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99 LESSONS LEARNED FROM DISNEY TO IMPROVE THE PATIENT EXPERIENCE

BY JAKE POORE

Anyone who knows my family and me knows that we are Disney fanatics. I do not know how that came to be, but it did. Whether you are or not, I think we can all agree there are many things the Disney Corporation does very well, especially delivering an unforgettable customer experience. During the last two years under the umbrella of the COVID pandemic, we have seen the reluctance of patients to come seek timely medical care. We would like to believe that patients come to see us solely for the quality of care we provide; however, in reality it is a combination of the care and the experience. Research has told us that patients value their experience as a factor in deciding whether or not to seek care and it has also shown us that patients who perceive a better experience are more compliant leading to improved health outcomes. Our goal should not to become Disney or the Ritz-Carlton, but to offer the best experience possible for our patients. As leaders, it is imperative for us to set the conditions within which this can happen, hence my interest in this book.

I wrote my first leadership book series article on Fred Lee's book, If Disney Ran Your Hospital: 9½ Things You Would Do Different. In it, he applied his experiences from Disney to healthcare. It was a fascinating read and I have personally brought several items from that book into places I have led through my career. This past March I had the opportunity to listen in to a virtual talk given by Jake Poore, another former Disney executive now making his career in healthcare helping facilities improve their patient experience. What I found truly fascinating about his talk was how small, simple changes can drastically improve the experience of patients. His new book walks readers through many of these small changes. Most of the concepts are not new, and my rocket scientist brother would probably agree are not rocket science, but warrant revisiting periodically especially as our Military Health System (MHS) is changing in the post-COVID world. For this article, I am going to do something a little different, since this column is about leadership, and focus this article solely on the leadership tips he presents in that section of the book.

One theme that echoes throughout this book, especially in the leadership section, is employee empowerment. Interestingly this was also one of the major themes in Fred Lee's book based on his time at Disney. As leaders, we need to empower our staff to be the one

that makes a difference in the patient's experience. This starts with setting Operational Priorities, a prioritized list of what matters to the organization. Does being on time to a meeting matter more than helping a patient find their way through the building or stopping a potential safety issue? After setting Operational Priorities we need to provide our staff a "common set of tools and common language." In military vernacular I see this as Mission Command, giving intent, guidance, and setting right and left limits.

A simple technique that I have used in my career to help empower staff is telling them the why. Mr. Poore comments on this as well in his book. When staff understand the why, they feel more empowered to act. Additionally, letting staff know how their role affects the bigger picture of the organization is important. Studies show that staff satisfaction is higher when they understand their role in the organization. There is the famous story about JFK asking the janitor at NASA what his job was. His response was related to putting people on the moon. In this book, a similar interaction is noted between Dr. Michael DeBakey in Houston and a janitor there. After that interaction, when asked, the janitor's response was "Dr. DeBakey and I save lives." I have personally seen in recent months the value of staff understanding the why and how they fit into the bigger picture.

Studies show that employees can solve 67% of all business problems. The tradition of ringing a bell at the conclusion of cancer treatments, or naming parking lots and numbering the spaces, all came from employees trying to make the patient experience better. Engaging with employees allows us to capitalize on the diversity of thought and ideas present amongst our incredibly diverse staff. Staff have great ideas but frequently do not feel like they can share them. Encourage the sharing of ideas from the end-user level up and ensure that you use your staff for their expertise in their specific role.

Another theme that Mr. Poore explores having to do with employees is recognition. Studies have shown repeatedly that people leave jobs because of their management and the lack of feeling appreciated. Part of that is informing them of their role in the bigger picture of the organization as discussed above. The other piece is recognizing when good things happen. Mr. Poore recommends before visiting an area, call first and find out about good things people
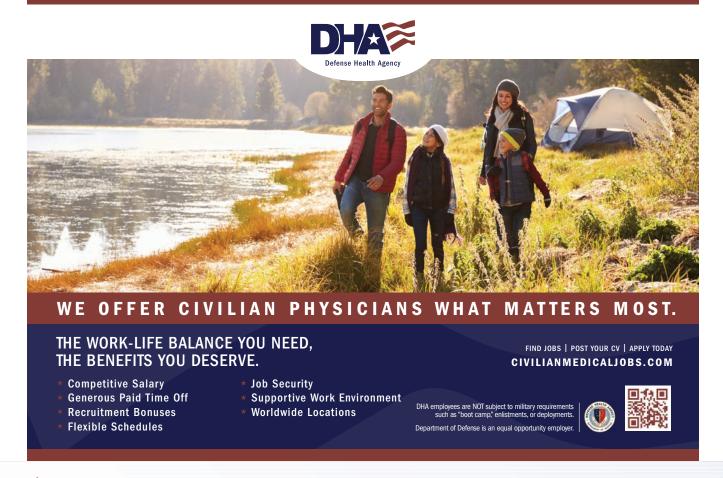
have been doing recently, so that you can recognize them in real time. We typically spend most of our time on visits focusing on what is not working but we need to flip the script to focusing on what is working. Even if something did not go quite right but the intention was sincere, it can be recognized. Mr. Poore calls it "Celebrate the Intent, Coach the Behavior." Publicly celebrate the intent and the motivation of the employee but privately coach them on the result.

Expectation setting is an area in which we can definitely take a lesson from Disney. Disney posts the wait times at every line so you know how long you will be waiting. How long should our patients wait after checking in? Did you know that in Section 32 of the Code of Federal Regulations there is a legal standard that our patients wait no longer than 30 minutes after checking in? I do not believe our patients know; however, it is a question on the JOES survey. Much has been written about expectation management especially in the restaurant sector. Restaurants typically tell you a time beyond when they expect to seat you so that, upon seating you sooner they exceed your expectations. They also fill the walls of the waiting area with paraphernalia to try to distract you so time seems to move faster. While we cannot do exactly this in healthcare, we can set expectations with our patients. A simple and cheap way is to put up a board on the wall listing all providers and whether they are on-time or delayed. Even without a board this is easy by having someone periodically go through the waiting area and letting waiting patients know of the delays and the why if appropriate. Research has shown that patients generally do not mind the wait, what they mind is no one telling them or keeping them updated. Simple interventions to improve the patient experience.

Lastly, ensure that not only you but all of your leaders are personally setting the example. I consider integrity to be one of the most important leadership characteristics. I define integrity as doing the right thing even if no one is watching. Mr. Poore refers to it as ownership. He says, "If you see it, hear it, or smell it – you own it." This behavior needs to be modeled by leaders first and foremost and staff will adopt it.

In conclusion, I hope you appreciate the revisiting of these simple concepts for leading to improve the patient experience. As I stated above, they are not rocket science but still not something we tend to do well in many of our clinics. This article has focused on leading to improve the patient experience but I want to ask you to consider it more customer experience than simply patient. Changing the mindset to customer experience brings in the satisfaction of our staff who are also our customer. Many of the ideas discussed above will improve the customer experience, not just the patient. Finally, I would like to challenge you, as leaders in our MHS, to change one thing that improve the experience of patients and/or staff within the next 3 months. It does take some time but in my opinion, it is well worth it. Thanks for reading.