Welcome to the Stanford Contact Center Symposium!

Please help yourself to coffee and breakfast
Grab a seat and introduce yourself to your table-mates
We’ll start the meeting closer to 9:30
Stanford Contact Center Symposium
Huang/Mackenzie Room
September 21 2016
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Logistics
- Room Set-up
- Restrooms
- Breaks

We're here to build a community of practice!
Welcome
Maria Maravilla
Client Executive and
Director, Service, Strategy and Delivery for
UIT Communication Services
A community of practice is a group of people who share a craft and/or a profession.

A CoP can evolve naturally because of the members’ common interest in a particular domain or area, or it can be created deliberately with the goal of gaining knowledge related to a specific field.
more than two people!
The increasingly complex needs and requirements for contact center environments require a **unified strategy** to leverage all three entities – Stanford Health Care (SHC), Stanford Children’s Health (SCH), and Stanford University.
BUILDING A COMMUNITY OF PRACTICE

1. Using technology to support networking

2. Using technology to support collaboration

Contact Center Technology
“Collaboration is a work practice, it’s a behavior, it’s a skill, and it needs to be combined with technology.”
GUEST SPEAKER
Dr. Renate Fruchter
Director of Project Based Learning Laboratory (PBL Lab)
Senior Research Engineer
Department of Civil Engineering
Center for Integrated Facility Engineering (CIFE)
Stanford University
### TABLE REFLECTIONS

What are some your gut reactions based on what you heard? What stood out for you from what you heard? What were your A-HA! Moments?
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If you have difficulty connecting to the “Stanford Visitor” network…

1. Connect to “Stanford” network
2. Open your browser and go to any site
3. Choose “Continue to Registration Choices”
4. Choose “Sponsored Wireless Guest”
5. username: contactcenter  
password: symposium
PANEL DISCUSSION
ALEX CHIROV, Stanford University IT
MAGGIE WATSON, Stanford Children’s Health
STEVEN ALEXANDER, Stanford Health Care
INTRODUCING OUR PANEL

ALEX CHIROV
MANAGER OF VOICE APPLICATION SERVICES (VAST)
STANFORD UNIVERSITY IT

MAGGIE WATSON
BUSINESS SYSTEMS MANAGER PATIENT ACCESS SERVICE CENTER (PASC), STANFORD CHILDREN’S HEALTH (SCH)

STEVEN ALEXANDER
EXECUTIVE DIRECTOR, ENTERPRISE CONTACT CENTER (ECC), STANFORD HEALTH CARE (SHC)
CONTACT CENTER TECHNOLOGY AT STANFORD

ALEX CHIROV
MANAGER OF VOICE APPLICATION SERVICES (VAST)
September 2016
CURRENT STATE

1.3M+ total calls per month
500K+ Contact Center calls per month

100+ SHC Call Centers
36+ UHA Call Centers
40+ SCH Call Centers
10+ UIT Call Centers

2,450 agents

18TB of voice recordings

FOUNDATIONAL TECHNOLOGIES
Avaya Call Center Elite, Call Management System (CMS) for Reporting, Experience Portal for Applications, Voxida Call Recording
STANFORD CONTACT CENTERS CURRENT ENVIRONMENT
STANFORD AVAYA INFRASTRUCTURE
CONTACT CENTERS EVOLUTION

Voice Only
Limited Feature Usage
Inconsistent After Hours
Some Centers Recorded
Fragmented Reporting
Limited Contact Center Applications
Limited Self-Service

Engagement and Experience
IVR / Speech Recognition
Omni-channel
Agent Productivity
Holistic Analytics and Reporting
Work Force Optimization
Cross Platform Capture and Transcription
Increased Self-Service Capabilities
Work Anywhere / Mobility
Epic Integration
CONTACT CENTERS TECHNICAL APPROACH EVOLUTION

**CONTINUOUS REVIEW**
Continuous review of Contact Center technical architecture
- Approach to architecture and design is evolving
- Stanford business requirements are **not** vendor-driven

**CAPACITY PLANNING**
Continuously looking at capacity to stay ahead, including exploring cloud options

**FUTURE DIRECTION**
Actively looking at the Contact Center market and better solutions/offerings
PATIENT ACCESS SERVICE CENTER (PASC)

MAGGIE WATSON
BUSINESS SYSTEMS MANAGER
September 2016
PRIMARY PASC CALL CENTER | SCHEDULING

22+ PASC performs scheduling functions for over 22 outpatient specialties

27+ agents

Offsite location for back-up/overflow

96% QA Scores

95% % Calls Answered

5% % Calls Abandoned

78% Service Level

15,437 Calls Offered
14 agents

Team handles the majority of incoming calls from referring providers, patients, and MD to MD consults

AUGUST KPIs

- % Calls Answered: 98%
- % Calls Abandoned: 2%
- Service Level: 83%

3,886 Calls Offered
2 agents

Primarily internal calls from colleagues with authorization related questions
ENTERPRISE CONTACT CENTER (ECC) ORGANIZATIONAL OVERVIEW

STEVEN T. ALEXANDER
EXECUTIVE DIRECTOR, ECC
September 2016
Support the Stanford Health Care Vision:
Healing humanity through science and compassion, one patient at a time

Patient Experience:
Provide compassionate, hassle-free, coordinated care by integrating our service philosophy of “know me, show me, coordinate for me, apply the leading edge” into all aspects of care
THE NEED FOR CHANGE

Stanford Health Care call centers lack centralization and governance, driving the need for enterprise-wide coordination to optimize for efficiency.
ENTERPRISE CONTACT CENTER STRUCTURE AND MANAGEMENT

The Contact Center is essentially a BPO with metrics and performance targets that must satisfy various stakeholders across SHC.

<table>
<thead>
<tr>
<th>Metric</th>
<th>Goal</th>
<th>Access Operations Contact Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Areas Supported</td>
<td>• 66+ Clinics</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• 8 Hospital Departments Radiology Scheduling</td>
<td></td>
</tr>
<tr>
<td>Staffing</td>
<td>• 250+ Call Coordinators</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• 11 Assistant Managers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• 4 Managers</td>
<td></td>
</tr>
<tr>
<td>Average Monthly Call Volume</td>
<td>• 180,000 Inbound Calls/mo</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• 51,000 Outbound Calls/mo</td>
<td></td>
</tr>
<tr>
<td>Average % Answered</td>
<td>&gt;95%</td>
<td>• 96%</td>
</tr>
<tr>
<td>% Voicemail</td>
<td>&lt;1%</td>
<td>• &lt; 1%</td>
</tr>
<tr>
<td>Average Speed to Answer</td>
<td></td>
<td>• 41 seconds</td>
</tr>
<tr>
<td>1st Contact Scheduling Call Resolution</td>
<td></td>
<td>• 82%</td>
</tr>
<tr>
<td>Call Recordings</td>
<td></td>
<td>• 100% of calls recorded</td>
</tr>
<tr>
<td>% of Staff Audited and Coached Monthly</td>
<td></td>
<td>• 100%</td>
</tr>
<tr>
<td>Hours of Operation</td>
<td>M – F S - S</td>
<td>• 7:00 AM – 7:00 PM</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• 8:30 AM – 5:00 PM (Primary Care and EBC Only)</td>
</tr>
</tbody>
</table>
ECC ESTABLISHMENT, CURRENT SCOPE, FUTURE CHALLENGES

The Enterprise Contact Center was formed in early 2015 by the SHC Executive team.

Encompasses 280+ FTEs organized into 7 sub-groups:
- Guest Services Contact Center (GSCC)
- Stanford Health Care Referral Center (SHCRC)
- Patient Access to Healthcare (PATH)
- Radiology Scheduling Center (RSC)
- Provider Relations Services (PRS)
- Stanford Patient Access & Response Center (SPARC)
- Enterprise Contact Center Shared Services Group (SSG)

Challenge: ECC recently co-located all teams to Newark.

Our current orientation toward patient access means that ECC runs the risk of growing in line with the broader demand for hospital and clinical services...at present estimated at 18% YoY.

Handled 3M Inbound and Outbound Calls in FY16.
### Impacts of Centralization - Access, Service, and Growth

<table>
<thead>
<tr>
<th>Key Performance Metrics and Results</th>
<th>Baseline: 2011</th>
<th>2016</th>
</tr>
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<tbody>
<tr>
<td># Centralized In-bound Calls per month</td>
<td>55,000</td>
<td>180,000</td>
</tr>
<tr>
<td>% Patients scheduled on first call (SPARC)</td>
<td>NA</td>
<td>83%</td>
</tr>
<tr>
<td>% New Patient calls to voicemail (goal &lt; 5%)</td>
<td>47%</td>
<td>1%</td>
</tr>
<tr>
<td>% Return Patient calls to voicemail (goal &lt; 5%)</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>% Patient calls abandoned (goal &lt; 5%)</td>
<td>5%</td>
<td>4%</td>
</tr>
<tr>
<td>Average # referrals received per day</td>
<td>350</td>
<td>925</td>
</tr>
<tr>
<td>% New patients scheduled in 1 calendar day</td>
<td>10%</td>
<td>48%</td>
</tr>
<tr>
<td>Visit Volume Growth</td>
<td>Double digit year over year</td>
<td></td>
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## Foundational Wins

### Relocated Organization to Newark Site with NO Interruption in Service over Five Moves

- Established Contact Center Integration Playbook, Project Management Team, and Training Team
- Established Knowledge Management Governance and Review Process
- Achieved 100% Proficiency & C-I-Care Training
- Implemented First Contact Resolution Framework
- Formalized and Launched Quality Mgmt Program
- Aligned Contact Center Scorecards & Reporting
- Launched Phase 1 Workforce Management Process and Funded Enterprise Workforce Optimization
- Funded Enterprise Quality Assurance Platform
- Launched Customer & Provider Satisfaction Surveys
- Launched Stanford Health Care Contact Center Council

### Delivered Contact Center Infrastructure and Shared Service Capabilities

- **Relocation to Newark Site**
- **Post-Contact and Performance Dashboards**
- **Coming Late 2016**
  - New Workforce Optimization*
  - New Quality Assurance Platform*
QUESTIONS FOR THE PANEL?

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MAGGIE WATSON
650.736.9138
MaWatson@stanfordchildrens.org

STEVEN T. ALEXANDER
510.974.2375
stalexander@stanfordhealthcare.org
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## STANFORD CONTACT CENTER SYMPOSIUM AGENDA

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1. Go to the table with the topic you want to discuss
2. Brainstorm individually using the provided worksheet
3. Discuss around the table, then engage with the panel
TABLE DISCUSSIONS – ASK THE PANEL

ALEX CHIROV
MANAGER OF VOICE APPLICATION SERVICES (VAST), STANFORD UNIVERSITY IT

MAGGIE WATSON
BUSINESS SYSTEMS MANAGER PATIENT ACCESS SERVICE CENTER (PASC), STANFORD CHILDREN’S HEALTH (SCH)

STEVEN ALEXANDER
EXECUTIVE DIRECTOR, ENTERPRISE CONTACT CENTER (ECC), STANFORD HEALTH CARE (SHC)
COLLABORATION AND ALIGNMENT

BETTER TOGETHER
Combined expertise
Interdisciplinary collaboration
Track record of innovation

ALIGNMENT AND JOINT EFFORT
Objectives, expectations, risks
Responsibility, workload, outcomes

CONTINUOUS ENGAGEMENT
Thank you!