

MLPCare's New Learning Program
Sets Common Service Standard

MLPCare Health Care Services
Best Learning Program Supporting
a Change Transformation Business Strategy
October 2018



Company Background

MLPCARE

Headquarters	Turkey, Istanbul
Year Founded	1993
Revenue	\$715 million (2.6 billion TL)
Employees	18,100
Global Scale (Regions that you operate in or provide services to)	MLPCare has 31 hospitals in 18 cities across Turkey and 15 representative offices over Asia and Europe. The company is the largest hospital group in Turkey.
Customers/Output, etc. (Key customers and services offered)	All Social Security institution insurance holders — private insurance holders — and all the other patients who do not have any insurance. All kind of health services are provided.
Industry	Health care
Stock Symbol	MPARK
Website	www.mlpcare.com



Budget and Timeframe

Overall budget	\$40,500 (150,000 TL) for design and delivery.
Number of (HR, Learning, Talent) employees involved with the implementation?	Two in headquarters academy team and over 65 employees in the field.
Number of Operations or Subject Matter Expert employees involved with the implementation?	Two SMEs on headquarters' academy team, two function managers (for patient service) at headquarters and collaboration with 60 patient service managers in the field.
Number of contractors involved with implementation	1 (Fenomen Consulting and Training Company)
Timeframe to implement	Preparation was over a seven-month period; implementation took three months.
Start date of the program	February 2018

Business Conditions and Business Needs

The Turkish healthcare sector has been expanding and is expected to continue that expansion as changing population ratios, higher incidences of chronic disease, wider health insurance coverage and increasing incomes create upsurges in healthcare spending.

The healthcare sector in Turkey is set to boom as healthcare spending per capita continues to increase. As demand grew for more and better-equipped hospitals, the Turkish healthcare sector saw increased investments in the hospital sector.

The expansion was mostly led by private healthcare institutions as the number of private hospital beds grew at a compound annual growth rate of 23.6%, a figure much higher than the growth rate of hospitals under the auspices of India's Ministry of Health. Similarly, the number of patient and private hospital visits also grew at a remarkable rate of 63.5%.

With the increasing demands of consumers and high growth rates, the competition level also has increased vastly during the last 10 years. To cope with this competition, hospital chains are trying to decrease their budgets while maximizing income revenue. Yet "care quality" and "service quality" are demanded equally. MLPCare, the healthcare leader in Turkey, knew that "patient/guest satisfaction" was the key word to cope with the competition and for sustainability.



To have a common language of "service quality," MLPCare first had to define what it is and what it is not. Although in previous years its CEO and top management set "patient/guest satisfaction" as a mandatory rule, as a fast-growing hospital group all its hospitals had developed their own "service quality" knowledge and their own ways to achieve it.

When patients enter in one of MLPCare's hospitals, "patient service representatives" serve as the first point of contact. In most of the processes, patients have to get in touch with them. Th patient service representatives greet and direct patients to examination rooms, verify patient's insurance coverage, collect co-payments, process credit card payments, balance daily cash deposits, maintain up-to-date patient data and verify patient information at every visit.

Depending on the experience level, patient service representatives also help fill out healthcare and insurance forms. They spend much of their time on the phone, contacting resources and verifying information. When a patient complains, they inform their facilities and try to resolve problems. They also collect data on patient encounters and consumer satisfaction — that was the reason why MLPCare considered these employees as its first priority target group.

Overview

- "Patient/Guest Satisfaction Focused Service" was set as the No. 1 priority in MLPCare's business strategy.
- Patient service in healthcare comes down to providing service in an environment where the goals of the patient can be complex and where appropriate service to the patient may take the provider from the typical customer service approach of striving to provide immediate customer gratification. It's truly a unique service business.
- As stated earlier, patient service representatives serve as the first point of contact
 for the people who are often at the most vulnerable times in their lives, and the
 representatives are responsible for communicating with them. In that sense, the
 environment is quite tense and different.

However, MLPCare believes that it can still learn and improve the way it interacts with its patients.



The company developed its learning program by including:

- Technical training materials.
- A reference book (service standards, correct and incorrect models of behavior and communication).
- Nine videos (handling all the parts of the "service process" and emphasizing the correct and incorrect models of behavior and communication).
- Determination, development and participation of in-house trainers.
- Classroom trainings.
- Seminars.
- Reminder email series (giving the short messages by a visual material).
- Giving the soft copy of the training materials via MLPCare's LMS.
- Pre-test and post-tests.
- Surveys (getting the patient service representatives and hospitals' top managers' opinions about the benefits of the project).
- The project, sponsored by MLPCare's CEO, was presented first to the general managers and assistant general managers of the hospitals by the CEO and CHRO via a meeting. It was launched for the whole group (31 hospitals) at the same time.
- To measure the progress in knowledge about "Patient/Guest Satisfaction Focused Service," MLPCare made pre-tests via LMS, starting from the management level of patient service representatives.
- It is a fact that service quality is directly related to both technical knowledge and behavioral standards. The more employees know the procedures, rules, system requirements, etc., the more they can give fast service and the right service. First, MLPCare prepared the technical knowledge training materials together with related function managers at headquarters and shared them via LMS.
- The pre-test average score was recorded at 64.60. After assigning the related eLearning and training materials, this score rose to 84.60. Supporting staff with the in-house classroom trainings (given by in-house trainers), the technical knowledge score ended up with an average of 98.07.



- Afterward, MLPCare focused on the behavioral standards. By using all the
 methods stated in the bullets above and after giving the trainings and tests for
 "patient/guest satisfaction" to patient services representatives, the company
 ended up with a score of 96.5.
- Meanwhile, the average "satisfaction" score of all its hospitals through surveys answered by patients/guests moved upward from 74.8 to 77.1 (from January 2018 before the launch of the project until April 2018).

Design of the Program

Together with Fenomen, one of the leading consultancy and training companies specialized on "customer satisfaction and right communication," MLPCare leaders made several visits to its hospitals. They had the chance to observe the current service level as it was. Also, they had meetings with the managers of patient service representatives both in hospitals and at headquarters. These meetings provided the insights regarding the training needs, the challenges involved and frequently made mistakes.

Once all the information needed was gathered, MLPCare developed the "MLPCare Service Standards and Excellence Booklet." The main topics in the booklet are:

- Professional image.
- Providing excellent quality service (the key points).
- Welcoming the guest/patient.
- Meeting the needs of the guest/patient.
- Importance of operating with complete documentation.
- How to effectively communicate over the phone.
- Managing urgent, unexpected and unpleasant situations.
- Giving a proper farewell to the guest/patient.
- Treating patients like your guests in your home.

Besides giving the necessary knowledge, these topics had both the "correct" and "incorrect" examples of behaviors.

The visual images and the content of the booklet were designed in a way so that readers can refer back easily; the booklet is user-friendly, informal, fun and interesting to read.



MLPCare also formed an "oath of service" within the booklet to summarize what a patient service representative should and should not do.

The next step was visualizing the most important parts of the book via videos. As a result, a scenario was written together with the consultancy company. After having meetings with the managers of patient service representatives both from hospitals and headquarters, it was fine-tuned. The scenario included handling nine different important parts (written as bullets above) of the service process.

The video was shot in one of MLPCare's hospitals (using a real hospital atmosphere but in a suitable place that was not disturbing to patients/guests) with professional actors/actresses. To create a realistic atmosphere, all details were reality-based. The patient service representatives and their managers wore MLPCare uniforms, used its terminology and forms, etc.

The third step was developing the training materials for the company's in-house trainers. Considering the dynamics of its hospitals, MLPCare prepared a modular presentation which included the knowledge presented in both the book and the videos. Since hospitals are places that provide 24/7 service, taking employees from the field is not easy. Since MLPCare did not want any problems with the service quality and since it did not have much time or days for delivering the training continuously, the company developed short presentations that can be delivered piece by piece according to the time learners have. For example, patient service representatives could start a part in the morning before work and start another part after work.

In selecting in-house trainers, MLPCare included each hospital's patient service managers. Without their input, this project would be lacking in one aspect. They became one of the trainers of their hospitals. Also, another manager from their team was chosen according to his/her competency in training. The in-house trainers had a "trainers' training" for three days that consisted of two parts: classical train-the-trainers (TTT) and how they should give the "Patient/Guest Satisfaction Focused Service" training to their team.

Since a professional touch would be good, seminars from Fenomen's professional trainer for big audiences were planned. These seminars included all features of the project: knowledge from book, parts from the videos and live performances with professional actor/actresses dramatizing the correct and incorrect examples of behaviors.



A program's success depends on its consistency, so MLPCare used another tool to keep minds fresh on the subject. The company planned to send reminders to its audience with the key message of "perfect service."

MLPCare planned a photo shoot where it used its employees, defined a motto ("Patient/ Guest Satisfaction Focused Service is What We Serve") and called these mailings a "keep in mind" series. Using these constant factors, the company shared a reminder each week with a different statement (such as "smiling is the shortest bridge between people").

It was obvious that running all the classroom trainings with an external consultancy or training company was not a sustainable solution; affording trainings by external trainers was not feasible. As a result, MLPCare designed all the steps of this project.

MLPCare also planned to share some activities within its hospitals to foster interest on "Patient/Guest Satisfaction Focused Service." Small quizzes, contests or games (such as "The Best Service-Giving Patient Service Representative" or "The Best Example of Perfect Service," etc.) were organized. The method could vary according to the preferences of the hospital, so MLPCare decided not to determine a standard way but watch the effects of the project for a while and let hospitals organize their own activities instead.

Delivery of the Program

The project, sponsored by MLPCare's CEO, was presented first to the hospitals' general managers and assistant general managers by the CEO and CHRO via a meeting. It was launched for the whole group (31 hospitals) at the same time. With the collaboration of the patient service function head at headquarters, an announcement about the project was made to all the patient service representatives.

The next step was sending the books. First, MLPCare informed its hospitals' Human Resources teams that the books would be sent and asked them to distribute the books to each individual employee. The books were sent to all patient service representatives and the managers of all the other functions (such as nursery, etc.) who are in contact with the patients/guests. Every manager was made aware that the project was being run. As a side benefit, they should have given a short training to their employees using the booklets and stressing "perfect service."

MLPCare ran the-in house trainers selection process as explained before, planned the three-day "train-the-trainers" program and shared the necessary training materials.



In conjunction with the patient service function managers in headquarters, the trainings by the in-house trainers were scheduled. Within two weeks, all the in-house trainings were completed. The training was controlled by using signature lists of the participants. After each training, these lists were sent to the headquarters' academy and patient service function.

The first big seminar was held for all MLPCare patient service representatives in Istanbul in two sessions. Since MLPCare has 11 Hospitals in Istanbul (including hospitals near cities like Kocaeli and Gebze), the company presented the seminar with the participation of more than 800 people. Since the seminar was interactive, it had a positive effect on motivation, as well as the knowledge level. The second seminar address was in Ankara (the capital city where MLPCare has two hospitals) and the patient service representatives of nearby cities were invited. That resulted in another group of 300.

As an advantage (and a must) in the digital age, MLPCare shared the soft copy of the book and the training videos via its LMS through an e-book or video. Every patient service representative was able to reach out and read it whenever and wherever they needed. The only thing needed was a mobile phone, tablet or laptop with internet.

MLPCare also sent a badge for patient service representatives to wear on their uniforms. With a smiley figure in the middle, an "I am Here for You" message was stressed. This badge is a declaration of the company's attitude toward its guests.

The effect of reminders in these kinds of project is obvious. To freshen the minds and give the key messages, MLPCare has sent reminder notices to its patient service representatives every week.

Change Management Efforts

In previous years, some attempts on the same topic ("Giving Patient/Guest Focused Service") was made by other MLPCare management teams — but since there was no central ownership or sponsor, these efforts became nothing more than temporary attempts to create a service culture. Knowing this, MLPCare begun with the sponsorship of its CEO — and that made the big difference.

The second obstacle was in the culture of digital learning in MLPCare. The company's eLearning had been around for only one year. In this one year, MLPCare shared many different eLearnings, videos and e-books with various employee groups and made a habit



of using the LMS system in a digital format, but a big effort still was needed to make them complete. The company had to put in a big effort but with the cooperation of headquarters' patient service function head, serious progress was made. But the most striking change was obtained with the announcement of testing. All MLPCare patient service representatives would be responsible for the knowledge in the e-books and videos related with this project. The procedures of service delivery also were included in the test. The procedures, the e-book and videos were what they should read or complete if they wanted to have a good score. In the end, MLPCare had a 77% average completion rate with the related eLearnings.

Measurable Benefits

Two kind of tests are done via MLPCare's LMS: Technical knowledge and patient/guest satisfaction.

To measure the progress on knowledge about "Patient/Guest Satisfaction Focused Service," the company made tests via LMS, starting from the management level of patient service representatives.

It is a fact that service quality is directly related to both the technical knowledge and the behavioral standards. The more people know the procedures, rules, system requirements, etc., the more they can give fast — and the right — service. MLPCare prepared the technical knowledge training materials together with the related function managers at headquarters and shared them via LMS.

The average pre-test score was 64.60. After assigning the related eLearning and training materials, this score rose to 84.60. Supporting the staff with in-house classroom trainings (given by the in-house trainers), the average technical knowledge score rose to 98.07.

Afterward, MLPCare focused on behavioral standards. By using all the methods stated in the bullets above and after offering the trainings and testing patient service representatives on "patient/guest satisfaction," MLPCare started with a 78.8 average and ended up with the score rising to 96.5.

Meanwhile, the average "satisfaction" score of all MLPCare hospitals, which was obtained by the surveys answered by the patients/guests, moved upward from 74.8 to 77.1 (from January 2018 before the launch of the project, until April 2018).

Also, the NPS (net promoter score) of all hospitals saw an increase from 29.8 to 36.5.



MLPCare made a survey available via its LMS to top management in its hospitals, asking: "Has this project made an improvement in their and their employees' knowledge level and did this turn into a change in their behaviors?" The answer was 86.7% "yes."

Another survey via LMS was made to all patient service employees and the answer to the question "Has this project made an improvement in your knowledge level and did this turn into a change in your behavior?" was 79.8% yes.

- The technical knowledge score went from 64.60 to 98.7 (a 52% increase).
- The score of the "patient/guest satisfaction" test went from 78.8 to 96.5 (a 22% increase).
- The average satisfaction score (patient/guest survey) went from 74.8 to 77.1 (a 2.4% increase in three months).
- The increase in the net promoter score went from 29.8 to 36.5 (a 22% increase).
- The result of hospitals' top management survey ("Has this project made an improvement in their and their employees' knowledge level and did this turn into a change in their behaviors?") was 86.7% "yes."
- The survey result of all patient service representatives ("Has this project made an improvement in your knowledge level and did this turn into a change in your behavior?") was 79.8% "yes."

Overall

- The technical knowledge and behavioral standards are parts of "patient/guest satisfaction," which is one of the most important company strategies. They both should be supported.
- The projects should be sponsored by the CEO and top management.
- The materials should be designed with sustainability in mind.
- The technical knowledge score went from 64.60 to 98.7 (a 52% percent increase).
- The score of the "patient/guest satisfaction" test went from 78.8 to 96.5 (a 22% increase).
- The average satisfaction score (patient/guest survey result) went from 74.8 to 77.1 (a 2.4% increase in three months).



- The increase in the net promoter score went from 29.8 to 36.5 (a 22% percent increase).
- The survey result of hospitals' top management and all patient service representatives ("Did this project made an improvement in their and their employees' knowledge level and did this turn into a change in their behaviors?") was 86.7% "yes."
- The survey result of all patient service representatives ("Has this project made an improvement in your knowledge level and did this turn into a change in your behavior?") was 79.8% "yes."

Lessons Learned

- Right planning and understanding the needs of the target group is the first step behind every successful change management process.
- Managing change management is easier when its counterparts are properly informed and involved.
- The sponsorship of the CEO and function head is crucial.
- Developing materials and methods considering "the real life and needs of the target group" and "sustainability" is very important.

What Is Next/Future Outlook

To keep this spirit alive in hospitals, a digital quiz game will be shared with the patient service representatives. By using gamification, all necessary key points will be reinforced.

MLPCare already has received suggestions from some of its hospitals about how to further foster this project. For example, one hospital will choose and publish the stories on their employees using their best practices for "perfect service." Another hospital suggested making a lottery in which only the best servers (chosen by other employees of that hospital) will be involved and can win different little prizes. By following the results of these pilots, MLPCare will spread out the best methods to the group.

In addition, the trainings will be followed up periodically through additional in-house training.

Another critical staff is MLPCare's nursery staff. The second phase will be for them and a brand-new design will be made for their needs and situations.



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