

INDUSTRY INSIGHTS 2023

Trends reshaping the future of healthcare





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Charting the way forward:

A Human Experience approach to understand and meet the needs of all stakeholders.

Executive summary

Press Ganey's Human Experience (HX) data represents the voices of every stakeholder in the industry across the full continuum of care: the voices of 50 million patients and consumers, together with those of 3.5 million caregivers. The performance trends in our 2022 data illuminate key insights that should shape strategies that will put organizations back on a path to resilience, growth, and loyalty.

Most patient and workforce experience measures have declined overall—but these declines are not homogeneous. There's been a "separation of the pack," with top-decile performers improving engagement scores, and the bottom decile seeing ever-larger declines.

Point-of-care and clinical roles saw the greatest dip in engagement. That said, workplace cultures are fraying across the board, with measurable declines also among nonclinical personnel, like clerks and security, as well as management.

Cultures built on pride and inclusion, win. The top drivers of employee loyalty and engagement are: (1) pride in one's work, (2) pride in the organization, and (3) a culture built on diversity, equity, and inclusion (DEI).

Safety culture, DEI, and employee engagement are closely linked. Staff members who don't feel respected, valued, and that they belong are less likely to speak up about safety concerns. Rising consumer expectations set the tone for patient trust and loyalty. A robust digital footprint—including accurate online listings, star ratings, and quality reviews—impacts a patient's decision about where and with whom they seek care, and can build consumer trust right from the start.

Friction can undo all your good work. 50% of patients experience friction before care. And even a moderate amount of "hassle factors" (like difficulty booking an appointment) can seriously impact patient loyalty—making it hard to bounce back.

Listening undergirds success. Active listening, fueled by continuous feedback strategies and built upon the timetested principles of safety and patient-centered care, help top-performing healthcare organizations understand what matters to people—and why. From there, they can glean the data and insights to make meaningful improvements in the Human Experience of healthcare.



Introduction

As health systems work to restore operations, they face an environment of lower engagement among their people, diminished loyalty among consumers, and higher patient expectations. And as organizations place their strategic bets, they do so against a backdrop of economic pressure, cultural change, and increasing consolidation and competition. This combination of factors is, simply, unprecedented.

Though aggregate performance declined across multiple domains during the pandemic, many organizations maintained their relative performance, and some even gained ground. Common among those organizations is a well-designed Human Experience strategy for both their people and patients, grounded in a commitment to continuously gather, analyze, and—most importantly—act quickly on feedback from all stakeholders.

Every "new era" in healthcare is characterized by change. New operating structures. New care models. New technologies. And each new era's pace of change and magnitude of challenges always seem to dwarf those of any previous era. This time, it might just be true.



But new eras are also characterized by potential, optimism, and a shared sense of urgency to move forward, differently. To be better. To finally crack the code on establishing durable relationships and lifetime loyalty. With advancements in listening strategies and tools, machine learning and analytics—paired with the time-tested fundamentals of commitment to purpose and continuous improvement—this time, it can be possible. And it can be possible at scale, for all organizations.

As a first step, we need to listen to the voices of the people who deliver care and those who receive it.

Employee experience trends

Two years ago, healthcare workers were hailed as heroes of the pandemic, celebrated for their resilience and commitment in the face of the unthinkable. Today, cultures are fraying under the strain of prolonged pandemic operations, as evidenced by <u>turnover</u> and open-position rates, which are at decades-long highs across all roles.



FIGURE 1: National physician and employee engagement trends

3% decline

over the past 5 years, with a bump for physicians in 2021

Largest decline

in engagement between 2021 to 2022 databases

In fact, employee and physician engagement began its decline prior to the pandemic. We've observed an aggregate decline of 3% over the past five years. COVID quickly exacerbated the effect on employee engagement. And, though physician engagement saw a bump in performance in 2021, in 2022, it declined even more sharply than employee engagement.

Though national averages declined, the difference between top- and bottom-decile engagement scores has never been greater-meaning many top performers were able to sustain and even improve engagement, while those at the bottom saw everlarger declines, pulling down national averages. Important lessons emerge from both ends of the curve, particularly when using "role" as the unit of analysis.



Role-specific engagement

Healthcare organizations are made up of a diverse workforce—mandating an understanding of experience by role. National data reveals that engagement among those on the front lines has declined more than other roles exacerbating a disparity that existed long before the pandemic—with the most significant declines among advanced practice providers (APPs), nurses (RNs), physicians, and security personnel.

Nurses, physicians, and APPs

experienced some of the greatest declines in engagement since 2021

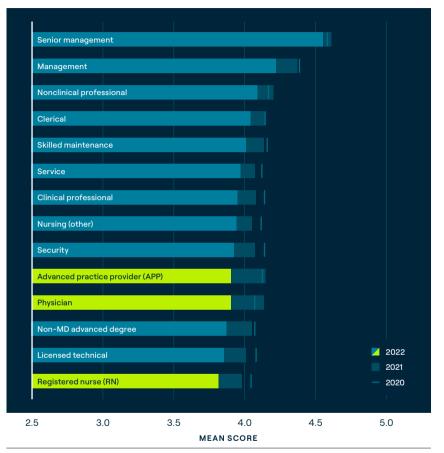


FIGURE 2: Year-over-year engagement trending by role

Engagement among front-line personnel predicts performance in an array of KPIs particularly patient experience, quality, and safety outcomes. To understand precisely how engagement impacts your organization, we recommend analyzing engagement scores at granular units of analysis—by role, unit, and team—and reviewing key driver analysis to identify the next best actions for improvement.

But while each opportunity for improvement is unique, our national key driver analysis reveals universal focus areas that hold true across opportunity types, which we share below.

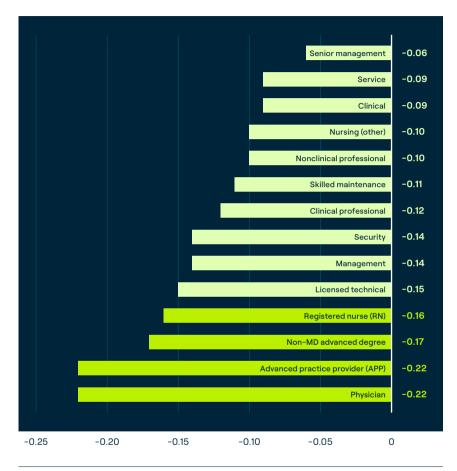


FIGURE 3: Engagement score difference between 2021 and 2022

Point-of-care roles experienced the greatest declines

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Top drivers of workforce loyalty

Engagement is a composite measure that takes into consideration intertwining facets of experience, like overall satisfaction, intent to stay, pride in the organization, and likelihood to recommend the organization for care. Though intertwining, each of these aspects of experience has a distinct set of drivers—levers that can be pulled according to the unique needs of a team or site.

A national analysis of performance on "intent to stay" questions confirms the intrinsic importance of caregivers liking their work, feeling their work is meaningful and valued, and believing their organization provides high-quality care.

It also reveals emerging drivers associated with diversity, equity, and inclusion (DEI). For example, employees who responded unfavorably to "my organization values employees from different backgrounds" are 4.3–4.6x more likely to give unfavorable responses to "intent to stay."

RANK	KEY DRIVER
1st	My work gives me a feeling of accomplishment
2 nd	This organization values employees from different backgrounds
3rd	This organization demonstrates a commitment to workforce diversity
4 th	My job makes good use of my skills and abilities
5 th	My job responsibilities are clear

FIGURE 4: Top drivers of employee retention

	STAY WITH ORG 3 YEARS	STAY WITH ORG IF OFFERED ANOTHER JOB
l like the work I do	8.5	6.5
My work is meaningful	7.0	6.1
The work I do makes a real difference	6.5	5.8
I see every patient as an individual person with specific needs	6.1	4.7
This organization provides high-quality care and service	6.0	6.2
This organization conducts business in an ethical manner	4.5	5.0
This organization treats employees with respect	4.3	5.1
This organization values employees from different backgrounds	4.3	<mark>4.6</mark>
My job makes good use of my skills and abilities	4.2	5.0
I respect the ability of the person to whom I report	4.1	4.7
This organization demonstrates a commitment to workforce diversity	4.0	4.4
Employees and mgmt work together to ensure the safest possible working cond.	4.0	4.5
The person I report to cares about my job satisfaction	3.9	4.3
The person I report to treats me with respect	3.8	4.2
The person I report to encourages teamwork	3.5	4.2
My work unit works well together	3.5	3.8
The person I report to treats all employees equally regardless of their background	3.3	3.7
My coworkers value individuals with different backgrounds	3.3	3.7
This organization providers career development opportunities	3.3	3.7
The person I report to is a good communicator	3.2	3.5
This organization supports me in balancing my work life and personal life	3.2	3.5
All employees have an equal opportunity for promotion regardless of background	3.0	3.5
Different work units work well together in the organization	3.0	3.3

FIGURE 4: Risk ratios for employees' readiness to consider leaving reveal emerging drivers of loyalty

A commonly held belief is that pay and staffing are the primary drivers of caregiver loyalty. And while they *are* correlated to intent to stay, their correlation to *loyalty* is much weaker than items related to DEI questions. The implication? After ensuring that pay is fair and staffing levels are safe, organizations should prioritize belonging, respect, and feeling valued to ensure loyalty and overall engagement among employees.

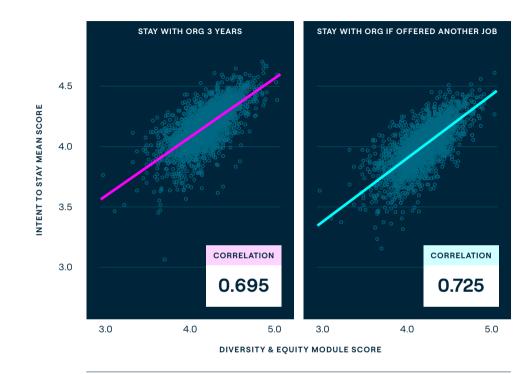


FIGURE 5: Perception of diversity highly associated with intent to stay

Declining resilience among caregivers

The current environment has contributed to unprecedented burnout rates—which, in turn, has led to high rates of turnover, with caregivers leaving the bedside and, increasingly, leaving the industry entirely. This further exacerbates labor shortages and capacity challenges that existed prior to 2020.

National results for Press Ganey's proprietary employee resilience measure capture the effects of the prolonged period of uncertainty and fatigue from the pandemic. Scores declined as much as 3% for some roles in one year. Our resilience measure is a composite score that takes into consideration *activation* (i.e., the ability to be fully present and engaged in the core mission of healthcare when on the job) and *decompression* (i.e., the ability to fully step away from the job during free time).

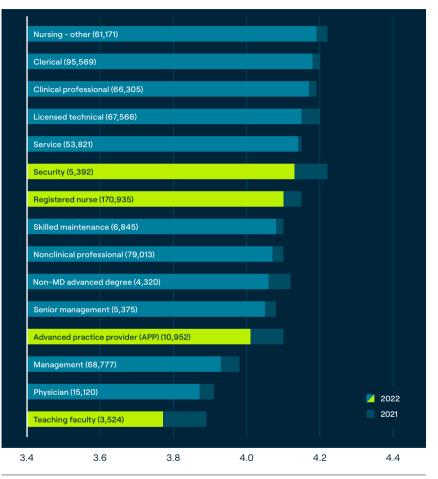


FIGURE 6: Resilience declines observed across all roles since 2020

Activation tends to be high among healthcare workers. And it remained high for most roles during the pandemic. Drops in resilience among healthcare workers were mostly due to issues with decompression—where we saw the steepest declines among nurses, advanced practice providers, and security personnel. Additionally, resilience among female physicians declined by more than that of male physicians.



FIGURE 7: Registered nurse decompression overall

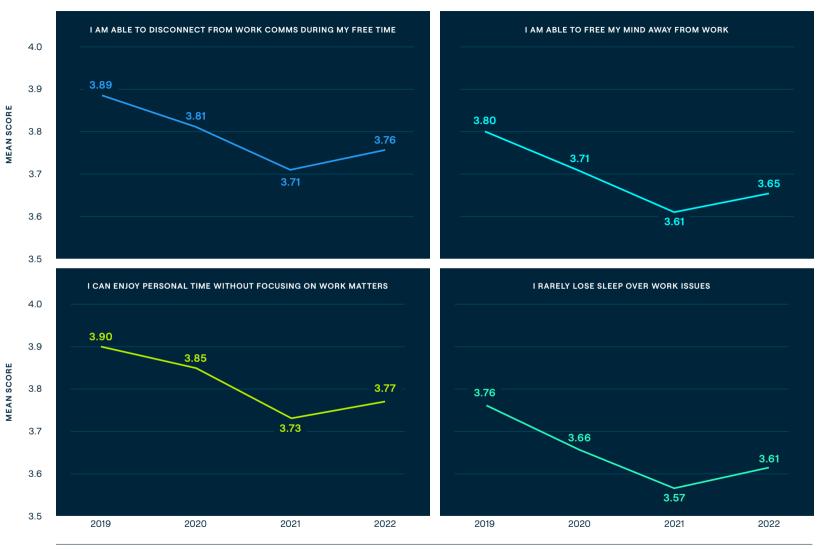


FIGURE 7: Registered nurse decompression breakdown

Declining safety culture

Despite gains in the years leading up to the pandemic, safety culture declined during 2020 and 2021, and it's not yet showing signs of recovering.

Safety culture scores are a leading indicator of preventable harm to patients and staff. Declining performance can signal where suboptimal culture and operations put organizations at increased risk for harm events, which we define as both physical and emotional/psychological harm.

Coincident with declines in safety culture scores, we've observed <u>an uptick in</u> <u>preventable harm</u> at U.S. hospitals including bloodstream infections (CLABSI), falls, pressure injuries, and ventilatorassociated events. At the same time, there have been sharp decreases in staff safety. Our analysis of assaults reported by 500 hospitals shows that, on average, more than <u>two nursing personnel are assaulted</u> <u>every hour</u> at U.S. hospitals.

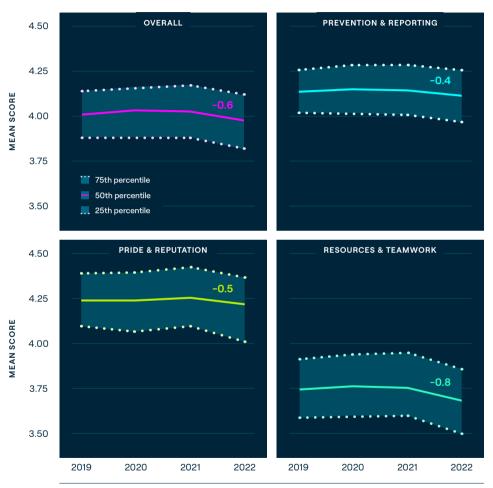
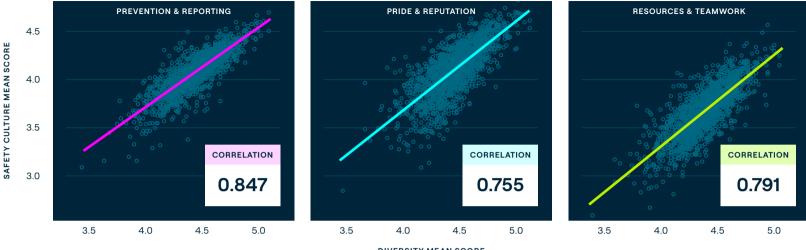


FIGURE 8: Safety culture trends

The association between safety culture, diversity, and engagement

In working to improve safety culture and, ultimately, reduce safety events, organizations that understand and act on—related areas of performance see greater gains and sustainment. The strong correlations between safety culture, ratings of the organization's commitment to DEI, and engagement create a clear path forward for organizations struggling with cultural transformation. Simply put: If staff members don't feel respected, valued, and that they belong, they're far less inclined to speak up and raise concerns. This puts patients and the organization at substantial risk.





DIVERSITY MEAN SCORE



FIGURE 9 and 10: Perception of safety culture, diversity, and engagement are strongly correlated



FIGURE 11: Perception of diversity and engagement are strongly correlated

Workforce experience and engagement are the foundation for optimal performance across a broad range of patient, caregiver, and business outcomes. A genuine commitment to optimizing the practice environment and culture has to be the starting point for any rebuilding effort. It may seem like a daunting task in the current environment, but it is achievable—and made even more possible by leveraging the evidence-based intersections of performance and practices of top performers.

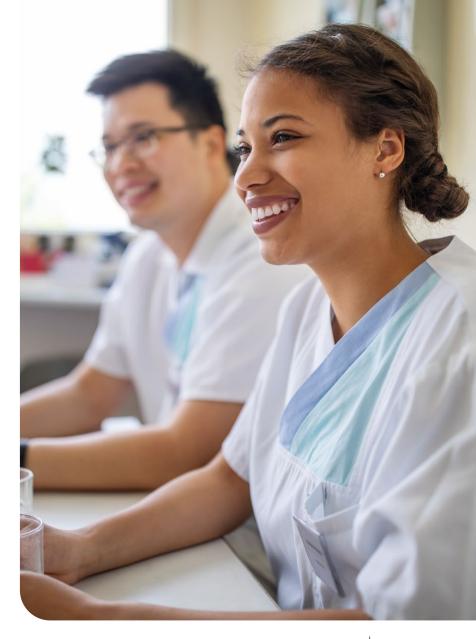
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Practices of top performers

The foundational practices of <u>continuous feedback</u> and active listening distinguished healthcare systems that were resilient to pandemic challenges from the rest. Their commitment to listening let them quickly spot and respond to issues—earning and sustaining the level of trust that's so essential in healthcare's complex, human-centered delivery system.

An essential extension of listening is analyzing looking at results by unit/site, team, and role, and further segmenting by respondent attributes like length of employment, gender, race, and ethnicity to identify gaps. Key driver analyses enable top performers to tailor their actions and prioritize the unique development and support needs of each team.

Leading organizations also invested in well-being and resilience programs for front-line staff. And they have adjusted their programs and approaches over time, as the pressures on the front line have shifted.



Best practices to earn caregiver trust

Enable a sense of purpose and joy in work through a shared vision and shared values that support it

- Leadership regularly messages on mission, models values
- Incentivize team performance over individual performance
- Pair accountability and recognition (5:1 feedback ratio)
- Engage caregivers in improvement

2

Reduce variation and eliminate barriers to great care

- High reliability leadership skills
- Universal relationship skills
- Universal reliability skills

3

Measure routinely and holistically to know where the organization and its teams stand on key elements of the caregiver experience

- Engagement
- DEI
- Safety culture
- Resilience

4

Optimize the talent life cycle

- Onboarding and orientation
- Role transitions
- Skills development and sustainment

Focus on physician and caregiver well-being

Develop leaders' understanding of resilience and well-being

Conduct leaders wellness rounds to listen and respond to the needs of staff

Incorporate messaging on mission into daily huddles to connect staff to purpose

Reduce hassle factors in the environment to enable top-of-license practice

5 Promote psychological safety as a core value

Coach and mentor leaders on supporting staff in need without crossing over into treating symptoms

6

8

Enable proactive peer support outreach process led by trained peer supporters

Destigmatize and enable easier access to mental health support

Patient and consumer experience trends

Patient experience declined steadily over the pandemic, after a short-lived bump in performance at its onset. The intense stress on provider systems and people severely reduced healthcare workers' ability to focus on a compassionate and <u>friction-</u> <u>free environment</u> for patients. That was further exacerbated by far-reaching stress on the population that shaped behaviors and attitudes in general, and toward healthcare in particular.

These trends now appear to be reversing. The first half of 2022 saw an uptick in patients' responses to "likelihood to recommend" (LTR) in both inpatient and emergency departments. We've also observed similar gains in key drivers highly associated with LTR. Despite overall declines in acute settings, patients' confidence in their physicians and caregivers remained high. Over 80% of ambulatory patients awarded the highest-possible LTR score to their physician or practice. Among 2.2 million ambulatory patient comments analyzed, there was a steady 4:1 positive-to-negative patient sentiment ratio between January 2020 and October 2021.

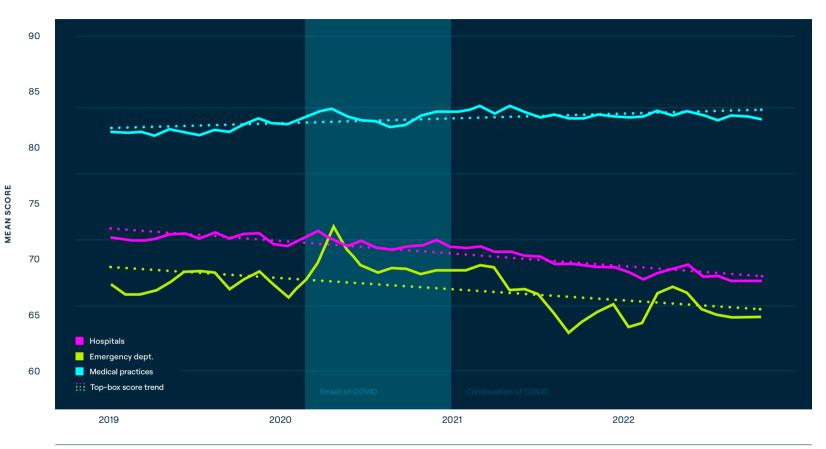
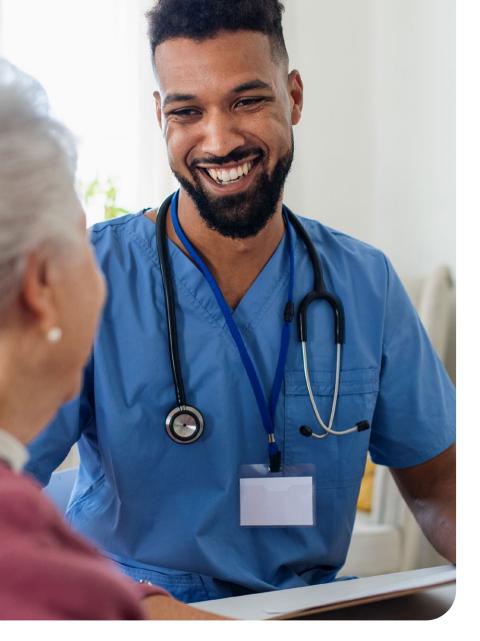


FIGURE 12: COVID impact on patient experience - likelihood to recommend

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Heightened attention to safety

Analysis of patient ratings and comments shows how the pandemic reshaped patients' attitudes toward care and caregivers. Since 2020, patients have become highly attuned to aspects of care that may undermine their safety and well-being—including <u>cleanliness and</u> <u>hygiene</u>, timely access, care coordination, and clarity of communications. This heightened awareness of safety cuts across care modalities and settings. When patients' expectations around these aspects of care are not met, their confidence and loyalty erode.

These trends offer clear evidence that patient trust should not be assumed. It needs to be earned—and reearned at every interaction. Trust building is not the job of the care team alone. All staff play an important role in establishing and sustaining trust.

Higher consumer expectations

Three key factors continue as primary drivers of consumer loyalty: confidence in the skill of their provider, evidence of teamwork among the care team, and respectful treatment. All three factors are strongly correlated with a patient's likelihood to recommend the provider or organization.

But expectations have increased beyond these key drivers, and consumers are more likely to walk away when those expectations aren't met. The availability of information is table stakes. The rise of consumer expectations in healthcare is evidenced by patients' increased (and increasing) reliance on online ratings and reviews when selecting a provider. Even when referred to a specialist by a trusted primary care provider or someone they know, 83% of consumers will consult online sources. Similarly, when choosing a new primary care provider, patients will consult multiple online sources and read five to six online reviews prior to making their selection. Failure to make ratings and comments available to consumers is a missed opportunity to connect with them at the time of decision-making. Additionally, ensuring patients see truly representative ratings and reviews helps build confidence in your organization and providers—showing that your organization is making good on its brand promise.

83%

of consumers will consult online sources even when referred by a trusted primary care provider or someone they know



2.2x more

0

0

than doctor referrals when choosing a primary care provider

> Patients will consider **5.5** online reviews

during their provider selection process

New appointment

OS PA

63%

of consumers prefer to book an appointment digitally vs. over the phone

Today's patient journey

#1 factor

in earning a 5-star review is the quality of customer service during a visit As information becomes more readily available, and people have more choices about where and with whom they seek care, consumers are less likely to tolerate inconvenience and "hassle factors." Analysis of patients' experience of friction before, during, and after care shows irrecoverable impacts on loyalty for even a moderate amount of friction—and greatly exacerbated impacts on loyalty when greater degrees of friction are experienced.

Friction experienced before care can include scheduling challenges, difficulty contacting the provider or office, and unreturned phone calls. Hassles during care include office staff interactions and getting important information at the point of care. Post-care friction includes things like post-visit communication, availability of test results, and scheduling follow-up appointments.





Friction can undo the beneficial effects of doing well on the "loyalty mainstays" (confidence, teamwork, and respect) and points to the need to gather information about the Human Experience across the entire journey. Further, to ensure loyalty and reduce friction, it points to the need for staff to be engaged, working in supportive environments, and set up to deliver care with high reliability.

Practices of top performers

Though the lines between patient and consumer engagement continue to blur, the good news is that improvement strategies are aligned. Organizations that focus on understanding and meeting the needs of consumers are building enduring relationships based on trust and characterized by loyalty.

Here again, we see common approaches among top performers whose performance was more resilient to the effects of the pandemic: active listening, fueled by continuous feedback strategies. New care models and new consumer expectations are pushing health systems to gather feedback using more dynamic and flexible methods—complementing traditional survey models with passive listening and digital engagement modalities, such as online PFACs and diagnosis– focused digital communities. But even as new technologies complement or supplant previous modes, the time-tested principles and approaches persist: leadership-driven commitments to safety as an enterprise core value, patient-centered care, data-driven continuous improvement, and adoption of high reliability organizing principles.

Building and sustaining trust among patients/consumers

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Establish a vision and strategy for achieving that strategy

- Enterprise PX/CX strategy
- Continuous listening: active and passive data capture
- Mine comments using AI
- Gather qualitative feedback using digital engagement
- Use data to drive improvement, support patient-centered care
- Monitor intersection of PX and employee experience (EX)

2

Apply high reliability principles to PX/CX

- Incorporate HRO principles and skills into service standards
- Reduce variation: Do better, not more

3

Leverage your digital front door as an online opportunity to build/sustain trust

- Accuracy of online information: Augment listings with photos, ratings, and comments
- Export PX ratings/comments to third-party rating sites and health plan directories
- Enable appointment booking from third-party sites

4

Address experience and safety for patients in ambulatory and virtual settings

As challenging as the times are, there *is* a path forward.

By Per

Conclusion

As challenging as the times are, there *is* a path forward. It is a path that demands building trust among patients, among employees, among consumers, among health plan members—in short, among *humans* in a vast array of contexts. While those contexts vary, the tools needed to gather, analyze, and visualize the data on what they are experiencing should be the same. That will enable acting on the data more effective and efficient.

Press Ganey is ready to be the platform that healthcare organizations use to understand the Human Experience, then act to improve it. We have the tools, the data, the insights, and the expertise needed to guide the strategies that will enable organizations to not just survive, but to thrive.

See what Human Experience healthcare is all about

Take your next steps into the future of healthcare. Learn more about our industry-leading platform at:

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