



# 'It's really all about the human touch.'

By James Furbush | August 11, 2016

**A**t urgent care clinics, as Shaun Ginter puts it, “the customer is really driving the train.” So the president and CEO of CareWell Urgent Care says his most important job is advancing a culture that puts great value on patient satisfaction, customer service and upholding high quality standards across his 15 centers in Massachusetts and Rhode Island.



athena**Insight** spoke with Ginter about the challenges he faces in maintaining a patient-centered culture as his business expands, and as retail care becomes further integrated into the healthcare landscape.

**Q** Do you have a model for the customer-focused culture you're pursuing at CareWell?

**A** The Ritz Carlton comes to mind. There is no question when you visit a Ritz Carlton that everything about that property, those employees, and the experience is focused on you. I ask myself on a regular basis: If somebody comes to a CareWell center, are we providing that same type of experience? Do our customers believe that it is truly all about them and their needs?

And if they pick any one of our locations do they really, truly feel like we deliver that same experience at every location?

**Q** The Ritz is legendary for that, and healthcare not so much. How are you building this culture of excellence into CareWell?

**A** We have chosen 29 “fundamentals” that drive our culture. We call it the CareWell Way. Every week, the entire organization focuses on one fundamental, and that fundamental is talked about every day, every shift, and at the start of every corporate meeting. If, for example, the fundamental is “Do the right thing, always,” I send out an email to every employee and talk about what “doing the right thing” really means in our business in terms of integrity, honesty, and being accountable for our actions, and then I share some examples of practicing that fundamental from the CEO seat.

At the centers, the staff talks about the fundamental of the week during their daily huddle. The small group of employees at each huddle is asked to share personal examples. We do the same thing at the corporate office,

starting any meeting, conference call or gathering of employees with a discussion of the fundamental. So we're practicing at corporate; they're practicing at the centers; and together it creates alignment of our culture throughout the entire organization.

We use these tools if we're dealing with a difficult customer situation, such as somebody who is unsatisfied with their service. We try to take every example right back to our fundamentals and our culture and really try to identify what can we do better next time.

**Q How do you measure and benchmark success, to know the impact of your culture on that all-important patient experience?**

**A** One metric we look at is repeat visit rates. I can look at the repeat visit patterns for each one of my centers, and I can do the same thing down to our providers. I can actually track our patients to the providers and determine which one of our providers has the best or worst repeat return visits.

We also collect patient satisfaction data. So if you visit us today, we give you a call back in two days to check on how you're doing. A day after that we send out an email survey and ask five questions to try to find out how satisfied you were with the visit and whether you would return or recommend our center to a friend or family. We're able to compare and contrast all of that data, which is very, very helpful for us.

**Q How do these data and metrics drive performance? And how does this information trickle down to staff?**

**A** Repeat visit metrics, patient comments, and net promoter scores can be cross-referenced with data on the growth of individual centers. We share this data from our patients with all of our providers, which I think is key. When we identify a problem, we really take the time to slow down, analyze all the data and the information that we have, and then we sit

down to talk with our providers. They can see in a patient's own words whether or not they felt that the provider met their needs, and that is very powerful.

We can also use this data as a way to talk about the health of the organization without talking dollars and cents. As soon as you start talking dollars, profit, and loss, I think you cross right out of being a great organization providing quality healthcare to an organization that is seen as for-profit, money hungry, and doesn't care about patients.

**Q Physicians give up some autonomy when they decide to work in urgent care centers. Is it a challenge to find doctors who embrace the CareWell culture?**

**A** Physician satisfaction is a challenge for all of us in the provider world, especially in the urgent care business. We do physician engagement surveys at CareWell to gauge whether they are satisfied with their job and if they believe that their needs as a clinician are being met in this line of work. We share that data with the team, and then try to use it to help us as an organization – both in our recruitment efforts and our retention efforts.

By and large, most physicians really want to take care of their patients both clinically and from a service perspective. Every once in a while there is somebody that just doesn't quite get it, that we might identify isn't a fit for our culture or isn't a fit for our company or our patients. They might think, "Wow, now that I've been here a little while, I want to have more of a say." So then they might want to get involved in administrative decisions or hiring decisions. If we can't get somebody to where they need to be, they kind of self-select out and then we'll move in another direction.

But really, only a small percentage of our physicians or other clinical team members just don't meet the company's expectations.

**Q** Your leadership style is very hands-on. How do you keep abreast of what's going on in your centers?

**A** Once or twice a week, I try to make sure that I'm out in my centers, meeting my providers, working with my clinical staff, and watching patient care. I think to be an effective CEO, I have to be engaged and truly talking with staff and patients and being part of what's going on in our clinics. So when I'm out, I'm an observer as well as an active participant. Quite often, I'll end up having to jump in and help with things in the centers if it's busy. I might be picking up trash in the parking lot or straightening the chairs or cleaning an exam room, maybe mopping the floor.

One of our fundamentals is "Check your ego at the door," and that means our focus is always on the patient, and every employee is here to serve that patient and take care of them the best way we can. That means nobody is above any job or any function, and as the CEO I think that's a key fundamental to practice myself.

**Q** As a leader, how do you build brand loyalty?

**A** In our business, the consumers vote with their feet. They're not setting up appointments or planning their visits weeks or days in advance. They wake up today, something happens to them, and they suddenly decide they need care. Three different urgent cares will have three qualified doctors, and they can all treat pink eye if you have pink eye.

The key differentiator – and everybody in the industry will tell you this – it's really all about the human touch and the experience. If consumers find a clean, welcoming center that is open when they need it, that is convenient to get to, that provides great service, that cares about them as a customer, and gives them a good quality outcome – they become very loyal and they come back. We are able to watch repeat visit rates with our patients. We can see if their family members come in. A great experience and a good quality clinical outcome drives that loyalty metric even in the urgent care space, which is really exciting.



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