Canadian Audiologist

The Official Publication of the Canadian Academy of Audiology

Unbundling Service Delivery: Start with the Customer's Viewpoint

Published May 4th, 2016

Originally posted at HHTM *On May 20, 2015*. Reprinted with permission.

If you've been keeping up with the professional listservs over the past year or so, you've probably heard the chatter about unbundling or itemizing various audiological services. There are many valid economic arguments for unbundling service from the selection and fitting of the device, and it's ultimately the decision of the owner or manager on how (or if) unbundling gets implemented in a practice.

On the surface unbundling seems fairly straightforward, but once you start digging deeper into actually doing it, things can get a little frantic. The good news is that the Academy of Doctors of Audiology has created a task force that is examining all facets of unbundling and hopes to present some of these best practices with respect to unbundling at its annual convention in November.

A big part of the unbundling equation revolves around service delivery. Specifically, which components of service are customers willing to pay for and which should be bundled with the delivery of the devices? The focus of this essay is not to discuss why or even how to unbundle. My purpose is to examine which components of the service experience are valued by the customer and how we can add more value to them, so that the market is willing to pay for these services. This process starts with a deep dive into the wants and needs of the marketplace. Examining the opinions of the market will serve us well as we fine-tune the unbundling process.

As the management guru Peter Drucker said, "the purpose of any business is to create a customer." In an elective medical/helping profession like audiology and hearing instrument dispensing where we draw from a relatively narrow segment of the population, the creation of a customer can be extremely challenging. Thus it is imperative that we listen to the "voice-of-customer" before we make any significant decision about our businesses. Sadly, aside from the Kochkin MarkeTrak reports there is little voice-of-customer information available. I did manage to stumble across one published report that shed valuable insight on what our customers think with respect to follow-up service.

Stika and Ross (2011) surveyed 942 hearing aid users drawn primary from individuals associated with the Hearing Loss Association of America (known when the survey was conducted as Self Help for Hard of Hearing People). Their primary objective was to analyze the differences between services delivered by an audiologist and those provided by a hearing instrument specialist from the customer's point of view. Their analysis of the survey results, in case you are interested, was that individuals who saw an audiologist, on average, reported a higher level of satisfaction than respondents who were provided services from a hearing instrument specialist. You can read the article to see how big the service gap between the professions was reported.

The most actionable part of their article, however, was not that finding. Rather, it was their

assessment of itemized services delivered by both groups of professions. Respondents were asked to recall which particular services they received from either their audiologist or hearing instrument specialist. Table 1 shows a breakdown of the percentage of survey respondents who received specific services. Not surprisingly, services that directly impact the use of the hearing aids themselves are provided more frequently by both groups of professionals.

Note that a much higher percentage of services that are inextricably bound to the hearing aid were reported to have been delivered by both groups of professionals. This provides some clear evidence direct from customers that, indeed, as my colleague and friend Barry Freeman suggests, the device is the center of our universe.

One could argue that most of the services listed in Table 1 were actually conducted by the professional, but the respondents simply did not remember it. After all, the authors did ask a group of elderly people to recall what happened at a prior appointment, which may have occurred several weeks ago. Granted that could be true, but it still doesn't explain the much higher percentage of services delivered for device-centric activities. If you ascribe to the poor memory recall argument, also keep in mind that patients are less likely to recall something that was not emotionally compelling and memorable. That is yet another reason to make your routine interactions with patients energetic and even entertaining when you can.

Information/Services	Audiologists (n = 651)	Hearing Instrument Specialist (n = 230)
Provided clear explanation of my current audiogram	77.7%	66.8%
Provided reason for selecting my hearing aid	78.6%	71.6%
Discussed care of the hearing aid	79.2%	79.0%
Discussed care of the battery	66.6%	66.2%
Discussed earmold hygiene	59.8%	57.9%
Made certain I understood the T-switch	48.2%	42.4%
Explained use of directional microphones	25.7%	20.5%
Informed me about other hearing assistive technologies (e.g., for the TV and telephone, Personal FM system; signaling and warning devices)	33.7%	28.4%
Asked to complete a questionnaire to identify problems my hearing aid causes me	11.7%	9.6%
Asked to complete a follow-up questionnaire after wearing the hearing aid to determine improvement	10.1%	8.7%
Discussed coping and communication strategies	16.9%	9.2%
Discussed with my spouse and/or other family members the specifics of my hearing loss and communication strategies	20.8%	20.2%
Invited to participate in group meetings to help orient me to my new hearing aid(s)	7.7%	3.1%
Provided information about Self Help for Hard of Hearing People, Inc. (SHHH), Association for Late Deafened Adults (ALDA), or other consumer resources	19.1%	14.8%

Table 1. Percentage of Respondents Indicating Services Provided by Either an Audiologist or Hearing Instrument Specialist. Source: Stika and Ross, 2011.