What Makes a Chief Experience Officer?

By Donna Padilla, Managing Partner and Practice Leader, Healthcare and Daniel Young, Senior Associate

The role of Chief Experience Officer or Chief Patient Experience Officer is growing but still in its infancy. In searches that we have conducted for this role, leading candidates have come from both inside and outside of the healthcare industry. Individuals from outside typically have grown through customer service positions or technology roles. Within healthcare, they often came from an operational background, were an internal hire approached by the organization to "fill a void" and assume a patient experience role, and gradually transitioned into the position and carved out a niche.

There is still no real blueprint to follow for this executive role. One Chief Experience Officer (CXO) we know spends most of his time on the front lines, working with staff, speaking with patients, tweaking and fine-tuning day-to-day habits. Another holds a full-fledged C-suite strategic position, more of a general than foot soldier. Yet another is somewhere in between, a strategist and operational expert who is just as likely to be speaking with the CEO as an ER nurse.

Clearly, the Chief Experience Officer role is being defined as time passes and reform progresses. After all, while all hospitals and health systems are talking a good game about being "patient-centric" and listening to the customers, most are just beginning to get a handle on how to do this. As the CXO role matures, search committees are becoming more in tune with the deliverables to be expected from a CXO, from standard survey and engagement scores, to visible operational impacts.

Certainly all staff play a role in patient experience, but it is critical that organizations have a place and person at which the buck stops—someone who can not only make sure the valet is opening doors correctly but also, for example, establish metrics, gather data, determine successes and failures, and communicate suggested courses for improvement to the CEO and top administrators. While the CXO might not be an official member of the C-suite just yet in every organization, the position must be more than a glorified concierge.

Seat at the table

The CXO is a critical bridge to getting serious about patient experience. It "brings focus to an organization's stated commitment to providing a great patient experience," write Jason A. Wolf, PhD, president of the Beryl Institute, and Dan Prince, president of Catalyst Healthcare Research, in a white paper published by Beryl. "It offers the potential to align various initiatives and processes around the customer . . . it ensures a seat at the table for the voice of the customer to be heard and acted on when senior leaders gather and make decisions."

WITT / KIEFFER Leaders Connecting Leaders The paper features brief interviews of 15 different executives with the CXO or similar title.¹ Our recent searches in this area suggest that a strong recognition of the CXO role at every level (including the board) and a strong relationship with the top level HR Officer in an organization are important components in allowing the CXO to integrate, innovate and execute.

The hiring of a CXO is a significant milestone on the patient experience journey. This is illustrated by the following hypothetical progression towards patient-centricity, in which the organization:

- 1. Perceives a void or need regarding patient experience
- 2. Makes improving patient experience a strategic priority
- 3. Hires a chief patient experience officer
- 4. Designs and implements cultural and experiential change
- 5. Builds a team around the CXO to support initiatives
- 6. Collects feedback and ROI on change initiatives
- 7. Refines initiatives
- 8. Transitions to a continuous improvement mode regarding patient experience

This is obviously a gross simplification of what hospitals and systems are going through, and many are taking multiple steps at the same time, but it is informative in that most organizations are in the stage 2, 3, or 4 range. It will be a few years until they begin to get comprehensive feedback on the success of their efforts, and can effectively measure and enhance ROI either from a financial or patient satisfaction viewpoint.

Cleveland Clinic

The Cleveland Clinic is hailed as a pioneer in this field, and bills itself as "the first major academic medical center to make patient experience a strategic goal," hire a CXO and put a team together around this executive. To the Clinic, patient experience "requires care that addresses every aspect of a patient's encounter with Cleveland Clinic, including the patient's physical comfort, as well as their educational, emotional, and spiritual needs. . . . we provide resources and data analytics; identify, support, and publish sustainable best practices; and collaborate with a variety of departments to ensure the consistent delivery of patient-centered care."²

The CXO must keep a keen eye on technology as digital engagement takes a front seat in the experience journey. Partnering with IT vendors and internal IT leadership to impact experience will be an ongoing quest for CXOs and must be embraced. "The solution is to remember that technology has a real role in encouraging patient engagement, while at the same time, recognizing what doctors want, which is to not be distracted or disengaged from their patients," notes Dr. Adrianne Boissy, Cleveland Clinic CXO.³

Stage 8 is the ultimate destination—a state at which the organization, its operations, and its culture are oriented around the patient experience. This strategy is succeeding in the marketplace, and the challenge becomes the ongoing process of optimizing the experience.

The Chief Experience Officer must be a connector, someone who can work with the CEO, CNO, CFO, CIO, CHRO, CMO, Marketing Officer, volunteers, staff and others who are familiar to all and can exert influence across functions and silos. Many CXOs don't have direct operational accountability but carry the authority and

responsibility to implement change. Today's patient experience officers are fortunate in that they are pioneers, able to experiment and learn on the job. As the role becomes more codified and standardized across the industry, it will lose some of its novelty and charm—but also sharpen its effectiveness and grow in status.

References

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