

How Hospitable Health Care Can Improve the Patient Experience

PETER C. YESAWICH, PhD
Health Care and Hospitality Author and Consultant

Competition in the hospitality industry forced astute practitioners to discover and embrace new ways to reach, engage and listen to feedback from guests. The awareness led these professionals to develop comprehensive profiles of guests' preferences and consumption habits. This information has enabled them to anticipate evolving customer needs and desires, offer more innovative product/service options, reward customer loyalty and, ultimately, achieve enviable increases in customer satisfaction. Furthermore, the most successful hospitality industry providers accomplish this while making the consumption of their services easy, often in difficult circumstances. Can the same be said about health care service providers who share many common points of contact in service engagement? Unfortunately not, according to original research Stowe Shoemaker, PhD, and I conducted for our new book *Hospitable Healthcare: Just What the Patient Ordered!*

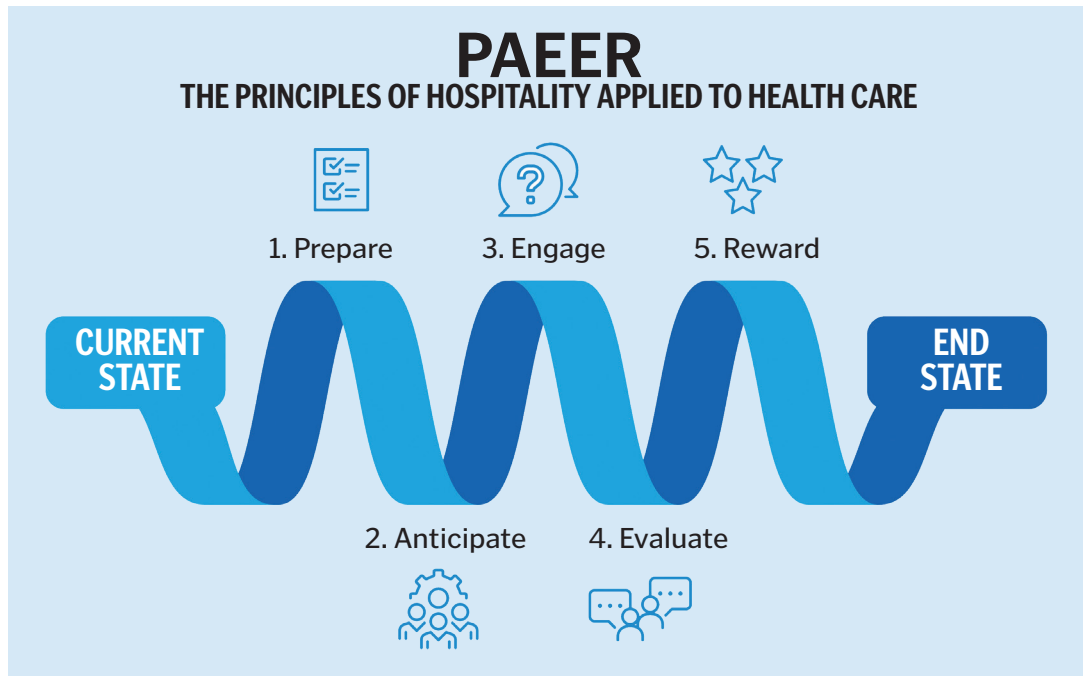
Some in health care argue that principles of hospitality have limited applicability to their profession because of the different reasons consumers cite when seeking both types of services. Specifically, they assert that health care services are “needed,” while hospitality services are “wanted.” This may be true for health care services sought in an emergency, yet not the case for countless nonemergency and elective procedures sought by patients for myriad other reasons. Further supported and revealed through data from our research, we assert that principles of hospitality are especially relevant when patients “need” emergency or urgent care because of their demonstrated ability to reduce the anxiety they feel when seeking such care.

REDEFINING THE PATIENT EXPERIENCE

Shoemaker and I examined prevailing attitudes toward service experiences in both health care and hospitality in a national survey of 1,200 adults. The survey measured their assessment

of 22 points of service engagement common to three groups of health care providers (hospitals, walk-in clinics and physicians' offices) and two groups of hospitality providers (hotels/resorts and restaurants). Composition of the survey instrument was guided by a relevant literature review and our professional experience working with widely admired hospitality industry service providers — including Hilton, Four Seasons, Ritz-Carlton, Canyon Ranch, Disney Parks & Resorts — and two prominent health care service providers: Cancer Treatment Centers of America (now City of Hope) and MD Anderson Cancer Center.

The research revealed five clusters of services for which a “hospitality deficit” exists in the delivery of health care, defined as a statistically significant difference in respondents' rating of their service experience in health care versus hospitality. These include, in descending order of magnitude: 1) not knowing or understanding the cost of the service before it is provided, 2) a lack of appreciation for “the business,” 3) poor arrival environ-



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ments and experiences, 4) poor service logistics and 5) recovery from poor service failures.

Much of the success the most admired hospitality brands enjoy is a direct result of their effort to deconstruct the customer experience into discrete, but complementary, disciplines and maintain a service culture that addresses each. They do this through service delivery informed by five sets of actions:

1. They “Prepare” for the arrival of guests by investing heavily in understanding their purchase patterns, preferences and profiles.

2. They “Anticipate” guests’ specific concerns and desires through ongoing sentiment research, which reveals how existing and previous guests feel about their experiences with the provider, whether positive or negative, and reasons why.

3. They “Engage” guests by creating welcoming environments and ensuring staff interact with them in a positive and respectful manner.

4. They “Evaluate” their performance against specific service quality benchmarks by soliciting and tracking guest feedback about the most critical points of engagement.

5. They “Reward” guests for their patronage to build brand loyalty over time.

These five disciplines coalesce to form a transformational model of service delivery we call PAEER (for Prepare, Anticipate, Engage, Evaluate and Reward, as shown by the graph on this page, and pronounced “pay-er”). We recommend health care service providers adopt this framework to address “hospitality deficits” at each step of service delivery.

In our *Hospitable Healthcare* book, Shoemaker and I reveal the magnitude of the hospitality deficit at every step and offer specific suggestions on how health care providers may adopt principles of hospitality to improve each phase of the patient experience.

Prepare for the arrival of patients.

1. Identify specific points of engagement through “patient experience mapping” that reveal where staff and patients interact. For each, have staff develop tactics to remind patients that they are receiving quality service.

2. When conducting patient research, ask questions that enable your team to develop comprehensive patient profiles and determine patient preferences that may be used to enhance the patient experience, most notably for nonemer-

gency patient visits. Examples include preferred days/times for appointments, contact times, language and method(s) of communication. Responding to patients' spiritual needs is foundational to understanding and anticipating their care preferences as well. Don't just focus on operational issues such as parking, wayfinding, clinic wait times, ratings of clinic/office staff, etc.

3. Remember, perception is reality. Hospitality service providers have used principles of consumer psychology, behavioral economics and revenue management to convert unfavorable perceptions into favorable ones. For example, the hotel industry gives customers the opportunity to decide which is more important when making a reservation: the nightly room rate or the desired arrival date. The airline industry has embraced the same approach to price its services for more than 30 years. I believe health care providers can and should do the same by offering variable pricing for elective services adjusted by day of the week and hour of the day (this would enable more flexible patient choice when scheduling while also enabling management to achieve more balanced patient flow and improved facility utilization).

4. Invest in the development of a patient customer relationship management (CRM) program. Such a program would encourage patients to reveal their likes, dislikes and other important information. You may then use this information to prepare for patients' arrival knowing their behaviors and preferences in advance, without having to ask again. Examples include preferred day/time of appointment, clinician (in a multiphysician clinic or practice), insurance, billing information, method of settlement, pharmacy and more.

Anticipate patients' expectations, anxieties and concerns.

1. Issue a prearrival projected estimate of the cost of the services to be provided, including the portion for which payment is expected from the payer versus the patient. Be sure to include all anticipated costs associated with the procedure, not just those of the main service provider. For example, in the case of a visit to the clinic that includes outside tests and/or other services, make sure these are part of the estimate.

2. Issue a prearrival appointment confirmation that includes introductory information on the expected clinical team (photos and short bios), "need to know" information about the planned procedure(s), administrative forms that patients

may complete in advance, and helpful information on parking and facility wayfinding. This will facilitate the check-in process upon arrival and preempt the "Do they know I am coming and who I am?" question contemplated by patients, oftentimes with considerable anxiety.

3. Create and maintain a welcoming arrival environment and experience. The "servicescape" you maintain at your facilities helps make the patient experience tangible. The physical aspects should reflect thoughtful environmental design, seating, textures, colors, lighting, music and scent. Staff should be trained to provide a welcoming environment in which teammates are genuinely eager to serve patients.

4. Introduce separate reception and registration areas for "new" versus "returning" patients and modify reception protocols accordingly. This is a simple but effective way of recognizing repeat patients for their patronage and continued support.

Engage with patients upon arrival.

1. Teach your team members the 14 key words of a service encounter developed by celebrated hotelier Edward Mady, former general manager of The Beverly Hills Hotel: "Remember me, recognize me, anticipate my needs, give me what I want on time."

2. Introduce an acronym that reflects your commitment to enhance patient satisfaction that is easy for your staff to recite and remember. Things easily remembered are more likely to be acted upon than those that aren't.

3. Develop and introduce service standards that specify the minimum level of service expected in each staff role, from receptionist to surgeon. These standards should be developed in collaboration with the employees who ultimately deliver the service and the patients who will be the beneficiaries of that service.

4. Ensure a connection between the service standards and your mission, vision and values. Repeated behaviors reflect the culture of your organization. Patients and staff members recognize if there is a disconnect between "what you say and what you do."

5. Present patients with a final bill that clearly explains the reason(s) for any variance from the estimate they received prior to arrival. Remember, engagement happens throughout the customer experience and customers usually remem-

ber the final interaction most vividly. This is typically when the bill is presented.

6. Minimize the use of incomprehensible jargon and communicate in layperson's terms so patients feel comfortable asking questions about things they don't understand. True engagement only occurs when two parties communicate with the same vocabulary.

7. Introduce a satisfaction guarantee for services for which the outcome is predictable and controllable (for example, clinic wait times, turnaround times for test results, etc.). Such a guarantee would communicate your confidence in the quality of the service experience you deliver and build patients' trust in your expertise. Positive engagement cannot happen without trust.

Evaluate the service provided.

1. Implement an ongoing program to solicit and review feedback from patients on the service they received within 24 hours of their visit. Ask patients to rate the relative "importance" of the aspects you are measuring in addition to questions about "performance."

2. Distribute feedback survey forms electronically (via email or text) for ease of completion with the assurance that all responses will be treated as confidential. In addition, make sure your file of completed responses is representative of your patient census for each reporting period. For example, if 20% of your weekly patients interact with you and your team on Tuesdays, make sure your sample of respondents reflects a comparable percentage over the course of the week under review.

3. Conduct sentiment analyses of postings about your hospital, clinic, practice or physicians on social media to determine the polarity (positive or negative) of comments, discover and address service failures, and replicate these analyses in a predetermined cadence (whether monthly or another time basis).

Reward patients to build loyalty.

1. Invest in a patient CRM program and continue to build and update patient profiles with personal preference information to enable enhanced recognition for patients on future visits.

2. Ensure patients are personally thanked for their patronage by all engaging staff prior to departure, then follow this with an email/text expression of thanks from management within 24 hours.

3. Invite patients to join a hospital/practice-specific "patient appreciation club" that rewards them for their patronage and encourages loyalty through privileged access to such things as complimentary health screenings, lectures, demonstrations and other incentives that can enhance their well-being.

4. Develop and introduce a hospitality-styled rewards program in compliance with regulatory requirements to encourage repeat patronage and build patient loyalty over time.

EVERY PATIENT INTERACTION CAN MAKE A DIFFERENCE

Does the application of principles of hospitality have a positive effect on the patient experience? There is considerable anecdotal evidence from our collective experience listening to patients respond to a question about whether they can recall a personal health care experience that "went wrong" and, upon reflection, realize the culprit is usually the manner in which their care was delivered, not the clinical outcome. Furthermore, the results of the research we conducted to write *Hospital Healthcare* and enviable Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) and patient satisfaction scores achieved by such patient-centric health care providers as Cancer Treatment Centers of America and Cleveland Clinic provide ample empirical evidence. Hence, more hospitable health care may be just what the patient ordered.

PETER YESAWICH is the former vice chairman of MMGY Global, an international marketing communications company known for developing marketing programs for major hospitality organizations, and chairman of Hospitable Healthcare Partners, a marketing consultancy serving health care and hospitality clients. He also served as a member of the board of directors and chief growth officer for the Cancer Treatment Centers of America.