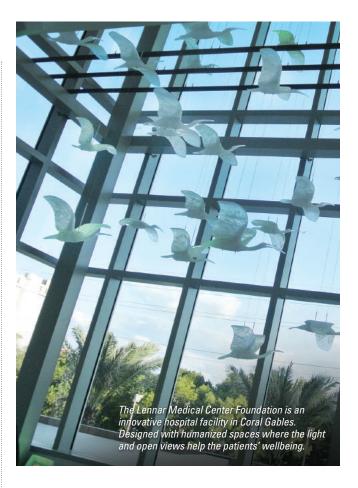
## EMPLOYEE ENGAGEMENT SPURS CONSUMER ENGAGEMENT

As critical as this input and participation is, though, you can't engage with consumers without first engaging the employees and providers within the health system — from the receptionists to clinicians to administrators.

"We cannot give a positive patient experience if our staff and our doctors don't like to go to work," commented Ben Riestra, chief administrative officer for the Lennar Foundation Medical Center, part of the University of Miami Health System. "It's as simple as that. … You have to take care of your employees so they can take care of patients."

Sunlight pours into the newly built Lennar Foundation Medical Center — not just in public areas but also the clinical areas. There's even a floor-to-ceiling window right by the operating suite. Breakrooms with videogames and other amenities for employees help them feel valued — which helps them convey that feeling to patients.

The physical building is important, but fostering human connections is even more critical in the health care environment.

Lisa Caradine, executive director, strategic marketing and communication at Northwest Community Health, observed the importance of "the human experience of saying good morning" is even more important in the fast-paced and high-pressure environment of



The Lennar Medical Center Foundation is an innovative hospital facility in Coral Gables. Designed with humanized spaces where the light and open views help the patients' wellbeing.

health care, where staff can easily become desensitized and disconnected from coworkers and patients. Recognizing the humanity in the people around us can help open eyes to the needs of patient populations as a whole.

As Deb Potempa, chief nursing officer at Mercy Health System in Tinely Park, Ill., pointed out, "You don't know what the person next to you is dealing with in their life. You have to be kind to everyone."

Before hiring people for Lennar Foundation Medical Center, Riestra screened potential employees for certain skill sets, such as a comfort with human interaction and an eagerness to help — basic customer service skills. But more often, hospitals can't start

CONSUMER

from scratch and hire all new employees, they have to work with the people they have. That takes training and modeling.

Treating people with respect has not been part of everyone's education or family history, Potempa acknowledges, and it takes some investment in staff to build the habit. At Advocate Good Samaritan, employees are encouraged to use the 10-5 rule: make eye contact with someone at 10 feet away, greet them with a "Hello!" at 5 feet. Some people may think this is insulting, but it helps to have a structure to instill these behaviors, says Busky.

Here again, leadership can play a vital role in modeling this in how they treat and greet staff, coworkers and patients. Yessenia Rodriquez, assistant director of hospitality operations, is one of those role models. She says staff members occasionally ask her, "Why are you so nice?" She encourages staff at University of Illinois Hospital to introduce themselves by name to patients and ask if there's anything they can do to help. At first employees don't see the point. But once a patient or family member comes back to them, calls them by name and asks for assistance, the human connection changes the experience for both people.

Involving staff and clinicians in process and program development also helps build a culture of consumer engagement. As Dr. Vasquez points out, we learned from the implementation of electronic health records to involve clinicians in any major process change. Dixie James, vice president of planning and business development at Einstein Healthcare Network in Philadelphia, said that getting support from staff — especially physicians — has been key to implementing the Einstein Direct program (see case study). "We had to curate a lot of support and buy-in for this," she said, including the front-line staff. "We had to explain why this was good for patients — and what's in it for them, too. We had to coach them through the process."

One hospital administrator told about one department's plan to meet consumer needs with extended hours. At first, employees resisted; the schedule change required a complete overhaul of their personal and professional lives. But once staff understood the thinking behind the shift, they could design a program that worked for everyone.

This is clearly hard but important work, the clinicians and administrators agreed. "We're changing the culture in an industry that is undergoing change," Riestra pointed out. Part of changing that culture and building an infrastructure for consumer engagement is celebrating the small successes along the way. ●

## A Sampling of Consumer-Driven Innovations

Consumer-driven innovations can be as simple as a "hydration station" with fruit-infused water or as high-tech as a customized wayfinding app. Here's a sampling of some of the ideas mentioned at the Health Forum Critical Conversation:

● Replace magazines and newspapers with **board games and puzzles**. Infection control may not like it, but patients and families do.

● Little Company of Mary Hospital in Evergreen, Ill., installed **queen-sized beds** in the maternity department so new families can easily stay together.

● One hospital created a consumer-driven campaign around treatment for **acid reflux**. Consumers took an online questionnaire to assess symptoms and see if treatment might be available. The promotion brought about 500 new patients into the system.

● Realizing that **millennials** have good physical health but are at increased risk for stress or mental health issues, Johns Hopkins medicine started an "I am listening" campaign to decrease stigma for seeking help.

● After hearing that patients couldn't come to the outpatient facility for follow-up treatment, one hospital decided to pay for a **ride sharing service** to close the transportation gap. Administrators are betting that the cost of the service will be less than the cost of missed appointments. ●

# A Sampling of Consumer-Driven Innovations

## The Lennar Foundation Medical Center, University of Miami Health System | Coral Gables, Florida

● **CHALLENGE** | University of Miami Health System is the only academic medical center in the Miami area. In other areas of the country, academic medical centers in this situation claim about 20 percent share of the health care market. University of Miami claims only 6 percent. The main hospital in the system is located in downtown Miami, but the bulk of area residents live outside the city and aren't willing to travel downtown for most of their health care. "We have created an incredible system that people can't access," says Ben Riestra, chief administrative officer of the recently opened Lennar Foundation Medical Center in Coral Gables.

● **SOLUTION** | The centerpiece of the U. of M. solution is a state-of-the-art facility on the Coral Gables campus (nine miles from the downtown hospital). The outpatient ambulatory care center is, in essence, a fully functional hospital — minus the beds. "It has the chassis of a 90-100 bed hospital," explains Riestra, including a full range of clinical services and Centers of Excellence, all available on an outpatient-only basis. The building was designed for easy access. From the first contact to make an appointment to the post-discharge meeting, the planners put the patient at the center of the process. Eye services are located close to diabetes care so that pa-
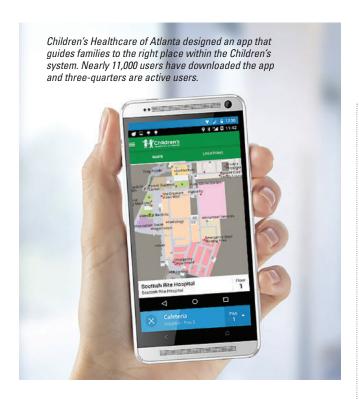
tients can easily move from one department to the next. Riestra calls it an interdisciplinary, multispeciality care model with a focus on the individual. Stainless steel walls in the operating room make it easier to modify and clean the space for a variety of procedures. An added bonus: the staff report feeling more "refreshed" after working in the space.

But accessibility is about more than building design. It's about feeling welcome and comfortable with the people. Hiring the right people — and providing the right training — was part of the human resources part of the equation. Instead of moving people from the downtown hospital, most of the staff at the new facility come from outside the organization. "This was very intentional," says Riestra. "This is a different model of care, a different way of seeing patients."

Technology also helps increase accessibility. Patients have a choice of registering with a staff member or at a kiosk — which saves time. Nearly two-thirds of patients choose the kiosk. The system takes a photo of the patient as part of the process. When the clinician is ready to see the patient, a staff member goes up and greets the person instead of yelling out the name.

A wayfinding app — developed by Gozio Health — fills in another piece of the accessibility puzzle. Guests can use the app to look up a U. of M. provider, make an appointment, and get updates about any delays or changes in appointment time. They also can access their personal health record and check test results. They can

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*Children's Healthcare of Atlanta designed an app that guides families to the right place within the Children's system. Nearly 11,000 users have downloaded the app and three-quarters are active users.*

look up the cafeteria menu, the schedule of musical performances in the lobby, or the names of the artists for the art on display in the facility. When they leave the facility, the app asks them a question or two about their experience — providing real-time feedback to staff about how well they met the guest's needs that day. ●

## CASE STUDY 2
### Children's Healthcare of Atlanta | Atlanta, Georgia

● **CHALLENGE** | Children's Healthcare includes three hospitals in metro Atlanta (a fourth is under construction), 27 neighborhood locations, 22 heart centers, eight urgent care clinics, and one autism center. The system had more than 1 million visits in 2016. Families enter the system from one of several entry points — including urgent care, schools, referring hospitals, pediatricians and specialists, etc. One point of contact makes it easy to call to make an appointment.

But families were still having trouble navigating the system — physically finding the different facilities, but also in knowing what services were available. An employee survey in 2014 revealed that staff — mostly nurses — were being pulled away from the bedside or from a train of thought at least one to two times a day to give directions or answer a logistical question. While administrators appreciated that staff took the time to help families, the interruptions still resulted in lost work time and potentially a threat to patient safety. Children's estimated the cost to the system at nearly $3 million per year.

● **SOLUTION** | Knowing that 78 percent of families use smartphones to conduct everyday business, Children's Healthcare of Atlanta decided to leverage this technology to create a "handholding experience" with an app that guides families to the right place within the Children's System.

The app — developed by Gozio Health — is designed to give families "driveway-to-driveway" guidance to accessing services at Children's. It gives families directions to the closest urgent care facility, lists current wait times, and even lets the family hold their place in line while they run an errand or grab a bite to eat. (It also provides lists of nearby restaurants.)

Without any external marketing promotions, nearly 11,000 users downloaded the app between September 2015 and April 2017. More than three-quarters are active users of the apps, and most have at least launched access to their child's personal health record. Feedback from families about the ease of finding their facility within the system has risen to nearly 100 percent positive by the first quarter of 2017. ●

## CASE STUDY 3
### Einstein Healthcare Network | Philadelphia and surrounding suburbs, Pennsylvania

● **CHALLENGE** | Einstein recently celebrated its 150th anniversary. The health system has two distinct but equally competitive markets: an inner city, largely government payer population that is expected to decline in utilization during the coming years, and a diverse and growing suburban market. In both markets, patients faced long waits for appointments (up to 70 days for a new patient appointment) and excessive travel time. Even getting someone on the phone was difficult because an antiquated phone system dropped calls. These two markets have very different needs, but Einstein's goal was to establish a consistent experience throughout the health system.

● **SOLUTION** | As one part of an overall strategy to increase access and improve the patient experience across the health system, Einstein has created Einstein Direct, a set of technology-based solutions that offer virtual visits, remote monitoring and online appointment scheduling. Einstein carefully chose the vendors and balanced costs and convenience for patients for each component to create a sustainable solution.

**Virtual visits:** This solution cuts out travel time and gives pa-

*The telemonitoring program at Einstein Healthcare uses supportive technology from Vivify to reduce the number of times patients need to travel to their providers for monitoring of their chronic conditions.*

tients easy access to board-certified physicians for routine care via desktop computer or mobile device. Using a simple and streamlined solution designed specifically for Einstein's needs by Teladoc, patients can connect to either an Einstein physician or a Teladoc physician within 10 minutes. Patients can enter their insurance information or pay $49 per visit. The program will launch in two phases: first to Einstein employees and their families, then to the wider public. The ROI on the employee roll-out is easy — as a self-insured company, it will be less expensive to keep the employees' care within the system rather than going to an outside urgent care or other emergency department services provider.

**Telemonitoring:** This program uses supportive technology from Vivify to reduce the number of times patients need to travel to their providers for monitoring of their chronic conditions, such as congestive heart failure, COPD, or diabetes. Home health nurses or emergency medical services crews visit patients in their homes to set up the technology and teach them to use it. Then, patients can easily report vital signs and other health information to their physicians so that changes in conditions are caught before they become emergencies. Reimbursement for telemonitoring varies by insurer; the largest commercial carrier in the area does reimburse, but Medicaid does not. But Einstein is hopeful that this will change and that the saving to patients and the system will be worth the expense.

**Online scheduling:** By combining online scheduling with service that helps connect patients with needed services, Einstein increased accessibility for current patients and built-in financial sustainability. Einstein introduced online scheduling through ZocDoc in 2015. The services have already resulted in 4,000 appointments, 40 percent of which were for patients new to the health care system. Einstein physicians listed on ZocDoc have gotten good reviews, and patient satisfaction with the service ranks consistent with top online retailers. ●

## CRITICAL CONVERSATIONS ON THE CHANGING HEALTH CARE ENVIRONMENT

In May 2017, the American Hospital Association invited health care leaders to participate in a critical conversation about the role of consumer engagement in transforming health care. Also participating were representatives of a selection of organizations whose solutions have been exclusively endorsed by the AHA. Here's a list of our sponsors: