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Health-care providers learn Disney touch

By Andrew Doughman
STAFF WRITER

Snow White as nurse and the Magic Kingdom as hospital might sound like a child's wish.

But the idea is part of a real-life, new Walt Disney Co. program designed to teach health-care professionals how to make patients as satisfied with a trip to the hospital — or the doctor's office — as they are with a trip to a Disney theme park.


For about \$3,500 each, health-care workers can spend 3½ days at the Disney Institute learning how to pay closer attention to the patient experience.

"Oftentimes in health care, the patient in the bed is almost secondary. Everyone comes in looking at their task instead of looking at the patient," said Patrick Jordan, a Disney Institute consultant and former health-care executive. "Looking at the various parts of your organization from the perspective of your guests becomes very important."

The Disney program goes beyond

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making patients feel better about their health-care experiences. It also may save hospitals money. Starting in October 2012, the federal government will begin to tie billions of dollars to patients' experiences at hospitals.

Mobilize the 'nice'

Hospitals "need to mobilize all of the 'nice' that they can muster in all of their employees to ensure that the total experience of the patient satisfies the patients' expectation," said Aaron Liberman, a professor of health-services administration at the University of Central Florida.

"If any [employee] happens to say something out of sorts or creates a bit of ill will with that patient, they may damn the entire hospital," Liberman said.

The idea for Disney's "Building a Culture of Healthcare Excellence" program, which launched this week, grew out of the theme park giant's collaboration with individual hospitals across the nation.

At Florida Hospital

In Orlando, Florida Hospital worked with Disney to improve the patient experience before the opening of its children's pavilion in March. As part of that plan, the hospital introduced new uniforms and simplified name tags, banned cell-phones in some patient areas, and instructed staff to greet patients with a smile and kneel down to talk to children at their eye level.

"We've realized that taking care of people means more than just putting the splint or the cast on the broken bone," said Tim Burrill, chief operations officer at Florida Hospital for Children.

Even though patients often arrive at the hospital in fear, paying attention to controllable things like stress can improve how they feel about their hospital visit, Burrill said.

To Disney, the new federal standards mark a shift in thinking toward improving the patient experience, said Stacey Thomson, public-relations manager at Disney. The result was an expanded program for health-care professionals that focused on increasing patient referrals



PHOTOS BY JOE BURBANK/STAFF PHOTOGRAPHER

Patrick Jordan, center, leads hospital officials on a tour of Main Street in the Magic Kingdom.

to facilities such as family-medicine clinics and skilled-nursing homes.

By exceeding expectations, doctors can attract new clients through referrals from satisfied patients, said Dr. Christopher Smith, who runs a 3-year-old family-medicine practice in South Carolina and participated in the Disney program.

Such detail may seem goofy, but Disney representatives say these nuances matter to the patient — or the guest.

The distinction was not lost on Smith from South Carolina. At his office, the receptionist has become a “greeter.”

Smith also uses Disney’s onstage and offstage approach to separate his office into public and private spaces. In patient areas, staff members present a calculated onstage image, while more private break rooms allow staff to go offstage to relax, vent or do other things



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they don’t want a patient to see.

The concept reminds staff that guests are watching how they behave when they’re “onstage,” Jordan said.

Just like other industries, doctors and their staffs have to learn that every service

matters, he said.

“You wouldn’t send a friend of yours to a restaurant that you knew had good food, but the service was poor,” he said.

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Patient as guest

For an insider’s view to improving customer service, Jordan took about 30 health-care providers on a tour of Main Street in Walt Disney World’s Magic Kingdom. He drew their attention to details that he said improved how guests experienced the park.

He explained that most guests are from North America and naturally move to the right after entering through the turnstiles at the park’s entrance. So that’s where lockers, strollers, wheelchairs and other amenities were placed.

Later, he pointed out a lack of directional signs in the park because Disney wants visitors to ask cast members questions, adding a personal touch that improves the guest’s visit, he said.

Some changes Disney recommends sound like semantics but signify a cultural shift.

For example, Disney employees are cast members, customers are guests.

“A guest is someone who is invited,” said Jeff Williford, a Disney Institute instructor. “A customer is someone who complains.”

HEALTH-CARE PROVIDERS LEARN DISNEY TOUCH by Andrew Doughman

I was sweating under the August sun on Main Street USA in Disney World's Magic Kingdom, jotting notes while listening to a Disney consultant lead a tour of health-care professionals, when I knew I'd found a good story in this happiest of happy places.

Earlier, another health reporter and I had discussed how we might tackle health policy on a health lifestyles beat. This story was my way. The story lies at the intersection of policy and popularity, a particular section of the news landscape that doesn't see much traffic. Disney is popular, especially in Orlando, so I saw the story as a way to introduce readers to a specific policy implication of the 2010 federal health law.

The initial idea came from an email. I'd signed up for a million different feeds, and this one caught my eye by mentioning "Disney." I looked beyond the initial release, researched thoroughly and realized that the true story behind the eye-catching Disney label was the policy itself. The broader appeal of the story would not be Disney, but the idea that how the hospital staff treat patients is important. Disney was just the entry point.

In the end, I felt proud of this story because my hunch that this story might generate a broad interest proved correct. Disney was the eye-catcher, but the ideas beyond and behind the Disney program resonated with readers. Editors picked up my story on the wire, and it ran nationally throughout the Tribune network and beyond.

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