THE EMPATHY IMPERATIVE

3 steps for driving human-centered healthcare experiences



Table of Contents

- **3** Healthcare is facing an empathy imperative
- **7** The ROI of empathy
- **14** Listening for emotion
- **18** Begin to understand
- **22** Act with empathy
- **30** Drive empathy at scale

Healthcare is facing an empathy imperative

Healthcare is facing an empathy imperative



If we were really listening, we would demand something different."

Dr. Adrienne Boissy

Healthcare has reached a tipping point. Facing financial pressures, a changing competitive landscape, and shortages in talent, the industry is pushed to its limits by the demands of the COVID-19 pandemic.

Exposing gaps in supply chains, communications, clinician wellness, and care delivery capabilities, the pandemic amplified the pain points of both patients and employees. The lack of access, ease, empathy, and partnership are making loyalty to any single organization wobble in the eyes of patients and employees. Overworked, over-exhausted clinicians struggled to rationalize the gaps between the healing they sought to provide and their current circumstance of limited resources and all too often *incivility*.

Meet your experts



Dr. Adrienne Boissy Chief Medical Officer



Hope McCain *Healthcare Senior Analyst*

Across all industries, organizations are being challenged to fundamentally rethink longheld understandings and assumptions to meet rapidly changing demands. We've known for some time that healthcare needs to change, and it has been slow to do so for a host of reasons, some more valid than others. Iterative improvements aren't enough. Clinicians are burning out at unprecedented rates. Employees are choosing to not be vaccinated. Fractured social contracts in today's world have changed the landscape and culture, and we may not be going back to the old "normal." Every day feels different, and quite honestly harder. More of the same won't work.

Organizations must think and show up differently.

There is what we call an empathy imperative that lies before us. There is a convergence of patient consumerism and digital transformation that is happening right now, and those who harness the power of this dynamic will effectively transform experiences, expand market share, and set the standard for healthcare. Meanwhile, employees are grappling to reconcile the values and ideal behaviors promoted by their organizations with the barriers they see in front of them everyday.

Defining a holistic view of empathy

Before we dive in, let us take a moment to ground in what empathy actually is. Empathy has been *defined* and *visualized*, and yet without some agreement on what it is, we will not be able to practice nor advance it. At its core, empathy is the willingness and ability to feel into the emotional experience of another - while maintaining one's own feelings - and then reflect and respond to that understanding. Often those latter parts are left off the definition or are more commonly associated with compassion. Others nicely outline the *components of empathy* as cognitive (imagining the emotions and experience), affective (feeling the emotions), moral (desire to connect with others), and behavioral (to act as a result).

Let's take a holistic view of empathy as a concept that includes the hard work of listening and understanding, AND acting. Important to call out here is that empathy is not limited to the interactions between two people - it can and does involve teams, processes, and brands.

Over the past decade, patients have told us our systems are fragmented, make them feel invisible and unknown, and amplify anxiety with delays and inefficient billing. In short, if we were really listening, we wouldn't need one more survey. We would already be demanding something different. We must answer the call to deliver a more empathetic and emotionally-connected healthcare experience for all humans - patients, families, providers, and staff.

The ROI of empathy

The ROI of empathy

We are all humans. It sounds silly to say aloud. We are fundamentally emotional beings who evaluate our experiences based on how they make us feel. Our emotions drive decisionmaking, perceptions, and behaviors in all aspects of life, and healthcare is no exception.

The recognition of emotion is vital to providing human-centered healthcare experiences. Patients and caregivers alike feel vulnerable, anxious, and invisible within the healthcare system. The time has come to develop tactics to listen in a way that supports efforts to heal both those being cared for and those providing care.

Patients and caregivers are on life journeys, which are inherently emotional and personal. To begin healing the suffering in healthcare, it's critical to listen more. And only after we have listened with intention can we begin to understand and, ultimately, act.

To further complicate things, humans are deciding how much emotion they share and with whom, and in real time. And not all emotion that we need to recognize is spoken. Body language, facial expression, tone, and volume often tell us more than the words themselves. Therefore, our ears, eyes, and tech tools need to be finely tuned.

Below is a small sample of the emotions we often hear and see from caregivers (employees) and patients alike. Recognizing there is a range of emotions that anyone might feel at one moment - and they can change pending circumstances - brings an appreciation to the depth, dimensionality, and complexity of the human experience.

Emotional experience of patients

- Appreciation for those that care for them and their loved ones
- Invisible to their caregivers beyond their disease
- + Proud that they can manage aspects of their care and health as part of the team
- Overwhelmed by trying to manage family and finances while also caring for themselves or others
- Fear and anxiety related to health concerns
- + Exasperation over bookends to careaccess, billing, and timelines or delays

52%

of <u>patients</u> want a caregiver who understands and meets their emotional needs

Emotional experience of employees

- + Hope that they can find meaning in what they do
- + Frustration when scores are valued over people
- + Disconnected when they have not had time or space to recharge
- + Joy and fulfillment when they build relationships with patients
- + Conflicted when barriers exist to doing the right thing for patients
- + Depleted by more asks and constant change
- + Loved by their patients and colleagues

62%

of physicians cite their burnout as being caused by their current employer

Humans miss emotional cues all the time - in *medicine* and in *relationships*. When that happens and emotions go unaddressed, people do one of two things: they either escalate the emotion in the hopes it will be seen and heard or they disengage altogether. Patients and employees aren't willing to settle when their emotional needs aren't being met. This ultimately comes at a cost to the healthcare organization, with a negative impact to relationships and trust as well as the bottom line.

When patients shut down, there are risks to them personally as well as to the health system or facility. Patients may be quick to share bad experiences with friends and family, and to post negative online reviews, harming patient acquisition efforts. Meanwhile, more than <u>one third of patients</u> will skip or avoid care based on how they were treated by their healthcare provider or staff. Healthcare avoidance has been shown to <u>worsen health conditions</u>. We think of costs as emotional, operational, and financial, and you'll find they land us in the same place.

The cost of empathy misses to the patient (or customer)

Broken promises and loss of trust which leads to...

Decision to not seek care or to disengage altogether which leads to...

Worse clinical outcomes which lead to...

Higher utilization and costs of care which leads to...

Repeat story telling of poor experience and social sharing which leads to...

Damage to brand and reputation

The cost of empathy misses to the employee

Broken promises and loss of trust which leads to...

Decision to disengage from role and continue to work or to leave which leads to...

Talent shortages, safety and quality risks, and frustration/apathy which leads to...

Higher cost of recruiting, training, and hiring new employees which leads to...

Repeat story telling of poor experience and social sharing which leads to...

Damage to brand and reputation

77%

When mistakes are addressed, consumers remain loyal 77% of the time as long as emotional bonds with the organization are strong. **24B**

Staffing shortages have cost hospitals approximately \$24 billion since the pandemic began.

And the results of operationalizing empathy at scale are compelling. *Industries* outside healthcare see better financial performance and community/employee engagement — one large manufacturing firm for example, saw a 9 point increase in NPS and 76% increase in program revenue. Our own *research* has identified the ROI when organizations focus on customer experience as \$38.4M.



By listening with modern methods, one large healthcare organization lowered employee turnover by 15% and saved \$9M as a result. By collecting feedback from frontline teams to improve processes and empowering employees to take an active role in shaping the patient experience, employees are more engaged and able to better serve patients.

Another organization that works with Qualtrics experienced \$300,000 in savings in annual program administrative costs and a 25% increase in patient satisfaction with real-time surveys, customizable outreach, detailed dashboards, and patient comment analysis. These mechanisms have enabled healthcare providers to address the emotion behind interactions all along the patient journey.

You get the point.

With so much at stake, empathy in healthcare is imperative. It is time to expand the way we listen to those we care for and those who provide care. Keep reading to discover how to bring human-centered experiences into focus across your entire organization.

Listening for emotion

Listening for emotion

To fulfill the four fundamental promises – partnering, communicating, caring about each individual as a person, and making it easy – systemic change is necessary. Creating and maintaining authentic emotional connections requires rapid innovation and optimization focused on these three pillars of human-centered healthcare experiences.

Pillar #1: Listening with intent

An experience is more than a solitary interaction or a snapshot of engagement. In healthcare, experiences extend beyond the walls of the medical facility.

By listening across all channels where your patients and staff engage, hidden pain points and unmet needs emerge. This means moving beyond siloed listening using traditional surveys and integrating calls, letters, complaints, phone calls, and conversations.

In most organizations, this isn't an easy proposition. Many of the departments who own pieces of this data are not housed under patient experience, but rather their operational partners in call centers, medical records, and revenue cycles. Organizations are at various stages of readiness to orient around an experience journey for the patient, so sometimes a phased approach is best.

When you take a more holistic approach to understanding the expectations, perspectives, and emotions tied to each interaction, you learn what matters most to your patients and staff.

Pillar #2: Aligning with the employee experience

Human experiences are intertwined. The patient and caregiver experiences do not exist separately within the healthcare landscape. Burnout, staffing challenges, and constant change all contribute to inefficiencies that impact the patient experience. It's important to address the emotional toll on your employees alongside your efforts to improve your patients' experiences.

Historically, healthcare employee engagement has been managed separately from the patient experience. Linking these efforts in organizations is a growing trend, which allows for a unified listening strategy and analyses of how the employee and patient experiences impact one another. The reality is that clinician and staff engagement is directly tied to *patient satisfaction*.



Pillar #3: Listening to emerging trends

Between rising healthcare costs, the complexities of the healthcare system, and the complications of the COVID-19 pandemic, patient needs are evolving. To deliver human-centered experiences for patients, organizations need to be able to identify trends with deeper listening strategies. How can this be accomplished?

Get smart about a comprehensive listening strategy. Take a look at what sources and content you already have before deciding where to focus in or expand out. Make the leap to real-time capture of feedback and create listening posts across the care journey.

Prioritize access as a place to start listening. Access is a critical point of entry for patients and their loved ones, and delays in access create additional suffering for patients and frustrate caregivers. Identifying access pain points will have downstream impacts on experiences and health outcomes.

Ask a basic set of similar questions across the journey to understand it in its entirety. Organizing OKRs to capture a global <u>NPS</u> or <u>CSAT</u> is a start, but the drivers are where the work begins.

Begin to understand

Begin to understand

We say "begin" because listening to emotion and context is the first step toward effective communication in healthcare. Communication in healthcare matters because lives depend on our ability to share and exchange information across teams with varying levels of knowledge and experience in a highly complex environment.

When communication is effective in healthcare, we enable patient safety and engagement, empathy, psychological safety, and trusting relationships. When communication is ineffective, it results in medical errors, physical and emotional harm, disengagement, and malpractice lawsuits-all well-documented, evidence-based consequences.

Therefore, our most critical skill set as humans is how we communicate. It is beyond essential; it is imperative to making connections with other people. And yet how much training in communication skills have any of us had?

Many hospital systems offer some onboarding or training for communication skills and service excellence, but many do not. Yet we measure performance in communication at system levels and on surveys with dashboards and color-coded comments, all too often assuming that if feedback in communication is modifying, the clinician is a "bad" communicator. Our point here is simply that humans are imperfect, and without support and training to be highly effective communicators, it is very likely we all have some skills to work on.

Technology adds another layer of complexity to the healthcare experience. It is shaping expectations, patient-caregiver interactions, and it allows communication at scale in ways never before possible. Technology has created a new dynamic, changing the ways in which we connect with patients and employees and listen to their feedback. Since technology is moving feedback into real time and can be activated through any channel–email, calls, texts, letters, surveys, etc. – we also need to be able to respond in real time through any channel.

What we'd like to focus on here for a moment, however, is the notion of empathy. If you do the hard work of listening, regardless of how – whether sitting in front of someone, answering the phone, or opening the letter – there is an implicit imperative to do something with it. Although this isn't a communication skills module, we want to explore where we have been and where we can go in the empathy space.

Let's dissect that.



After listening, the next opportunity in effective communication is to make sure we understand the emotion and context of what someone is feeling. This is typically enabled through what's called reflective listening, wherein the listener verbally reflects the content of what someone said, or the emotion they are interpreting (also a part of empathizing). Some examples:

- + "You seem sad."
- + "It sounds as though this has been incredibly frustrating for you."
- + "Earlier this year when you lost your mom, you felt hopeless."

Reflecting this to the patient gives the patient an opportunity to also correct or affirm what the listener has heard. Once the emotion is seen clearly, connection happens.

So what does this have to do with technology? Technology has evolved to detect emotion with precision. It will never replace having a human in front of you holding your hand in a crisis and recognizing your emotions. Yet, technology like ours not only recognizes expressed emotion, but also hidden emotion. The unsaid. And what isn't said is just as important as what is said.

In addition, modern analytics can assign intensity and effort to language to quantify the pain or joy. It can be segmented by emotion, unit, and demographic to give depth and insight we simply don't have in one-on-one conversations. This powers empathy at scale.

Act with empathy

Act with empathy

Universally, there is much debate about the difference between empathy and compassion. Many associate action, or the desire to act, as compassion. From a common sense standpoint, let's consider. If we listen and seek to understand without acting, we fail at empathy.

Empathy as an action could be as simple as mirroring emotion physically, giving a hug, or even staying in what we call the "bathtub of emotion." In other words, the goal is not to fix. Rather, the goal is to be present, validate the emotion, and communicate nonverbally the understanding and connection. Empathy as an action could be something you say aloud: "Anyone who just went through what you describe would be heartbroken" or "Grief shows up in so many unexpected ways; I know you weren't expecting that" or "I'm here for you anytime." Empathy as an action could also be a gesture of service recovery.

At an organizational level, empathy as action is making experience measurement an organizational OKR. It might be rolling out effective training in empathy and communication to set people up for success. It might be telling stories in every meeting. It might be replaying phone calls. It might be having the executives eat the hospital food. You get the point.

So how does technology help here?

We call this operationalizing empathy. It's when we bake our empathy as action into touches (digital or human), our operations, and our processes. At the lowest level of impact, this can be automated responses to let someone know we are grateful for the feedback they've given. At the next level, we feed back to them how their input changed our processes or invite them to help us make it better. At the highest level, we automate outreach and workflows for low emotional items and use that same technology to ticket when a human needs to engage based on the intensity of the emotion or the person themselves. Imagine a time when we aren't reacting to feedback, but we're proactively anticipating what an individual's experience will be and intervening in advance.

So we've covered empathy as a concept wherein we listen, we understand, and we act. And whether humans do it or technology amplifies each step, the end result is the same: people feel seen and known and cared for.

If human-centered experiences, and therefore empathy, are driven by emotion, how can you build an experience management strategy for patients and employees? We offer some thoughts around what is most important based on what patients and employees have been telling us for years. We don't actually need one more survey to make movement on the below concepts, because they are timeless and consistent.



Modernize foundational experience programs

Modernization has three key components: real-time data, closed-loop processes, and assistance of artificial intelligence.

O1 Data in real time. With today's technology, you can put real-time feedback into action immediately. While traditional surveying methods often result in feedback that is delayed by weeks or even months, platforms designed to collect real-time insights give you the power to act quickly. Meeting your patients directly where and when concerns are identified is vital to creating the genuine connections patients seek out in modern healthcare.

O2 Closed loops to drive action. Closed loop feedback systems give you more control in responding to emotions, perceptions, and behaviors. Automated workflows allow you to alert the right people at the right time so service recovery can begin immediately.

Imagine a patient provides feedback indicating frustration with many attempts to call and schedule an appointment. Collecting this feedback in real-time and automating a workflow to alert a staff member to contact the patient creates an emotionally-connected experience in which the patient feels their voice was heard and their wellbeing is your priority.

O3 Artificial intelligence (AI) to enhance patient focus. Utilizing an analytics platform for your patient insights that automates action frees up time for clinicians to focus on patients. Time saved with analytics of both structured and unstructured data-text comments, phone conversations, and much more-can be spent instead forming meaningful connections with patients with more opportunities to listen.

Improve patient ease and access

Patients have been telling us for a long time that access, billing, and delays are pain points in healthcare. With or without the patient experience teams, many organizations are launching targeted redesign of call centers and revenue cycle operations.

As organizations focus on ease and frictionless experiences, these bookends to clinical care are priorities. At the call center, patients often experience varying entry points that land in disparate locations and in phone numbers that no longer work; they get transferred multiple times within a single phone call; or they experience long hold times, only to get an appointment in eight months when they want one next week. Timely availability of care is the top factor driving how patients seek out healthcare, with 74% of patients indicating this heavily weighs on their decisions about where to obtain care. Yet, only half of patients are able to book an appointment on their first attempt over the phone.

The call center agents themselves are also not having a great experience. They want to deliver thoughtful care for patients and they pride themselves in service, only to be unable to open patient slots, feel reduced to bill collectors, and lack empowerment to make decisions beyond protocols. The clinician side for access is also complicated. Schedules might have multiple blocks with various controls, they often can't schedule patients themselves, and don't know that a given patient is trying to access their care.

There is hope. Organizations are centralizing many of these services or creating hybrid models with clinical triage. They are also reducing the number of metrics to hit for the agent and focusing on exceptional experience and relationships. Agents themselves are being called relationship managers or service specialists to dial up the caring that can occur. The expansion of online scheduling and self service options for many patients will grow, as well as in-home and retail services for care.

From expanding options for booking appointments, to providing alternatives to in-person visits for addressing medical concerns, engaging with patients digitally is no longer a "nice to have," but a necessity in today's landscape.

Adopting new technologies is vital in addressing the emotional toll on patients. By expanding how you listen, you can more easily identify the tools and technologies that will meet your patients' needs and ease the emotions related to accessing care.

Partner and engage with your caregivers

Without caregivers who feel their needs are being met and their experiences valued, you cannot improve the experiences of your patients. To address the issues affecting burnout, turnover, and lack of empathy, it's time to take caregiver listening to the next level.

Many organizations survey their employees on an annual basis; in healthcare especially, this isn't often enough. The constant shift in priorities, regulatory requirements, COVID policies, and use of technology requires frequent engagement in order to best support your caregivers and reduce burnout.

A more comprehensive view of your caregiver experience is needed to identify the true drivers of burnout and turnover. Listening throughout the entire employee journey—including awareness, interviewing, onboarding, engagement, promotions, learning and development, and inclusion and equity—is the key to recognizing the emotional toll on your workforce.

Operationalizing empathy is about making sure we use the data we have to lift our people everyday. Telling stories at meetings, sending emails to caregivers with the beautiful things patients have said about them, huddling on topics of purpose and meaning, and making gratitude personal. Some people want to be mentioned in meetings, and others prefer a hand-delivered note in private.

Deliver on your organization's promise

These days, patients often have enough choice in their healthcare that they will jump around from one clinician or system to the next until they find one that listens and treats them as more than a number. They seek out care with organizations that are committed to their patients, employees, and communities.

Brand perception is owned by the patient and employee, not the organization and is impacted by the experience people have. More and more, organizations are deliberately demonstrating how they live their values consistently through process and operations - and those values often include empathy or compassion. In addition, perception is not built based on the steps in a journey, but rather how someone experienced them with all of their senses. What was most memorable? What sounds did they hear? What smells and tastes do they associate with their time with your brand?

Operationalizing empathy through listening to your patients and employees at scale, taking action to dampen the emotional toll of suffering, and amplifying love and gratitude is what will differentiate brands for years to come.

Drive empathy at scale

Drive empathy at scale

Empathy doesn't have a benchmark. We hope we never reduce it to a number. In many ways, we seek to quantify the unquantifiable. And yet, if we get one thing right, that one thing has to be that people felt cared for while in our care.

And if we knew the range of emotions people were feeling, we would provide the best care humanly possible. And make no mistake about it: empathic care is safe care. Empathic care is high quality care. And that's true irrespective of what industry you are-whether you are an airline, hotel, restaurant, etc.

If we were really listening, we would demand something different. We would do something different today. To drive empathy at scale, listening with intent, understanding, and acting are strategic imperatives for every organization hoping to care for their members, customers, patients, and especially, their own people. qualtrics.**

Ready to get started?

LEARN MORE

