

The Power of Influence: Patients as Consumers

For the last two decades, healthcare has been transitioning to a consumer-driven model. The vision is one to which we can all relate, similar to that of a business or retail model, where patients as consumers can choose the best provider based on a myriad of options, including type of care offered, care quality, and price. It's utilizing the idea of choice to drive demand. It's not novel in other business sectors; it's what makes the business model work - creating customer satisfaction, driving revenue, product and experience differentiation, as well as incentives or promotions.

According to an article published in *HealthAffairs*, which examines the promise and the performance of re-positioning the patient as a consumer for the last two decades, "much has fallen short of both the aspirations of its proponents and the fears of its critics."

With that said, hope still springs eternal. Perhaps that is because the integration of patients into the care process, such as welcoming their input and seeing them as consumers, instead of just patients in need of care, truly can elevate the standards of care.

A recent presentation at TEDMED 2013 by Dr. Susan Desmond-Hellmann, the Chancellor of the University of California, San Francisco, discusses the power and influence of the patient's perspective on healthcare. She shares: "We all want great doctors. But can healthcare consumers make being a doctor a better job?"

An interesting question. Can consumers actually help make being a doctor a better job? According to Desmond-Hellmann, the answer is a resounding, "**Yes.**"

Desmond-Hellmann cites firsthand examples of how she's seen treating patients as consumers work and change the healthcare outcome to something that would never have been imagined previously. She also discusses how changing the process to include patients and viewing them as consumers is a paradigm shift, one that is not always welcomed.

Desmond-Hellmann sees a future in which consumers drive treatments and innovation, starting by sharing data to a global health network. Here are her top 5 ways to address the system, amended with some additional thoughts:

- **Power of consumers** - Desmond-Hellmann says, "Don't underestimate this power." We also believe, as in any consumer situation, the power of consumers speaks to choice. In healthcare, patients must feel that they too must feel satisfied and are receiving quality care, otherwise they should have the choice to switch providers (not always an option today, but becoming more so).
- **Enable the care environment** - Desmond-Hellmann is referring to "not putting more tools with more rules, which will limit advancement." Instead, ask why the rules are there. Legal rights and privacy are needed, but we also need to challenge if the rules prevent progress. For example, by not allowing patients who are willing and desire to share their data to do so, we are limiting the ability to share knowledge that could potentially cure something or help someone.
- **Prepare for messiness** - It's a fact that a group of patients will provide a variety of opinions.

“There’s not a point estimate on what a group of patients think. Millions of voices provide great richness, not all one opinion,” Desmond-Hellmann said. It’s a great asset to harness. Imagine the input that could be provided and harnessed for almost any medical topic.

- **Provide incentives** – Again this goes back to the retail or business model formerly discussed. Desmond-Hellmann also stated: “providing a reason for [patients] helping a doctor – changes in healthcare, tools, transparency – are significant incentives for patients.”
- **Tap into social connections** – We’ve discussed this in many recent posts. Patients are well connected. Desmond-Hellmann concurs: the consumer/patient population has an enormous reach, and can be positive or negative.

In our recent post, *Beyond the Physician: A New Paradigm in Patient Care*, it was discussed how “with the introduction of newer technologies, much has changed over the last few decades. Today, patients with similar conditions are working together to support each other, exchange information, and even change their own outcomes by influencing each other’s treatments.” So regardless of whether or not the healthcare systems really desires to include the patients as consumers, the movement is already beginning anyway.

But if real change is to happen, Desmond-Hellmann said it best: “Patients need more than a seat at the table, it needs to be driven by them – not just accepted or tolerated, but embraced. A new social contract will be required, that patients need to donate data and information for the greater good, to enable doctors and the overall healthcare system to make this transition towards consumers.”

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