

Trustee Insights

EMERGING TRENDS



What Makes Your Organization Special?

Using insights from humanizing brand experience to better engage health care consumers in a post-pandemic world

BY JUSTIN WARTELL

C OVID-19 brought out the very best of the American health care system — health care workers' humanity, heroism and unwavering dedication to patients' well-being. The pandemic also beamed a spotlight on what's not working. From inconsistent consumer experiences and challenges in accessing health information to misaligned systems and teams — these issues continue to create barriers to great health care experiences.

The disruption to our personal and professional lives, the declines in health engagement (outside of trust) and the fear that has caused care delays have put pressure on what delivering a compelling experience really means. While we are experiencing a time of unprecedented change, there is an interesting reality for consumers: The fundamental human needs from health care remain the same across just about every attribute measured.

Informed by more than 30,000 health care consumers and in exclusive partnership with the American Hospital Association and the Society for Health Care Strategy and Market Development, "Humanizing Brand Experience," volume 4, delivers the most comprehensive and clearest pre-COVID-19 and post-COVID-19 views of consumer, brand and experience needs in the health care field.

How consumers "think" and "feel" when making decisions about health care brands has not changed

— it is only what they “do” that has shifted in a COVID-19 world. Looking at the year-by-year data on the importance of each of the attributes in driving choice and advocacy, we can see that most of the metrics have hardly moved.

However, how do you take action against this new reality? Faced with incredible business pressures to continue the reinvigoration of an organization’s health care brand, there are many opportunities. Data from this year’s study illuminates three potential areas of focus.

First, we have to acknowledge and address the fact that people are less engaged with health care this year compared to last. To address this, we have to overcome the health engagement setback. While all engagement measures have deteriorated, the only attribute that has grown is trust. For health care leaders, the challenge is to avoid diluting this critical success factor and to not lose consumers’ trust. We also have to accept that consumer definitions of fundamental health care concepts are shifting, especially in the area of innovation. It’s critical to incorporate these emerging definitions into approaches to driving choice and advocacy across our experiences. Starting with innovation through real talk, not robots, is a path to changing behaviors internally and mindsets externally.

Overcome the Health Engagement Setback

While the amplification of health care’s challenges has been louder and more viscerally felt than ever before, fundamental issues,

including those discussed here that influence experience and trust, were around long before COVID-19. And if organizations don’t act, these issues will continue lurking long after the vaccine is distributed. These breaks in consumer experience and engagement expectations lead us to recommend three actions that health care organizations should take now to reengage consumers in a post-COVID-19 world:

1) Lead with a physician’s voice. Although most engagement factors decreased, one index marker increased. Health care consumers said that during the past year, their trust in their providers’ decisions increased. And it makes sense. During the pandemic, the Centers for Disease Control and Prevention and the voice of the primary care provider were seen as the most trusted outlets for information on COVID-19, safety precautions and the vaccine. Continue to use this power of the physician voice — ideally reflecting the voices of the actual provider, via digital tools, to reach out and reconnect with consumer audiences.

2) Empathize with burnout about pandemic news. Since the beginning of 2020, news channels, social media feeds and conversations with friends, family and coworkers have revolved around health and health care, and many people are tired of these topics. Let’s be empathetic to our consumers and communities and create messaging that demonstrates a gentle understanding of what they’ve been through before we send out a list of all the appointments they should make or different health approaches to try. They give us permission to do this; nearly

60% of consumers want equal parts COVID 19-related and non-COVID-19-related messaging.

3) Start a conversation. As consumer engagement with health softens (further), let’s create opportunities to start conversations with our patients. Let’s offer time to first lean in and listen. Consider lengthening appointment times to accommodate time for conversation. Or give patients an opportunity to schedule a 15-minute meeting with a member of their care team even starting with a virtual interaction.

Don’t Lose Consumers’ Trust

Trust — and often the lack of it — has been a leading topic since the onset of the pandemic. Debates around truths and falsehoods have been in the headlines across the nation, and misinformation has run rampant. Public disputes and conflicting messages about the coronavirus have led to a sense of national uncertainty about what, and who, can be trusted. Even in the best of times, trust is a multi-faceted, complex concept. It can be challenging to earn in the first place and even harder to earn back when it’s been lost. It cannot be messaged into existence or established overnight — instead, organizations must be working toward it constantly through proven consistency and clear commitment over time. Now, it is imperative that health care organizations refocus on how to maintain and grow trust with patients and communities, and I suggest two actionable tips:

1) Bring patients into the decision-making process. Empathy and transparency are key to establishing

a trusting patient-provider relationship. Bring people along on the journey to recommending a solution — exploring different options with them, while explaining the pros and cons of each. Take the time to answer all their questions and, together, arrive at a solution that works for them.

2) Don't be afraid to show vulnerability. With updates on COVID-19 and vaccines still shared almost daily, it's impossible for hospitals and health systems to predict the future. By acknowledging the unknown, leaving room for change and ensuring a commitment to improvement, health care leaders can portray a sense of humanity that will further drive trust.

Innovation Through Real Talk, Not Robots

Finding the desire to be “innovative” is baked somewhere in most health care organizations' brands. Physicians, in particular, may call for their organizations to focus on innovation in a specific way. Yet actually delivering on this idea remains an obstacle for many organizations. It's time to reframe the way we think and communicate about innovation as a concept. Consumers define innovation from a people-centric, humanizing perspective, and that's a very different definition of the concept compared to what most health care organizations think about.

To own the conversation about innovation, your organization needs to expand its definition from one focused on clinical technologies and advancements to a much broader and more inclusive, forward-looking definition of the idea. Use this

expanding notion to your advantage and define a place where you want your organizational experience to play when it comes to innovation.

1) Define your organization's take on innovation. Many health care organizations tout their innovative qualities, but the definition is quickly changing in the minds of our consumers. Clarify your organization's meaning, strengths and specific goals to stand apart from the crowd and provide a clear vision to employees and patients.

2) Find new words to express goals. Conduct a verbal exploration of alternative ways to express innovation-related goals and accolades. Is your organization focused on uncovering never-before-used treatments and cures that provide more choices for patients? Or finding new ways to put tried-and-true methodologies to work in today's environment, which change the trajectory of community health? The more specific your organization can be, the better.

3) Start with humanity. Ground your organization's aspirations and plans in the unmet needs of people first. Then use your own unique definition of innovation, technology or not, and new ideas to solve for those needs. Additionally, start communications from a place of mutual understanding, so that all audiences can comprehend your vision.

4) Think big and plan ahead. Don't be intimidated by large aspirations related to innovation-driven transformations. Every breakthrough had to start somewhere. Embrace those hopeful milestones and begin planning for them now, even if completion is years away. Share

these plans internally and externally to bring advocates along for the ride and garner support for a more human definition of innovation.

5) Find the right partners. Making change in the field doesn't have to be a lone endeavor. Seek out collaborators inside and outside your organization to find efficiencies, brainstorm together and pool resources to make innovation real for patients and for communities. Sometimes, this type of scale is invaluable to make an impact.

Are you considering pushing for a change to your organization's brand and experience to be better tooled for the post-COVID-19 era? What's critical now is not to make decisions based on individual internal perspectives. Instead, anchor brand decision-making to the proven needs of the patients that you currently serve and the consumers that you hope to serve in the future. There is real risk of overcorrection in the current environment. Focus on what makes your organization special and ensure that every person is laser focused on it. That's the brand opportunity we all face in this new world.

Monigle, a leading independent brand experience agency, partnered with **SHSMD** and **AHA Data & Insights** to produce this fourth volume of its report, *Humanizing Brand Experience*.

Justin Wartell (jwartell@monigle.com) is the managing principal with *Monigle*, based in Denver, Colorado.

Please note that the views of authors do not always reflect the views of the AHA.