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HEALTH

2025
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Experience Perspective 2025

Trust in healthcare is evolving—driven principally and importantly by demographic shifts and changing expectations among consumers, patients, and employees. Social, cultural, and demographic factors have always shaped things like expectations, brand perception, and trust. And while in this perspective we focus on age-related research, we acknowledge that there is much more to think about and prepare for. But the reality today is that we are on the precipice of large-scale changes as the healthcare needs of younger populations increase. Keeping both individuals and systems in mind, we emphasize research and strategies to build and sustain trust by:

- Understanding what healthcare consumers expect from their experiences
- Aligning behavior with brand promise
- Reimagining the role of the patient experience team
- Empowering frontline leaders to build trust by creating a culture of reliability, competence, and respect for all those they encounter—patients and employees alike

CONTENTS

FOREWORD

Combining the expertise and experience of healthcare executives and employees with feedback from millions of patients and consumers, NRC Health has forged a distinct perspective for 2025.

In the 2024 Experience Perspective, we highlighted the importance of intentionally bridging the traditional silos between brand, consumer, patient, and employee/workforce experience. We delivered a clear message: Elevating experience requires thinking differently and taking decisive action. We explored this further in 2024 in our white paper, *Next-generation Human Understanding: A Playbook for Healthcare Experience Management*. After we asked, listened, and studied throughout the year, the focus for this Experience Perspective became clear: The need for trust is a call to lean harder into and evolve an experience mindset. We are doing a deep dive into the evolution of trust at a critical time in which consumers, patients, and employees are demonstrating differing experiential preferences, ranging from traditional to adaptive to digital-first. Guided by our research, we propose a trust framework to help leaders understand and address what matters to unique humans receiving, delivering, and supporting care strategies that are humanized for the unique needs of patients and care teams alike.

The first section unpacks new research that underscores the importance of driving trust. The second explores experience management as a primary capability for holistically meeting the expectations of trust. The remaining sections delve into the relevance of trust as applied to healthcare brands, consumers, patients, and employees.

Each section shares rich perspectives to provoke thoughts and help you turn insights into action. And you can trust us to be with you every step of the way.

Helen Hrdy
Chief Customer Officer, NRC Health

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Chief Experience Officer, NRC Health

*"Take no one's word for anything, including mine–
but trust your experience."*

—James Baldwin

INTRODUCTION—THE EVOLUTION OF TRUST IN HEALTHCARE

David, a 45-year-old nurse, has led a healthy lifestyle for as long as he can remember, relying only on the occasional urgent care visit for minor healthcare needs. But now he finds himself caring for his aging parents while also beginning to face his own health challenges. Like many seeking care today, and despite his familiarity with the industry, David is beginning his healthcare journey with uncertainty. Can he trust that the brand promise made by his health system's website, of seamless, compassionate care with the physician he chooses, will hold true?

The reality is that at every touchpoint in the healthcare journey, there is potential to erode or foster trust. For the millions of people like David who are navigating complex health systems, trust is not simply a preference—it's a necessity. Additionally, demographic-related shifts in the expectations of consumers, patients, and employees are complicating how trust is built and sustained. Considering these factors, understanding how trust is evolving has never been more foundational to delivering quality care.

The question of building trust in healthcare is not new. But revisiting the question, "What's next in the evolution of trust?" remains critical. In the 1950s, research was focused on the interpersonal dynamics between physicians and patients. In the '80s and '90s, the focus shifted to empirically measuring trust's impact on satisfaction and outcomes. And recent efforts have been aimed at understanding trust in the context of technology, brand reputation, C-suite leadership, and governance. So the story of trust in healthcare shows a clear shift in how we think about trust—i.e., from being influenced by interpersonal factors to being influenced by systemic ones, and eventually to being influenced by both. But what we need to ask now is: **How will impending age-related demographic shifts impact trust-building and, therefore, the delivery of quality care?**

David grew up in an era before cell phones and the internet, but now relies on these technologies, albeit reluctantly. He values interpersonal connections and wonders what healthcare will look like for his young nephew, who seems to prefer online communication for everything. At the same time, David has to help his parents log into their health portals, navigate payment sites, and order medications online. Attitudes and preferences steeped in age-related differences index rich and complex social dynamics that underlie how trust is delivered today and built in the future.

The purpose of this perspective, then, is to enable healthcare systems to better understand and respond to nuances between and among generational cohorts so that trust remains the cornerstone of every care experience. This means understanding consumer expectations, delivering on brand promises, centering care around individual needs, and creating a workplace that fosters employee engagement—all while planning organizationally for looming demographic changes. It's a lot, to be sure. But the stakes are high, and it will be those organizations that are most willing to adapt to evolving demands that will foster the most trust, meet diverse expectations, attract the most patients, and deliver the highest-quality care.

01 Research and Insights

The Stage is Set for Demographic Change

The U.S. population aged 65 and over has grown steadily since 1960. When Baby Boomers began retiring in 2011[1], it marked a period of significant growth in people over 65. The year 2030 will mark the first time that those born between 1965 and 1980 (Generation X) will reach retirement age. That's why the U.S. Census Bureau estimates that rapid growth will continue to 2030 and beyond, when the population of those 65 and over is estimated to total around 71 million—and over 80 million by 2050.[1]

This matters because in 2020, the Centers for Medicare & Medicaid Services (CMS) estimated that while those over 65 made up 17% of the U.S. population, they accounted for nearly 40% of all healthcare spending[2]—and those numbers are expected to rise.[3]

US population 65 and over, 1960 to 2050 (millions)
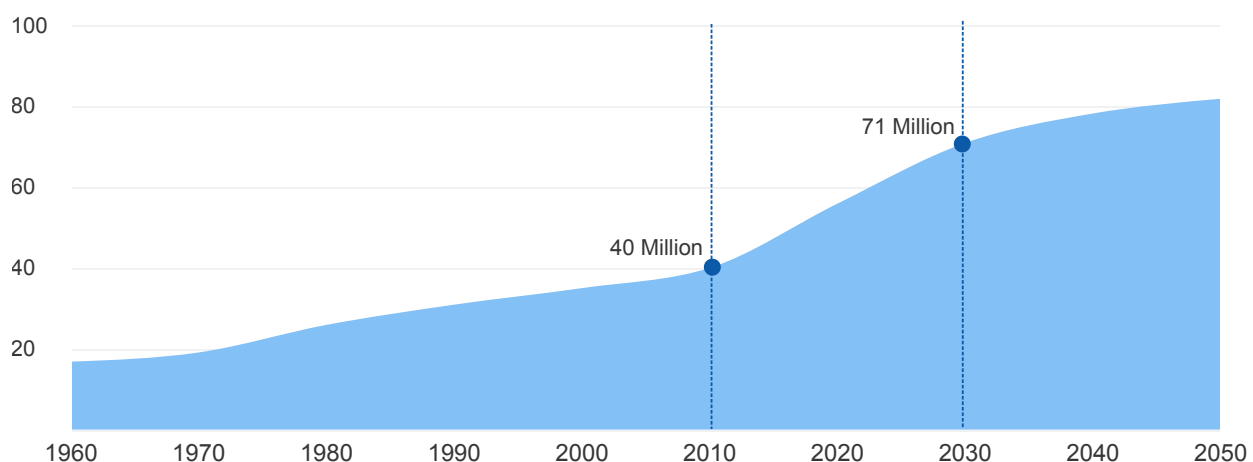
U.S. Census Bureau | Apr 2024 | Population distribution in the United States in 2023

1   Pew Research Center, Baby Boomers Approach 65 – Glumly, December 20, 2010, https://www.pewresearch.org/social-trends/2010/12/20/baby-boomers-approach-65-glumly/.

2   Centers for Medicare & Medicaid Services, National Health Expenditure Fact Sheet. Accessed March 2025, https://www.cms.gov/data-research/statistics-trends-and-reports/national-health-expenditure-data/nhe-fact-sheet.

3   Congressional Budget Office, The Budget and Economic Outlook: 2023 to 2033, November 2023, https://www.cbo.gov/publication/59697.

Yet in the face of the so-called "silver tsunami," it is often overlooked that 83.1 million Millennials represent an even larger wave of healthcare consumers, with Generation Z following just behind at 72.7 million—and Gen Z is projected to be the most diverse, well-educated generation yet.[4] And they are reaching parenting age, which for many will be their first major brush with healthcare systems. In fact, with the exception of babies born in 2025, today's pediatric patients all fall within the Gen Z demographic, and a large swath of their parents are Millennials.

American community survey: US population distribution 2023
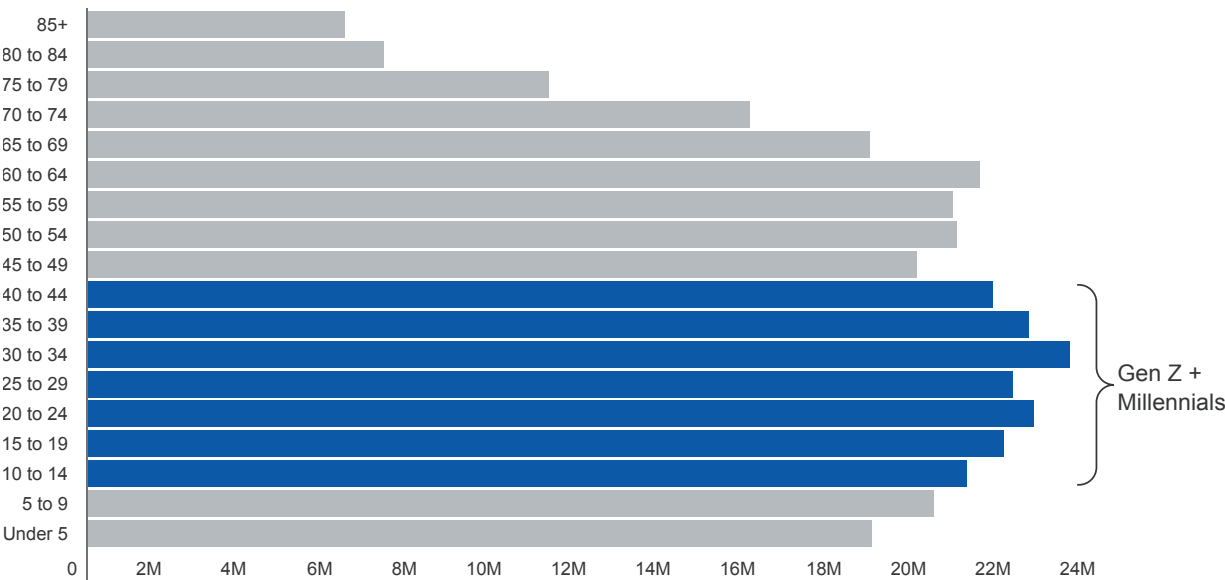
U.S. Census Bureau | Apr 2024 | Population distribution in the United States in 2023

In other words, in five years, one in five Americans is projected to be over the age of 65, which means utilization will continue to rise—all while younger patients are pushing the demographic mix increasingly towards heterogeneity as their usage increases with age. Healthcare is on the precipice of large-scale demographic change.

So the question for health leaders is this: How can trust be leveraged to build and sustain loyalty among current healthcare users and employees, while also addressing demographic shifts and the changes in expectations that younger generations will bring with them as they age into more frequent utilization of services?
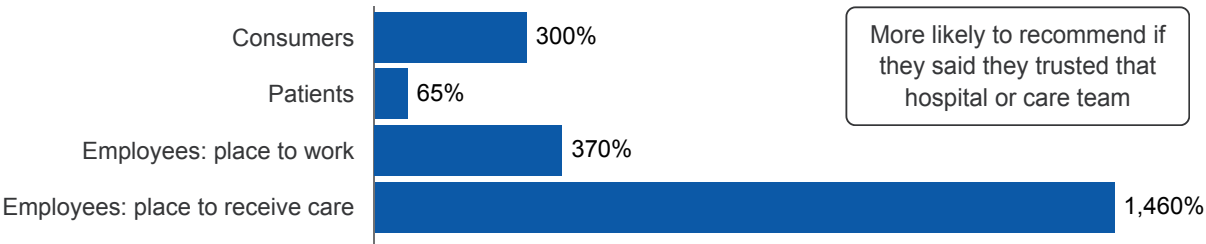
Everywhere, Trust is Key[5]

CONSUMER EXPERIENCE (CX)

In an analysis of NRC's Market Insights survey from 2024 (n = 155,096), those who gave a 9 or 10 response to the question "how much do you trust [your top-of-mind hospital]" were nearly **300% more likely to recommend a hospital if they said they trusted that hospital.** Even when controlling for age and other demographic factors, trust emerged as the highest correlate of likelihood to recommend (LTR).

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4   Pew Research Center, Early Benchmarks Show 'Post-Millennials' on Track to Be Most Diverse, Best-Educated Generation Yet, November 15, 2018, https://www. pewresearch.org/social-trends/2018/11/15/early-benchmarks-show-post-millennials-on-track-to-be-most-diverse-best-educated-generation-yet/.

5   For these analyses, NRC Health conducted a series of multivariate logistic regression analyses, controlling for respondent age and other demographic factors.

Likelihood to recommend (LTR) probability increase given "Yes" to trust question

Consumers	300%
Patients	65%
Employees: place to work	370%
Employees: place to receive care	1,460%

> More likely to recommend if they said they trusted that hospital or care team

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PATIENT EXPERIENCE (PX)

In a similar analysis conducted in the context of the care setting, patients responding to NRC Health's Real Time PX surveys in 2024 (n = 559,169) were **65% more likely to give a 9 or 10 response to a Net Promoter Score (NPS) question if they also gave a "Yes, always" response to a "trust in the care team" question.** This is the most correlated patient experience survey item to an LTR question, making trust the top key driver of one's willingness to recommend a provider or clinic/facility immediately after a care experience.

EMPLOYEE EXPERIENCE (EX)

In late 2024, NRC Health fielded an employee trust study to a panel of healthcare employees (n = 733) and found that respondents were **370% more likely to recommend their employer as a place to work and 1,460% more likely to recommend their employer as a place to seek care if they also said that they trusted their organization.**

The bottom line is clear: Trust matters, irrespective of context. It drives loyalty and LTR among all age and demographic groups tested, and it does so for consumers, patients, and employees alike—especially when it comes to workers recommending their employers as a place to seek care. However, NRC Health research also shows that trust is not always built in the same way between and among demographic cohorts—generational groups in particular. So trust is something of a moving target, especially since healthcare is on the verge of a seismic demographic shift.
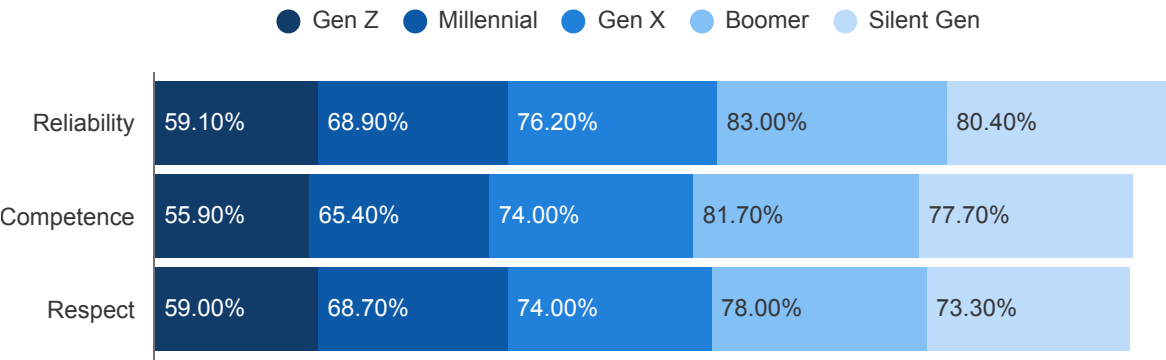
Consumer Drivers of Trust

While trust is foundational to building lasting relationships, sustaining growth, and ensuring a positive reputation, fostering trust among a diverse set of consumers requires a nuanced approach. The good news is, there may be a relatively simple framework available to help make sense of the complexity.

A 2024 NRC Health Market Insights survey (n = 24,569) shows that **reliability, competence, and respect** are the top three factors that consumers say contribute to their trust in a hospital or health system. The order of these changes slightly when generational cohorts are viewed more closely, where respect may be more salient for younger than older consumers. But the top three are consistent across generations, and all lie within a few percentage points of each other among each group.

①

PUTTING IT INTO PRACTICE

How important are the following factors in terms of how much they contribute to your trust in a hospital or health system? (% Extremely/Very important)

● Gen Z ● Millennial ● Gen X ● Boomer ● Silent Gen

Factor	Gen Z	Millennial	Gen X	Boomer	Silent Gen
Reliability	59.10%	68.90%	76.20%	83.00%	80.40%
Competence	55.90%	65.40%	74.00%	81.70%	77.70%
Respect	59.00%	68.70%	74.00%	78.00%	73.30%

NRC Health Market Insights Data | 2024 | n = 24,569

These findings suggest that adopting an organizational posture that's predicated conceptually on reliability, competence, and respect may be key to building and maintaining trust among consumers, irrespective of their age and context. But as expected, things become more nuanced when panel respondents (n = 1947) defined the behaviors that signal when an organization is taking these key factors seriously.

RELIABILITY	COMPETENCE	RESPECT
All cohorts agree on the top three experiences that signal reliability.	All agree on the top two factors, but there are some nuances around the third.	While there is overlap here, what defines the third aspect of respect is slightly different across generational cohorts.
1. Access to appointments when I need them	1. Doctors stay informed on new medical procedures/treatments	1. Treat me with courtesy and compassion
2. Ability to schedule the appointment I desire (in-person, virtual care, etc.)	2. Doctors and staff with high expertise and skill	2. Care about me as a person, not just my healthcare (my interests, hobbies, etc.)
3. Provide consistent care and experiences for all appointments/visits	3. **Gen Z, Millennials, Gen X** Use effective safety protocols during treatment **Boomers** Use effective and proven treatments **Silent Generation** Offer the most up-to-date treatments and technologies	3. **Gen Z** Accommodate all types of people (those with disabilities, people who speak a language other than English, the LGBTQ+ population, etc.) **Millennials** Value my decisions and ask for my preferred types of care or treatments **Gen X** Staff are sensitive to all forms of diversity **Boomers, Silent Generation** Listen carefully to me and my concerns/questions

When it comes to earning trust, consumers, patients, and employees have similar expectations. While the specific meaning of "trust" may vary across generational groups, our data suggests that organizations should position their mission, brand, and services within a framework of reliability, competence, and respect—then ensure that every patient interaction reinforces that message.
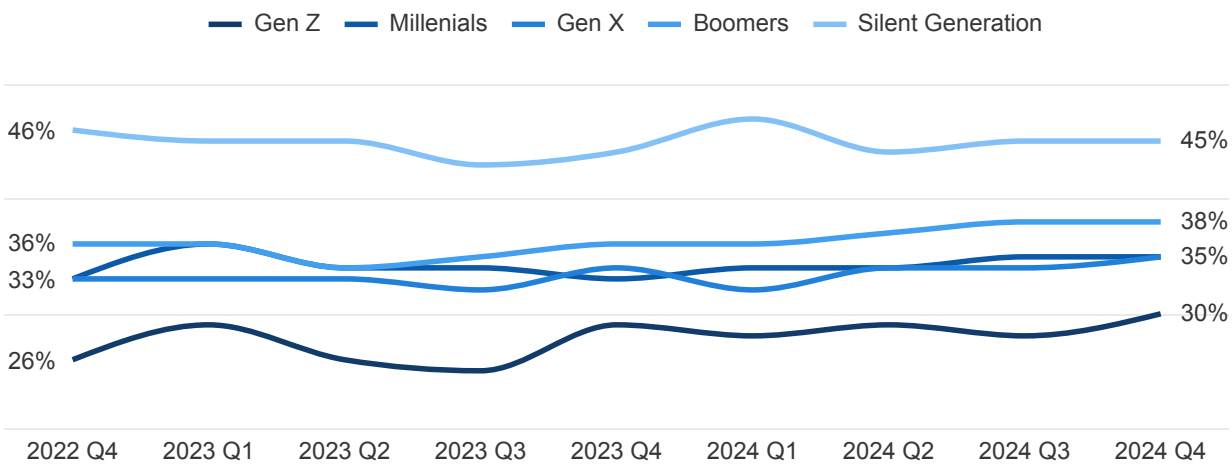
Trust as a Brand Promise

Analyses of NRC Health Market Insights data (n = 797,339), collected since 2022, highlight key differences in how respondents from different generations think about hospital brands and interact with information shared by healthcare organizations.

First, image/reputation (i.e., brand perceptions) for U.S. hospitals remain low across generational cohorts. And while some groups have shown some upward movement, at just 2 to 3%, growth has been agonizingly slow over the last two years. Second, among Gen Z respondents, less than one in three say they would rate the image/reputation of their "top-of-mind" hospital as "excellent." Even for the Silent Generation—whose scores are significantly higher than all other groups—less than half gave a top-box response.

Hospital brand: How would you rate the overall image and reputation of your "top-of-mind" hospital?

Legend: Gen Z — Millenials — Gen X — Boomers — Silent Generation

Y-axis values: 46%, 36%, 33%, 26% (left); 45%, 38%, 35%, 30% (right)

X-axis: 2022 Q4, 2023 Q1, 2023 Q2, 2023 Q3, 2023 Q4, 2024 Q1, 2024 Q2, 2024 Q3, 2024 Q4

NRC Health Market Insights Data | Jan 2022 to Dec 2024 | n = 797,339

Third, part of the reason for low brand scores might be that consumers don't appear to draw much distinction between hospitals. Last year, fewer than one in three patients for all age groups said their "top-of-mind" hospital was very unique/different from other hospitals in the area.

How unique/different is your top-of-mind hospital from other hospitals in the area?

28%
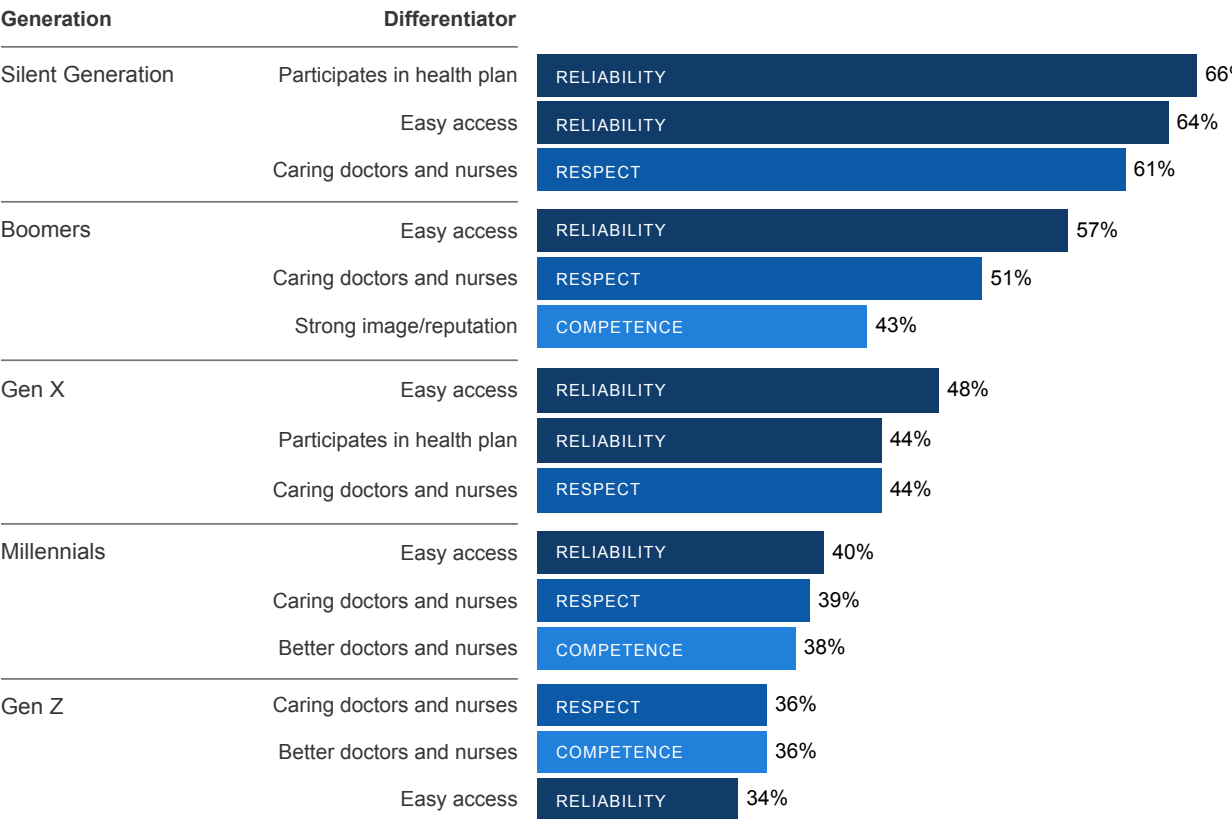of consumers view their "top-of-mind" hospital as being unique

NRC Health Market Insights Data | 2024 | n = 296,615

Clearly, there is work to be done to convey to the market the usually very laudable work being done within the four walls of the care setting. After all, in 2024, 85% out of a sample of more than 10.8 million patients said that they would recommend their care facilities to family and friends.

So the question is: What should organizations tell consumers about the very often praiseworthy care they provide, so they can increase their image/reputation and distinguish themselves from competitors in their markets? The answer may come from NRC Health's 2024 consumer data (n = 268,732)[6] related to hospital differentiators and what some hospitals do well to set themselves apart from others in their area.

Hospital differentiators: What my "top-of-mind" hospital does especially well to set it apart from other providers in the area

| Generation	Differentiator		
Silent Generation	Participates in health plan	RELIABILITY	66%
	Easy access	RELIABILITY	64%
	Caring doctors and nurses	RESPECT	61%
Boomers	Easy access	RELIABILITY	57%
	Caring doctors and nurses	RESPECT	51%
	Strong image/reputation	COMPETENCE	43%
Gen X	Easy access	RELIABILITY	48%
	Participates in health plan	RELIABILITY	44%
	Caring doctors and nurses	RESPECT	44%
Millennials	Easy access	RELIABILITY	40%
	Caring doctors and nurses	RESPECT	39%
	Better doctors and nurses	COMPETENCE	38%
Gen Z	Caring doctors and nurses	RESPECT	36%
	Better doctors and nurses	COMPETENCE	36%
	Easy access	RELIABILITY	34%

NRC Health Market Insights Data | Jan 2022 to Dec 2024 | n = 268,732

In the chart above, similarities are once again seen in hospital differentiators—differentiators that fit well within, and nicely corroborate, the framework of reliability, competence, and respect. For example, being seen by the best doctors and nurses (competence) ranks higher for younger patients than for older ones, many of whom are more interested in whether their hospital participates in their health plan (reliability) and/ or has a strong image/reputation (competence). But caring doctors and nurses (respect) are a differentiator for all groups, irrespective of age—so getting that right appears to be table stakes. The same is true for easy access (reliability).

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6   The 268,732 n-size for 2024 reflects the number of individual respondents. For this research we chose to align methodologically with the calculations we make in relation to Patient and Employee Experience surveys.

More should be said about access—it is, after all, one of the primary touchpoints where trust can begin to erode. The good news is, our data shows that access scores are on the rise across all age cohorts since 2022. The less-good news is that only one in three Millennials, Gen X, and Boomers says their "top-of-mind" hospital makes it easy to access their services. That number falls to around one in four for Gen Z.

"Top-of-mind" hospital makes it easy for me to access their services
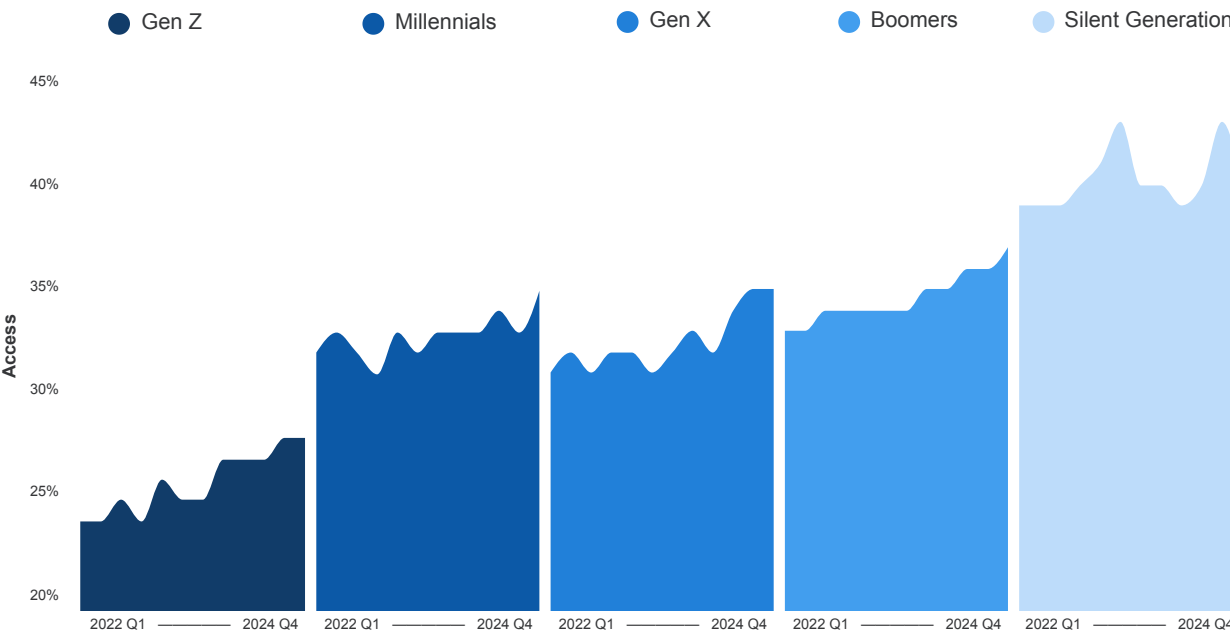
NRC Health Market Insights Data | Jan 2022 to Dec 2024 | n = 797,339

The consequence of a persistent lack of access is that it opens the door for new entrants into the market to (re)solve the issue and deliver on a promise of making access to care faster, easier, and more reliable. It's no surprise that Gen Z and Millennials, who report the lowest access scores, are most likely to report having used a retail clinic—and are most likely to be excited about using one in the future.

Would you feel excited to / Have you used a retail clinic?
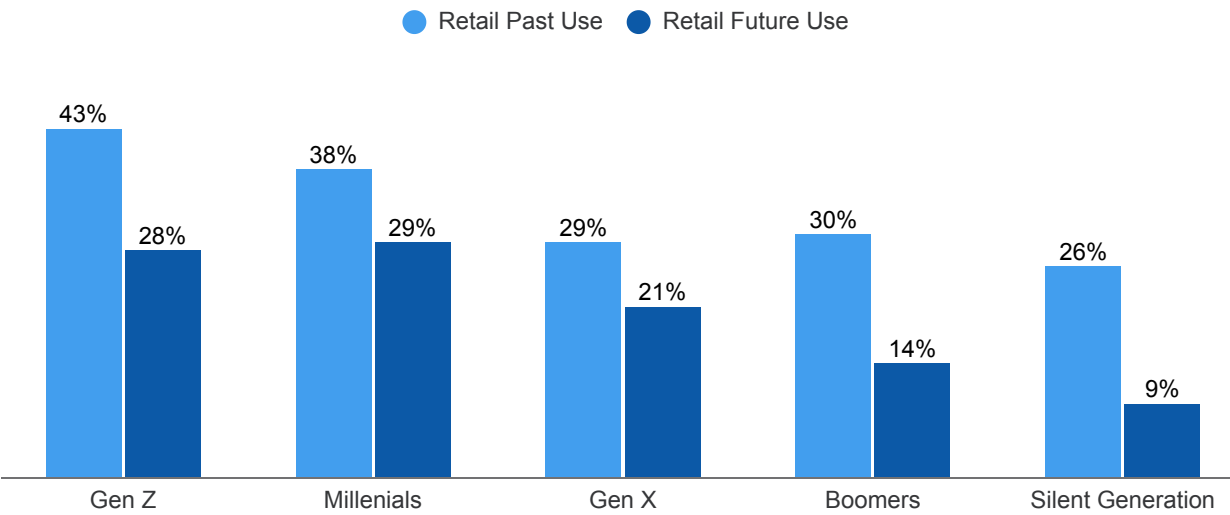
NRC Health Market Insights Data | 2024 | n = 268,731

Enter big tech firms. NRC Health research conducted from 2023 to 2024 (n = 24,108) shows waning skepticism about Amazon One Medical's potential to be better than traditional care (51.9% in 2024 vs. 55.4% in 2023). So at present, one in two consumers thinks Amazon can potentially deliver better care than traditional providers.

Considering these data, it is difficult to overstate the importance of health systems listening to and understanding the issues consumers and patients are having, related to access—and then investing in innovative ways to make it much easier for people to engage with the services and professional care they need to stay healthy.

The story to this point has been about the importance of building and sustaining consumer and brand trust—vis a-vis large-scale demographic changes—through a framework of reliability, competence, and respect. But at some point, organizations will need to actually deliver on the brand promises they make to the individuals who actually walk through their doors.

Trust in the Care Setting

How impactful is trust on patient experience? As mentioned above, a patient is 65% more likely to give a 9 or 10 response to an NPS question given a "yes, always" response to a "trust the care team" question. Those numbers become even more striking when we look at providers specifically.

Patients who give 9s and 10s to an NPS question (promoters) are about 85% more likely to rate their care providers high on trust compared to those who give sevens and eights (passives). Likewise, promoters are about 320% more likely to give providers a high trust score compared to respondents who give a score of 0-6 (detractors).

Trust in care providers by Promoter Status

Promoter Status	Trust
Promoter	91%
Passive	50%
Detractor	22%
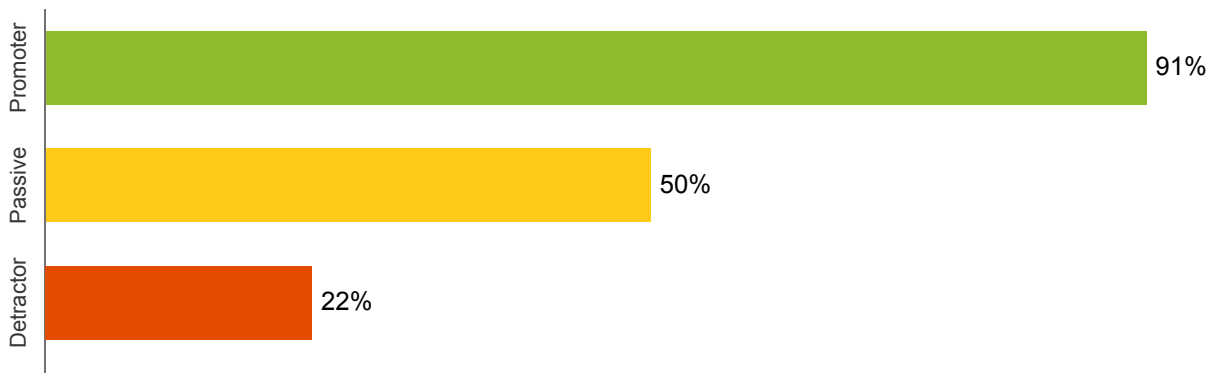
NRC Health Experience Data | 2024 | n = 5,844,098

It's clear that trust matters. Where things get interesting is when the relationship between trust and LTR is examined by generational cohort. Data shows that the relationship is much stronger for younger age groups than for older ones, and is particularly strong for Gen Z and Millennials. This finding has clear implications for the future: earning the loyalty of younger patients will be tied even more powerfully to earning trust. In other words, getting good at building trust now is a great investment in future relationships with patients.

Trust correlation with facility NPS (*r*)

0.693	0.715	0.65	0.543	0.435
Gen Z	Millennials	Gen X	Boomer	Silent

Strong Correlation

Moderate Correlation
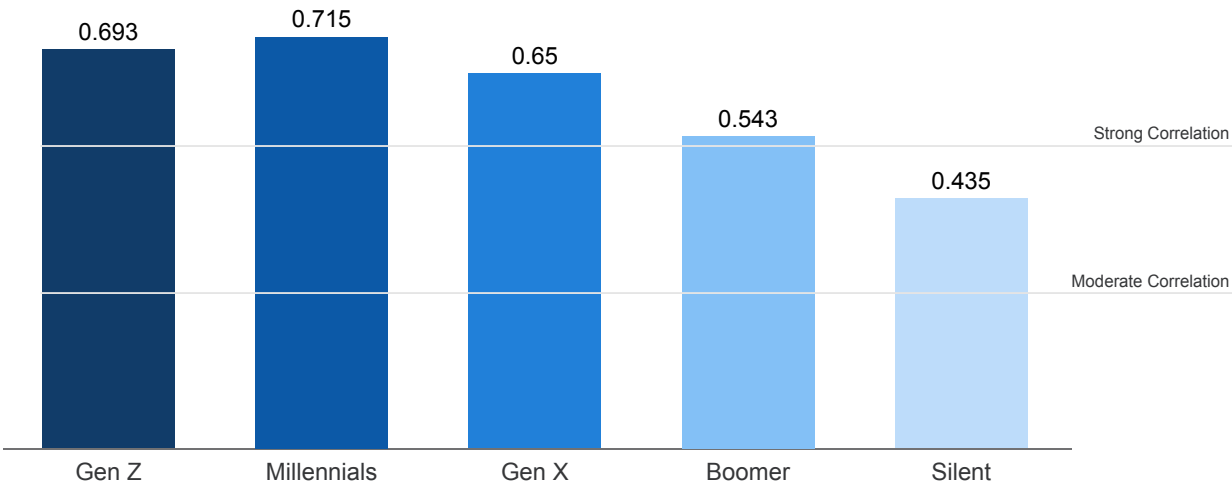
NRC Health Experience Data | 2024 | n = 9,220,861

Knowing that trust matters now, and acknowledging that the stakes may be even higher in the future, is one thing. But knowing what levers to pull to drive patient trust and deliver on a brand promise of **reliability, competence, and respect** is another.

Our research shows that patient experience survey items that are thematically related to reliability, competence, and respect have strong correlations to trust. Patients value being listened to and having their opinions taken seriously, as well as having care providers spend enough time with them (all of which are signs of respect). Among other factors, they also value having their questions answered in a way that makes sense to them (competence) and receiving consistent information (reliability).

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PUTTING IT INTO PRACTICE

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Experience drivers of trust (*r*)

Respecting patient's opinion	RESPECT	0.823
Spending enough time with patient	RELIABILITY	0.817
Answering questions in way that makes sense	COMPETENCE	0.813
Listening to patient's perspective	RESPECT	0.807
Easing pain or discomfort	COMPETENCE	0.803
Being treated with compassion	RESPECT	0.798
Being treated with courtesy and respect	RESPECT	0.788
Explaining things to patient	COMPETENCE	0.781
Receiving consistent information	RELIABILITY	0.78
Being included in discussions of care	RESPECT	0.771

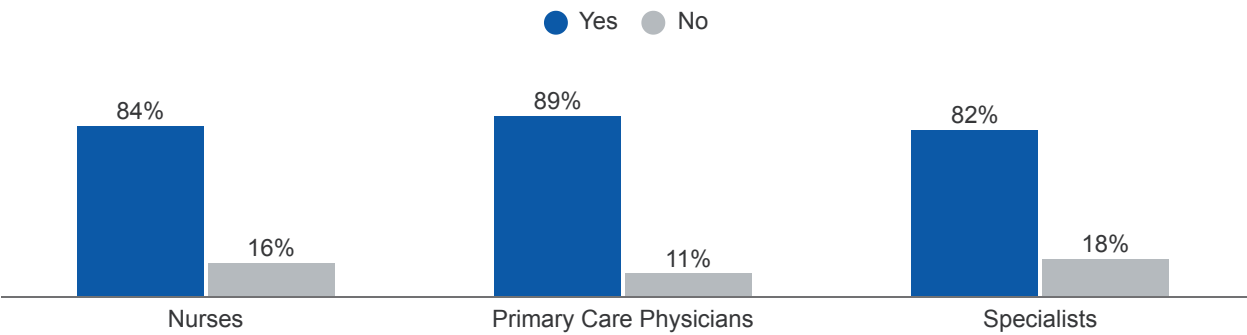NRC Health Experience Data | 2024 | n = 20,501,961

From these data it may be obvious, but it shouldn't go without saying: building trust is finally dependent on n = 1, interpersonal interactions. So while a system or facility can embolden and empower employees to build trust in mission-critical ways, how well leaders listen to and act on what employees are saying about their experiences will greatly influence how well brand promises are carried through to patients.

Employee Trust and Engagement

The final piece of this puzzle is how to build trust and engagement among those who are being asked to deliver on the promises we make to consumers and patients. In late 2024, NRC Health conducted a focused survey among 732 healthcare employees to determine the extent to which employees say they trust the organization they work for, and what factors might be driving that trust.

In this sample, employee trust was generally high—91% overall—but trust among physicians (89%) and nurses (88%) was lower than the sample average. Parsing the data to look at those respondents with a clinical, non-leadership role, trust appears to erode even further: within this group, trust among nurses and specalists fell 7 to 9% lower than the sample average.

Do you trust the healthcare organization that you work for? (Clinical, non-leadership)

● Yes   ● No

	Yes	No
Nurses	84%	16%
Primary Care Physicians	89%	11%
Specialists	82%	18%

NRC Health Employee Experience Data | Dec 2024 | n = 732

When we analyzed the responses of those who said "no" to the question, "Do you trust your healthcare organization?" we found that the highest-ranked factors employees cite as leading to trust were culture, leadership, and competence.

Key Factors Influencing "No" Responses

- **Culture:** Organization equally committed to caring for employees and patients/families
- **Leadership:** Leaders are active, visible, and engaged.
- **Competence:** Organization delivers safe, high-quality, empathic care.

6—

PUTTING IT INTO PRACTICE

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As previously mentioned, employees are nearly four times more likely to recommend their employer as a place to work and nearly 15 times more likely to recommend their employer as a place to seek care if they say they trust their organization. The good news is, trust appears to be generally high among healthcare workers—but work remains to be done to sustain trust and continue to build on it in the future. Listening to and thinking about what matters to those who say they don't trust their organization can help.

The bottom line is that boards and C-suite leaders should view the key drivers of trust as the foundation for a system-wide strategy, while management and marketing work to differentiate their organization in a crowded, competitive marketplace. Meanwhile, PX teams must be co-collaborators across these levels to bridge the gap between brand message and brand reality, making sure that what patients are promised is exactly what they experience.

02 Experience Management

"Trust is built step by step, commitment by commitment, on every level."
—*Robert C. Solomon*

Intentional, Curated Experiences, Everywhere

As NRC Health research shows, health leaders must use a wide lens and listen broadly to understand the full range of actions and touchpoints experienced by humans on both sides of the stethoscope if they are to forge trust through a framework of reliability, competence, and respect.

Yet for years, healthcare experience work has focused only on experience improvement. The work has often been reactive, taking place only after asking patients or employees, "How did we do?" While this will always be important for understanding and measurement, using this approach exclusively leads to incremental improvements at best—and the resulting work is often siloed or narrow. As preferences and expectations for consuming goods and services—and even for selecting an employer—evolve, it becomes clear that what got healthcare to this point is not moving it where it needs to go as quickly as it needs to get there. Healthcare is not getting a free pass on this one. But how do health leaders move forward?

Enter experience management. Viewing this work through a more strategic lens, experience management is about being intentional in designing and implementing experiences that are integrated across a fragmented landscape. It provides a framework for taking a proactive approach transforming a healthcare organization's ecosystem, in its entirety, by intentionally designing and managing systems and processes around the humans who use them—the key phrase being, "the ecosystem in its entirety."

Consumer, patient, and employee expectations require healthcare to be forward-thinking and innovative. Leaders are being called to take a page from the playbooks of other service industries and deliver more intentionally designed, curated, and connected experiences that will drive trust and deliver on promises every time. Supported by continuous listening, this approach requires an all-hands-on-deck mindset.

Put another way, health systems would never think of managing their finances in a silo and only improving on them after a loss. Instead, they proactively manage their finances across systems to mitigate loss, tracking results and adjusting their plans to improve their fiscal health as needed. Health systems manage care for complex patients in a similar way—intentionally, holistically, and proactively, with the goal of improving their overall health.

Given that everything we humans do is an experience, it's surprising that we have not yet become as highly intentional in managing the experiences we're responsible for in healthcare. Too often we deliver experiences by default rather than by design.

NRC Health believes the right response to these shifting times is for leaders to level up their expertise in experience management across brand, consumer, patient, and employee experiences. It is the answer to the challenge of earning and keeping trust through reliable, competent, and respectful care, which cannot be fully delivered without intentional, holistic experience design.

This shift requires leaders to evaluate their current state and ensure that key parts of the organization are optimized. The following sections will unpack the first of many ideas NRC Health will share in 2025 to support clients in their evolution toward experience management and their continued pursuit of earning and keeping trust.

03 Brand Experience

"Brand is simply trust."

—Steve Jobs

A Sea of Sameness

It's never been particularly easy to find the right healthcare experience, or an organization that provides it. Healthcare is complicated, naturally difficult to manage, and for most, an intermittent need. Determining who provides the best care— and how to find them and be seen by them—is a recurring chore.

In 2025, the waters are choppier than ever for would-be patients. A few years ago, as part of a unified communications response to COVID-19, hospitals, health insurers, doctors, health departments, and even government officials all seemed to sing from the same sheet of music, echoing similar sentiments and urging communities to prioritize safety and practice vigilance against the virus.

Many consumers tuned in and clicked through as their local hospitals and health systems joined together and became a prominent voice in pandemic responses. But healthcare's powerful show of unity had an unintended consequence: most brands seem the same. Given that fewer than 30% of respondents view their "top-of-mind" hospital as unique, healthcare brands have been plunged into a sea of sameness in the minds of most consumers.

Now that fighting COVID-19 is no longer the core focus of healthcare, what's the brand message to the market going to be? The data suggests that hospitals and health systems must strike with a clear message: we are reliable, we are competent, and we respect patients and consumers. But the data

also suggests that most consumers, even across generations, appear to have similar expectations. So hospital leaders must ask themselves:

- How can we create a message within the reliability, competence, and respect framework, while avoiding being swept into a sea of sameness?
- How can consumer and patient data be used together to better understand *how* and *to whom* they should send nuanced messages about our brand?

The number of consumers across the U.S. who don't have a stated preference for a hospital brand stubbornly remains stuck at one in three—only dropping 3% since 2020, when the data show that most consumers weren't thinking about hospital preference at all. Think about the fact that the average remaining lifetime spend for a 26-year-old healthcare consumer is approximately $1.2 million[7]—in that context 33% is a lot of healthcare dollars up for grabs.

Which is why it's more important than ever for health leaders to take stock in their brands and begin to grapple with what makes them stand out within the framework of reliability, competence, and respect. Be open to the idea that your brand might not stand out—and take no offense, as it's quite common in healthcare. Also understand that you cannot be sure what consumers think of a brand unless you are willing to ask them directly.

The (D)evolution of the Marketing Team

To engage consumers *and* provide superior patient experiences, healthcare brands must be strong, differentiated, and trusted—and frontline workers must be empowered to deliver on brand promises. It's striking to see in our data that 85% of patients would recommend their care facility to friends or family, but just 29% to 48% of consumers (depending on generation) rate their "top-of-mind" hospital as having an excellent image/reputation. There's clearly a disconnect here.

One thought: Hospitals and health systems have to do a better job of evangelizing the good work they do with patients. This requires coordination across departments within the healthcare organization—it can't be left to siloed marketing teams to do this work alone in a vacuum.

In general, undervaluing marketing and PX teams (especially as a unified front) doesn't bode well for breaking through as a brand. Organizations must come face to face with how much they value a cooperative relationship between these teams, and ask: How do we (re)emerge as a brand without the care team making good on the promises that marketing has made to consumers—or without marketing broadcasting the ample successes of the care team?

Misalignment weakens both brand promise and brand experience. Yet far too often, a disconnect is seen between the marketing and PX teams. When those who craft and direct PX strategy don't communicate with marketing, and/or brand messaging isn't aligned with the PX team's mission, one of two things happens—or both:

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7   Estimate calculated using data from: Agency for Healthcare Research and Quality. Mean expenditure per person with expense by age groups, United States, 1996 to 2019. Medical Expenditure Panel Survey. Assumes average life expectancy to age 80.

01   Frontline workers who bring the brand to life have no idea what promises the marketing team has made to consumers.

02   Marketing teams are unaware of the initiatives PX teams are successfully implementing to drive PX improvement.

Consider this: it's time to reimagine marketing teams, not as a siloed group putting billboards up around town, but as an empowered part of the care team's strategy and mission, wielding their unique ability to tell the story of an organization's good work to consumers.

The bottom line is, consumers expect the absolute best from their experience—and our data suggests that this means delivering on a message of reliability, competence, and respect. Marketing can be the conduit between expectation and experience, but without this connection, experiences can fall flat, and unmet expectations can serve as fuel for frustration.

For healthcare brands that are willing to invest in their own voice, the community is ready for clarity. For those ready to focus on trust, patients are ready to provide it—but only if experiences inside the care setting match the expectations consumers bring with them from the market.

⑦

PUTTING IT INTO PRACTICE

04 Consumer Experience

"Reliability is the precondition for trust."

—Wolfgang Schäuble

The Access Crisis: Trust, Reliability, and the Rise of Membership-Based Care

It's no secret that many health systems grapple with providing reliable access. Long wait times, workforce shortages, inequitable treatment, transportation, and financial barriers all erode trust in an organization, driving poor consumer experiences and leaving many without timely or adequate care.

Access is one of the first touchpoints when it comes to gaining or losing consumer trust. NRC Health data shows that access is a strong signal of reliability, and it matters across generations, particularly with respect to appointment scheduling, availability, and preference for in-person or virtual care. It is also a key differentiator: NRC Health data shows that all generations believe that easy access to care sets hospitals apart from competitors. Yet less than half of consumers overall say their "top-of-mind" hospital or health system makes it easy for them to access the services they need.

How much trust is eroded before consumers even get in front of a care provider? When patients can't get an appointment for weeks or months, they sense unreliability—and many opt to use care models that feel more responsive and dependable instead.

Enter membership-based health services. The model is simple: offer health consumers convenience, simplicity, and respect for their time through fee-based benefits such as same- or next-day appointments and on-demand virtual appointments. Currently, Amazon One Medical is the fastest-growing option.

By design, Amazon One Medical and similar companies exist to address the access obstacles and experience pain points consumers are feeling with traditional primary care. In other words, these

companies are capitalizing on the access crisis by filling the gaps where hospitals and systems are struggling. And they're doing so by mirroring the easy and convenient experiences that people expect and receive when using app-based services to manage their daily lives, such as Uber and Instacart. In minutes, someone can order transportation, groceries, and healthcare from the palm of their hand—all delivered quickly.

Fortunately, access scores are on the rise. However, since younger consumers appear more likely to make choices based on convenience and easy access—and considering the high numbers of millennials and Gen Z (~155 million)—it's more important than ever for health leaders to make reliable access a top priority.

It's time for health systems to get creative to address consumer-access pain points and avoid losing patients to nontraditional care providers. Boost telehealth services, since virtual care increases access across age groups and is desired by more and more consumers. For health systems struggling with workforce bandwidth, consider hiring retired physicians to provide telehealth; physicians with mobility challenges who still want to treat patients are also great for virtual care. Open urgent-care or walk-in clinics to bolster access to primary care and keep patients in the system. Alternatively, consider a co-branded partnership with existing urgent care networks. The bottom line: think differently. That's how companies like Amazon One Medical are finding success.

The access crisis is fundamentally a trust crisis. If traditional healthcare organizations leave it unaddressed, they risk losing patients to disruptors that can deliver faster, more seamless experiences. The solution is to focus on what matters most to consumers: reliability, competence, and respect for their time.

The access crisis is fundamentally a trust crisis.

05 Patient Experience

"Trust is built with consistency."

—Lincoln Chafee

The Evolution of the PX Team

As research throughout this perspective has highlighted, there is potential to erode or foster trust at every touchpoint in the healthcare journey. This is worth repeating because, while most health leaders often agree that delivering great experiences that earn trust is everyone's responsibility, the patient experience (PX) team typically shoulders a disproportionate share of the experience management workload.

8

PUTTING IT INTO PRACTICE

SEE PAGE 35

While these responsibilities are often second nature for PX professionals, the challenge lies in ensuring that the organization's PX strategy evolves and scales to meet the needs of patients, consumers, and healthcare employees. That's why PX teams must evolve from tactical problem-solvers (which they always will be) to strategic architects of patient-centered care. Their role isn't just to react to experience issues—it's to engage with other parts of the organization in the business of proactively shaping experience at every level.

In 2023, NRC Health conducted a study with a panel of PX leaders (n = 152) to better understand what constraints they face and how their organizations can reimagine their PX teams. The bottom line from our research is that organizations need to develop a fresh approach to meet today's demands and anticipate future needs. Below are some comments we collected that may help organizations turn insight into action.

NRC Health Question: "How do you see the PX role changing in the future?"

Insight: "Patient experience as a department/intentional commitment is newer to our organization. We have been growing in awareness and engagement and are beginning to see significant momentum." —PX Leader, NRC Health Partner

Action: Assess your current state
It is essential to know where the organization stands today, relative to experience management best practices. An assessment will identify strengths and gaps to help PX leaders develop a plan for maximum impact.

NRC Health Question: "What is the greatest challenge for the experience leader role today?"

Insight: "Competing priorities; seeing experience as a silo instead of as a part of quality, safety, employee experience/engagement. Accountability for frontline leadership." —PX Leader, NRC Health Partner

Action: Clarify the PX team's role
PX teams cannot be the sole owners of PX tactics and implementation. Rather, the health system is best served by utilizing PX teams as strategic partners who develop and oversee experience management tools and frameworks, vet technologies, and coach others to instill PX mastery throughout the organization.

NRC Health Question: "How do you see the PX role changing in the future?"

Insight: "We are trying to shift our culture so that everyone feels responsible for improving the patient experience, in order to free up my team to adapt our strategy to the shifting needs of our organization. But we are not quite there yet, even though the needs are pressing." —PX Leader, NRC Health Partner

Action: Create a culture of collaboration
PX is not a stand-alone discipline. PX leaders must build strong partnerships that span the organization to make certain everyone is equipped to view their work through an experience lens.

NRC Health Question: "What is the greatest challenge for the experience leader role today?"

Insight: "Deep understanding from executive leadership about why this work is so vital and how it connects to quality, safety, financial outcomes, etc. It's SO much more than 'patient satisfaction,' and senior leadership doesn't always grasp that completely." —PX Leader, NRC Health Partner

Action: Ensure that leaders understand their experience management responsibilities
Every leader must own the experience for their area. They are accountable for understanding what matters to those they serve, to those who serve them, and for their results. PX professionals are strategic partners to enhance experiences locally.

NRC Health Question: "Is your organization making meaningful advances in experience strategy?"

Insight: "We have a very supportive and bought-in executive leadership group when it comes to patient experience." —PX Leader, NRC Health Partner

Action: Support frontline leaders
Frontline leaders are the biggest change agents in your organization. Ensure that they have the skills and support to influence and inspire their teams and tools to manage experiences in their areas.

NRC Health Question: "What is the greatest challenge for the experience leader role today?"

Insight: "There is little inherent authority to hold those accountable for the patient and employee experiences to best practices. The issues are easy to identify and difficult to address due to cultural influences." —PX Leader, NRC Health Partner

Action: Develop systems to facilitate accountability
Accountability across the organization is essential. Providing ongoing opportunities for leaders to share progress on experience goals, request help to remove barriers, and celebrate successes is a best practice. PX professionals can take the lead in developing these systems.

Clearly defining roles and responsibilities is crucial for organizational accountability, sustainable results, and ensuring that everyone is aligned and working toward the same goal—designing experiences that build trust. By assessing the current state and taking key actions, PX leaders can begin the process of transforming their teams and their organizations so both are better positioned to be successful in the future.

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At LBH we have clearly articulated that the patient experience team members serve as consultants, collaborators, and support for the ultimate responsible leaders that are the President, CNE, and CMO. This triad is ultimately responsible for delivering expectations and holding people accountable. We support frontline leaders through leader rounding, sharing patient stories, and offering interactive training and skills labs. Lastly, everyone can see everyone else's data. We love looking for lower-performing areas and seeing how we can support them. And we love celebrating with high-performing areas."

LESLIE SIMMONS, RN, FACHE
Executive Vice President and Chief Operating Officer, LifeBridge Health

06 Employee Experience

"Leadership is not taken, it is given. People give leadership to those that they trust. They allow people they trust to have influence over their lives."

—Henry Cloud

Leadership Development at the Frontline

Cultivating a team amid the shifting sands of trust requires solid bedrock to build on. The framework of reliability, competence, and respect offers that foundation. As mentioned in Section One, a recent NRC Health workforce study on trust (n = 732), showed that 91% of respondents reported that they trust the healthcare organization they work for. That's great news! When asked what factors contribute to not trusting their employer, respondents identified culture, leadership, and competence as the top three drivers.

Leaders play a pivotal role in shaping the experiences that build trust across the organization for patients *and* employees. Contemporary leadership, especially for frontline managers, is complex, as both tactical skills and strategic thinking are required to meet the many demands of health systems today.

Adding to this complexity, in today's workforce many frontline leaders are new to the organization or to leadership roles. Newer leaders face the challenge of managing peers and creating a collaborative culture with others across many tenure levels. Tenured leaders face challenges that require them to evolve as healthcare team dynamics and employee and patient expectations continue to change rapidly. While many frontline leaders have the passion and commitment to lead their teams, some lack the necessary leadership skills to be both tactical and strategic, as several NRC Health partners have noted:

- "I'm seeing a bigger gap in skill set between new leaders and more experienced leaders."
- "We are seeing more providers in leadership roles. They could benefit from leadership development training."
- "We spend a lot of time with new leaders in the beginning, then they are on their own."

These sentiments reinforce the need for ongoing leadership development. Yet many leaders are offered limited skill-building opportunities. This can leave them feeling unsupported and overwhelmed, which can translate negatively to teams and, in turn, patients.

Leadership development goes beyond learning core management skills such as staffing and managing a budget—it's also about honing capabilities that drive human understanding to earn and keep employee trust. Below are three key actions that frontline leaders can take now to drive employee experiences:

1. **Prioritization:** Prioritizing involves more than time management. When done well, it projects competence to employees by helping leaders manage in-the-moment demands and strategic responsibilities. Successful prioritization requires:

   - Gaining clarity
   - Seeking resources
   - Asking for help
   - Negotiating deadlines

2. **Leadership Effectiveness:** Effective leaders are reliable, competent, and respectful of others. They demonstrate professional presence and maximize the combined potential of their teams. Essential leadership skills also include:

   - Being visible and accessible
   - Breaking down silos and removing barriers
   - Connecting employee contributions to the organization's mission, vision, values, and promise
   - Leading by example
   - Apologizing for mistakes
   - Creating trust by listening broadly, staying curious, and respecting employee preferences

3. **A Continuous, Two-Way Feedback Culture:** Teams excel when everyone feels respected, involved, and safe to give and receive constructive feedback. Feedback can be difficult to give and receive, so leaders can set the tone by giving timely, authentic, and specific comments to members of their teams. It is also important to celebrate individual and team successes often.

   Additionally, leaders should create time and space to listen to feedback from their employees. The answers to some of the most challenging issues are in the hands, hearts, and minds of those doing the work, and decisions are best made when multiple angles are considered.

   Co-designing with employees empowers them to inform, ideate, create, and implement solutions that meet the needs of both those seeking care and those delivering care. It leaves them feeling like a part of something bigger than themselves. Over time, their involvement creates a culture of trust supported by purpose and a commitment to solving problems.

When leaders continuously listen and create space for teams to come together to solve problems or create innovative programs, the result is dual ownership. This leads to buy-in, better solutions, and more successful implementation and sustainment. And this process is more than just a collaborative conversation. Leaders set the stage by leaning into:

- Intentionality and focus
- Engagement in the design process
- Collaboration with stakeholders who are solution-oriented
- Creating a safe place for individuals to share their perspective

While frontline leaders are integral to building trust and managing experiences, senior and executive leaders are accountable for ensuring that their entire workforce trusts the organization as a great place to work and to receive care. Creating, modeling, and supporting a culture of continuous feedback will help leaders deliver experiences that meet the expectations of their workforce and patients to sustain them into the future.

Because culture, like trust, continuously evolves, leaders at every level benefit from intentional leadership development opportunities. **Including experience management as a foundational leadership capability** equips every level of leadership to consistently deliver reliability, competence, and respect, which, in turn, sustains the organization, now and into the future.

07 Trust-Building in the Pediatric Context

*"If kids can trust you with the little stuff,
they will come to you with the big stuff."*

—Dr. Laura Markham

Throughout this perspective, trust is emphasized as a core component of healthcare experiences for all consumers and patients. In this section, we offer a closer look at how trust-building specifically relates to pediatric care. It can be more complex in this space, because pediatrics requires care teams to build trust with both children and the parents who care for them.

In many ways, perhaps out of necessity, pediatric healthcare has pioneered the strategic prioritization of trust. The use of Child Life specialists, who offer support during care experiences, shows a commitment to helping kids cope with medical encounters. Interventions like personalized care plans, distractions, and positions of comfort are ways that any health team member can begin to build a child's positive relationship with healthcare.

As mentioned throughout this perspective, reliability, competence, and respect are most important in building and maintaining trust. Below are some key behaviors to reassure parents and provide them with a sense of security when they entrust their child to another's care.

Clinical Expertise and Competence

Parents want the best for their children, and to know that their care team is knowledgeable and competent. Certifications, tenure, and experience in the field provide reassurance for those seeking care. In addition, when service and clinical standards are delivered consistently, patients and families feel safer and more reassured. Consistency expresses reliability and competence and provides comfort; for example, if bedside reporting is set as an expectation, each nurse committing to the process and

consistently delivering throughout the experience builds trust. If there is a policy or procedure related to a task, such as a dressing change, ensuring that staff are consistently executing on that task builds trust.

Personalized Care with Genuine Concern for the Child's Well-Being

As Theodore Roosevelt said, "Nobody cares how much you know, until they know how much you care." Knowledge alone is not enough to build trust and strong connections; being attentive to the needs and details specific to each child, while providing intentional emotional support, are the ways to show genuine respect, care, empathy, and concern.

A few examples of this in practice:

- Asking the child and/or family to fill out a "Three things you should know about me" form (to be posted on a white board or in the EHR) to help the care team build connection with the child and family. Things shared might be a favorite color, activity or hobby, sports team, or stuffed animal.
- Engaging the child in conversation with the goal of understanding what matters most to them in their care experience.
- Partnering with Child Life experts to identify positive coping strategies that can be used when the child is in pain or undergoing a test or procedure, such as deep breathing, music, games, parental support/engagement, or positions of comfort.

Collaborative Decision-Making and the Willingness to Listen to Child/Parent Perspectives

While healthcare teams bring clinical expertise, parents and children bring their innate expertise on their personal lives, who they are, and how they live. No one knows a child as well as a parent or caregiver does. Parents want—and need— to be active and respected members of the care team, and kids need to feel seen, heard, and made a part of conversations happening about their health (when appropriate).

Open and effective communication is vital. This includes ensuring that children and parents are included in bedside shift reports and provider rounds, along with keeping updated white boards in the room to allow for optimal engagement in the plan of care.

Because children and their families spend most of their time outside of the care setting, parents and caregivers are responsible for keeping the child safe and well–cared for post-encounter. When we listen to understand and collaborate with parents on plans of care, we can best achieve the most optimal health outcome for the child.

Also of note, traumatic care experiences caused by lack of empathy and inconsistencies can have lengthy and even lifelong impact on children and their families, creating lasting fear and anxiety. For

children, the unintended consequences of this can carry into adulthood, affecting when, how, where, and even if they access care. It also can affect how they help their aging parents navigate care in the future, as well as how they access care for their own children.

It is in the little and big moments that children and parents look for connection, reassurance, guidance, collaboration, and ultimately trust in pediatric care. Trust is important everywhere in healthcare, but what it means to build trust with a child and a caregiver—often during the same interaction—adds a layer of complexity that really can't be ignored.

NRC Health stands by these behaviors and the importance of n = 1. Organizations committed to understanding what matters to each unique child and family seeking care recognize that there is no one-size-fits-all approach to healthcare. They also acknowledge that every patient/family has a name, a face, and a story, all of which are incredibly important to understand in order to build trust. But health leaders must also think systemically about the big picture, so they can be intentional in how they inspire other leaders and employees to gain the much-needed trust of the children and families they care for.

" As a pediatric nurse at the bedside, I did my best to provide compassionate and connected care to patients and their families. It was not until I had my own little one that I truly understood the depth of love and protection one feels for their children. Those of us in pediatric care must acknowledge the privilege and immense responsibility we have when parents trust their 'world' in our hands. May we keep in mind the impact of moments that leave a lasting impression on the littlest of patients, adolescents, and their parents who seek a safe place for care. Let us be a place in which all feel secure in our commitment to providing high-quality, safe, collaborative care with compassion."

ASHLEY NELSON, BSN, MS, RN
Strategic Advisor, NRC Health

08 Implications for Governance

"Trust is a performance multiplier...for every activity you engage in, from strategy to execution."

—Stephen R. Covey

In today's disruptive and competitive healthcare marketplace, consumer experience and patient experience are strategic-level differentiators for NPS and patient loyalty, which directly impact market share. As described previously, the drivers of trust—reliability, competence, and respect—influence likelihood to recommend and loyalty, so it's vital for boards to understand these, as well as the kinds of experiences that erode trust.

Trust as a Strategy

As business author Stephen R. Covey has noted, trust fosters and sustains long-term innovation. Health systems must use innovation to differentiate their brands and deliver on their brand promise. Innovation drives efficiencies that stretch the dollar, which is a must-do in today's financial crunch and competitive environment.

Yet building trust is not just a tactic or initiative for certain employees or departments—it should be embedded into overall organization strategy as a key driver of consumer, patient, and employee experience. NRC Health and TGI challenge boards to look beyond their marketing plans and build trust into their overall strategic direction and vision framework.

Embedding trust into strategy drives innovation by unveiling opportunities to redesign care to improve consumer, patient, employee, and clinician experiences. For example, elevating employee trust reduces strain and burnout and can bring back the joy in healthcare. Building community trust through strategic partnerships and addressing access barriers shows action and concern for the greater good. These focus areas for trust improvements spur organizational innovation, growth, and market share; create value; reduce costs; and increase efficiencies that benefit both health systems and the people they care for.

Implementing a Trust Strategy: Key Questions for Boards and Their Senior Leadership Teams

To launch a trust strategy, NRC Health and TGI recommend that boards and leaders evaluate their organization's current experience and trust scores to identify strengths, weaknesses, opportunities and threats. Their lens should encompass all stakeholders, from employees and local communities to payers, vendors, and partners. Key strategic aims for improvement and innovation in trust and experience include:

- **Marketing and communication strategy:** What compelling stories around trust and experience can we tell—differentiated from our competitors'—to our communities, patients, and employees? What stories around trust and experience can we share with payers so we become and remain essential providers in their health plans? How do we reach consumers in today's age of digital access? What strategies can we use to address generational preferences for communications and create more personalized experiences?

- **Care delivery and experience design:** What actions can we take to intentionally design and manage systems and processes around the humans who use them using generational drivers of trust as a framework? What parts of our current care delivery system break trust, and why? What, if any, of our efforts to transform care delivery and experience were stalled because of COVID-19 or financial constraints? What can we do now to restart and accelerate?

- **Clinician engagement:** How can clinicians contribute to supporting trust as an organizational strategy? What is the right way to engage our clinicians in experience efforts, and when should we do it? Do we have strong enough relationships with our clinicians, or has their trust in us eroded, and why? What are barriers to progress?

- **Workforce culture:** How can we cultivate trust from within and leverage employee experience to better connect with communities, consumers, and patients? In what ways does our current organizational culture support success with a trust strategy? What areas of our culture will we need to address to succeed with this kind of initiative?

- **Technology:** How can we carefully and thoughtfully leverage AI tools and other digital solutions to elevate trust and experience?

- **Role of the CEO:** Is our CEO our lead experience and trust ambassador? What can s/he do to regularly communicate trust as an organizational strategy across the system and engage employees in the effort?

- **Institutional reputation:** How can we become the go-to source for reliable healthcare information? What is our role in countering misleading and false information on social media, apps, and other media?

- **Board and leadership education:** What additional transparency, visibility, data, education, training, etc. do the board and key leaders need to create and implement a trust strategy and drive success?

- **Organizational strategy:** What new initiatives with clear, measurable objectives do we need to add to our strategic plan to act on the answers above?

FINAL THOUGHTS

David's story doesn't simply open this discussion—it echoes throughout it. His experience balancing his personal healthcare needs with the demands of caring for others reflects a fundamental challenge facing modern healthcare: building and sustaining trust across every moment of an encounter. Trust is fragile, and it is shaped by interactions at every point in a healthcare journey. It is forged at the nexus of promise, expectation, and experience.

And trust is not static—it's a moving target. Patients and employees bring their own histories, preferences, and doubts to each encounter, and health systems must rise to meet them. The question has never been whether trust matters. It does. But now more than ever, the question of how trust is built and sustained intentionally must be at the forefront of our actions. It's a challenge, to be sure, but one we must rise to.

This means:

- **Meeting consumers where they are**—by ensuring people know that if they come to you, they will receive reliable, competent, and respectful care.

- **Delivering on brand promises**—so that what's marketed matches what's experienced.

- **Embedding trust into the patient experience**—not by accident but by design, through a reimagining of the PX team.

- **Empowering employees and leaders**—because a disengaged workforce can't build patient trust.

David's story is a reminder that trust is won or lost in the smallest moments. Yes, it is enabled by policy and strategy and by the strength of our brand—but it's also found in how a call is answered, how a provider listens, and how a system responds when something goes wrong. It is a living, breathing force in healthcare—one that requires continuous attention, action, and accountability.

At NRC Health, we are committed to advancing these ideas, and we will continue to explore the evolving dynamics of trust vis-a-vis consumer behavior, patient experience, experience management, and more. Our continued work will support healthcare leaders to help anticipate change and act with data-driven insights to embed trust into every interaction. Because in the end, gaining trust isn't an abstract ideal—it must be an intentional, everyday practice.

Suggested citation for this report:

Baron J, England W, Silva M, Nelson A, Gorley T, Donohue R, Fryda S, Peisert K. 2025 Experience Perspective. NRC Health. https://nrchealth.com/resources.

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Putting it into Practice

The 2025 Experience Perspective highlights the importance of trust in healthcare experience management. From patients and families to employees and communities, understanding those you serve leads to better outcomes for everyone.

We are highlighting nine real-world examples of how leading hospitals and health systems are putting it into practice to drive real change.

2024 NRC Health Experience Perspective

Next-generation Human Understanding:
A playbook for healthcare experience management

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