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## The consumer has spoken: Patient experience is now healthcare's core differentiator

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### Abstract

In just a few days we will celebrate Patient Experience Journal's (PXJ) 4<sup>th</sup> anniversary since our inaugural publication. In these 4 short and quick years we have seen 163 articles published in our first four volumes that have stirred a significant focus on building the evidence base in patient experience. Not only has PXJ served as the central clearing house for thoughtful research, measurable cases, and insightful narratives, but it also has reinforced the breadth and depth of what patient experience truly encompasses. This integrated view was reinforced by the very voices of healthcare's consumers in The Beryl Institute's recent study on Consumer Perspectives of Patient Experience in which participants reveal experience is extremely important to them, focuses on individual health, is grounded in an individual's desire to be acknowledged and is identified as a key driver for healthcare decision-making. It is for this reason experience is found to be a critical differentiator in healthcare now and into the future. And it is on this foundation that the patient experience movement continues to grow, commitment continues to expand and the contributions of PXJ continue to push the boundaries of our overall conversation. That is the essence of our strength, that we find not only on these pages, or in the words of our many contributors, but also in the voices of all who are impacted by or part of the global healthcare ecosystem. There are few other efforts as honorable than to ensure the best for your fellow human being. In our rigor to push the edges of this conversation, we will continue to thrive together.

### Keywords

Patient experience, consumerism, consumer perspectives, choice, differentiator, strategy, outcomes

### An idea at the heart of healthcare globally

Welcome to Volume 5, Issue 1 of *Patient Experience Journal* (PXJ). In just a few days we will celebrate PXJ's 4<sup>th</sup> anniversary since our inaugural publication. In these 4 short and quick years we have seen 163 articles published in our first four volumes that have stirred a significant focus on building the evidence base in patient experience. Not only has PXJ served as the central clearing house for thoughtful research, measurable cases, and insightful narratives, but it also has reinforced the breadth and depth of what patient experience truly encompasses.

The articles we have published represent the multiplicity of perspectives across the continuum of care and across care settings, underlining all that makes healthcare both dynamic and chaotic. To overlook this complexity, the patchwork perspective<sup>1</sup> I recently described, would be shortsighted in a world where experience matters. In healthcare it matters that much more. To even a greater extent, the readership of PXJ has reinforced some critical points about the broader experience conversation. The first, no one person or organization owns the patient experience, but rather it is an opportunity owned by all committed to excellence in healthcare and by those who aspire to achieve the best in outcomes, while doing the best for those the system cares for.

The second, builds on that idea. Experience is not a national policy prerogative, though it may be driven as such in some places around the world. The reality of experience is it is a global point of focus across systems and settings, and while policy may have influence on some actions, it has not been and is extending well beyond an idea simply motivated by "must do" actions or incentivized efforts. There is a reason that PXJ is downloaded in over 200 countries and territories around the world and almost 10,000 times a month. This is not because experience is entertaining or a force requirement, but rather it is a fundamental idea at the very heart of healthcare itself.<sup>2</sup>

As we launch Volume 5, we find ourselves in the midst of Patient Experience Week 2018. The level of activity, the extent of reach and the examples of unwavering commitment have been evident in these last few days as healthcare organizations across the continuum and over continents have all joined together to elevate the patient experience conversation. While I do not believe anyone would assert this is the only week in which patient experience is important, it is something that requires relentless effort and continuous action, I offer that the opportunity to stop and acknowledge achievements big and small is important in our healthcare world today. More

so we are seeing patient and family members saying the same as well.

With that idea in mind The Beryl Institute earlier this year set out on an exploration of what really matters to consumers of healthcare. It is important here that we not get stuck on the word consumer, especially in conflating it with the word customer. I do not think anyone in healthcare today would suggest people in our healthcare facilities for the most part are customers in the traditional sense of the word, though as healthcare diversifies and care options expand the delivery side of healthcare is playing to that idea in an increasing number of ways.

Rather what I mean by consumer are those people who use the system. Whether they are in a private insurance driven environment like the United States or the variations of publicly funded programs in countries around the world. In any of these environments people still consume care and therefore to varying extents have some choice that comes with their healthcare decision-making. It was on this premise that we sought to explore consumer perspectives on patient experience overall.

### The consumer has spoken

As I noted, The Beryl Institute, in conjunction with research partner SMG Catalyst and corporate partner Studer Group conducted a global exploration to better understand consumer perspectives on their experiences in healthcare.<sup>3</sup> The intent of this was to understand to what

extent experience matters to people in healthcare, how they define it, what priorities they have in identifying a positive experience and the impact that experience has overall. The 2000 participants in the study represented 5 countries across 4 continents, from Australia to the Philippines, Canada to the United Kingdom and the United States. While I will not delve into every detail here, the conversation is of great relevance as we continue to expand the case for patient experience overall.

The key learnings from this exploration are simple in context, but significant for how healthcare needs to consider its future moves. What was learned is that 6 out of 10 consumers identified patient experience as extremely important to them as they defined it. While this was an important foundational finding, we took the participants deeper to understand what it was in experience that was most important to them.

In providing a number of angles with which to approach experience we learned a few key points from consumers.

1. Consumers validated the idea that patient experience from their perspective is the integration of much of what healthcare has worked to operate separately. Consumers reinforced that experience was inclusive of quality, safety service, cost and outcomes that drive decision making (Figure 1). This macro view of experience set the stage for much of what they revealed.

Figure 1. An integrated view of patient experience<sup>2</sup>



2. Consumers reinforced three core ideas about experience overall. That first and foremost it was personal and about their health. Second it was about how they were treated in their healthcare encounters and then third it was about the more transactional idea in care such as time and cost.
3. This connection to the personal was further exemplified in how consumers offered what was most important to them in considering their healthcare experience. In identifying the level of importance across almost 30 factors one could experience in healthcare, it was evident that the personal items were most critical to those considering healthcare experience. Consumers above all else are asking one thing, to be listened to. The top three items that stood out encompassed this idea, with the second and third highest ranked items “being communicated to in a way one could understand” and “being treated with dignity and respect”, respectively. The fact that three items about how people wanted to be engaged were elevated over the expediency or efficiency of process or the realities of physical environment also reinforced this idea.
4. Ultimately what consumers shared was a clear and practical realization. That for any experience good or bad the thing they will do above all else is tell others. That the means by which people look to make healthcare decisions is most significantly driven by the stories they are told and recommendations they receive. In essence underlining the central role for experience as the driver of differentiation, choice and ultimately the business reality for healthcare institutions

regardless of the nation they reside or the system they are part of.

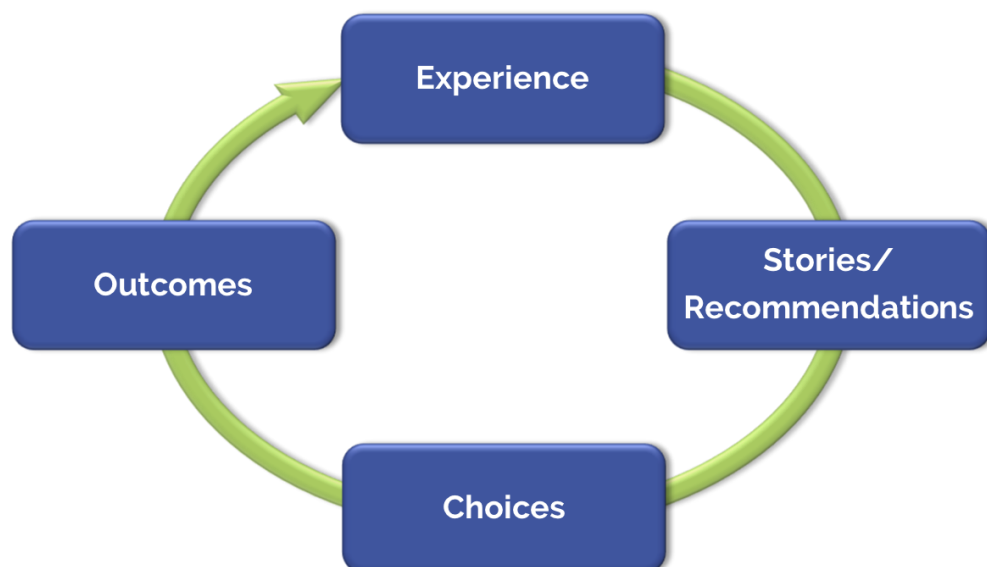
This reality, what I have dubbed the cycle of experience (Figure 2) exemplified a powerful loop that links experience to outcomes as a positively (or negatively) influencing cycle that can drive positive goodwill or negative reputations. This all will impact how healthcare organizations across the continuum will ground their viability overall. In these point we also found that while there are national and generational differences to some extent, the similarities far, far outweigh any distinction. This reinforces that consumers approach their healthcare experiences from the perspective of human being first. That is why a focus on the human experience will be the differentiator in healthcare today and into the future.

### **A differentiator for healthcare now and into the future**

If one believes that choice is a possibility in healthcare, acknowledging the varying degrees with which systems around the world provide choice, then the results of the study suggest something significant. There are real tangible implications for the experience we provide for those in healthcare. It also means that rather than narrowing our scope of what experience is, we must be willing to expand both our understanding and framing of the idea overall.

In this case, I define a differentiator as a distinguishing factor. This will be critical as consumers' expectations rise in a global market where healthcare is no longer compared to itself, but seen via lenses that are inclusive of cross

Figure 2. The Cycle of Experience<sup>3</sup>



industry and setting experiences from retail to restaurants and beyond. An executive leader panel I had the honor to lead at Patient Experience Conference 2018 made this point very clear. They said for all we do in healthcare that is expected of us in providing quality-focused, safe outcomes, people also want a top-notch experience overall, as the study data revealed.

With that it will not be through sustaining the baseline expectations that we will have an impact, but rather it will take a commitment to experience as differentiator that will drive and sustain long-term success. That is the opportunity we saw in the research data and continue to hear in a growing crescendo from healthcare leaders and consumers alike. This idea reinforces a simple point I posed now over 8 years ago. That experience is not about being nice or making people happy, it is not a fad that would come and eventually go. Rather it is all about a commitment to the human experience, to engaging the person in front of you, be they patient or family member or a team member or colleague. These may be the most important muscles we have to build in healthcare today.

### **A Look at Volume 5, Issue 1**

It is this building of muscles that is reflected again on the pages of this issue of PXJ. In our issue and in alignment with elevating the voices of the healthcare consumer, we see a powerful collection of pieces elevating the perspectives of patients and families in the overall experience. This is led off by an insightful commentary from the poetic Dr. Rana Awdish, who has shared her life-changing story and now brings a perspective to care she never expected to have. She opens with a powerful thought, “Like the power of water to erode rock, I had seen how even our well-intentioned efforts to treat could wound rather than heal.”<sup>4</sup> Her suggestion that we must elevate our awareness in caring for ourselves and others based on the core needs at the heart of our humanity sets the tone for the pieces to follow.

From the power of patient narratives and stories, and the opportunity to engage patients and families as partners and participants in decision-making, the content that graces the pages that follow not only calls us to think, but provides us the cases and the evidence to focus on what is truly right and what truly matters in healthcare overall. With global engagement and cross continuum perspective from exploring chronic illness from the personal lens identifying the important points of focus in mental health services and addressing the needs of veterans this issue again reinforces the breadth of all that experience encompasses. All the while we are reminded that in our drive for science, our subjects will always remain people with all the complexities that frame the affirming challenges of this work.

### **The power to listen and learn**

It is on the foundation of these affirming challenges that the patient experience movement continues to grow, commitment continues to expand and the contributions of PXJ continue to push the boundaries of our overall conversation. In many ways it returns us to what the consumers themselves revealed in our research findings, “listen to me” and “communicate to me in a way I can understand”. That may best summarize what our intention has been in our first four year at PXJ.

In listening to the work and ensuring what is published conveys not only new science, rigorous evidence and thoughtful narratives, but it does so in a way that makes this work accessible to all committed to elevating the human experience in healthcare. From the farthest reaches of the globe, to the furthest extents of the continuum of care, to active participants in healthcare, to those who find themselves thrust into a situation they would have never hoped to have, we all meet at this crossroads. Through PXJ we will continue to work in honoring all voices and expanding our capacity to listen, as our community and our global movement commits to learning from one another. That is the essence of our strength, that we find not only on these pages, or in the words of our many contributors, but also in the voices of all who are impacted by or are part of the global healthcare ecosystem. There are few other efforts as honorable than to ensure the best for your fellow human being. In our rigor to push the edges of this conversation, we will continue to thrive together.

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