In the 1980s, the patient experience department “functioned as a complaint department. Now, it’s the office of patient experience. And we’re moving towards it becoming the office of very helpful people,” said Thomas D. Howell Jr., MD, Assistant Medical Director of Patient Experience, Mayo Clinic. To provide this high level of assistance, hospital and health system patient experience professionals now need to address every detail of the patient journey, including everything from logging into the patient portal to navigating around a facility to feeling comfortable with the care plan, paying the bill – even “finding a vegetarian meal” in the nearby community, Howell said.

As such, healthcare leaders “are now looking much more holistically at the experience across the continuum of care,” he said at “Creating End-to-End Patient-First Experiences,” a webinar sponsored by ServiceNow. Howell was joined by fellow panelists Vishakha Sant, Global Head of Healthcare Provider Solutions, ServiceNow; and Christopher Brereton, Vice President of Product, SideBench.

In this age where consumer is king, healthcare organizations (HCOs) need to create a positive experience from first contact to final follow-up. As a result, leaders should understand that the patient experience “includes everything and, at the same time, it’s whatever the experience is in that moment. And, all of those things matter,” Howell said. Patients expect HCOs “to be good at everything. They assume you’re technically competent. And the differentiator is those experiential, relationship pieces,” he added.

Confronting challenges
Creating an experience that resonates with patients in today’s consumer-driven environment comes with plenty of challenges. To start, HCOs need to support patient experience initiatives, despite the fact that financial incentives are still aligned “transactionally and sometimes at the expense” of creating an end-to-end experience, Howell pointed out.

In addition, HCOs need to design experiences for large populations with “different demographics, different age ranges, and different condition management,” Sant said. While doing so, they should consider the totality of the patient journey, as each consumer interacts with many different entities including providers, payers, pharmacies, and agencies along the way.

What’s more, COVID-19 has complicated matters. When the pandemic hit, many providers adopted virtual care technologies just because they had to and some “flipped from in-person
visits to virtual visits in a week,” according to Howell. Now, with the pandemic evolving, providers are trying to create the ideal patient experience by offering the perfect combination of in-person and virtual care.

Getting much-needed guidance

Amidst all of these challenges, HCOs need to forge ahead, creating optimal end-to-end patient experiences. To start, HCOs must adopt some guiding principles to ensure that their organizations’ patient experience initiatives align with their organizational culture. Sant developed the following simple CREATE framework to guide patient experiences:

• **Caring.** HCOs need to demonstrate that they are concerned about patient needs at all times. Remember, the patient experience is “not a transaction. It’s an ongoing relationship, irrespective of where that patient is at in the lifecycle, whether they’re shopping for the service, or they’re receiving the care, or they’re post-discharge at home having to do a treatment plan,” Sant said.

• **Responsive.** “In this age of the consumer, there’s this notion of being responsive,” and that means that HCOs need to provide the experiences that patients want and need “right here, right now,” she noted.

• **Easy to use.** “Digital experiences should be easy to navigate,” Sant said. For example, the iPhone is so well accepted because “there’s no large manual to let you know how it’s used – it’s just kind of intuitive,” she said.

• **Agile.** Organizations must adjust their patient experience initiatives on a dime. “COVID has really taught us that the salient, resilient, and flexible organizations are the ones that are going to actually survive in the years to come,” Sant said.

• **Technology-driven.** Health IT leaders should link technologies to specific goals. In some organizations, “there are nice, shiny objects” but there is little definition around what the technologies are trying to accomplish, Sant pointed out.

• **Equitable.** HCOs must ensure there’s fairness for providers and patients alike by making care experiences and digital platforms affordable and accessible to all. HCOs will miss out on many caregiving opportunities if leaders do not “think about the person who’s in rural America who isn’t able to get to that physical experience” that the HCO is designing or doesn’t have access to the digital appointment scheduling platform the organization is using, Brereton said.

Doing what’s best

In addition to adopting a guiding framework, HCOs can create an exemplary end-to-end patient experience by relying on a variety of best practices, such as:

**Use technologies that interface well with others.** Healthcare leaders need to leverage products that have been designed while considering “the entire customer journey end-to-end,” Brereton said. Even when specific tools only address a certain component of the patient experience, they should work in context with other technologies to enhance the entire end-to-end journey, according to Brereton.

**Make the most of what you’ve got.** It’s important to take action on all of the information collected from patients. “In medical school, you’re taught, ‘Don’t order a test that’s not going to change your management,’” Howell said. Similarly, when using technology to collect data from patients, HCOs need to make sure they follow up and give patients the experiences they want. Ignoring patient input is “disenfranchising to patients and really turns them off,” he pointed out.

**Know the difference between personalizing and customizing.** HCOs should strive to implement standardized workflows, platforms, and processes that enable them to streamline patient flow, while also addressing individual patient needs. HCOs must “touch on personalization without [getting] into heavy customization, which then leads to... a lot of investments in technology to upkeep and upgrade,” Sant said.

**Zero in on the experience.** HCOs should leverage technologies that have been designed with a focus on the human experience. “Design thinking is more about keeping the human at the center of the equation all the time ... it’s really designing tools with the human and their context in mind first,” Brereton said. “It’s really not about the imagery or how something looks, feels, reacts to the end user.”

**Don’t lose the human touch.** “As we learned from the pandemic, there should always be this option to go back to a human,” Sant said. Just because an organization provides
digital tools, “doesn’t always mean that everyone is going to be gung-ho about it. There should always be an alternative for those people that need to have a one-on-one,” she noted.

**Challenge assumptions.** For example, it’s not safe to assume that “older patients aren’t going to be able to adapt to digital and virtual visits. That’s absolutely 100% not true,” Howell said. On the other hand, HCOs can’t assume that all patients have access to virtual visits. “In the upper Midwest, especially in rural Minnesota and Wisconsin, 20% to 25% of our patients don’t have broadband. So we can try and virtual them to death, but the infrastructure isn’t there,” he said.

**Create memorable moments.** The reason people have vivid high school memories is because they were most likely experiencing a strong emotional connection to what was happening at the time, Howell pointed out. So, while the entire patient journey is important, leaders should recognize there are specific points where people are apt to feel a strong emotional connection. With inpatient care, for instance, patient emotions typically run high at the time of admission, the end of the first day in a facility, and during discharge, he noted.

**Make life easier for healthcare workers.** Healthcare professionals are “already bombarded with so many devices and signals and beeps. There’s so much burnout out there,” Sant said. Unfortunately, many HCOs keep adding to the technology stack without considering the effect on workers. Instead, HCOs should ensure that each new tool fits seamlessly into healthcare staff members’ workflows and optimally streamlines processes.

**Share knowledge.** HCOs collect a wealth of information from patients. The problem: This data is often held in silos and not shared across the continuum. As a result, patients will often call “into an advice center, then be transferred over to some other agent, then finally get on the phone with someone else, and they will be asked the same questions over and over again. That’s not a great patient experience,” Sant said. To address this challenge, HCOs need to integrate data across systems by leveraging standards such as HL7’s Fast Healthcare Interoperability Resources, according to Brereton.

**Don’t bombard patients.** With digital tools in place, HCOs sometimes overcommunicate with patients, sending text messages to the point where patients’ phones “are being blown up with reminders,” Sant said. HCOs need to “be very mindful about how much they’re communicating to the patient. And the communication needs to be welcomed. So being very mindful of the preferences that the patient has set forth is super important,” she said.

By adopting these best practices, HCOs can ensure that their patient experience departments morph beyond simply reacting to complaints, as they did in the 1980s. Instead, HCOs can embrace the patient experience as a “much bigger idea that is very intertwined across the continuum of the healthcare industry,” according to Howell.

As a matter of fact, HCOs can leverage patient experience initiatives to enhance the entire care journey and improve outcomes for patients, while also realizing better financial results, Sant concluded.

To learn more about how ServiceNow can help your healthcare organization develop optimal patient experiences, visit servicenow.com/healthcare.

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