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What if we Treated Patients More Like Customers?

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COVID-19 has ignited the need for data-driven decision making, personalised health-care and digital delivery. How can the NHS become a customer-focused organisation and reimagine healthcare to meet evolving priorities?



Key Points

- To deliver world-leading health outcomes, the NHS needs to get comfortable with new concepts of healthcare delivery.
- It is now time to consider the full potential of reshaping the NHS's relationship with
- patients so they are treated more like customers.
- Moving to a customer model would allow the NHS to realise a patient activation dividend, freeing up capacity to focus on those who need the most support.
- The first step to becoming a customer-focused organisation could be to cultivate a vibrant market that encourages new players who bring disruption, technological innovation and ingenuity.

People spend a large proportion of their day interacting with big multinational corporations that are ultra-responsive and hyper-personalised. With so many of our interactions with organisations being virtual, intuitive and personalised, patients' expectations for how they interact with the NHS are changing. This was the case before COVID-19, and these expectations have only increased as a result of the rapid uptake of new technology-enabled service delivery in recent months.

These organisations (Netflix, Amazon, Apple etc.) have two essential characteristics. Firstly, they constantly seek new ways to deploy emerging technology to deliver services. Secondly, they treat people like customers.

To deliver world-leading health outcomes, the NHS needs to get comfortable with both concepts. Signs are very good on the technology front. The speed at which the NHS has been able to move to new digital models of delivery has been incredible. For example, at PA Consulting, our experts supported the

rapid deployment of new technology to deliver virtual consultations. With respect to a particular new platform, this has contributed to the growth of virtual consultations at a rate of around 200 appointments a day.

We have also helped roll out new technologies to the homes of vulnerable and elderly people to enhance their ability to live in their own home and easily connect to support services - 94% of service users feel that the care technology deployed has increased their feeling of safety and security. We have worked with over 20 local health and care economies to harness data in their response efforts. These analytical tools are helping the NHS develop mitigations to the impact of COVID-19 this winter and guide the recovery of elective services, ensuring as much activity is serviced as possible before winter.

As for introducing customer capabilities and culture, there's still a lot to do. And the effects of the lack of customer centricity are clear.

The NHS is a highly efficient system by

global standards, but increasingly standardised pathways of care have unintended consequences. Through our work, we see the NHS over-servicing some patients and under-servicing others, in some cases, spending more money than necessary and still struggling to improve health inequalities. For example, we are working with a health and care economy which has received funding increases year on year and yet sadly has worsening levels of diabetes, late diagnosis of diseases and an increasing gap in life expectancy based on deprivation. A simple measure that could make a difference is capturing the time spent on face to face interactions with people who could safety be serviced virtually and redirecting that resource to tackling areas of greater need.

This experience has led us to consider the full potential of reshaping the NHS's relationship with patients so they are treated more like customers. How might this save money, improve outcomes and capitalise on the digital advancements that have been achieved through the COVID-19 crisis?

What do Customer Focused **Organisations do Differently?**

Let's start by thinking through what customer-focused organisations do:

- · Customer segmentation.
- · Differentiated offers for different customer segments.
- · Different allocation of resources for different customer segments.
- Influence customer behaviour, such as through reward schemes.
- · Al-enabled marketing.
- Unrelenting focus on customer satisfaction.

this anxiety is understandable, we think it is misplaced. In fact, treating patients like customers could be transformational in helping unlock efficiencies and making sure taxpayers' money is optimised. For example, adults forty-five years or older who sleep fewer than six hours a night are 200 percent more likely to have a heart attack or stroke during their lifetime, as compared with those sleeping seven to eight hours a night. How many people know that and are therefore empowered to make a change to their sleep patterns? Perhaps not many, as two-thirds of adults throughout developed nations locally through commissioning strategies, incentivising collaboration between local organisations, and designing new outcomes-focused contracts. These are practical ways for the Government to act with greater collective impact.

"It's hard to change an organisation as big as the NHS"

Yes, it's hard to change the culture of an organisation as huge as the NHS. But isn't this the perfect time to radically reimagine health and care economies and their potential to meet evolving priorities? A time where

The NHS is fatigued by structural reorganisation but a healthcare customer revolution is coming

If patients were treated more like customers, we could begin to:

- Use data to better understand people and what they need to be well.
- Use personalised medicine and improve health outcomes.
- · Have light-touch, or more intensive models of care based on patient activation/ability to self-manage.
- · Incentivise people to stay healthy, rather than just treating people when they become sick.
- Proactively push personalised resources to people to support prevention and self-care.
- · Have happier, more engaged and more motivated patients and clinicians.

Why Has This Not Been Done Before?

People have traditionally had major concerns about shifting the NHS in a customercentric direction. As we emerge from the COVID-19 crisis, it's arguably now clearer to see how each of these objections can be overcome.

"It would increase expectations that we can't afford to meet."

Some NHS managers fear such an approach will raise patients' expectations beyond the service that the NHS can provide. While fail to obtain eight hours of nightly sleep. Empowering people with insight to make healthy decisions is immensely valuable in terms of health outcomes and economic outcomes. We see this desire for insight in areas such as the growing business to consumer market for wearables, finger-prick blood tests, genetic testing, and microbiome analysis and 'treatments.' Moving to a customer model would allow the NHS to realise a patient activation dividend, freeing up capacity to focus on those who need the most support.

"We don't have the capabilities to respond to customer expectations."

It's true that it would be hard for the NHS to build the capabilities required to make this transition overnight. However, something that NHS and local government commissioners are skilled at is market development. The first step to becoming a customerfocused organisation could be to cultivate a vibrant market that encourages new players who bring disruption, technological innovation and ingenuity. At a national level, this can be achieved through using the levers of Government such as national and local industrial strategies, investing in skills programmes, tax offsets for health technology companies, and funding incubation of innovation. This can be complemented we could pivot the healthcare system from a sickness model to a purpose-led and adaptive health and wellness model. For example, supporting and coaching people in relation to their sleeping, eating, alcohol consumption, and exercise as well as all aspects of condition management and medication adherence. These sorts of interventions have a high return on investment, and they go the heart of purpose and what motivates clinicians, nurses and carers: helping people. The NHS is fatigued by structural reorganisation, but in our experience, unwavering from their personal motivation to care. Culture eats policy for breakfast; why not approach change by leveraging cultural strengths?

COVID-19 has ignited even greater appetite for data-driven decision making, personalised healthcare and digital delivery; all advancements that can orientate the healthcare system to a customer footing. And, because of the incredible progress that has been made, we have renewed confidence in overcoming perceived barriers to ambition and pace of transformation. The healthcare customer revolution is coming, and personally I'm very much looking forward

Conflict of Interest

None.