

A photograph of the Stanford University campus, featuring a large, multi-story building with a red-tiled roof and arched windows in the background. In the foreground, there is a large, vibrant field of red and white flowers. A paved path leads through the field towards the building. The sky is clear and blue.

# 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

# STANFORD CONTACT CENTER SYMPOSIUM AGENDA

8:30 – 9:30	NETWORKING / REGISTRATION
9:30 – 9:40	<b>Welcome</b>
9:40 – 9:50	Welcome Keynote
9:50 – 10:00	Introduction of UIT Support Teams
10:00 – 10:30	Guest Speaker
10:30 – 10:45	Table Reflections
10:45 – 11:00	BREAK
11:00 – 12:00	Panel Discussion and Q&A
12:00 – 12:45	LUNCH
12:45 – 2:00	Roundtable Discussion
2:00 – 2:30	Wrap-up
2:30	ADJOURN

## 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

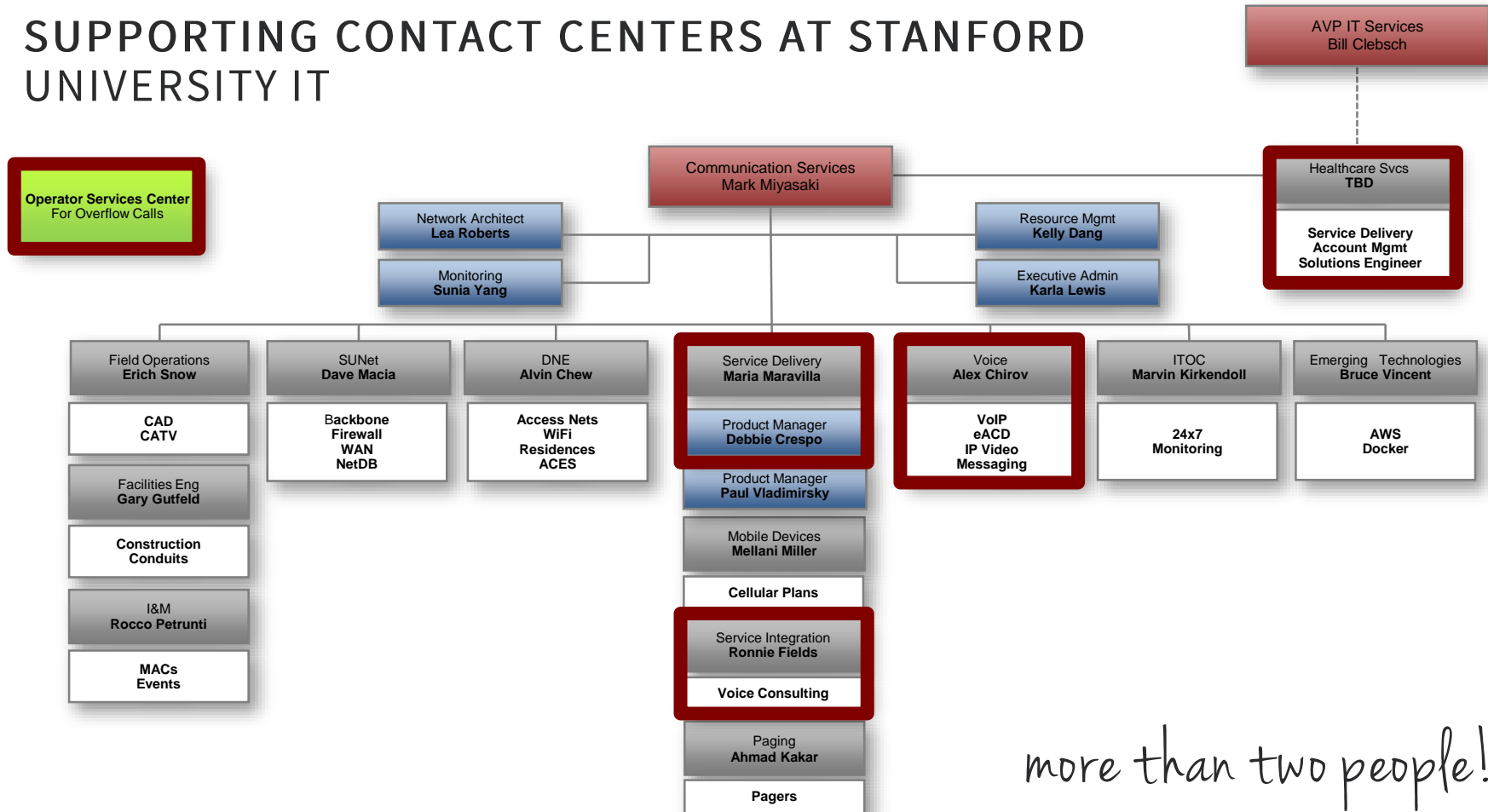
## COMMUNITY OF PRACTICE (CoP)



A community of practice is a group of people who share a craft and/or a profession

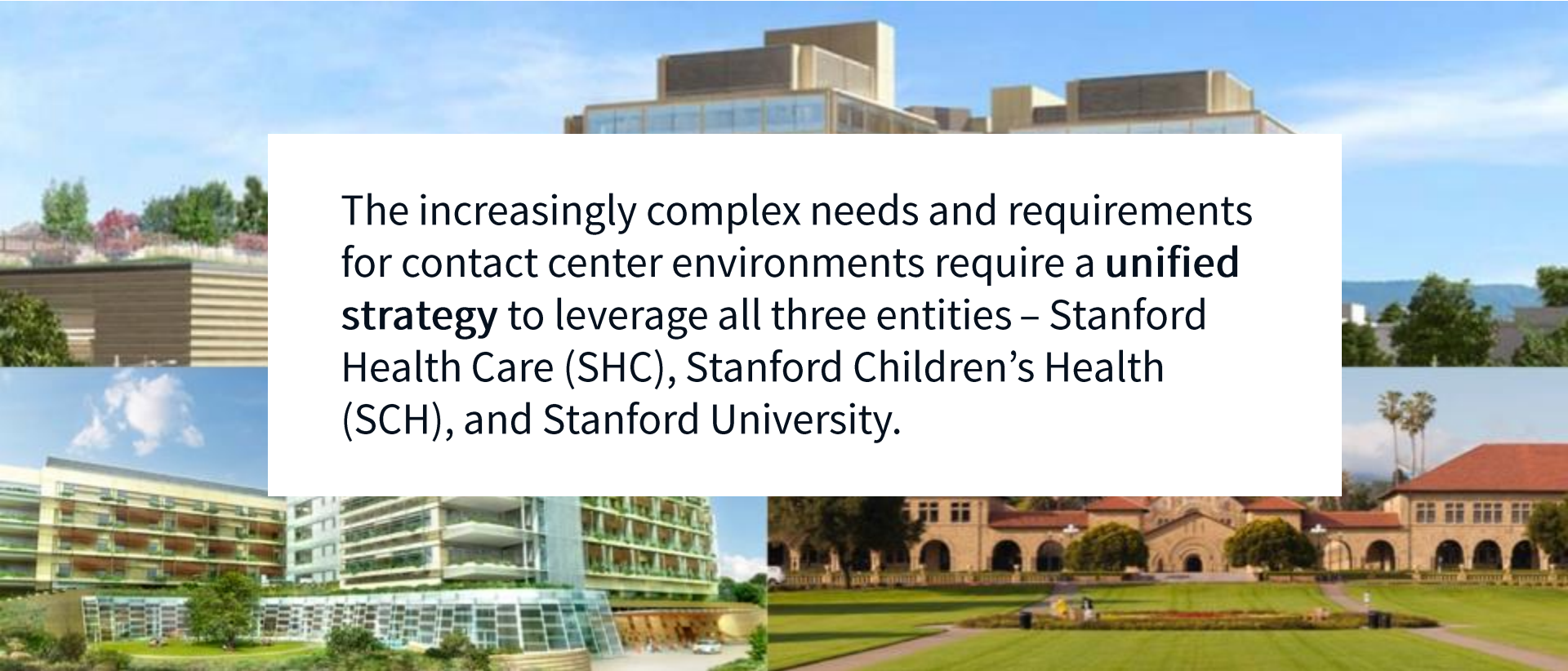
A CoP can evolve naturally because of the members' common interest in a particular domain or area, or it can be created deliberately with the goal of gaining knowledge related to a specific field.

# SUPPORTING CONTACT CENTERS AT STANFORD UNIVERSITY IT



more than two people!

# COLLABORATION AND ALIGNMENT



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



## INTRODUCING OUR GUEST SPEAKER DR. RENATE FRUCHTER

“Collaboration is a work practice, it’s a behavior, it’s a skill, and it needs to be combined with technology.”



A red-tinted photograph of the Stanford University campus, showing a large building with multiple gables and arches, a central courtyard with a fountain, and palm trees in the background. People are walking on the paths.

## 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?



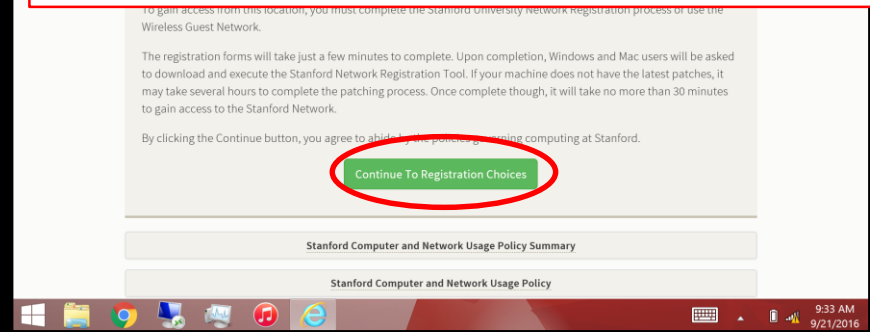
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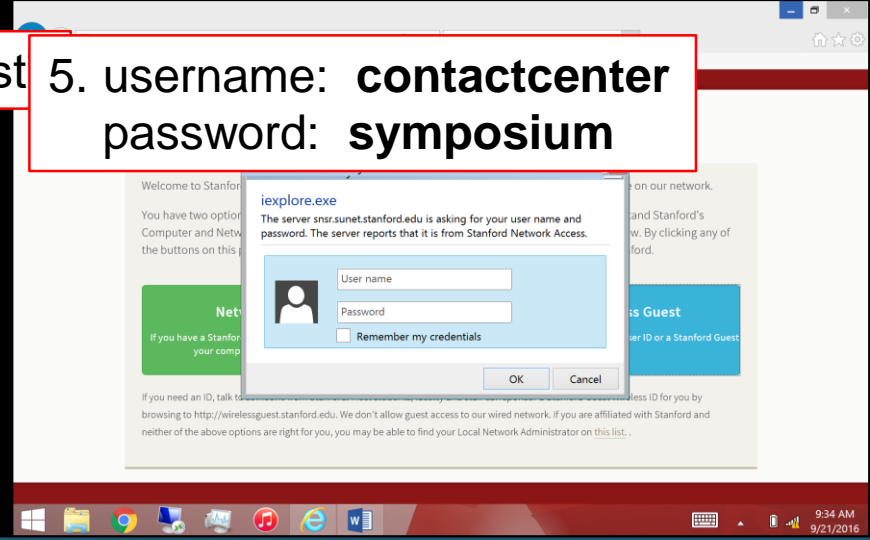
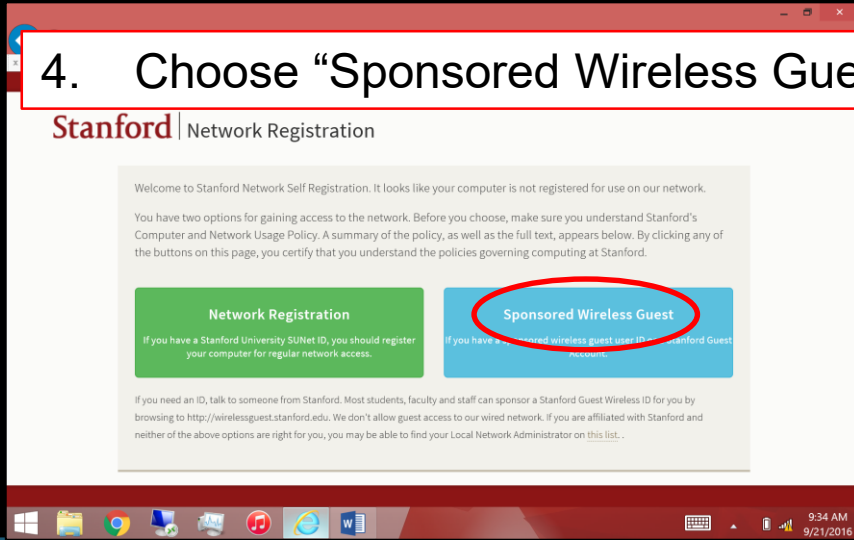
→ Where we are in  
the agenda

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**



A wide-angle photograph of the Stanford University campus, featuring the iconic redwood trees and the large, historic buildings. The image is overlaid with a semi-transparent red filter. In the foreground, there is a large, manicured lawn with a central path leading towards the buildings. Several people are walking on the paths. The background shows the main campus buildings, including the redwood trees and the large, historic structures.

## 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

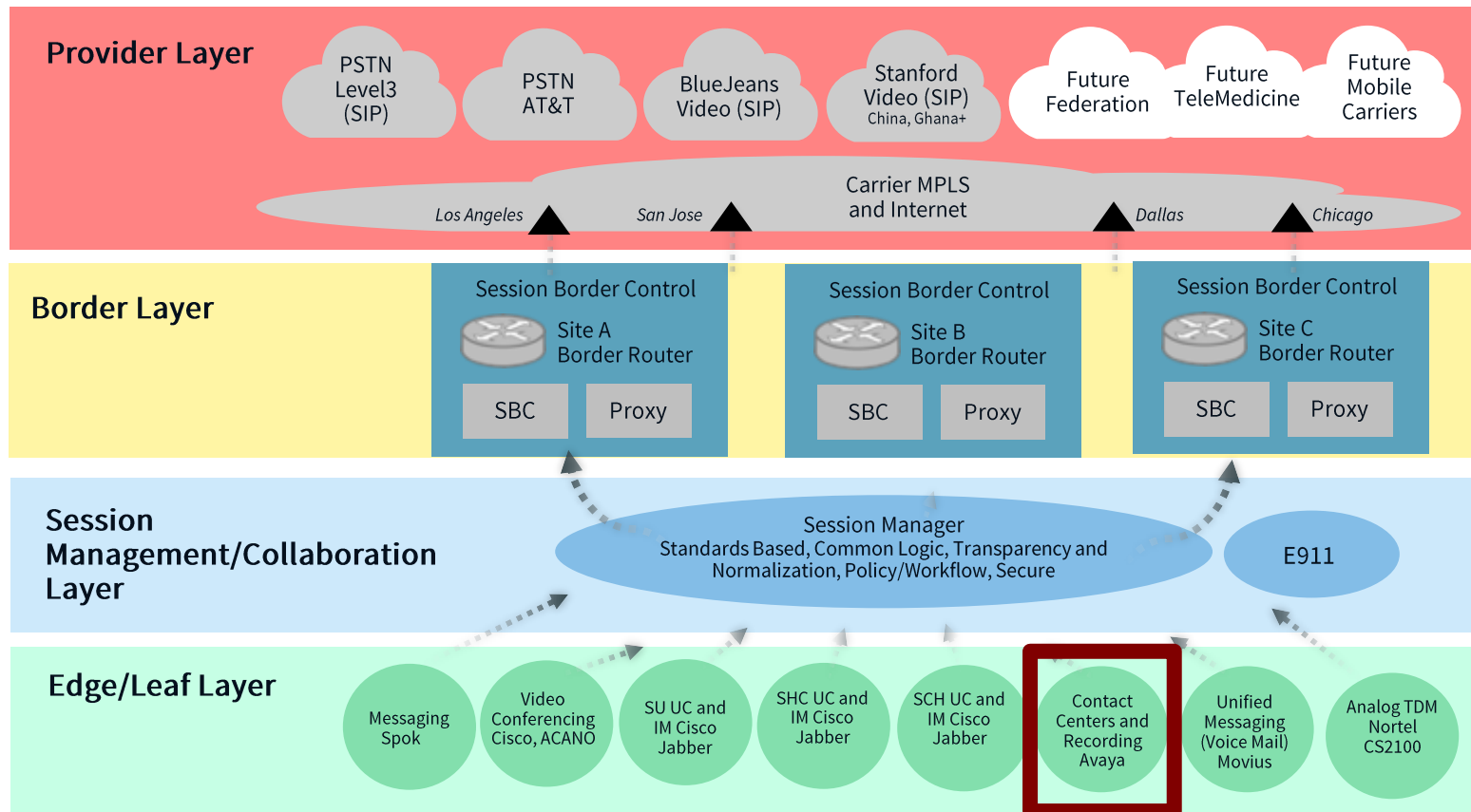
## FOUNDATIONAL TECHNOLOGIES

Avaya Call Center Elite, Call Management System (CMS) for Reporting, Experience Portal for Applications, Voxida Call Recording



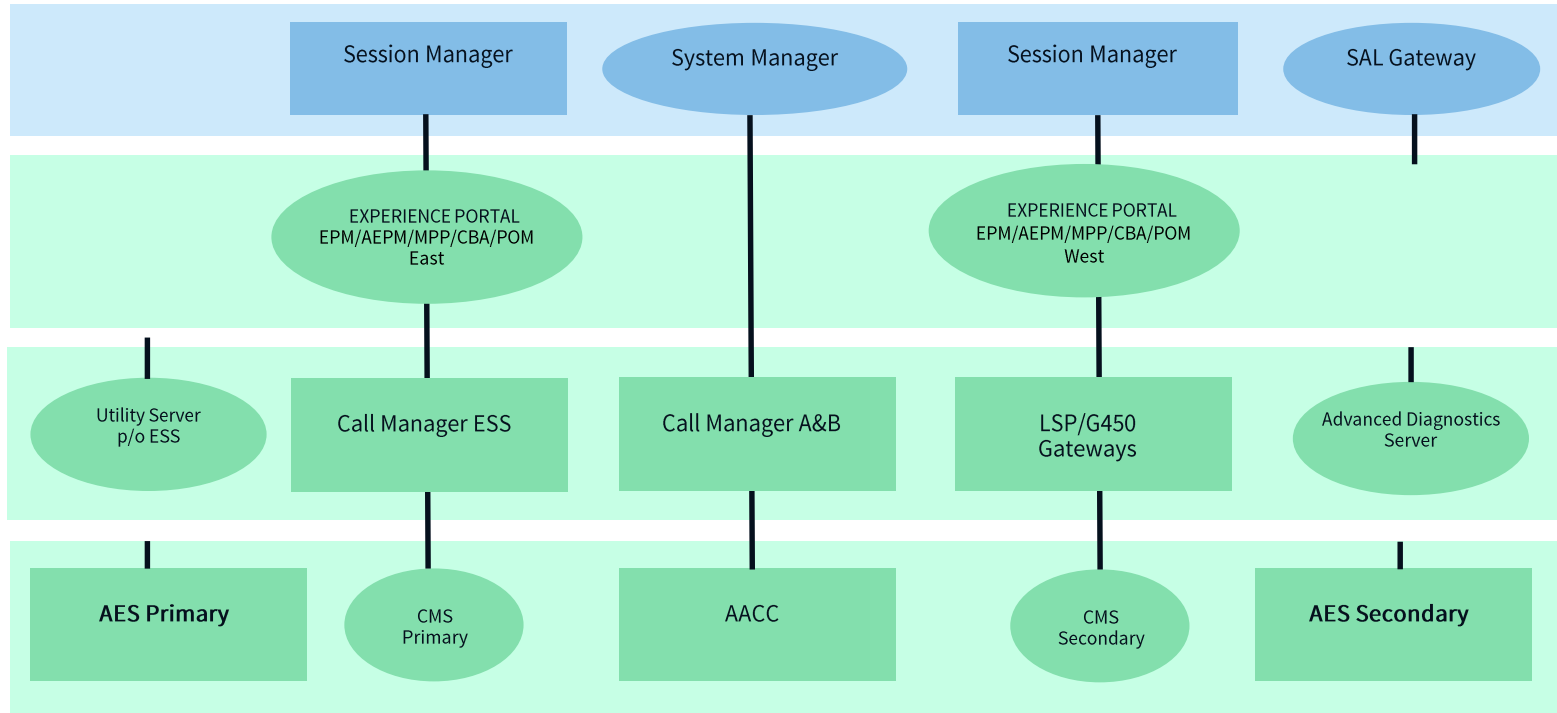


# STANFORD UNIFIED COMMUNICATIONS OVERVIEW



# STANFORD CONTACT CENTERS CURRENT ENVIRONMENT

## STANFORD AVAYA INFRASTRUCTURE



# CONTACT CENTERS **TODAY**

Voice Only

Limited Feature Usage

Inconsistent After Hours

Some Centers Recorded

Fragmented Reporting

Limited Contact Center Applications

Limited Self-Service



Callback Assist

CTI (  )  
Integration



Appointment Reminders @ SCH

Multimedia Contact Center

Messaging Integration



# CONTACT CENTERS **EVOLUTION**

Voice Only

Limited Feature Usage

Inconsistent After Hours

Some Centers Recorded

Fragmented Reporting

Limited Contact Center Applications

Limited Self-Service

*today*

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

*future*

# 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



Stanford  
Children's Health

# 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

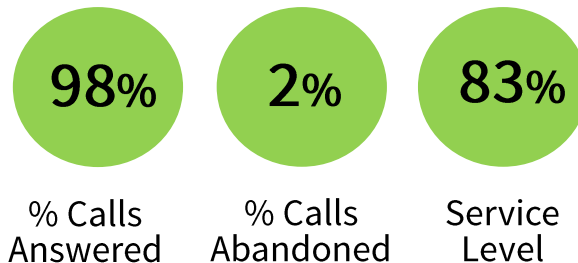
15,437 Calls Offered



**14** agents

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

## AUGUST KPIs

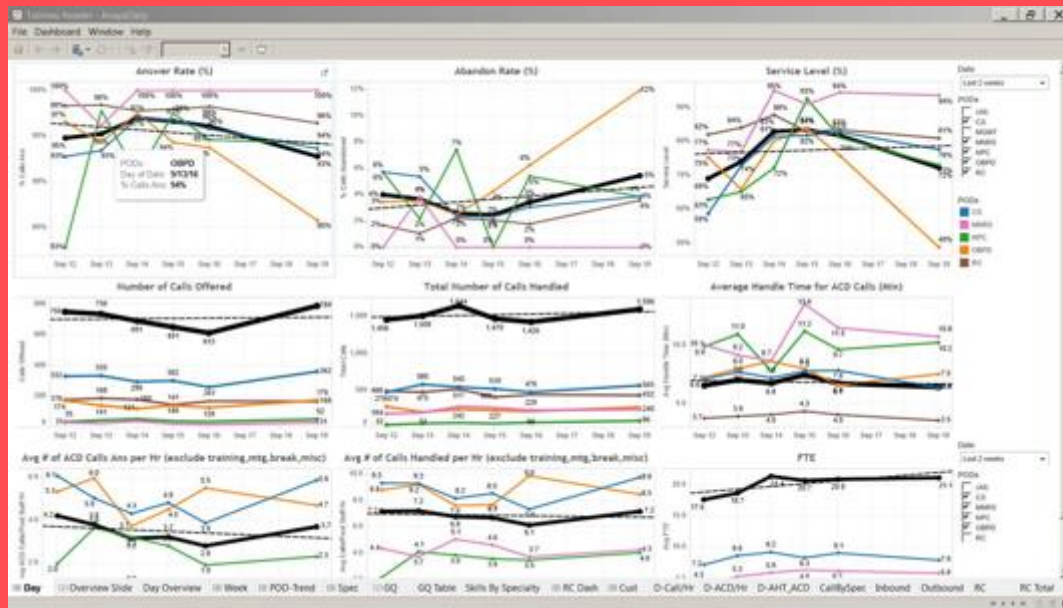


3,886 Calls Offered

2 agents

Primarily internal calls from  
colleagues with  
authorization related  
questions

# BUSINESS INTELLIGENCE | + a b | e a u®



 + a b | e a u®  
*demo*



# ENTERPRISE CONTACT CENTER (ECC) ORGANIZATIONAL OVERVIEW

STEVEN T. ALEXANDER  
EXECUTIVE DIRECTOR, ECC  
September 2016



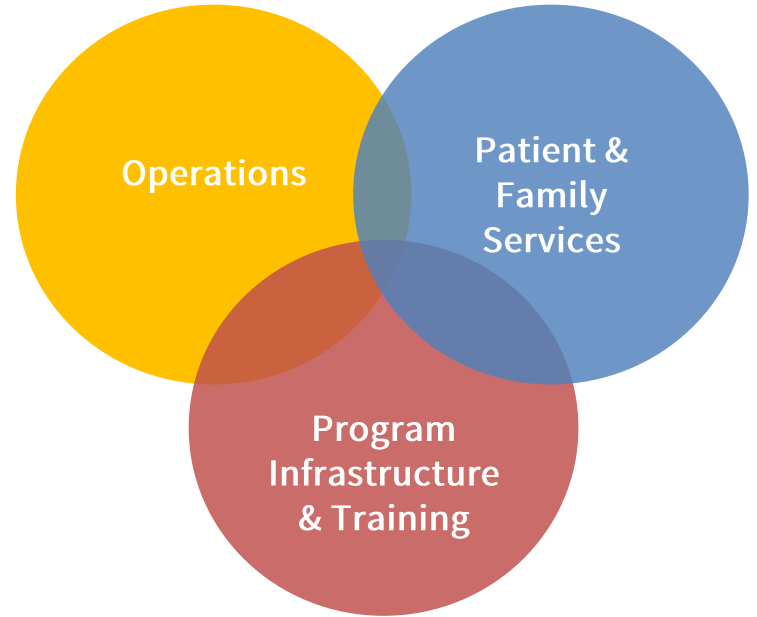
# THE PATIENT EXPERIENCE AT STANFORD HEALTH CARE

## 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*



**Stanford**  
HEALTH CARE

# THE NEED FOR CHANGE

Patient Experience  
Guiding Principle:

“Know me, show me, coordinate for me  
across the Healthcare System”

Contact Center  
Strategic  
Imperatives:

## Governance and Accountability

- Provide unified accountability to all contact center touch points
- Authority to make impacting change across silos
- Standardization of patient experience execution

## Empower and Enable Our People

- Endow team with tools to simplify and expedite patient interactions
- Allow for standardization of patient experiences at all touch points
- Increase patient satisfaction

## Efficient and Effective Operations

- Continue to increase productivity
- Redundancy and scalability
- Increased adoption of self-service

Contact Center  
Observations:

Multiple Reporting Structures

No 360° View of Patients

Multiple Telephony Solutions

Disjointed Reporting Tools

High Transfer Rates

Inconsistent Service Levels

Informal Budget & Hiring

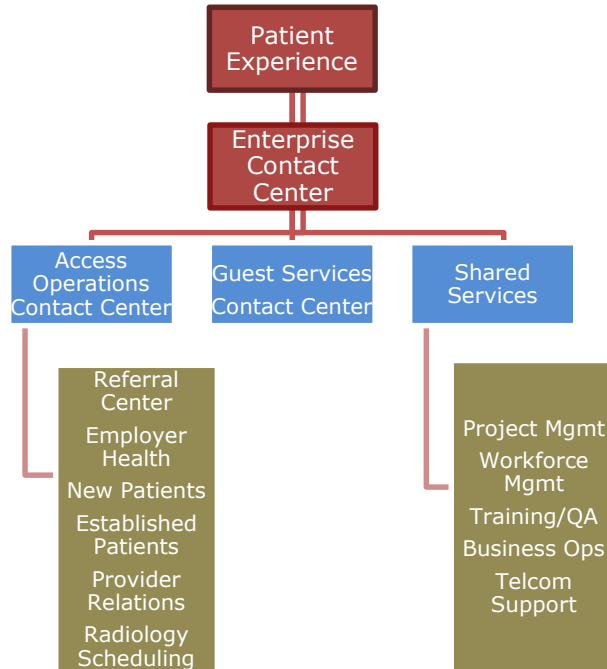
Limited Protocol Documents  
or Training

Varying Adoption of MyHealth

Stanford Health  
Care call centers  
lack centralization  
and governance,  
driving the need  
for enterprise-wide  
coordination to  
optimize for  
efficiency

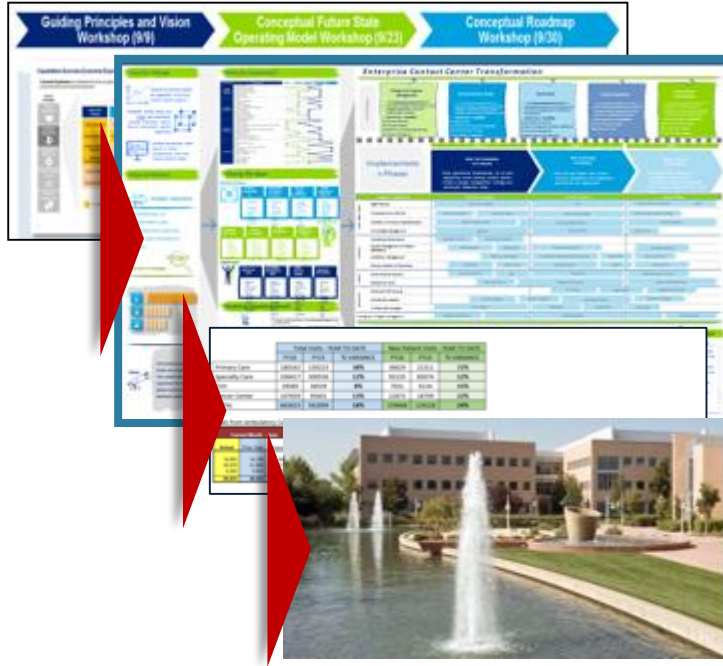
# ENTERPRISE CONTACT CENTER STRUCTURE AND MANAGEMENT

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



Metric	Goal	Access Operations Contact Center
Areas Supported		<ul style="list-style-type: none"><li>• 66+ Clinics</li><li>• 8 Hospital Departments</li><li>• Radiology Scheduling</li></ul>
Staffing		<ul style="list-style-type: none"><li>• 250+ Call Coordinators</li><li>• 11 Assistant Managers</li><li>• 4 Managers</li></ul>
Average Monthly Call Volume		<ul style="list-style-type: none"><li>• 180,000 Inbound Calls/mo</li><li>• 51,000 Outbound Calls/mo</li></ul>
Average % Answered	>95%	<ul style="list-style-type: none"><li>• 96%</li></ul>
% Voicemail	<1%	<ul style="list-style-type: none"><li>• &lt; 1%</li></ul>
Average Speed to Answer		<ul style="list-style-type: none"><li>• 41 seconds</li></ul>
1 <sup>st</sup> Contact Scheduling Call Resolution		<ul style="list-style-type: none"><li>• 82%</li></ul>
Call Recordings		<ul style="list-style-type: none"><li>• 100% of calls recorded</li></ul>
% of Staff Audited and Coached Monthly		<ul style="list-style-type: none"><li>• 100%</li></ul>
Hours of Operation	M – F S – S	<ul style="list-style-type: none"><li>• 7:00 AM – 7:00 PM</li><li>• 8:30 AM – 5:00 PM (Primary Care and EBC Only)</li></ul>

# 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

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

# FOUNDATIONAL WINS

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

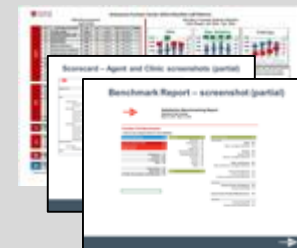
- ✓ Established Contact Center Integration Playbook, Project Management Team, and Training Team
- ✓ Established Knowledge Management Governance and Review Process
- ✓ Achieved 100% Proficiency & C-I-Care Training
- ✓ Implemented First Contact Resolution Framework
- ✓ Formalized and Launched Quality Mgmt 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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the agenda



# TABLE DISCUSSION

# TABLE DISCUSSIONS

**DISASTER  
RECOVERY**

**REPORTING**

Contact  
Center  
Centralization

Self  
Service  
Capabilities

**Omni  
Channel**  
(multichannel)

**WORKFORCE  
OPTIMIZATION**

Contact  
Center  
Management  
and Workflow

Specifically:  
• Recruiting  
• Retention  
• Training

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**

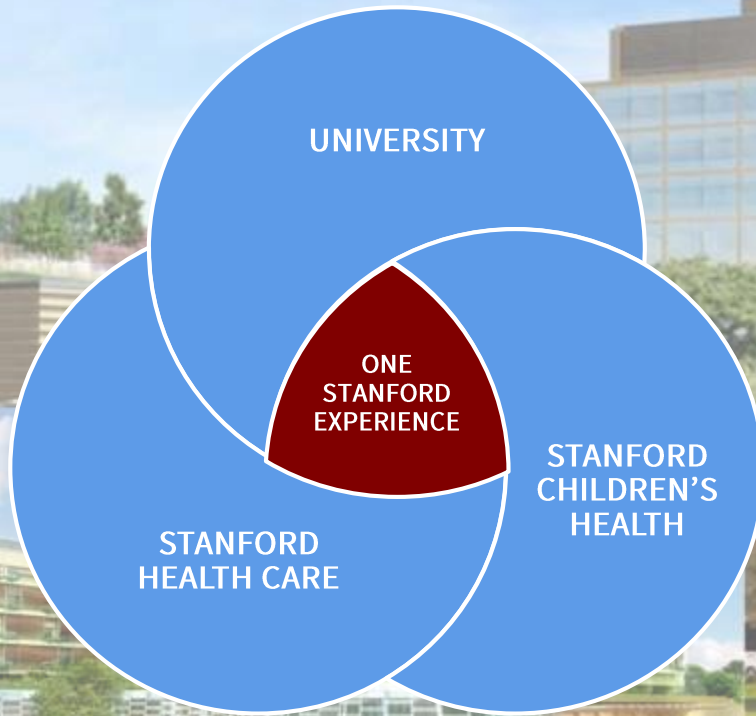
BUSINESS SYSTEMS MANAGER  
PATIENT ACCESS SERVICE CENTER  
(PASC), STANFORD CHILDREN'S  
HEALTH (SCH)



**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!