

Your Data is Talking to You. Can You Hear It?

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With all of the abundant data coming your way these days, do you find yourself wondering what to do with all of it? “Big data” is just so big! The good news is that data is opening up new avenues for us to better understand what patients are experiencing, what doctors are dealing with, what our healthcare system is handling, and what we did not know was even taking place right in our midst.

Add to your own data the emergence of artificial intelligence, machine learning and other data-driven systems and you might be facing data overload. More and more, non-human systems are assuming the tasks of processing data and responding to questions. Even Alexa and Echo are smartly carrying out people’s instructions, and doing so quite intelligently.

What does all of this mean for those in management and strategic planning in healthcare systems?

What does it mean for CEOs searching for the right data to help guide their decisions in fast-changing times? Will they simply ask, “Alexa, how should I run my hospital?” How can smart staff add

value innovatively, not just incrementally, to an organization so that its leaders and staff can respond quickly to shifts taking place all around them?

Perhaps the true value of data lies not in the data itself but in how humans visualize it and then act upon it. The challenge is in our own confirmation bias. Our brains are great at sorting through the data and only capturing those data points to affirm our own story today. The rest we simply discount or delete—when in doubt challenge the data!

Does it fall to us, then, to hear the data that is talking to us and turn it into the right story? And are those stories essential to understanding the meaning of the data that emerges, helping others act upon it and share it, influencing and leading others?

Sounds impressive but how do you do that?

Our hunch is that data story telling could be a valuable solution to those problems you have been asked to solve.

Somehow, you hope the data you have gathered



Sketches have been provided by Andrea Simon for inclusion in this article.



will help you convince others to believe in what you are seeing and then act upon your insights. You'll need to convince someone to:

- Alter or sustain the direction of a service line or new retail delivery channel, or to expand telemedicine solutions.
- Expand the delivery network to improve accessibility.
- Change physician practice behaviors regarding the best ways to handle chronic illnesses.
- Discard well-established organizational practice habits that are adding costs (the old “ways we do it here” patterns).
- Think about a particular problem differently and then convince your leadership to act upon the new insights.

A Story to Share

Several years ago, we worked with a medical center to help them more fully penetrate the geographic region they served. Their primary referral source was acquired by their competitor, creating an undersized primary care and ambulatory network. What to do, besides have a panic attack?

Our client was a very smart strategist who immediately went to the data which could help him make the best decisions quickly. This might not seem so significant, but the hospital had operated quite nicely without “digging into data.” Planning was an after-thought. Data supported current plans.

When the crisis hit, they were scrambling to find the right data, information and insights to build a compelling story that would enable them to allocate the funds needed to significantly alter their footprint,

access points and space in the market.

Some of the big questions they immediately asked:

- Where were the gaps in the market space? What could GIS tell them?
- Where were consumers without primary care physicians? With unmet needs? How could they capture them?
- What could they do quickly and affordably to open new delivery channels?
- How could they do this with a disparate team of people, together?

The leadership created a new team from across the institution. This institution-wide problem could not be solved simply by a strategic planning unit. It had to be a hand-picked group of talented players, each of whom had skin in the game and a perspective that would prove essential if the data was going to become a compelling story that everyone would embrace. Each of them had to create the new story, see the data in similar ways, and share the story widely.

Next, they sorted the data into three major strategies to convert opportunities into potential revenue streams:

- How to attract more physicians, quickly
- How to expand their delivery points, innovatively.
- How to rethink their customer acquisition strategy as their patients were flocking to urgent care centers.

Despite the abundance of data which the new team was finding—and there was a good deal of debate about what they were finding—they realized

that they had to convert the charts, dashboards, Excel spreadsheets and research results into something that would resonate with the board, management and staff.

They needed a story. But which story?

As we worked with them, their questions revolved around how to craft the story so that it was the “right” story among several that could be fabricated out of the experience and the data. It was time to stop arguing about data accuracy or relevancy.

The Dominant Story Themes

They were surprised to see the different ways they could craft their new story, that new strategy.

Throughout human history, there have arisen essentially Seven Story Structures. You can learn more about these in the book, *The Seven Basic Plots: Why We Tell Stories*, by Christopher Booker.

These seven structures are:

- Slaying the monster
- Rebirth
- Quest
- Journey and return
- Rags to riches
- Tragedy
- Comedy

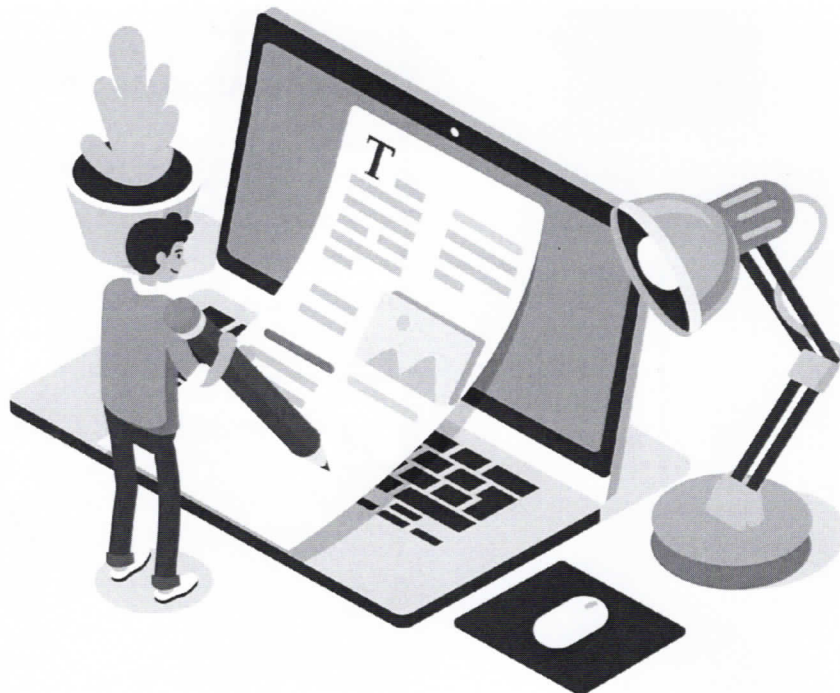
Each has an individual character that plays a major role in the development of the story, as follows:

Slaying the monster: The hero must destroy the monster to restore balance to the world. This hospital could easily become a “Slaying the monster” story.

Rebirth: A threatening shadow is going to overcome the hero until a sequence of miraculous events lead to redemption, rebirth and the restoration of a happier world. For this hospital, leadership really needed their physicians to know how bad things were and what they were doing to bring the institution back to its growth stage.

Quest: The hero, often with sidekicks, travels in search of a priceless treasure, during which he must defeat evil and overcome powerful odds. His quest ends when he gets both the treasure and the girl—think *The Odyssey*. Or the story of every bold entrepreneur or hospital president trying to take an organization in new directions, which is exactly what had to happen here.

Journey and Return: Protagonists are suddenly thrust into strange and alien worlds and must make



their way back to normal life. *Alice in Wonderland* or *The Wizard of Oz* come to mind. As the hospital leaders were empathizing with patients having a hard time finding doctors, you can see the plot emerge.

Rags to Riches: This is not the story of this hospital. For this particular institution, they did begin to feel downtrodden, lost and abandoned, and achieved a happy ending when their natural talents were displayed to the world and they overcame their competition with great success.

Tragedy: This describes what happens when humans overreach their limits and egotism rises to the surface. This hospital saw that when it lost its major referral source of primary care doctors who were acquired by a competitor, it was a catastrophe. What were they going to do?

Comedy: This is not the “ha-ha” kind of comedy. It’s more a case of this hospital’s staff not being able to get out of their own way. They had to have help to untangle their problems and find solutions.

So, which one did this hospital craft as their story? Rebirth!

The medical center began to tell a story about being the fallen hero that needed a Rebirth. With the data in hand, their narrative described their intention (and hope) of quickly tackling the well-established competitor who used to be their “best buddy.” And in fact, they did find a rebirth. “Against great odds, they overcame the monster and restored the patients to their rightful home.”

And in the telling of their story, what they learned was that they needed different versions for different

audiences. One story was necessary to complete leadership to invest in the strategy. Another was needed to get the doctors on board. And yet another was needed to get the nurses enthusiastic about their approach to rebirthing the organization.

Why?

The Brain

The brain takes data and converts it into stories in order to make sense of it, to enable the data to be visualized, and to allow it to be shared among others.

But the brain hates to change! That's why it needs stories.

Visualizations are needed to tell a story to an audience. Storytelling helps the viewer gain insight from the data. That's why this hospital's story had to be constructed and reconstructed to be most persuasive for different audiences.

Indeed, when data is not delivered as narrative (a story), it tends to trigger those areas of the brain which are the language processing sections and where we decode words into meaning. We know that the brain sorts data to fit its current "mind map" and discounts data that does not fit its current visualization of the situation.

Therefore, for data to have value, it has to be turned into something beyond the data itself. In other words, for your ideas to have their intended impact, you need others to "see, feel and think" about the data as you do.

That means you need to craft and tell the right stories to the right people.

However, whether fiction or nonfiction, a narrative engages its audience through psychological realism—recognizable emotions and believable interactions among characters. We can detect when something rings false. The data plays a support role to what we feel. And, most importantly, we decide what is true, or what we will believe, based on what we feel and see, not on what we think. Logic and data support our feelings, not the other way around.

In fact, research backs this up. Our brains are not hard-wired to understand logic or retain facts for very long. They are wired to understand and retain stories.

Consequently, you cannot just show people data and expect them to understand it. Rather, the brain is essentially tipping its hat at the new information to acknowledge that the data has been processed, but nothing magical occurs.

When you add the right storytelling into the mix, the brain behaves completely differently.

The Right Story?

If you too are in a similar situation to our client, and finding yourself having to craft a story, consider

that an effective narrative typically has four elements that are essential to help the brain visualize what you are trying to convey:

1. Characters: People who will appeal to specific audiences and whose lives will be improved if you do something.

2. Connection: The bridge between the audience and the characters. These are the basic human needs which we all share.

3. Conflict: This is what holds your characters back from achieving the desired results.

4. Conquest: This is the outcome of your characters' situation where they overcome the hurdles and succeed against all odds.

Character-driven stories with genuine emotional content result in better understanding of the key points you wish to make. Also, characters produce greater recall of the key points weeks later. They also compel listeners to share the stories and act upon the insights conveyed by the story line.

Is your data talking to you? Can you hear it? What story is it trying to tell?

Let it tell you the right story and then you will become the storyteller. Then, and only then, will you know that the data is talking to all of you. ■

HMR Calendar

Are you or your organization sponsoring a healthcare conference, seminar or class that might be of interest to other marketers? If so, let HMR list it for you in our monthly calendar of events. Send information to: HMR, Calendar of Events, P.O. Box 76002, Atlanta, GA 30358-1002.

September 8-11, 2019 • Nashville, TN

SHSMD Connections
Society for Healthcare Strategy
& Market Development
312-422-3888

November 4-6, 2019 • Orlando, FL

23rd Annual Greystone.Net
Healthcare Internet Conference
Greystone.Net • **866-440-9080**

April 5-7, 2020 • Las Vegas, NV

25th Annual Healthcare Marketing &
Physician Strategies Summit
Forum for Healthcare Strategists • **312-440-9080**