E-Com@Eu Programme
Work Programme 3

SEVENTH FRAMEWORK
PROGRAMME

CJM and Segmentation Report

Part Two: A

Prototype Tools / Guides to

Customer Journey Mapping

in relation to Pandemic Influenza

June/ July 2013

1 What is Customer Journey Mapping for pandemic influenza?

Customer journey mapping is a marketing tool that encourages policy makers and planners to think and feel what it is like to be a service user or customer. It involves tracking and describing all the experiences that customers have as they encounter a service or set of services, taking into account not only what happens to them, but also their emotional responses to the experiences.

It aims to ensure that every interaction with the customer is as positive as it can be, giving an opportunity for the service provider to see the whole picture – or journey - by bringing the service users' stories to life.

For pandemic influenza planning, customer journey mapping can help 'join up the dots' between communications and service provision, and help ensure that services are able to respond to the questions and concerns of members of the public at different stages of a pandemic. Ultimately, it can contribute to the adoption of preventive behaviours to reduce – or ideally stop – the spread of transmission of infection.

Customer journey mapping helps by identifying the key junctures in the process – from the service users' point of view – that will either make or break the pandemic influenza prevention effort.

People may be confused about what to do, uncertain about when and how they should act on information given in official communications, or where to go to seek help and advice. They may be upset to find that they are not eligible for some forms of treatment or vaccination, or that the messages provided by different service providers are inconsistent. By undertaking customer journey mapping, planners can discover where problems are likely to exist and take pre-emptive action to address them.

Customer insight

Influencing behaviour depends on understanding the needs and motivations of the people whose behaviour we seek to influence. In social marketing, this is known as 'customer insight'. Customer insight can be obtained from many sources. Most obviously, it involves asking customers directly – through surveys and qualitative methods. It also involves assessing data collected from people who purchase – or use – goods and services. This may include data from customer services enquiries and complaints, loyalty schemes and service use (including sales) information.

Once analysed, this knowledge base enables service providers to personalise their 'offerings' - be they communications, physical services, online, phone or face to face services (or a combination of all of these) – to better meet the needs of the people who will use them.

In the case of pandemic influenza, we need to understand what will motivate (and demotivate) a very wide range of audiences to engage with the prevention and help seeking messages.

Unlike a commercial service or even most government led programmes, pandemic influenza is a universal concern. But this does not mean that people will respond to it in a uniform way. Some people may act immediately on prevention advice, others may be more sceptical and others still may be hostile to – or dismiss the warnings and advice altogether.Unless programme planners understand what really matters to the people they are trying to reach, they will waste time and

money by offering services that people do not recognise as being for them, and have difficulty accessing.

2 Key features – a systems map overlaid with customer experiences

Customer journey mapping involves developing both a 'systems' or 'process' map of how the service *ought* to operate, and a 'customer experience' map of the actual, lived experiences of ordinary people who use the service(s).

By overlaying the latter on the former, service planners can identify where the service works well and where there is room for improvement.

The beauty of the technique is its simplicity. It is easy to use, and yet can be applied to complex processes to identify the points where changes are most needed to make the programme work effectively.

For pandemic influenza planning, there are a range of journeys – many of which are complex – with multiple interactions that take place over short and longer timeframe.

Customer journey mapping can be applied to any journey (or part of a journey) that people take - involving a single setting or a whole intervention. For instance a journey map could be developed for patients' experiences of seeking help from specific settings (GPs , hospitals, pharmacies etc). Or a map could be developed to cover the entire journey – from the moment of becoming aware of pandemic influenza until the pandemic ends.

Typical elements of customer journey maps include:

- Customers' (or service users') actions, usually broken into chronological phases of some kind
- Goals and needs at each step in the process
- Moments of truth, or areas of particular importance in the overall customer experience
- Pain points, gaps and disconnects in service provision
- 'Brand' impact, satisfaction, and emotional responses
- Touch points and process, including roles, systems and departments of the provider
- Existing services and opportunities for improvement

3 How to construct a customer journey map

Step 1

Confirm the journey and customer – identify customer segments

The starting point for the journey is always the customer, and the initial step is to decide which customer(s) to consider. Because everyone is an individual, in an ideal world, we would design and target communications and interventions at an individual level. But in the real world, we have to take a broader approach and target groups. The important point when targeting groups is to understand the key characteristics that a group shares. We need to identify the motivations that are common to group members that can be influenced to bring about the desired behaviour. Segmentation of the customer base makes it possible to choose where to focus the work

For example the focus could be on:

- Who has the greatest need (minority groups, young people, people with chronic respiratory conditions)

- Where is the current experience least satisfactory, based on evidence from research and evaluation studies. This is likely to vary by place, but may include those who failed to take up recommended behaviours

- Where the mapping is likely to have most impact – for example in large cities or among those who travel abroad, or among the most socially connected groups where there is greatest risk of infection transmission (for instance parents with young children)

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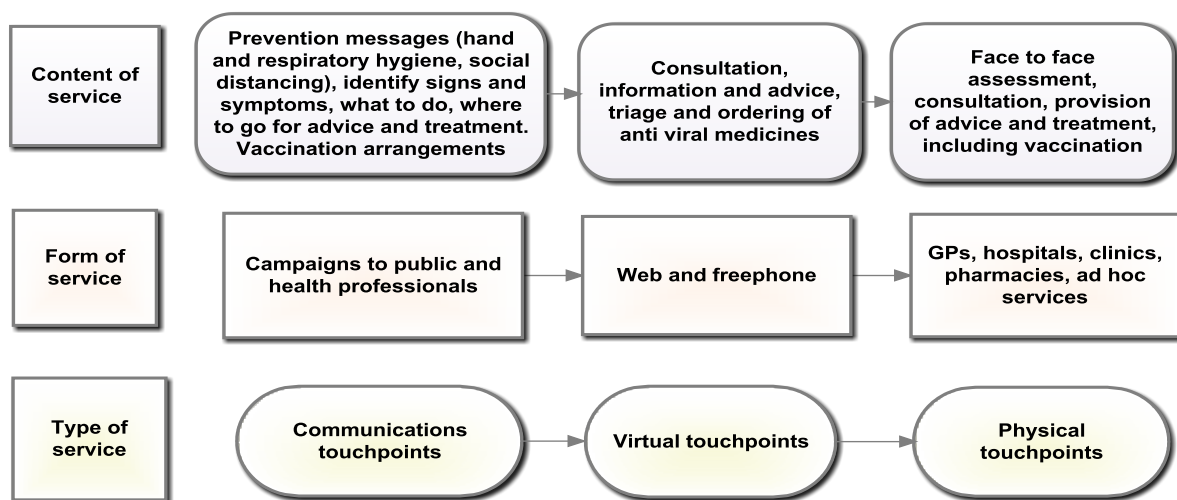
Step 2

Construct the systems map

Mapping the system involves creating a graphic representation of all the steps, actions, interactions and decision points of a process, in order to understand it and identify opportunities for improvement.

In order to construct a map of how the journey *ought* to operate, ask service providers and policy makers to identify the start and end points of the journey, and the key steps or stages, including the key touch points. These include moments when the service seeks to engage with members of the target audience. They may include communications touch points, physical touch points (clinics and hospital services), online and telephone touch points and face to face interactions.

An example of a systems map, derived from the case studies conducted for this project might include the following goals and process or systems map.

Core system goals	Goal 1 Provide actionable information to prevent spread of infection	Goal 2 Minimise number of people with flu symptoms swamping primary care and hospital services	Goal 3 Achieve high rates of vaccine uptake among identified priority groups, when vaccine becomes available

Process or systems map for pandemic influenza planning

Content of service	Prevention messages (hand and respiratory hygiene, social distancing), identify signs and symptoms, what to do, where to go for advice and treatment. Vaccination arrangements	→	Consultation, information and advice, triage and ordering of anti viral medicines	→	Face to face assessment, consultation, provision of advice and treatment, including vaccination
Form of service	Campaigns to public and health professionals	→	Web and freephone	→	GPs, hospitals, clinics, pharmacies, ad hoc services
Type of service	Communications touchpoints	→	Virtual touchpoints	→	Physical touchpoints

Step 3:

Walking in the customer's shoes

Customer experience mapping is a qualitative research technique. It tracks the main steps in a customer's experience and records how customers think, feel and act at each step. There are a variety of ways to gather information about customers and their journeys.

- Recruiting service users to recall – or to anticipate - the journey in focus groups or in individual interviews
- Recruiting service users and knowledgeable service providers and asking them to 'walk through' parts of the journey in real time

The key with any research is to start with clear objectives and the development of relevant questions.

The aim of the research is to identify the following
- Key journey steps
- Actions, feelings, thoughts and reactions
- Touch points – where customers interact with communications and/or services
- Moments of truth– points where customers stop and evaluate

Checklist: the customer experience

Preparation	Running	Capture and output
Who? • Service users • Frontline staff • Policy and strategy • Service managers • People with a vested interest	**What to bring** • Clear description of and evidence supporting the segments chosen • Customer profiles and pen portraits • Relevant research • Existing customer satisfaction measures • Inputs from mapping events	**What to capture** • Plan to capture as much as possible • After – edit, tidy up • Simplify without losing details • Look for output that is visual and arresting with pictures and diagrams • Check back with customers or staff who took part in the mapping events – to validate outputs
How many? • 8-10 people		
Where? • A creative place that is relevant to the journey	**How to run** • Plan an agenda that is realistic • If covering more than one journey or customer group – be realistic	

Example questions

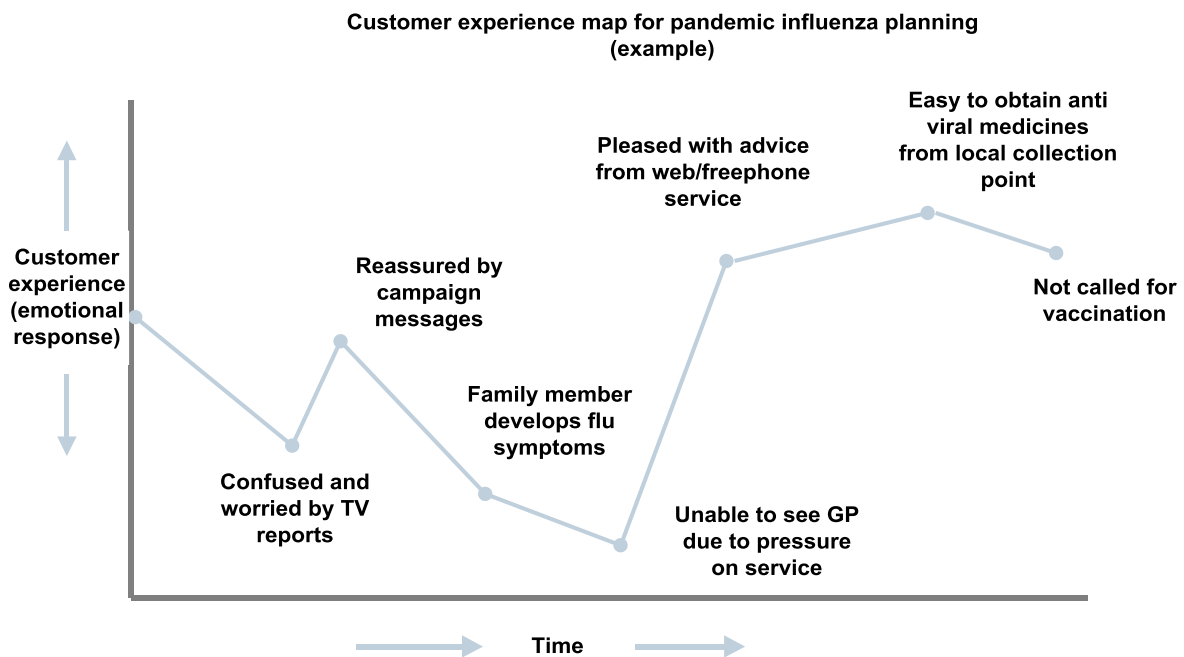| What are the key journey steps?	Learning about the pandemic, prevention, what to do if symptoms suspected and vaccination programme	Prevention behaviours	Contacting web or phone based service	Contacting GP or hospital	Vaccination programme
Actions/ thoughts and feelings at each step	Emotional impact – fear, anxiety, reassurance? What impact did emotional response have in relation to adopting behaviours? Any questions not addressed by official messages?	Are they achievable - consistent? Are others: peers, role models etc - doing these things? Barriers and facilitators to behaviour change?	What was the experience like? Was the service easy to use? Any concerns re confidentiality? Were prevention messages reinforced as well as treatment, advice and information?	Was it clear to service user that there were alternatives? Why did they use these services?	Was it clear who was prioritised? Were risks and benefits clearly explained? Was it clear how to obtain vaccine? Reasons for being/not being vaccinated?
How did they feel at different steps?	Anxious, reassured, personally affected?	Too difficult/ not worth the effort? Or important to follow guidance?	Was this a positive experience or negative? Why? How could it be improved?	Was this a positive experience or negative? Why? How could it be improved?	Was this a positive experience or negative? Why? How could it be improved?

Step 4:

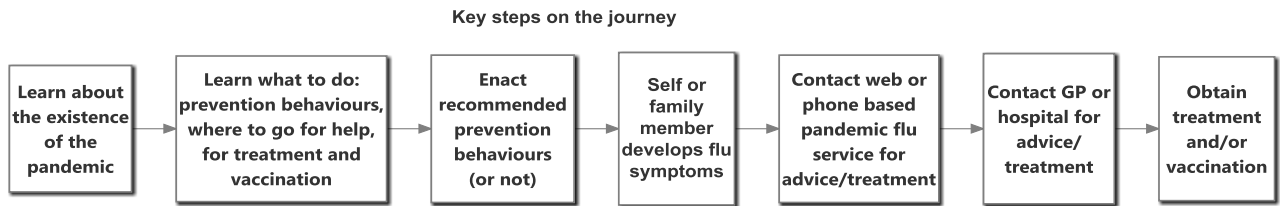**Identify key journey steps and draw the map**

Having collected the evidence, find a means of identifying the important points so that it is easier to see where changes are needed. This step involves arranging the information by chronological order. Identify between 6-10 key steps. Identify channels people use at each step.

Include actions, feelings, thoughts and reactions – taking the customers' point of view for each step, use emotive words, in everyday language

Identify the touch points – for each step identify physical (buildings) human (face to face or telephone or web) and communications

Moments of truth – look at the whole journey, identify moments of truth – key points in the journey where customers pause and evaluate the experience or make a crucial decision.

Customer experience map for pandemic influenza planning
(example)

Easy to obtain anti
viral medicines
from local collection
point

Pleased with advice
from web/freephone
service

Customer
experience
(emotional
response)

Reassured by
campaign
messages

Not called for
vaccination

Family member
develops flu
symptoms

Confused and
worried by TV
reports

Unable to see GP
due to pressure
on service

Time

Key steps on the journey

| Learn about the existence of the pandemic | → | Learn what to do: prevention behaviours, where to go for help, for treatment and vaccination | → | Enact recommended prevention behaviours (or not) | → | Self or family member develops flu symptoms | → | Contact web or phone based pandemic flu service for advice/treatment | → | Contact GP or hospital for advice/ treatment | → | Obtain treatment and/or vaccination |

Possible lessons from customer journey mapping

- Campaign messages do not lead to behaviour changes - review message content, emotional content and tone
- Anti-vaccination campaign dominant on social media. Develop comms strategy to engage on social media
- Web and phone based services cope well with demand. Raise profile of service for future outbreaks
- Certain 'types' of people continue to use physical services despite messages to use web and freephone. Research reasons and consider options

Step 5:

Taking action and measuring success

The aim of customer journey mapping is to use the information to improve the service. Once the research is completed, it is possible to identify and implement solutions that improve the service users' experience.

They fall into the following areas

- Improving process or service design – for example cutting out unnecessary steps or designing new services to meet unmet needs
- Communications planning – to provide clearer or more targeted information
- Staff training – more training or support to key members of staff

In normal circumstances, evaluating the impact of the changes should be done at some point in time when it is reasonable for the changes to have taken effect. With pandemic influenza, true evaluation is only possible following a future outbreak. However, an analysis of the changes is possible through testing of the system.

- The kind of questions to be asked of an evaluation will depend on where the customer journey mapping has been applied. The following are generic areas where system testing may be considered

Complexity: is the path through the system clear to customers? Are there points where they are unclear where to go next? Are they having to do the same thing more than once? Are they clear where responsibility lies at each step of the process? Is poor design causing delays?

Time taken: how long does the whole process take now? How long does each step take? Are people satisfied with the overall timespan and with timespan for individual steps? Where do delays occur?

Accessibility: where and when are people coming into this system? Are they coming at the right points? Once in the system, is signposting clear? Does the customer see consistent branding? Are you offering appropriate channels?

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Suggested further reading on Customer Journey Mapping

HM Government *Customer journey mapping: guide for practitioners*.

http://webarchive.nationalarchives.gov.uk/+/http:/www.cabinetoffice.gov.uk/media/123970/journey_mapping1.pdf

French, Blair-Stevens, McVey and Merritt (eds) *Social marketing and public health: theory and practice.* Oxford University Press. 2010

Hastings G. Social Marketing: why should the devil have all the best tunes? Butterworth-Heinemann. 2007