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INSIDE EDGE

Patient & Consumer Engagement: Redefining a Relationship

Introduction

When Scottsdale Institute launched the SI Patient/Consumer Engagement Adoption Model™ and the SI Patient/Consumer Engagement Assessment© earlier this year, we frankly didn't expect any organizations to stand out in practical implementation of consumer-centric strategies for a traditionally hospital-centric industry. We were wrong. While to date most participating health systems have scored on the second level of the five-level model (one is basic and five the most sophisticated) a few—all SI members—scored near the top. We are fortunate in being able to feature two of these leading health systems in this *Inside Edge*.

We talk to teams from Trinity Health and Cedars-Sinai to share best practices in this evolving endeavor. Our discussion also includes an expert from SI Sponsor Emmi, which counsels providers in engaging patients and consumers.

Health system-executives are invited to participate in the SI Patient/Consumer Engagement Assessment© to see where their organization scores within the SI Patient/Consumer Engagement Adoption Model™ (see graphic p. 7). To measure your success and progress in engaging patients and consumers visit http://www.scottsdaleinstitute.org/pce/pce.asp. There is no cost, results are private

and multiple participants from a health system are allowed.

Preliminary Returns for SI Patient/Consumer Engagement Assessment©

36%	**Level 1**
45%	**Level 2**
10%	**Level 3**
6%	**Level 4**
1%	**Level 5**
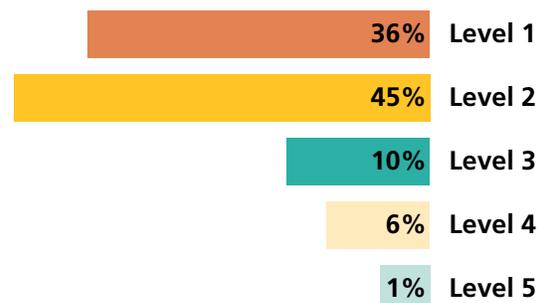
Where is your organization on this journey? Find out by taking the assessment.

A 'mystery'

"What patient and consumer engagement means is still a mystery," says Shara Cohen, Senior VP at Chicago-based Emmi, a provider of patient-engagement solutions and an SI Sponsor. "There's no consistent definition and that means healthcare organizations are often confused. Success is a moving target."

A big challenge for even top-performing organizations is that they're often not judged against their peers by consumers. Rather than healthcare standards, they will be judged against experiences with consumer products and the retail industry. "There's a tremendous distance between the two worlds," she says, which makes the demand on organizations bigger and more pressing than often thought.

Still, there's a growing imperative in healthcare: if you cannot engage people and develop a relationship over time, someone else will. "Increasingly, patient engagement is not a nice-to-have. You have to be able to nurture a relationship with people in your catchment area," says Cohen.

That's much more than engaging patients during hospital rounds or how providers relate to patients generally. "When you think about the scope of a population, it's a completely different cultural challenge," she says.

Shara Cohen, SVP, Emmi

"Organizations are used to thinking, 'How can I impact the person in front of me?' That's not enough anymore. When you focus on the top 1 percent of high-cost patients the traditional care-management model works, but it doesn't scale when you're accountable for the other 99 percent. That ability to scale is what everybody is talking about but not effectively implementing yet."

Culture over technology

"For all the discussion regarding technology, patient and consumer engagement is more of a cultural issue than a technology one. You have to communicate outside the direct provider/patient relationship but reinforce that relationship. And that relationship can be disintermediated by new competitors—non-traditional providers, retail pharmacies, consumer websites and others. It's incredibly tricky."

Key is for senior leadership to commit the patient resources required at the level of population and community health. Communicating messages that support care plans and delivery outside the clinical environment is a critical element. "Not sending people to Google to figure it out on their own," says Cohen, noting that such communication involves two components:

"If you cannot engage people and develop a relationship over time, someone else will. Increasingly, patient engagement is not a nice-to-have."

1. Quality communication that's patient-centered and imbued with behavioral marketing and educational science;

2. Technology to enable that delivery and measurement of effectiveness.

Organizations must ask how they best deploy that technology to effectively communicate those messages.

"We can't apply old solutions to new challenges. Organizations need to consider how they're making investments in patient and consumer engagement and who is empowered to implement them. The risk is that we delegate these decisions and the action to people invested in or limited by the status quo. Also, organizations underestimate the cultural shift required for their staff. At a practical level organizations can quickly devolve into inaction. The reason organizations like Trinity Health and Cedars-Sinai will be successful is because executive leadership has made the decision and they're steadfast to make it happen on the local level," she says.

> "*If we're going to be a transforming presence we've got to find a way to reach the people who don't come to us.*"

Trinity Health: Creating a healthcare-consumer marketplace

With 88 hospitals in 21 states, Livonia, Mich.-based Trinity Health is one of the largest Catholic healthcare systems in the country. Notwithstanding its size and diversity, Trinity Health has launched an aggressive, enterprise-wide, patient-and-consumer-engagement strategy—even as the concept continues to evolve. The strategy brings together an integrated team from marketing, clinical care and IT.

"We've seen tremendous change in the patient-and-consumer-engagement space," says Bret Gallaway, at Trinity Health for three years and senior VP of Marketing and Communications. "Trinity Health always starts with its 160-year-old mission which is to serve together. This is a very diverse organization and this initiative is really a combined effort. Our mission also is to become a transforming healing presence within our communities. Today that means finding new ways to serve our communities. Digital health is one of those ways."

Scale is paramount when caring for 35 million people across 21 states—and only one in four persons comes into a Trinity Health facility. "If we're going to be a transforming presence we've got a way to reach the people who don't come to us," says Gallaway. "One-hundred and sixty years ago we would go out to people's homes, schools and churches. How can we use the digital environment to achieve our vision of being a trusted health partner for life—and do it from the user's point of view?"

Bret Gallaway, SVP, Marketing & Communications, Trinity Health

That's the spiritual foundation for patient and consumer engagement. Enter IT.

"We've been fixated on the EHR for the past decade," says Marcus Shipley, Trinity Health's CIO. "This effort goes beyond that focus to envision IT as a modern utility, built with interoperability from the ground up, in partnership with third parties and the consumer." Trinity Health's myHealth platform represents that shift, designed to be more like a consumer-banking application and incorporating interoperability and unlocking data for the consumer to use, in contrast to the monolithic nature of traditional EHRs.

Marcus Shipley, SVP, CIO, Trinity Health

Platform for flexibility

Nothing is off the table. Third-party IT partnerships are welcome as long as they support flexibility to change as quickly as consumer

trends. Shipley frames the new IT architecture on three levels:

1. A visual layer that integrates all information—including from the EHR and other sources—through a single-sign-on user interface to make the user experience fluid.

2. An integration and interoperability layer using state-of-the-art web services and standards like FHIR.

3. A data layer based on open systems.

myRecord to enter my latest blood sugars. My care manager can send me congratulations and mention that our pharmacy partner has a glucose strip that's on sale if you go Tuesdays. Is this built yet? No. That's the vision. The data is about me and about choices. I'll be able to calculate the cost of care, see the difference among options and select the best value for me. The goal is to understand what matters most to our consumers and partner with them in achieving it."
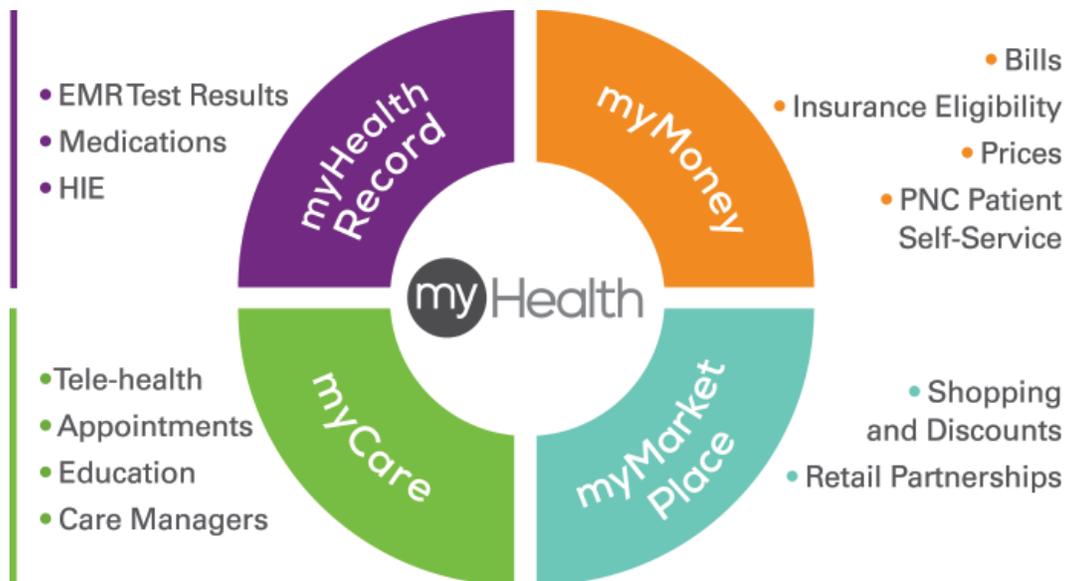
Such IT infrastructure enables creation of the new myHealth framework for consumers. Mary Beth Hardy, Trinity Health's VP of People-centered Care Experience, says myHealth allows consumers to access to their health records, view pricing, pay for their care, engage in digital messaging and schedule classes, appointments and testing. Patients and consumers can invite their family members into the myHealth platform as part of the care team. The objective is to create a combination secure clinical experience and marketplace where they can buy goods and services. http://www.trinity-health.org/myhealth-patients

"We want an N of 1 experience," she says. "As a consumer I can log in to myHealth, click on

To date Trinity Health has implemented the single-sign-on capability, built out e-visits, developed partnerships with community health agencies and is close to embedded wellness information.

"We want to build the Amazon.com of healthcare. We'll invite partners in who want to help create the N of 1 experience," says Hardy.

Mary Beth Hardy, VP, People-centered Care Experience, Trinity Health

Getting to know you

As another sign of how marketing has become a key element in patient and consumer engagement, Matt Casselton came to Trinity Health only six months ago as VP of Marketing. "Marketing plays a critical role in getting to know consumers, including segmenting consumers, mapping their journeys and working with IT and clinicians to craft their experience," he says.

"We want to build the Amazon.com of healthcare."

In previous experience he became familiar with firms like Mint.com, which offers a comprehensive financial-services portal for consumers. In that vein, Trinity Health has partnered with Sharecare.com, a consumer website that allows people to create their own health profiles, ask medical questions and guide their wellness activities. "We love their consumer-engagement platform, their personal assessment tools. It's personalized, customized," says Casselton.

Matt Casselton, VP, Marketing, Trinity Health

Hardy says healthcare has to think both locally and globally simultaneously. "We're challenging ourselves to think about virtual communities. We care for geographic communities but we also need to expand our view of care to virtual communities. How can we be the facilitator of virtual health and wellness communities?"

"Facebook is social, LinkedIn is professional and YouTube is visual," notes Gallaway. "What's your health platform? Consumers want one place to go."

Adds Shipley: "We need a platform that's transparent, relevant to consumers and supports the integration of mind, body and spirit."

Cedars-Sinai: Thinking outside the silo

Los Angeles-based Cedars-Sinai, one of the nation's largest academic medical centers with nearly a thousand beds, 2,100 physicians and 2,800 nurses, also serves one of the nation's most diverse urban regions.

"Patient engagement is extremely important to us," says Sharon Isonaka, MD, Cedars-Sinai's VP of Clinical Transformation. "We define it as a process by which patients become activated and partner proactively with us in maintaining wellness and treating disease." While it overlaps somewhat with patient experience, the two concepts are complementary—and patient engagement involves the entire enterprise.

"Although I lead our patient engagement initiatives, this is truly a partnership with leaders across our organization. There is no one leader or function that does it all for patient and consumer engagement. It's anything but siloed. It's embedded across the entire institution, supported by robust enterprise-wide information systems," she says.

"We have a multi-pronged approach," says Cynthia Litt Deculus, VP for Population Health at Cedars-Sinai. "We aim to address the needs of patients and consumers no matter where they are across the continuum of care. For example, for patients in the community we have a long-standing history of outreach and partnership with community-based programs. For primary care patients, we have a more integrated approach that takes full advantage of the patient portal to complement our in-person services. More fragile patients require the deepest level of engagement.

Sharon Isonaka, MD, VP, Clinical Transformation, Cedars-Sinai Health System

Patient and consumer engagement covers a wide spectrum."

Isonaka says the commonality among all of the Cedars-Sinai initiatives is that they start with a focus on each person as an individual. "The individual's preferences are key. Knowing how each person best receives and shares information enables us to tailor our approach. What are their individual risk factors? How can we best translate that individual focus to meet the needs of our entire population for whom we are accountable? We see patient engagement and population health as very integrated."

> *"The individual's preferences are key. Knowing how each person best receives and shares information enables us to tailor our approach."*

Litt Deculus says all organizations are going through a cultural shift that began when hospitals started becoming health systems. "Cedars-Sinai started that cultural change with creation of a medical foundation many years ago. The hospital has always centered itself on the patient experience. We have always been a patient-focused organization."

Multiple-choice question

Perspective is critical to changing the culture. "We begin with identifying how patients prefer to access healthcare and information," says Isonaka. "Leveraging technology enables us to give our patients many new options. We understand that each patient has different interests, needs and abilities. The challenge is to offer a variety of solutions."

For many, the patient portal fills those needs. Cedars-Sinai is continually expanding the capabilities of the portal, which allows patients and consumers to access information 24x7. In addition to reviewing their own health information, patients can schedule appointments online, participate in e-visits for selected conditions and complete assessments and receive guidance tailored to their health status. A pilot in video visits is designed to find new and more convenient ways for patients to access healthcare.

Educating patients on the benefit of registering an online account occurs during visits to physician offices, the ED and imaging centers, among other sites. Patients also have the option of setting up their access to the portal through a website without the need for a prior visit to the health system.

"It doesn't mean the portal will replace the telephone, in-person visits or even print material. We also do in-home visits," she says. "The key is to create a blend of options based on patient preferences and health risks. Both are important in finding the best way to meet the needs of patients."

Cynthia Litt Deculus, VP, Population Health, Cedars-Sinai Health System

The two basic principles of population health—risk stratification and engaging those patients identified in that analysis to more effectively manage their own health—has led Cedars-Sinai to build real-time-query tools in its EHR for continuous monitoring of its accountable populations. "We are continuously stratifying so we can conduct intelligent outreach with electronic reminders to support prevention and wellness," says Litt Deculus.

"There is also great potential for patient engagement to enhance the power of population health," says Isonaka, "through more personalized, efficient, and impactful disease management. We are exploring ways to harness the power of patient-reported data and to connect it with the efforts of our pharmacists, health coaches, dieticians and physicians. Mobile platforms for interactive real-time communication

and patient-reported data will complement in-person and telephonic visits and classes with our care team."

Conclusion

It's almost a truism that defining patient and consumer engagement is an elusive task. Perhaps it's just a matter of *redefining* it for the 21st century. Not everything about patient engagement is new under the sun. Trinity Health cites its 160-year-old mission as a transforming healing presence within the community as the driver for finding new ways to engage patients and consumers.

"There is great potential for patient engagement to enhance the power of population health through more personalized, efficient, and impactful disease management."
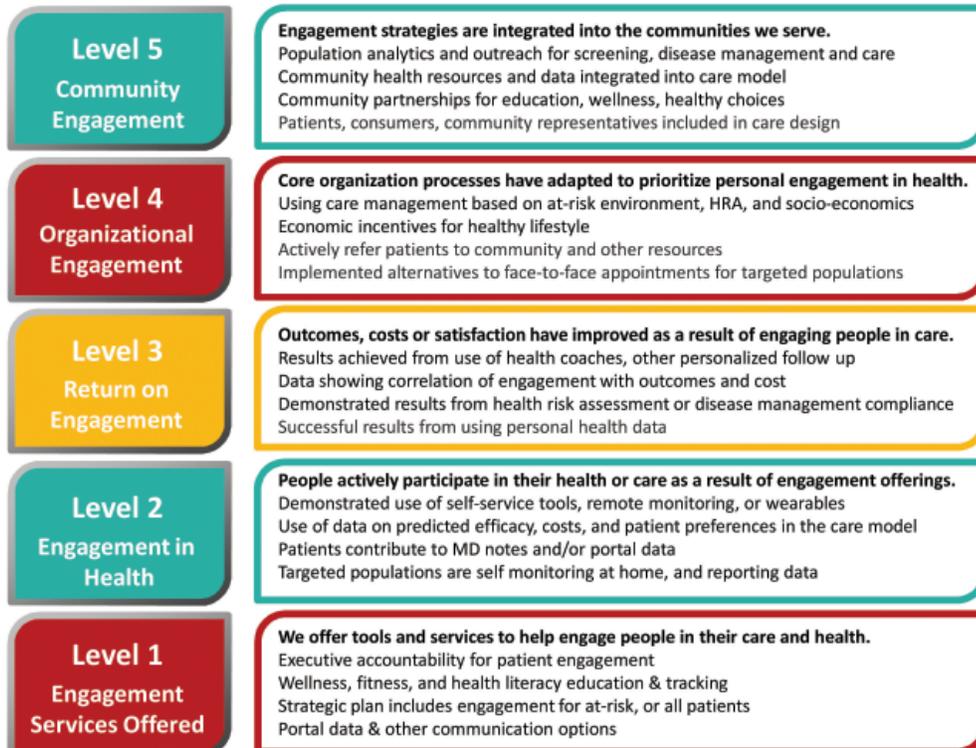
Since its inception in 1902, Cedars-Sinai has a long and rich history of excellence in quality healthcare, including a significant focus on improving the health status of its community and a 30-year history of providing longitudinal primary and specialty care for patients.

Still, the patient-and-consumer-engagement train never stops running. Trinity Health wants to build the Amazon.com model of healthcare. Cedars-Sinai just completed a pilot for OpenNotes, an initiative that enables patients to read the ambulatory care progress notes written by their physicians through the online patient portal. In the next six months it plans to expand the program, which has become a national movement (http://www.myopennotes.org/) to enhance transparency of information and partnership between patients and providers. That's a good place to start.

SI PATIENT/CONSUMER ENGAGEMENT ADOPTION MODEL™
STRATEGIC OUTLINE FOR HEALTH SYSTEM EXECUTIVES

Level 5 — Community Engagement
Engagement strategies are integrated into the communities we serve.
Population analytics and outreach for screening, disease management and care
Community health resources and data integrated into care model
Community partnerships for education, wellness, healthy choices
Patients, consumers, community representatives included in care design

Level 4 — Organizational Engagement
Core organization processes have adapted to prioritize personal engagement in health.
Using care management based on at-risk environment, HRA, and socio-economics
Economic incentives for healthy lifestyle
Actively refer patients to community and other resources
Implemented alternatives to face-to-face appointments for targeted populations

Level 3 — Return on Engagement
Outcomes, costs or satisfaction have improved as a result of engaging people in care.
Results achieved from use of health coaches, other personalized follow up
Data showing correlation of engagement with outcomes and cost
Demonstrated results from health risk assessment or disease management compliance
Successful results from using personal health data

Level 2 — Engagement in Health
People actively participate in their health or care as a result of engagement offerings.
Demonstrated use of self-service tools, remote monitoring, or wearables
Use of data on predicted efficacy, costs, and patient preferences in the care model
Patients contribute to MD notes and/or portal data
Targeted populations are self monitoring at home, and reporting data

Level 1 — Engagement Services Offered
We offer tools and services to help engage people in their care and health.
Executive accountability for patient engagement
Wellness, fitness, and health literacy education & tracking
Strategic plan includes engagement for at-risk, or all patients
Portal data & other communication options

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