RingCentral | Research

COLLABORATION-ENABLED CARE

Closing communications gaps to support value-based care and healthcare consumerism demands.

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INTRODUCTION

COLLABORATION-ENABLED CARE

A common, singular collaboration framework that allows staff and patients to efficiently and securely collaborate throughout the care delivery cycle.

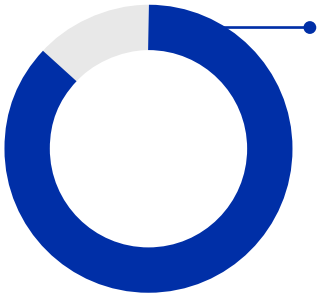
In response to the healthcare industry's ongoing shift towards value-based care and consumerism-driven patient demands, a new focus must emerge within healthcare organizations—collaboration-enabled care.

Clinical and patient experience executives alike are assigning accountability for improving both staff and patient engagement effectiveness throughout each critical juncture of a patient encounter. This imperative requires greater clinical efficiency and improved access between care teams and patients. Key objectives include better scheduling, enhanced care coordination, and stronger patient engagement.

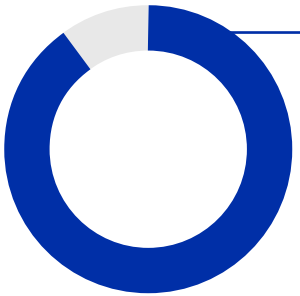
As providers continue their focus on workflow redesign and the use of supportive informatics technologies to achieve these objectives, significant communication gaps still limit their results. To uncover these communication-related gaps, RingCentral surveyed 150 healthcare leaders directly responsible for patient care delivery, patient experience management, and other critical facility operations. This eBook outlines their current communication-related challenges and the direct impact collaboration-enabled care can have on staffing optimization, care coordination, and patient engagement.

EXECUTIVE SUMMARY

Collaboration-enabled care is gaining focus and is a top priority among clinical and patient experience executives.

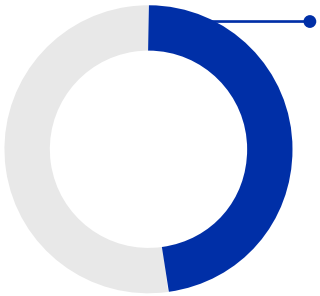


87%
say that **collaboration improvement** is an important initiative—60% ranking it as a top 3 priority.



90%
believe their current communications platforms create **care coordination gaps** and are generally inefficient.

The communications technologies in use today across acute, ambulatory, and medical practice settings detract from care coordination.

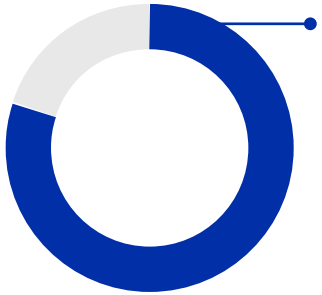


48%
feel that their current communications technology makes patient **discharge planning** more difficult.

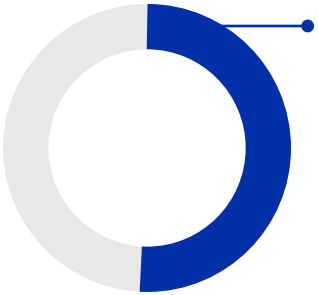
51%
strongly agree that it IS NOT easy to **schedule** initial or follow-up **appointments**.

CURRENT STATE OF COMMUNICATIONS

The most commonly available communication tools today (email and voicemail) are actually used the least by healthcare teams.

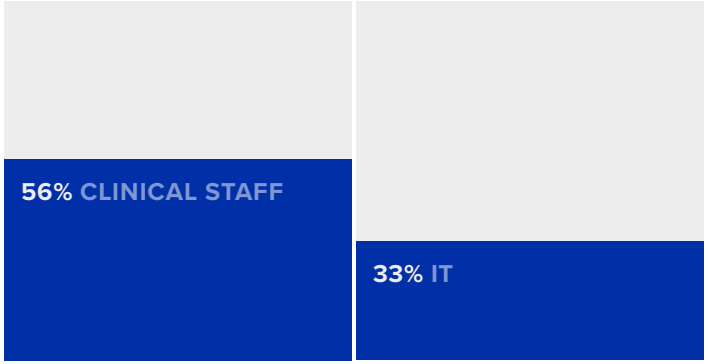


80%
of healthcare teams (clinical and support) prefer to leverage **messaging**, voice calls, and face-to-face conversations to connect and **collaborate**.

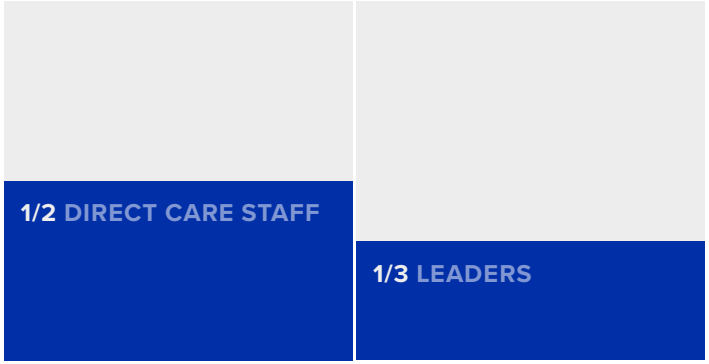


50%
of respondents indicate that their current communication/ collaboration processes/ resources contribute to **staff burnout**.

There's a wide disparity between respondents regarding the impact of current communications technology on the patient experience.



56% of clinical staff vs only 33% of IT staff feel that **current patient call handling** is effective.



More than 1/2 of facility direct care staff vs less than a 1/3 of leaders agree that patients have a **positive discharge or return visit impression**.

SUPPORTING VALUE-BASED CARE

As part of the broader strategy to reform how healthcare is delivered, how do healthcare leaders weigh communications and collaboration improvements against their overall success with value-based care delivery?

When asked about several key program initiatives, survey respondents **agree or strongly agree** that collaboration improvement:

- Helps eliminate or reduce adverse events–**75%**
- Aids the implementation of evidence-based standards–**78%**
- Supports processes that improve patient experiences–**74%**

Additionally, **more than 50%** of leaders surveyed say they strongly agree or agree that improved collaboration would impact other key performance indicators:

- Higher patient satisfaction rates
- Reductions in redundant care
- Shorter patient stays

Reduce adverse events

Rx errors due to lack of timely communication between clinicians

Hospital-acquired conditions from ineffective collaboration or miscommunication of care directives

Implement evidence-based care standards

Efficient, on-site staff training

Targeted time at the bedside via real-time collaboration

Implement new processes to create better patient care experiences

Access to patient care navigators for questions, care coordination, and appointment management

Proactive patient follow-up with post-treatment support and satisfaction surveys for better outcomes

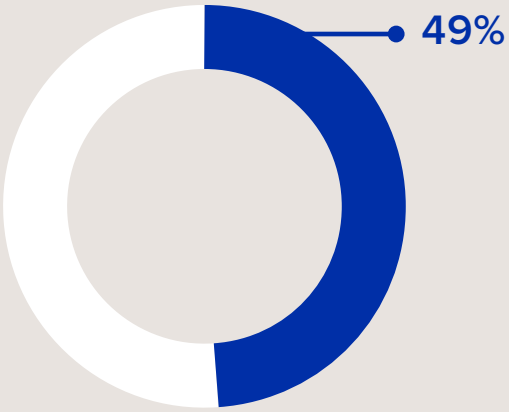
A GAP IN PERCEPTIONS

Healthcare leaders feel strongly that collaboration-enabled care will support their value-based initiatives.

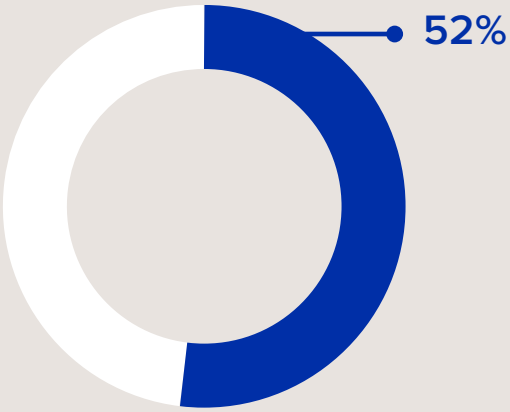
However, before they can architect this change, they must first build internal alignment by closing the gaps between how they and other stakeholders (clinicians, IT, operations) perceive current communications capabilities and limitations. To focus this effort, the leadership survey results identified four (4) key areas that most directly support the Value-Based Purchasing (VBP) Program, as well as other top-of-mind operational imperatives:

- Patient scheduling management
- Virtual patient engagement
- Patient experience and satisfaction scoring
- Clinician satisfaction and burnout

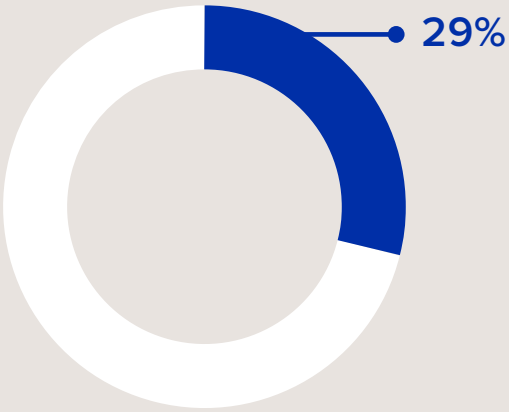
Respondents agree that scheduling with their health organization is a negative patient experience.



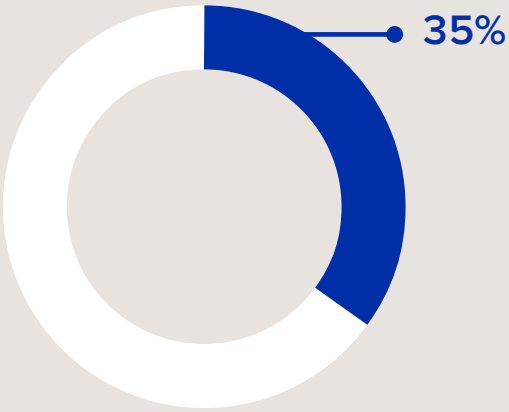
CLINICIANS



FRONTLINE CARE



IT



EXECUTIVE LEADERSHIP

PATIENT SCHEDULING MANAGEMENT

There is really just a single patient experience or perception that is formed throughout a patient journey. A perception that is influenced across multiple interactions and encounters with a provider.

Appointment scheduling is the beginning of the journey and sets the tone for a patient's initial impression of a provider. When asked to rate first impression-related statements, over 50% of clinical and support team respondents agree that scheduling with their health organization is a negative patient experience.

Comparatively, only 38% of IT and leadership respondents feel scheduling is a negative experience. Why the disparity? Clinicians and support teams encounter patients first, following scheduling coordination. They will capture firsthand impressions from patients—including scheduling and other provider interaction gaps.

These additional impression statements were ranked with below average responses (> 50%) demonstrating a clear opportunity for improvement:

- **A call into our health system is a positive patient experience.**
- **Patients get to the right person/department on the first attempt.**
- **Our current communications technology enables staff to address patients by name and with relevant information.**

50%

Over 50% of clinical and support team respondents agree that scheduling with their health organization is a negative patient experience.

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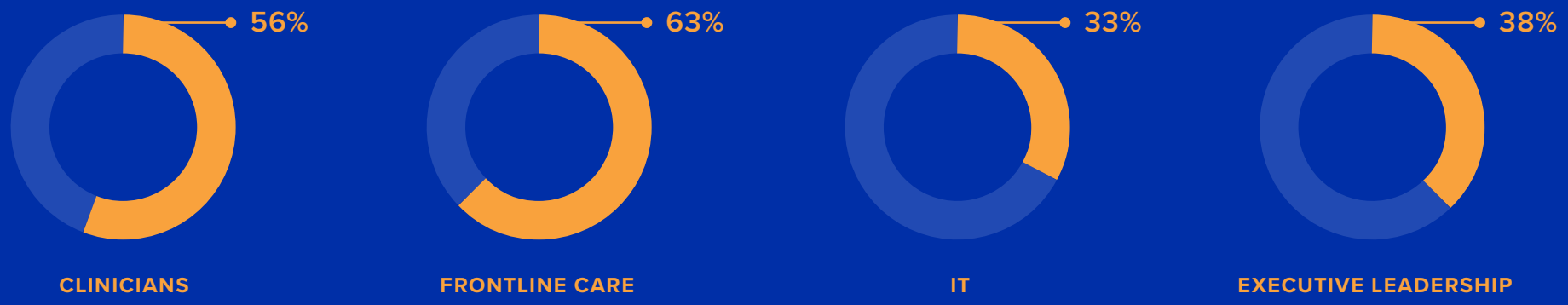
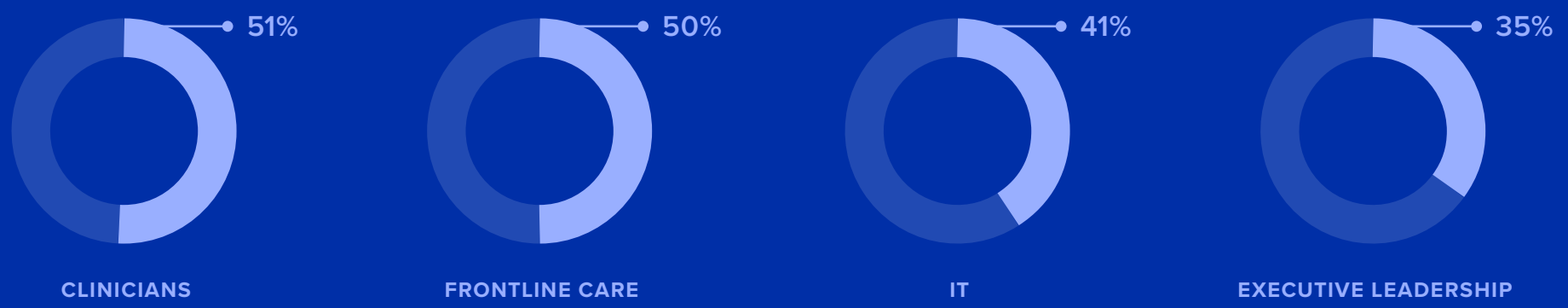


Respondents agree that recurring scheduling is a positive experience.



VIRTUAL PATIENT ENGAGEMENT

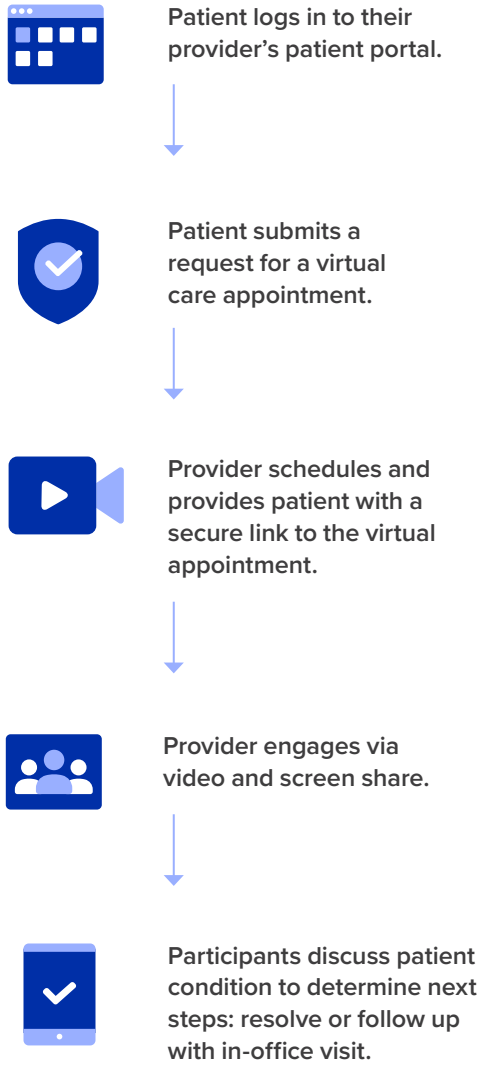
Improving patient outcomes (the core tenet of value-based care) requires not only customized care interventions, but also active patient participation.

To improve provider access, remove common barriers, and drive patient engagement, providers have begun to increase their use of virtual care (telehealth). Virtual care is the delivery of health-related services and information via video, voice, screen sharing, and secure messaging. What's more, telehealth can be utilized across primary and specialty providers alike. The technology enables providers to reach broader patient populations and access them through internet connectivity.

Implementation and use of virtual care systems improves patient engagement levels and directly contributes to their overall health and outcomes, but adoption levels remain very low. **Fewer than one-fourth of the respondents employ secure virtual care technologies (23%).**

The low telehealth adoption rates identified in this survey are driven by the traditional heavy costs of on-premises telehealth platforms: fixed kiosks, dedicated data center resources, and more.

Comparatively, cloud-based telehealth applications are software-as-a-service (SaaS) based and can be accessed from common devices such as smartphones or tablets that are commonly used by both doctors and patients.



PATIENT EXPERIENCE AND SATISFACTION SCORING

Consumers as patients (healthcare consumerism) bring their consumer-side experiences and expectations to their healthcare service consumption. The result: they demand newer communication channels to engage with their providers. They desire to move away from traditional voice-only or email engagement to newer channels: text reminders, web chat, and virtual, video-enabled visits.

The need to expand communication channels and improve access between patients and providers is critical towards capturing patient sentiment and direct assessment of their healthcare service experience. We asked respondents about the impact of their current communications process and technology on their health systems' HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) scores.

The majority of survey respondents (70%) say their current communications process and technology has room for improvement with clinician-to-clinician and clinician-to-patient communications. When asked to specifically rate the impact of their current communications process/technology on patient communications, 60% of respondents indicate a need for improvement or an actual negative impact.

70%
of surveyed healthcare leaders say their HCAHPS scores are impacted by current communications technology.

60%
of respondents indicate a need for improvement or an actual negative impact.

CLINICIAN SATISFACTION AND BURNOUT

Collaboration-enabled care can improve work satisfaction for staff. Substandard collaboration, however, can actually detract.

For leaders to reduce staff burnout, they must improve workflows that require the most multidisciplinary team collaboration: patient evaluation, treatment, and transfers. Transfers can be the most complex, as patients are transitioned between units (e.g., med/surg to the ICU) or discharged from the hospital directly, and providers need enhanced collaboration capabilities to improve patient transfer times.

When asked to rate their current care coordination efficiency, **55% of respondents indicate it is inefficient**.

50%

of survey respondents agree current communication and collaboration processes/resources contribute to clinician burnout. Another 45% are neutral.

CONCLUSION

COLLABORATION-ENABLED CARE

A common, singular collaboration framework that allows staff and patients to efficiently and securely collaborate throughout the care delivery cycle.

Healthcare leaders must address the challenges of inefficient collaboration across multi-disciplinary teams and with patients directly. Existing clinical communication tools and workflows are manual and inefficient. In turn, many clinicians are frustrated at the loss of productivity at the bedside, and patients feel disconnected from their providers.

To support the new era of personalized care, providers must explore how collaboration-enabled care will reimagine care delivery within their healthcare organizations.

Learn more at ringcentral.com/healthcare.

ABOUT RINGCENTRAL

RingCentral, Inc. (NYSE: RNG) is a leading provider of global enterprise cloud communications, collaboration, and contact center solutions. More flexible and cost-effective than legacy on-premises systems, RingCentral empowers mobile healthcare teams and distributed specialists to communicate, collaborate, and connect from any location, on any device, and via any mode. RingCentral provides unified voice, video meetings, team messaging, digital patient engagement, and integrated contact center solutions for healthcare provider, payer, and life science organizations globally. RingCentral's open platform integrates with leading healthcare apps and enables healthcare organizations to easily customize clinical workflows. RingCentral is headquartered in Belmont, California, and has offices around the world.

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About the research

Root3, on behalf of RingCentral, conducted an online survey of 150 clinical, operations, and patient experience leaders within US hospitals and ambulatory settings. Participants completed a 16-question survey that explored the communications and collaboration technology currently in use within their organizations. Survey questions focused on identifying potential gaps in how these current systems address collaboration efficiency across care teams and with patients directly.

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