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THE MAGAZINE FOR HEALTHCARE EXECUTIVES

## CURRENT ISSUE

Cover Story  
Features

## Department

### Management: Gaining Experience

Written by Jill Rose  
Tuesday, 01 April 2008

As chief experience officer at Cleveland Clinic, Dr. Bridget Duffy has her work cut out for her—making sure that all 30,000 workers in the organization are focused on creating a better patient experience.

"If I'm successful," Duffy said, "a year from now, if you walk in the door and ask anyone you see the purpose of their job, they will tell you it's to help people heal."

Fortunately, Duffy has a lot of support, starting with Cleveland Clinic CEO Dr. Toby Cosgrove. Duffy noted that Cosgrove has identified the organization's top five strategic initiatives for the next three to five years, and number one is putting patients first. Hence Duffy's position as CXO, which began last summer.

Duffy is also supported by a groundswell movement toward taking the patient experience to the next level. Much of that push is coming from the baby boomers, says Gary Adamson, founder of Keystone, Colo.-based Starizon, which specializes in experience design.

Not only are the baby boomers unwilling to put up with poor customer service in healthcare, they have become accustomed to personalized products and services. "Just think of all of the things that are possible to personalize now. We want that in our healthcare," Adamson explained.

Of course, hospitals cannot spend unlimited amounts of money to improve the patient experience without a return on their investment. Although solid data is not yet available, Duffy believes strongly that her organization will begin to see shorter lengths of stays, along with lower use of post-op narcotics/anti-anxiety medications and higher nurse retention and satisfaction rates.

And there's another potential return for hospitals—better marketing for little or no cost. Consultant Anthony Cirillo says his experience shows the majority of hospitals waste a huge amount of their marketing dollars.

"The only way you can effectively market to people who are interested in your organization is to ensure that the people who use the services now have an incredible experience," said Cirillo, president of Fast Forward Strategic Planning and Marketing in Huntersville, NC. He added that market research backs up this opinion—most marketers believe one word-of-mouth recommendation is worth 600 advertising exposures.

#### Peak performance

Duffy spent the first few months of her new job with people in a variety of front-line positions, including patient transporters, housekeepers, nurses, and physicians. It's no surprise she found passionate, highly dedicated people. But she also felt there was work to be done.

"I'm not sure every employee understood that everyone who touches the patients impacts their experience," she said. "We needed to send the message that everyone is an equal and valued member of the healthcare delivery team. They matter—and they impact the experience."

One way to send that message, Duffy and Cosgrove believe, is to focus on employee wellness. To that end, Dr. Michael Roizen was appointed chief wellness officer. "We realized we had to focus on the health and well-being of our employees for them to deliver on the patient experience," said Duffy. "That means dealing with their physical and mental well-being, their nutrition, and their capacity to show up and be able to work at peak performance."

To begin spreading the experience concept throughout the organization, experience officers are being appointed in each of Cleveland Clinic's



Does your hospital need a chief experience officer? Only if you're interested in shorter lengths of stay, higher nurse retention, and incredible word-of-mouth advertising.

institutes. Their role is to identify current gaps in the patient experience, work on environmental changes that can enhance the experience (e.g., place for family to sleep and nutritious food options), and ensure the employee satisfaction levels are high. "They are also in charge of letting us know what they need to transform the experience," said Duffy, noting that these IEOs have a dotted-line reporting structure to her office.

#### Relieving stress

Duffy and her team are also piloting a Healing Services team that includes holistic nurses, social workers, psychiatrists, integrated medicine specialists, and pastoral care staff. A member of the team visits patients facing surgery after admission to proactively address any anxieties, issues, or stressors and offer the team's services.

"We recognize that a great clinical outcome is not all the people need to heal. Sometimes you need to tap into other things to have a positive, successful outcome," said Duffy. She noted that in looking at complaints to the hospital's ombudsman department, many issues would not have become formal grievances had they been addressed earlier, and that's exactly what this program is designed to do.

In the three months the program has been in place, about 1,000 people have used the service, and 93% said they found it helpful. Similarly, 90% said they would recommend it to a friend. Duffy said the nurses on the floor where the program is being piloted are "in heaven." Relieved from dealing with sensitive issues due to fear and stress, the nurses are able to better focus on the tasks they are trained to do—and call-button utilization is down.

Another program being piloted is called Health Navigator, which provides a hospital staff member (either a nurse, social worker, or patient-service advocate) to help patients get the clinical referrals they need, information about support groups, and answer any other questions.

"This is the main thing wrong with healthcare," said Duffy. "After you are diagnosed with something like cancer or heart failure, there is no human connection to help get you access to the right care, guide you while you're there, and support you when you leave."

#### Woven in

Like many other hospitals, Cleveland Clinic is conscious of the physical environment's potential to aid healing—things like ambient room lighting, relaxing music, 24-hour food service, more comfortable hospital gowns, and art designed to relieve stress.

However, Duffy emphasizes that although the environmental piece is important, it's the human interactions that really make a difference. "The environment is nice; it gets them in the door, but it's not what will get them to come back," she said. "Every employee needs to feel like they're contributing to the mission every day to help people heal."

She is also well aware that those focused on experience cannot operate in a vacuum. "You have to find a way to embed this function into your organization so that it's not a separate silo but works in conjunction with other departments and people trying to improve performance and efficiency. It has to be woven into everything you do—otherwise it will go away at the end of the budget year."

Starizon's Adamson could not agree more. "One of the big things that gets in the way of healthcare experience initiatives is all of the silos," he said. "Experiences can't be done well in a siloed way. It's like a Broadway show—you don't say, 'The actors had a good night, but the lighting people got it all wrong.' It's all one thing."

Both Adamson and Cirillo feel strongly that CEO involvement is key to ensuring silos do not get in the way of experience efforts. "If the CEO is lukewarm about the customer thing, this is probably not an organization where a CXO will thrive," said Cirillo. "In institutions successfully implementing experience programs, the CEO is heavily involved," added Adamson. "It can't be the CEO saying, 'I don't need to think about this anymore because I have a CXO.'"

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