

Learning How to Own It: Designing a Service Recovery System

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Objectives

- Discuss the impact service recovery has on driving loyalty and trust within your organization
- Recognize the importance of creating a culture that supports service recovery actions through the use of real time feedback service alerts
- Review Sanford's service recovery workflow
- Describe the importance of leader sponsorship on your service recovery journey



Introduction

- Sanford Health
- Largest rural health system in the US
- 47 medical centers
- 2,800 physicians and APPs
- 200 Good Samaritan senior care locations
- World clinics in 8 countries
- 47,700 employees



Sanford Patient Experience Team

- Amanda Schotzko
- Ashley Nelson
- Becky Moch
- Sammi Davidson
- Mikayla Atchison
- Erin Healy
- Darrin Hawley



Vendor Journey



Service Alerts

- Natural Language Processing (NLP)
- Notifies leaders of concerning patient comments
- Comments describing very negative experiences, clinical errors, mistreatment, privacy concerns, requests for a call, intent to never return, legal risks, warning signs, and serious symptoms will be tagged as an alert.





How we figure out customers are dissatisfied

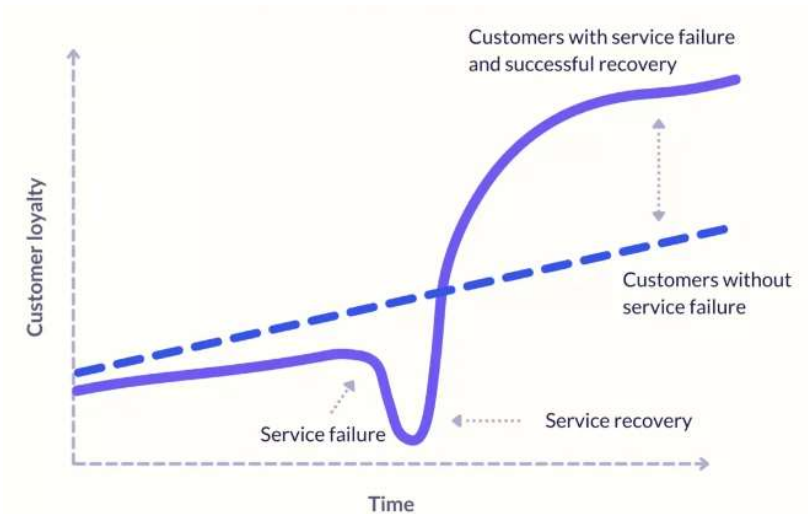
They tell us

**They don't
come back**

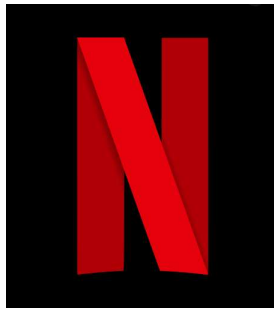


The Service Recovery Paradox

- You will never have a perfect system when you are delivering services
 - “Prepare for failure”
- Service recovery works best when
 - It’s not severe
 - It’s the customer’s first time experiencing failure
 - It doesn’t happen often
 - Perception the company couldn’t have controlled it
- Loyalty can increase



Logo Loyalty



Your competition is the last best
experience your patient had—
anywhere.



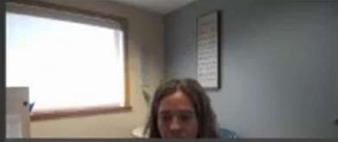
Why Service Recovery Matters



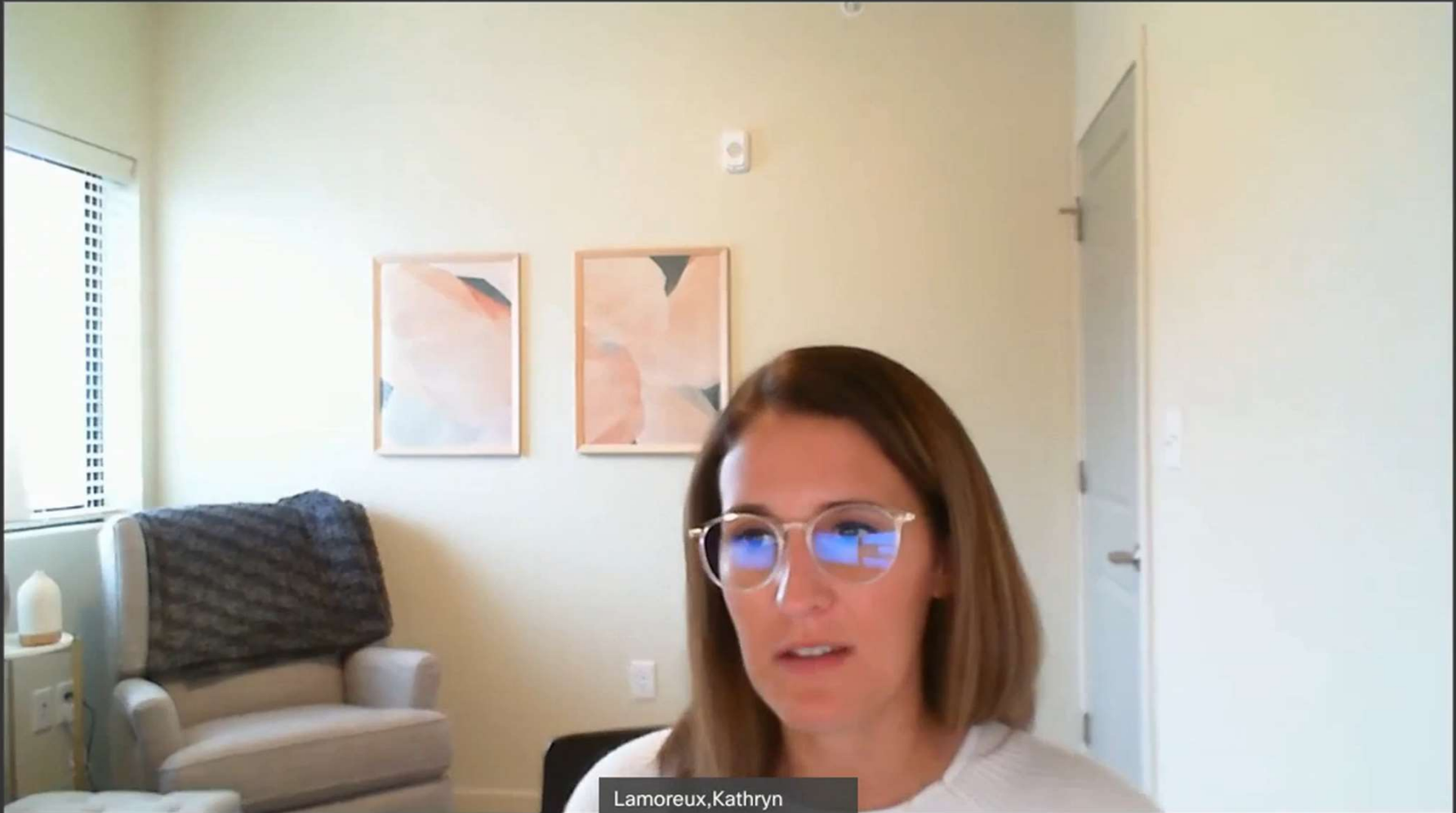
Setting The Foundation for Service Recovery

- Opted for decentralized approach
 - 8 team members for 47 hospitals and 300+ clinics
 - Leaders have access to EMR & relationship with providers
 - Timing is everything to the patient & staff
 - Better visibility for leadership
- No prior expectations to follow up
 - Big change; needed to coach leaders through the change





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ADKAR

- **A**wareness
- **D**esire
- **K**nowledge
- **A**bility
- **R**einforcement

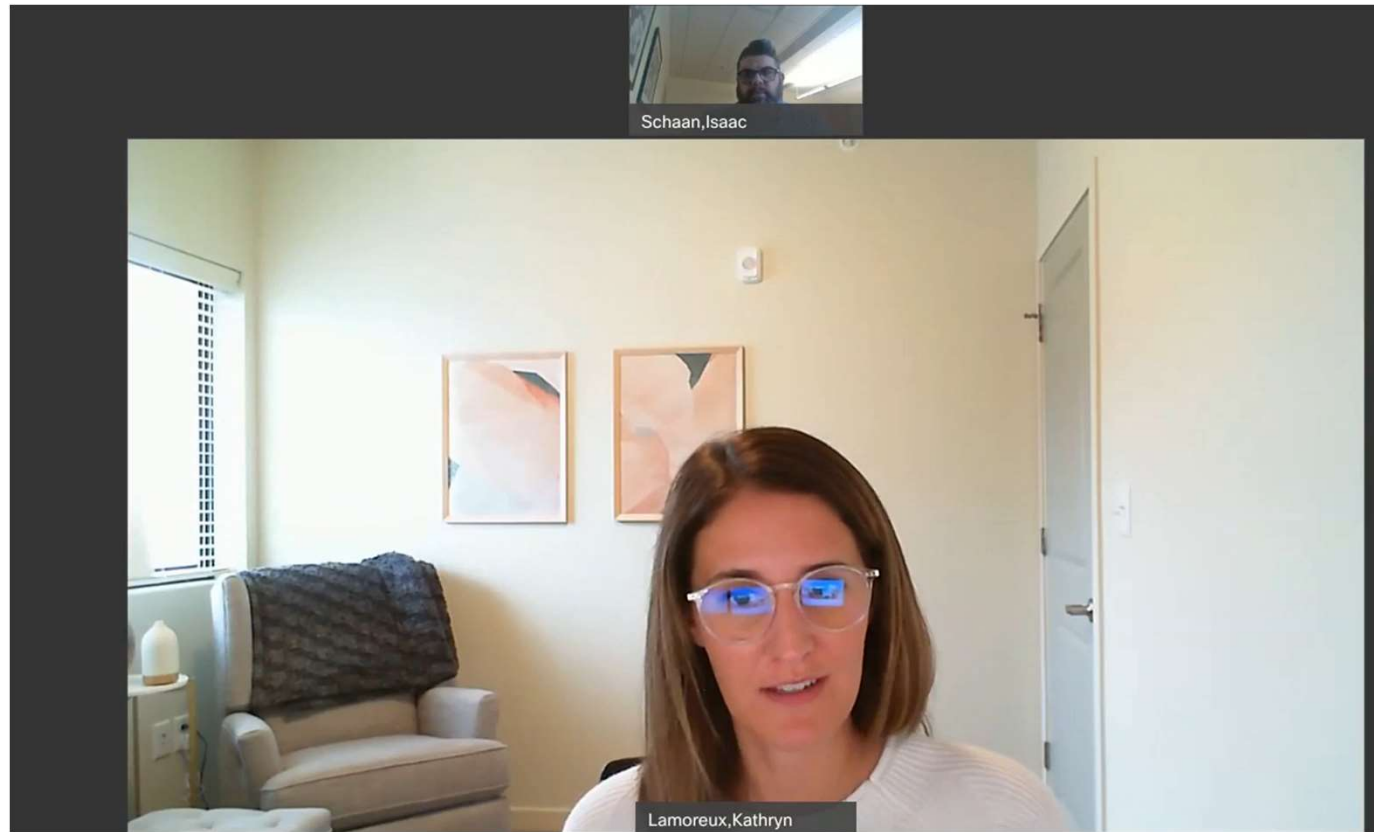


Awareness & Desire

- Awareness
 - Updates throughout the pilot
 - Numerous messages & presentations on why we were making the vendor change
 - Stories in our internet home page
 - Training webinars
- Desire
 - Start with why – share personal stories, make the connection
 - Connect back to ROI when you can
 - Connecting it back to our values

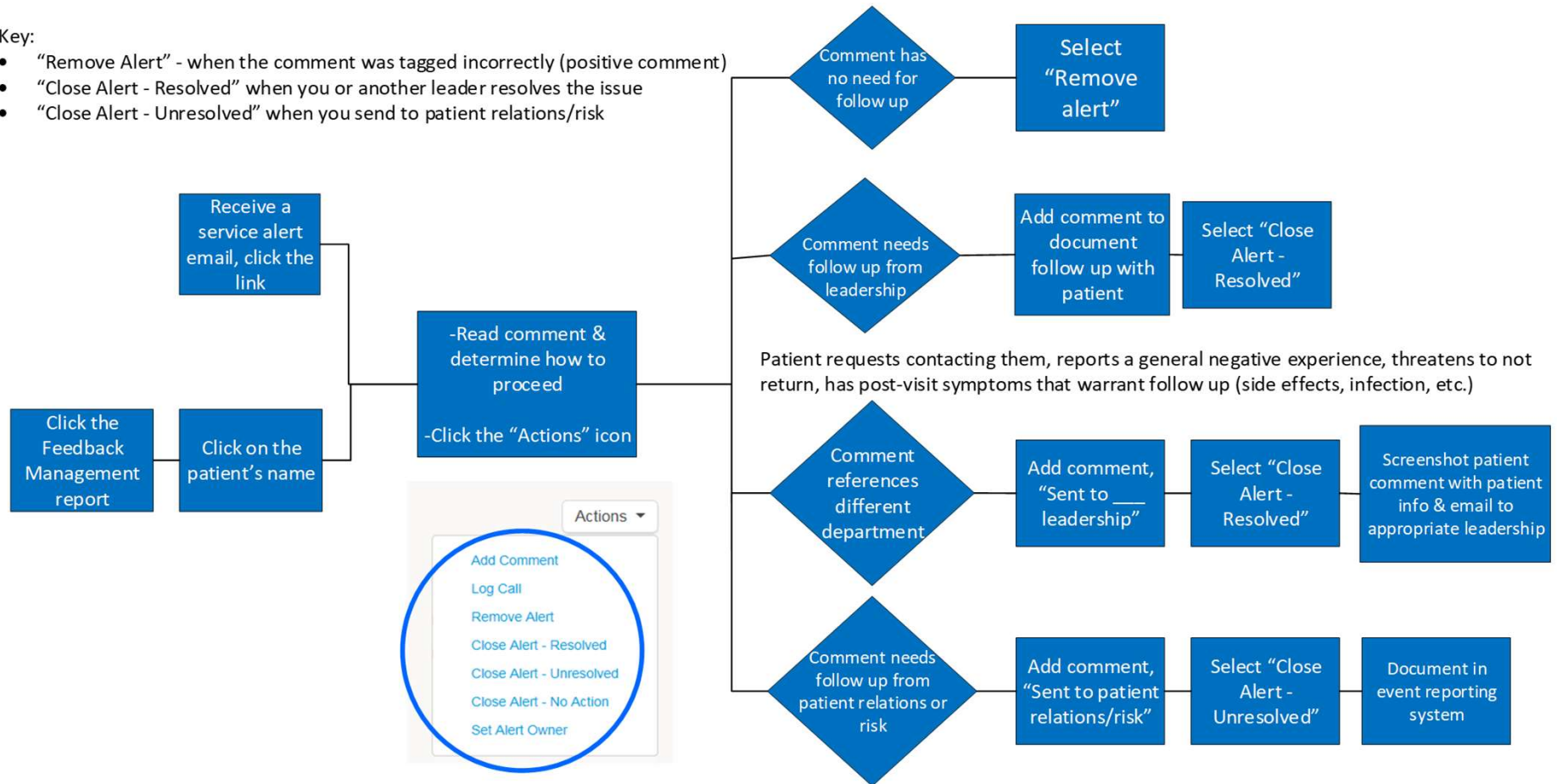


Knowledge



Key:

- "Remove Alert" - when the comment was tagged incorrectly (positive comment)
- "Close Alert - Resolved" when you or another leader resolves the issue
- "Close Alert - Unresolved" when you send to patient relations/risk



Patient relations: Patient mentions filing a complaint, lawsuits, malpractice, HIPAA violations, informed consent, identity theft, discrimination, allegations of aggression, racism, sexism, abuse

Risk: Patient mentions clinical errors (ie. wrong tests, incorrect diagnoses, allegations caregivers lacked knowledge, failed to review test results or medical records, comments about negligence)

Ability

7

ALERT: COMMENT

Actions ▾

What Else Re: Experience:

I waited in the room for vitals to be taken for 20minutes. After she left another 20 min for the Dr. I had a 11:30 appt. And did not see the Dr. Until 12:20. Rather unacceptable.



What does the leader *really* want to say?
What does the patient want to hear?
What might they say if they are feeling stressed out?



Ability



- “Hello, may I please speak with [patient’s preferred name]?”
- “This is [insert your name, role, and organization]. I am calling because I received your feedback regarding your experience with us on [date]. Would now be a good time to talk?”
- “I am so sorry you experienced this, I can imagine this was frustrating to you.
- “Can you tell me more about what happened?”
- “I really appreciate you sharing your feedback with us. Our goal is to provide exceptional care and service to our patients.”
- “Thank you for giving me a chance to resolve this. Based on what you’ve shared with me, I will...”



Reinforcement

Legend:

Department has had a close rate < 33% and 3+ alerts for both of the last two months

% of Alerts Closed is less than 50%

% Alerts Closed within 48 hrs is 75% or greater

Location	Region	Executive Director	Total # of Surveys Received	# of Service Alerts	# of Alerts Closed	% of Alerts Closed	Average Number of Days to Close	% Alerts Closed within 48 hrs.	Alerts – Previous Month	Alerts Closed – Previous Month	Average Number of Days to Close – Previous
			28	2	2	100.0%	10.8	0.0%	2	2	0.01
			6	1	1	100.0%	1.0	100.0%			
			21	1	1	100.0%	9.9	0.0%			
			181	5	5	100.0%	1.4	80.0%	6	5	2.27
			116	12	12	100.0%	7.4	18.8%	9	9	3.36
			19	2	2	100.0%	1.4	50.0%	2	2	4.81
			65	2	2	100.0%	0.5	100.0%	2	1	0.32
			11	2	1	50.0%	6.1	0.0%	2	2	13.48



Leader sponsorship

“If your boss finds it interesting, you should find it fascinating”



Reinforcement

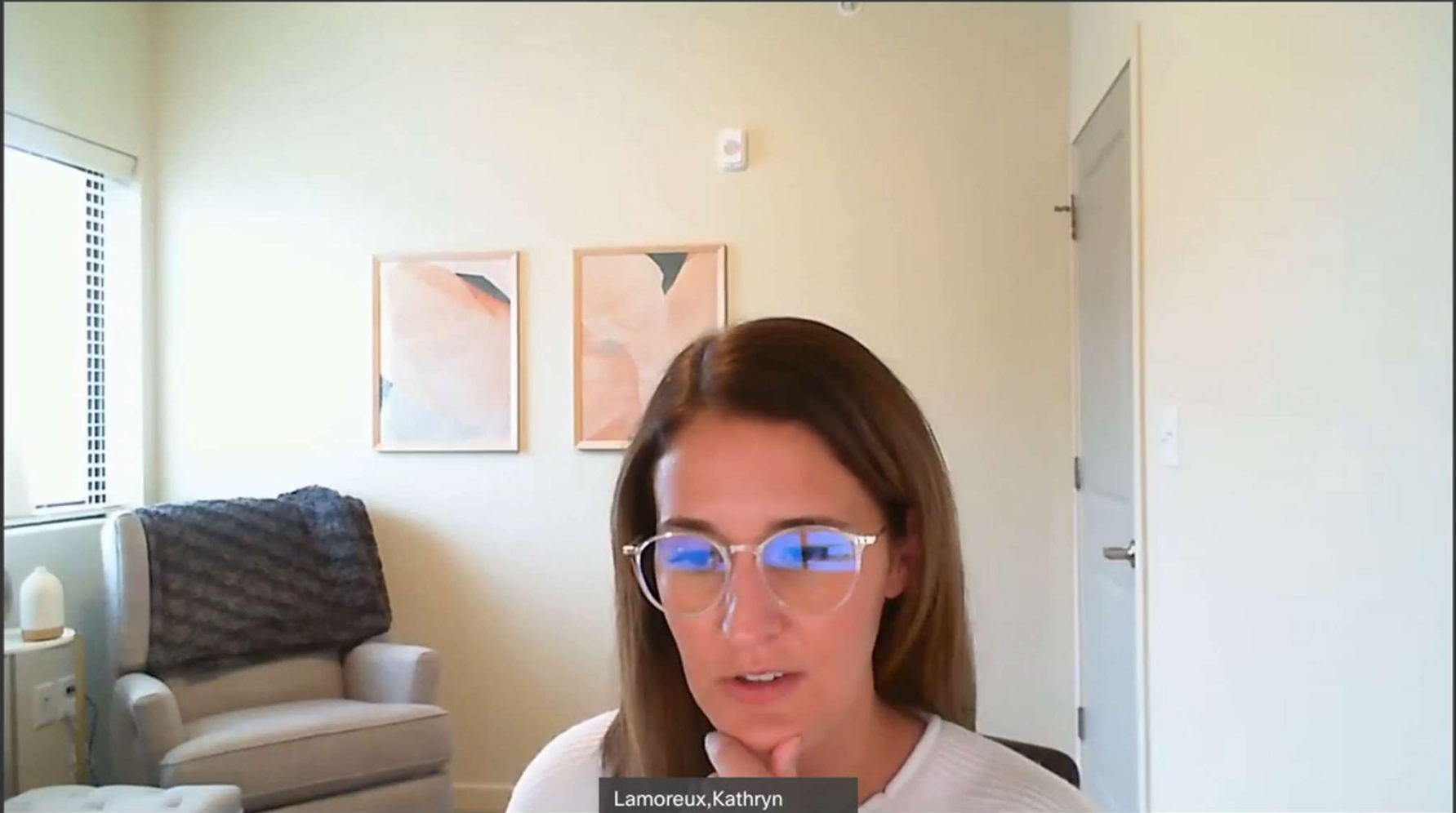
- Bemidji study
 - Webinars
 - Cohort created (22 leaders overseeing 56 departments)
 - Leader audits by executive directors
 - 5 audits per month of service alerts (are they following the workflow appropriately?)

	Percentage of encounters with service alerts	Open alerts: Closed alerts
Pre improvement (4/25-5/25)	2.4%	26: 27 (51% closure rate)
Post improvement (5/26-6/25)	2.5%	3: 57 (95% closure rate)





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Mission

Metric

Dedicated to sharing God's love through the work of health, healing and comfort.





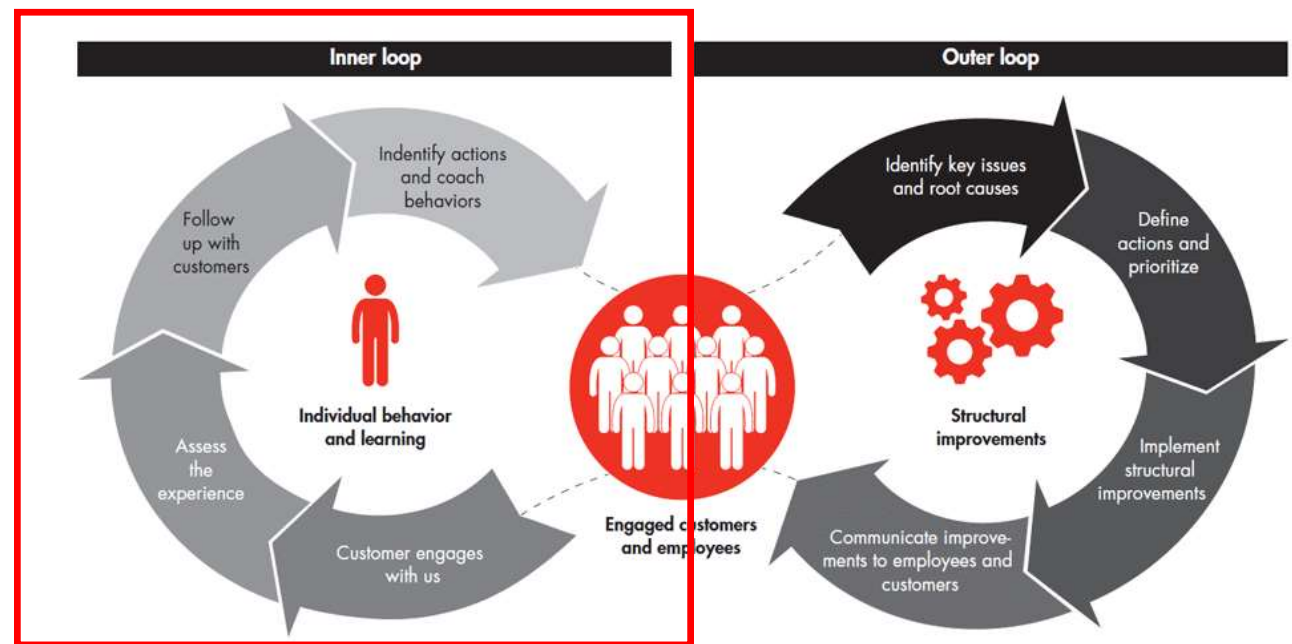
Where We Go From Here

- Continue to refine quality of service recovery & remind leaders of the “why”
- Continue to develop leader sponsorship
- Make the workflow easier to do the right thing
 - Allow for easier assignment of service alerts
 - Less steps to document on service alerts
- Tie to financial ROI
- Start to use data for outer loop feedback



Inner Loop & Outer Loop Feedback

Figure 2: Two feedback loops promote both individual learning and structural improvements



Source: Bain & Company



Organizational Assessment Before You Begin

Culture

- ❑ What level of comfort do leaders have today in conducting service recovery? Do they know the fundamentals of crucial conversations?
- ❑ What change management model do you want to follow?
- ❑ Does your executive leadership understand the “why” and are they willing to support it?

Workflows

- ❑ What are the different avenues patients are providing feedback? (digital, surveys, phone)
- ❑ Are there other support teams that should inform your process (risk, patient relations)
- ❑ What time frame is expected for follow up? How is that reinforced?



4 Takeaways

- Service recovery can improve your patient's trust in your organization, ultimately impacting their loyalty and intent to return
- Service recovery is heavily influenced by the culture of your organization & mission
- Make expectations for service recovery clear and easy to complete
- Leader sponsorship will make or break your service recovery efforts – mission over metrics



Questions?



Thank you for attending!

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