Are You Ready for a Chief Experience Officer?

By Debbie Landers, MBA

The Chief Experience Officer (CXO) title is one of the newest, and I might add important, additions to the healthcare C-suite over the last decade. This role was driven by the need to have someone in the organization at the executive level focus on CAHPS, increased transparency and rapidly growing reimbursement models. Additionally, the CXO is the voice of the customer, both current and future.

Studer Group had the privilege of helping establish the importance of HCAHPS and lead the effort for all size hospitals to understand the value and impact an aligned culture driven by consistent employee and physician behavior will have with quality and service outcomes.

Centers for Medicare and Medicaid Services (CMS) has made it clear, the patient’s voice will play a much greater role in the overall government incentive payments based on performance for years to come. There are currently seven mandated CAHPS programs and more are in the pipeline.

Recent research by Jarrard Phillips Cate & Hancock, showed half the hospital CEO/CXOs felt good about their HCAHPS progress and were moving into a broader scope of responsibilities for their patient experience. We saw this same movement with CNOs and Compliance Officers - the responsibility expands as the scope of the work is better defined. With Studer Group partner organizations across the world, we see the need for the CXO is growing significantly.

Boards of Directors are challenging hospital leadership to improve the patient experience. Savvy executives realize the only way to ensure consistency is through hardwiring the engagement of the employees and physicians. To create consistency, it requires that tactics and actions become the “way we practice” or routine with every employee, every physician and every patient—we call that culture! Culture is not an action that is owned by one title, like the CXO. It must be fluid throughout the organization. The CXO role is one that can lead the efforts to align a culture, improve engagement with employees and physicians, reduce turnover and improve access points - which all leads to improving the patient experience and engagement.
The Role of the CXO Today
Employee engagement is not an HR role; it is a CXO role today. Our partners realize that an engaged and happy workforce will reduce turnover and provide consistency. So, now we are adding turnover to the scope of the CXO role. The CXO is also a data “geek.” They have to thrive in understanding CAHPS numbers and the correlation to quality outcomes. These numbers provide insight to the executives on where they have stars and where they have challenges.

Access into a healthcare system is also becoming a role the CXO is actively leading or supporting. I spoke with several CXOs who spend more than 50% of their time working to create quick and easy access into the physician clinics, outpatient centers and other care venues. This is challenging healthcare systems to think more like a retail business. When people are interested in your product, you must make it convenient and accessible. Think urgent care, minute clinics and online physician visits.

How to Leverage Technology
One organization coached by Studer Group, Kaiser Permanente, shared that in 2016 they saw more patients virtually than they did throughout their health system. They are taking care to their patients versus expecting them to travel and get care the traditional way. Consumers are forcing healthcare systems to think more like a retail business. When people are interested in your product, you must make it convenient and accessible. Think urgent care, minute clinics and online physician visits.

Technology has made our need for immediate access to answers, data, products, services and care. This expectation has quickly spread throughout all industries. Amazon is now the largest retailer; they have figured out how to get you what you need delivered to your door in two hours if you are willing to pay to be a Prime member. Uber has disrupted the transportation business, simply by creating an app and a convenient way for people to generate extra income. CXOs are finding themselves challenging the status quo and being disruptive by thinking outside the traditional care models and putting the convenience of the patient first.

Recruiting the Right CXO
Hiring the right person for this job is difficult. We advise CEOs not to look within the current C-suite seats for this role. The CXO needs to focus on consistent behaviors (across all access points) that drive and lead to consistent quality outcomes. Many think the role of the CXO is solely to improve patient experience. Beware of this thought as you will not have sustainable long-term results if you solely focus on the patient experience. You might experience an uptick in your HCAHPS for one or two themes, however as CMS is adding additional CAHPS you will not have consistency until the culture expectation is hardwired. That means the C-suite and every employee and physician in the organization must be aligned by goals, process and tactics. You can’t have an employee in the ED who doesn’t follow the same culture expectations as a team member in the outpatient center.

So, if you are reading this and ready to make the investment to add a CXO to your organization, be sure you can commit to the following:
1. Agree this person is the Chief of Culture, not the savior to all CAHPS and engagement needs.

2. Provide unwavering support to stay the course and make the changes within the organization to truly hardwire a culture for long-term results.

3. Believe employee and physician engagement is the foundation to long-term patient experience.

4. Empower all leaders to commit to aligned goals and holding their employees accountable for results.

5. Utilize an execution model, like Evidence-Based Leadership℠, that provides a roadmap and tactics that make this all possible and will stand up against the challenges the physicians and staff will have around change and accountability.

6. Dedicate time and resources; this is not an independent role. This role will need the support of every department and every leader. It will need to have the voice of the CEO and CNO to set the stage and demonstrate the leadership need.

7. Ensure it’s a leader who is excellent at working across all departments and can tell stories and create the momentum for change.

8. Build support for all CAHPS Patient Experience, quality outcomes and the connection of the two.

9. Create the ability to interpret the various CAHPS and subsequent reimbursement models across all service lines and access points.

10. Ensure your organization is ready for transformation. Look at the patient as the customer and put the customer needs first. Perhaps you should think Chief Consumer Officer.
Bottom line, don’t think you can add a CXO and the job is done. The culture transformation is just beginning and the work will be invaluable to your organization. Studer Group can help your organization assess if a CXO would be a good addition to the senior leadership team, develop an onboarding plan and help align goals for success. Contact partnerships@studergroup.com to learn more.

Debbie Landers is the Innovation and Product Leader at Studer Group. Debbie is passionate about ensuring organizations set CXOs up for success and that CXOs have the tools needed to drive change. She helps CEOs understand the tremendous value a CXO can bring to their organization and how to set them up for success. Hiring right is critical with a CXO, they will need the skill set to align and build trust from the Board of Directors to the front line staff.