

## **Disruption of Healthcare: The rising power of patients**

Lecture IndustryForum Healthcare, Pfäffikon (Switzerland) March 7, 2018

Dr. Steven P.M de Waal



#### www.publicspace.nl



## Public SPACE Foundation (since 2002) (www.publicspace.nl/english)

#### **ThinkNetwork**

ThinkTank has evolved into a Think Network. Prominent executives, academics, opinion leaders and decision makers operating in strategic frontiers of public/private corporations

#### **Core Concept since 2002**



#### **Mission**

*'Winning strategies for the common good'*. Open nonideological inquiry, active international outlook for best practices and interdisciplinary approach.

The main mission is promoting active citizenship and social entrepreneurship in public services

#### Opinion, blogs and archive on website





#### **Outline**

- 1. Common knowledge: disruption as the most strategic phenomenon in markets
- 2. Surprise: same technologies also have disruptive impact on politics and public services through power of citizenship
- 3. Disruptive Citizenship: mentality, powertools and organization capacity
- 4. Revolutions are already going on in healthcare
- 5. Big impact on leadership in healthcare. Main direction: Civil Leadership\*

Main challenge in leadership makes lectures on leadership relatively useless: You are totally in charge: leadership is personal. Only your personality, your leadership abilities and style and your personal efforts count!

\* Dr. S.P.M. de Waal 'The Value(s) of Civil Leaders', Eleven 2014



### Most important strategic issue in markets: disruption

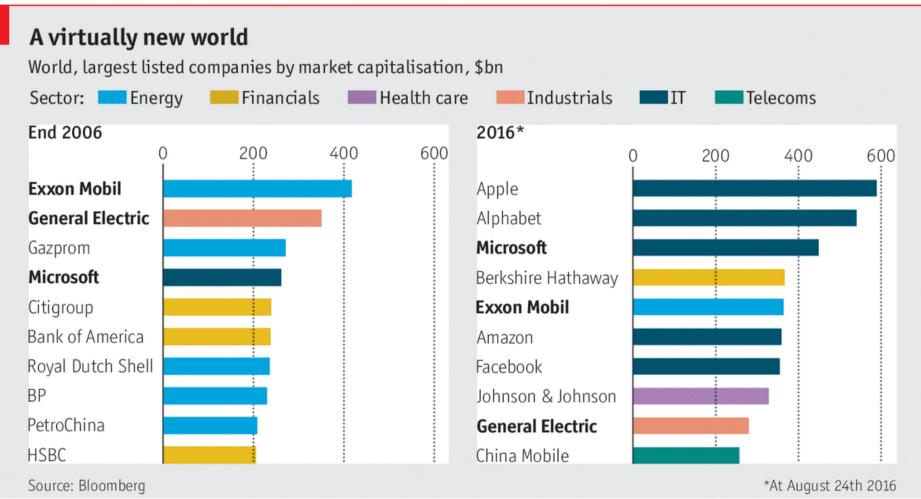
- Recent definition:
  - Rise of new and unexpected competitors, from outside current market, innovative in and through their direct access to and exchange with customers
- Common conclusion until recent: CEO's see it latest. First phase: denial, ignorance, defensive (seemingly rational) critique. After that: surprise! This is proof of real powershift
- Direct exchange and real time information & communication is key
- Economy and competition dominated and dictated by **platforms**
- **Competition between platforms** is on:

sympathy, belonging, community-feeling, hands-on service, feeling of being 'in charge' and easy tools for self-steering

• The market now teaches its customers these values & attitude



## Platformeconomy has already won

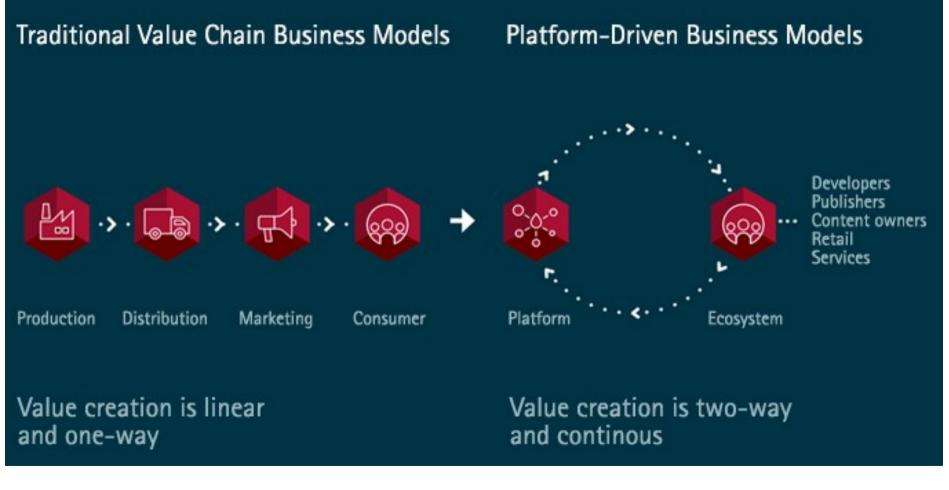


Economist.com

Also Theme Issue of Harvard Business Review, April 2016



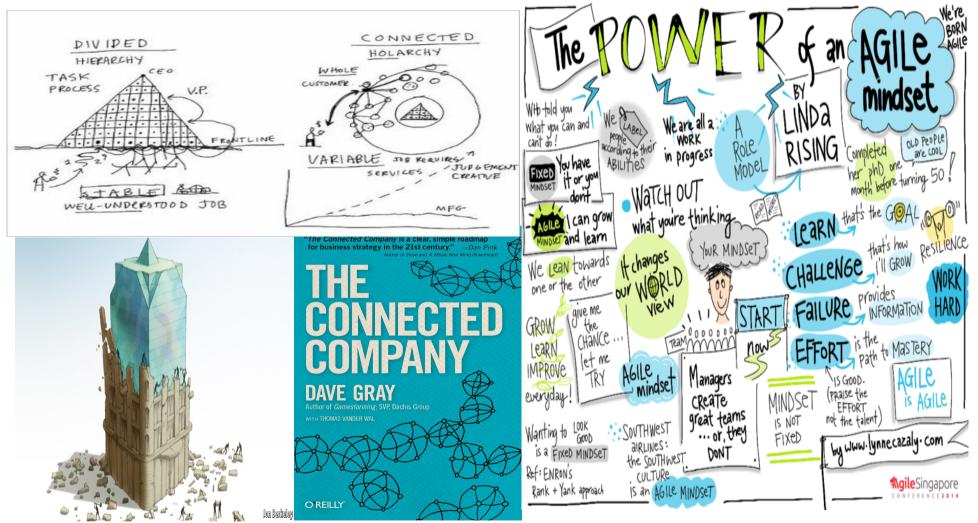
## This is already changing our view on organizations: they too become platforms, internally and externally



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## Organization evolves to internal platform: frontline workers and exchange with patients crucial





## The disruptive citizen

It's not just technology ('stupid'), it's power- and informationtools and their impact on mentality!

- **a.** Shift in real power: data, knowledge, communication, peer-reviews, peer-organization
- **b.** Shift in mentality: I personally can gather information and opinions, steer, choose, organize, manage and consult peers

Public services have more time to adjust by the protection of state, laws, public finance and lobby's.

Not sustainable:

- **Traditional politics will learn quickly**: no re-election without listening to the new public power
- **Customers of public service will demand change and choice;** have a direct and public channel to voice their opinions
- Public debate and reputation in these direct channels



### Main powertools for citizens in new technologies

## Public platform: direct and public exchange on all issues and attitudes, including amount of support (permanent public polling):

- classic political issues (passive in modern culture)
- new issues not on agenda or covered scandals
- reputation and complaints about individual organizations, even personel by name

## Mutual organization\*: realtime linking of peers in same situation or needs to exchange & organize:

- on neighbourhood issues (e.g. safety alerts, neighbourhood watch)
- in assets (like housing, gardens, cars) and help (like care, shelter, repair)
- \* NB: Mutualities were once the basis under healthinsurance and also longterm care in Europe!



## Main new power-source of civil society: independent & direct channel

#### **Revolution in personal ICT (Information & Communication & Media):**

| • | Smart                        | Enormous, still increasing computingpower            |
|---|------------------------------|--|
| • | Small and mobile             | Close to person, always at hand                      |
| • | Not just data, all media     | Real time vivid actual observation- and face-contact |
| • | Mass use and (!) so expected | Connection anyplace on the earth, anytime            |
| • | Platforms                    | Develop and support exchange services                |

A new and independent, local and global, ICT and media-channel of, to and between citizens.

No selection, reframing or censorship outside citizens themselves and algorithms! Get used to the new manipulation instead of the old and now distrusted filters (politicians, experts, professors, journalists, PR industry).



### My introduction of 'Disruptive Citizen' in Dutch Financial Times (August 2015)

## Lo Anders denken

#### Zeggenschap

#### Disruptieve burger richt zijn leefomgeving zelf in

Woningcorporaties kunnen niet langer om de macht van de burger heen: met nieuwe platforms en apps krijgt een bewoner meer greep op de eigen woonomgeving.

#### Steven de Waal



leidde dit tot een nieuwe Woningwet, met belangrijke maatregelen zoals een centrale overheidstoezichthouder, meer formele invloed op het beleid van huurders en gemeenten, en een beperking van het domein waarin corporaties mogen ondernemen. Ogenschijnlijk is er nu duidelijkheid. De sector lijkt weer over te kunnen gaan tot zijn kerntaak. Business as usual.

Hierin schuilt een groot en gevaarlijk





# Big impact outside markets



## **Public services in general**

Public services are still delaying impact by using protection of state, laws and lobbies Not sustainable: traditional politics will learn quickly: no re-election without listening to new civil channel and power

- Need/demand for co-production and co-creation; no longer just voice and passive consumer service, but co-choice, co-production, partnering with 'amateur'cooperatives
- 2. Reputation based on peer-reviews on direct channel, be there!
- 3. Monopoly is gone: civil initiatives and cooperations are here to stay; simple supplyside attitude won't work
- 4. Quality standards are not only based on technical/professional and bureaucratic paradigm, add peer-review and reputation

**NEW CIVIL LEADERSHIP** 



### Main impact of disruptive patient on healthcare

- A. New power:
  - 1. Independent information gathering (knowledge about disease and treatments, personal data & medical files)
  - 2. Choice between providers and even individual professionals based on peerreviews
  - 3. Self-diagnosis & shared decisionmaking & individual co-producing
- **B. New mentality:** 
  - 4. Self-monitoring & personal management of chain organization (from home to hospital and vv.)
  - 5. Collective patient and family organizing & pressure for co-production



#### New processing and access to files



#### FACTS ABOUT PATIENT EDUCATION



#### RESEARCH SHOWS THAT:

- Physicians often over estimate the topics and duration
  of what they have talked about with their patients
- Telling patients once... is usually not enough to get the patient's attention or buy-in
- Patients filter what they hear from their doctor in a variety of ways that physicians usually know nothing about, i.e., the patient's health beliefs, values, previous experience and illness explanatory models.



www.alamy.com - JDT4XF

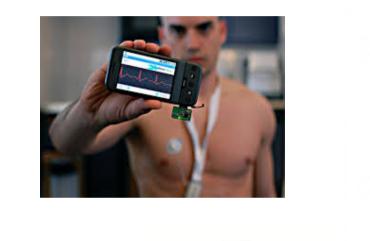


#### **Direct access patientdata, before the doctor**

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## Self-monitoring leads to minimum of ambulant care and maximum at home digitalization











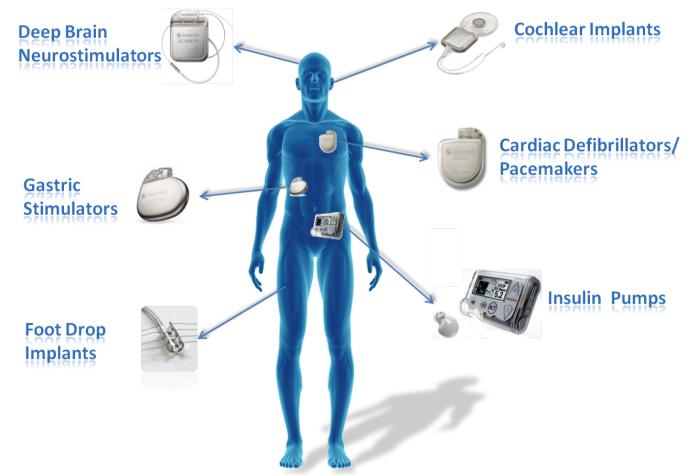
## This means enormous logistical centres to manage and plan the total chain





### **Even patient bodies become machine park**

## WIRELESS IMPLANTABLE MEDICAL DEVICES





## **Or their homes**

#### Long Reach

Wireless devices for remote patient monitoring





### In love with the new doctor?





## How this changes leadership in healthcare



## Leadership

#### Leadership is about:

- Authority (not formal power or (management-) position)
- Character and capacities
- Rhetorics and charm (spontaneous followers)

#### Roots for leadership: personal passion, values and biography

- a. No leadership without context and reasons: resistance is normal
- b. Leaders must be as clever in powergames as anybody with a vision or position (good character and good intentions are not enough)
- c. Rules, codes, protocols are not enough to get the right things done; hiding behind them is often first step in resistance



### **Disruption: impact on leadership in healthcare**

MAIN impact: domain of your leadership (authority, character, followership) is patients and their families as much as your professional personel and protocols!

- A. Treating them equally: bridging instead of opposition, hierarchy or neglect
- B. Learn to be as supportive AND critical towards civil action and self-organization as to the professional organization
- C. Partnership is necessary: less professional power: knowledge and references are shared and publicly available; shared decisionmaking



## Addendum 1: Summary of dissertation 'The Value(s) of Civil leaders' (Eleven 2014)



#### The Value(s) of Civil Leaders

A Study into the Influence of Governance Context on Public Value Orientation

Steven P.M. de Waal



#### Bublic SPACE

#### My dissertation, PhD in October 2014

Research on 30 selected civil leaders and a websurvey on app. 200 executives with experience in different governance context.

- a. How values and value orientations differ between governance contexts (for-profit, non-profit, informal active citizenship) and influence leadership
- b. What the value patterns are of these civil leaders and how it is influenced by their governance context.

Important concepts outlined in the study: Values, Civil Society, Valuepatterns of Market, State and Civil Society, Public Value, Governance Contexts and Leadership.



### **Main results**

- Yes, the value patterns of the three governance contexts (for-profit, non-profit, active citizenship) differ substantially and probably influence leadership
- No, the value pattern of these civil leaders doesn't differ accordingly
- Amazing: there is a common value pattern for all civil leaders, they are 'a breed of their own'

#### Side-results:

- Civil leaders, despite their citizenship, are often seen as competitors by politicians (who claim a monopoly on public debate about public issues)
- Civil leaders are often challenged and have the competence to be active in public debate
- In most cases of executive positions there was a tension between civil leaders and their non-executive boards, basically on the managerial technical attitude versus their own value based attitude. They are not 'easy' executives.



## Civil leaders in my study have a value pattern of their own (a breed of their own)

| Freedom of Choice<br>(13)      | Sustainability/<br>stability (11) | (Social) Justice<br>(9) | Solidarity (8)            | Independence (7)          |
|--------------------------------|-----------------------------------|-------------------------|---------------------------|---------------------------|
| and                            | and                               |                         | and                       | and                       |
| Entrepreneurial spirit<br>(13) | Respect (11)                      |                         | Self-actualization<br>(8) | Bonding &<br>Bridging (7) |

They have a value-pattern with two tracks:

On the one hand: **entrepreneurial**, selfsteering, autonomous, pigheaded, **independent** 

On the other: socially committed and passionate about **societal results** for targetgroups and vulnerable citizens or changing failing public services



### We found four keydimensions of civil leadership style

Together these key dimensions define the style of a civil leader

Every civil leader has to make choices on these key dimensions to establish his/her typical style and operate in a way that he/she feels it makes him/her credible and effective as a civil leader

- 1. The value-driven-instrumental-neutral value stance
- 2. Backstage to front stage
- 3. Elitist to common touch
- 4. Legitimization to innovation



## Handling the public debate is crucial for civil leader. The public domain is not just for politicians anymore.

The civil leader's approach, style and character in these public debates are as important, both for the public acceptance of their innovative work as for the possibility of further institutionalizing this innovation, as the actual public value of their effort.

Other lessons can be drawn:

- Any issue can be charged with values
- *Purely private initiatives with positive public value generate little public debate*
- The public debate is a special arena with little control

So, the public debate can hit hard, affecting civil leaders personally as well as their organizations/networks, with little opportunity to control the result.



## Main impact of civil leadership on healthcare leadership

Power of disruptive citizenship will come closer and change roles:

- Frontline professionals need more decision power in their interaction with patients
- The question will increasingly be: who knows patient's opinions best (written surveys will not help)?
- How to provoke and evaluate this information?
- Bureaucratic attitudes in interaction with citizens changes to commitment and value driven character. It is real partnership
- How to choose between upcoming civil initiatives? And between them and current supply in healthcare?

Main point that will create unrest and insecurity about jobs:

- A. Threat to professionals and professionalism
- B. Threat to the current monopoly



#### The Value(s) of Civil Leaders

A Study into the Influence of Governance Context on Public Value Orientation

Steven P.M. de Waal

eleven



## Addendum 2: Focus Public SPACE Foundation



#### **Main-topics Public SPACE in lectures and literature**

**Citizenforce** (has a historical right as the private basis for much of public sector, 2000) **to be extended with citizen power** like: 'right to challenge', 'vouchers' and preference for social enterprises (2015)

**Citizen disruption of Democracy:** There is already a direct and open information- and mediachannel for citizens. It threatens to disrupt representative democracy if not used and embraced by current politicians (2014)

**Citizen disruption of public services** by rise of self-organization, demand for co-production and influence of peer-reviews & own choice (2015)

**ChinaHealthcare**: The Dutch healthcaresystem is hardly marketlike, but very government steered in finance, services, innovation and structure. Main fault is that patients have not much influence and hardly any choice in provider (since 2011)

Strategy: 'Beating the odds'

**Aristoteles**: Virtues, Character, Balance of middle in strategic context, Practical Wisdom. Governance codes must be principle based not rules-based

**Civil Leadership:** persons and personal behaviour more important than institutes or structures. Citizenship can and must be in the boardroom (2014)





BOOM LEMMA

#### Burgerkracht met Burgermacht

Het einde van de maatschappelijke onderneming en het polderpaternalisme

Steven P.M. de Waal

#### Latest book (in Dutch), May 2015

#### Title translation: *Citizen initiatives with Citizen power*

Presented to Director of Social Cultural Planbureau, a major adviser for central government on health and social issues and policies.

Based on large debates, physical and virtual and literature study.

#### Main message:

Positive about recent political attention to active citizenship in health, social welfare and social security, but:

- too political top down and too much linked to political agenda (budget cuts)
- naive about powershift
- doubts if municipalities are closer to citizen force



#### **Previous publications Public SPACE (Dutch)**











Een betere Zorg voor Jeugd. Decentralisatie van de Jeugdzorg als kans.



Mei 2011