

Achieving Patient Satisfaction: Your Duck Is Dead !

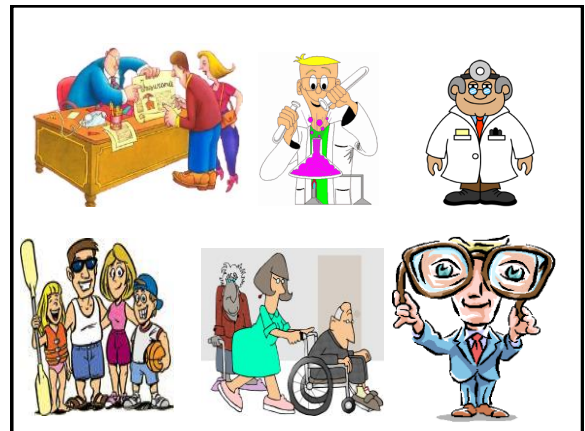


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Customer Service: Who's Your Customer ?

While your clinic may have a strong focus on the **business** of "customer service", you need to ensure that you do not redefine the status of your patients as "customers." You need to remember that medicine is not strictly a *business* but a combination of people, business and medicine.



In the true definition of a business agreement, a "customer" is someone that enters into an **economic** exchange with someone. They *choose* to enter into that transaction and the end result is an **increase** in that businesses' revenue.

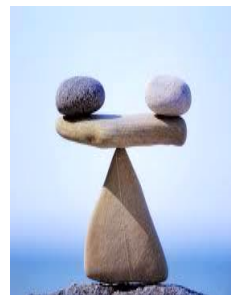
Customer service, can also be described this way, but the relationship in health care can positively, or even negatively, affect the doctor's revenue because of the insurance or payment the patient has or doesn't.



Words That Blur The "Goal" of Good Patient Relations

1. Patient Encounter
2. Customer Service
3. Achieving Goals & Benchmarks
4. Scope of the Mission

Customer service does not translate well into the world of medicine because there are major differences between "patients" and "customers".



Differences Between Customer Service and Patient Care

The doctor/nurse/tech has an obligation to their patient to care for them even after they have terminated the relationship. If they fail to do so, they can be sued for



abandonment. This obligation outweighs any transgressions the patient did, i.e. delinquent accounts, abuse of staff etc. There also is an emotional bond with the patients that will cause us to care for them even if we lose money by seeing them.



System Failures

1. Phone Queues
2. Lining Up To Register
3. Cattle mentality



- Penalties if you are late for your appointment
- Multiple Clinic Cancellations and Reschedules
- Hoops
- Playing the Game !



Ways Patients Let Us Know They Are Unhappy...

The "Hit & Run" Phone Call

This is a usually a strongly vented often threat filled rant to **sue** the clinic for a myriad of reasons: because their glasses are making their nose red or they waited too long to see the doctor and now they want you to reimburse their hourly wage they lost

- Refusal to pay the bill or better yet....pay the co-pay with pennies

'SHOW ME THE MONEY'



- Threats to go to another doctor ... you usually don't know this until you receive their request for records
- Sending you a complaint letter by certified mail.
- Returning your clinic survey ripped up in the envelope !



- Threats to publish your name, and their complaint, in:

- *Facebook
- *Better Business Bureau
- *Angie's List



What Is It That Patient's Want ?

1. An exam focused on their needs...

Patient exams are focused on the **doctor's** needs! The last time the patient was here, the doctor wrote their "orders" - or "wish" list on the patient's chart note. This is designed to enable them to efficiently see the patient the next time they are in clinic and to appropriately follow the patient's disease.



Example: The patient has OHTN so the doctor wrote: 6 months VA, TA, HVF.

The patient wants a glasses check because the dog ate the glasses. But the appointment time doesn't "allow" for a refraction.



Beware of the technician that will follow the doctor's orders to the tee and "stay on track" by NOT doing the refraction.



For the patient's convenience - they will bring them back for the refraction any time the patient chooses...even if they have to leave work again to do it.

2. Someone to talk to that cares!

With the emergence of EMR, most doctors, and their staff, have their noses firmly planted in the computer and rarely have time to look at the patient. *And* when they do, they do it through the slit lamp.



You have the time to care !! I had an elderly lady who was on a fixed income and food stamps. She used food stamps.



She would come in for her appointment ...I always offered her an elbow to help her down the hall, and I always asked about her cat, her grandchildren and complimented her hat. One Christmas, she came in with a small tin foil pan of home made fudge. "I remembered you were from out East and they always use walnuts in their baking...so I put some in for you !"

3. Address the issues: Ex: if it is a concern regarding billing or co-pays, get someone working on the problem while you do their exam. We need to lose the "it's not my job" mentality and remember what the "job" is... the job is the patient !





4. Alert the doctor regarding the patient's concerns.

Your technicians are spending an average of 20 - 30 minutes with each patient. They see, hear and observe "things" about the patient's demeanor, their presentation, whether their responses to simple questions are appropriate or off the beam. They are the voice for the patient. Encourage them to speak up.



5. Talk to them!

Patient's will often express their fears, concerns or anger over their disease. Often, they need some additional education about what is going on with their eyes.

I once had a patient tell me she was sad because she had finally decided to put her cat down because her neighbor informed her that her cat gave her glaucoma!

6. Don't make promises you can't/won't keep!

This gets done for a number of reasons...move them along through the system, get them to stop yelling or pushing you for an answer you don't have, or a myriad of other reasons. It's called **passing the buck**. The patient gets really mad when they realize it. The next person is going to get it!



7. How can he charge me 250.00 when he only spent 4 minutes with me?

The old adage "quality versus quantity" doesn't work here! They want the doctor to see them, talk with them, and spend a little time with them. They want their moneys worth!



"A survey performed by Kaiser found that 8 in 10 people want their health care provider to listen to them, but just 6 in 10 reported that it actually happens, and fewer than 4 in 10 say their provider clearly explains the latest medical evidence. Additionally, less than half of people surveyed reported that their provider asks about their goals and concerns for their health and health care"

"Doctors take note: People want — and deserve — meaningful engagement in conversations about their care, and they value it when rating their experience of care," said contributor John Santa, MD, director of the Consumer Reports Health Ratings Center. "They do not want their practitioner to make decisions for them or offer only some of the options." KaiserPermanente.com 2012

8. Keep the technicians from "scatter

focusing"... this occurs when the technician does everything at 70% because they are "so busy" and need to keep moving.

This can occur when they are performing tasks they really don't want to do (complete after complete after complete). You will start to see parts of the exam missing or the hated "copying" forward of information.



They need to be reminded to focus on that **ONE patient**, do the exam the doctor wants and the patient wants, and do a technically complete exam. Then go get the next patient and do it again. Focus on one patient at a time!



Technicians will use your own words against you for performing sloppy work! When they are being urged to stop carrying information forward, focus on the patient they have and keep moving (less chit chatting between patients)...



they will tell you they are **too busy** to do on demand refractions or add on fields - even though they know the patient needs it for the doctor to do the best exam!



This means they have no time to:

- Neutralize the glasses prior to a refraction (they copy forward)
- Check for medicine co-pays
- Check the pharmacy address so the doctor sends it to the right place (they copy forward)
- Do a strong history (this helps them avoid talking to the patient)
- They read the doctors last note!



Try This !

Next time you know someone is doing 70% exams...when they come out of the room and tell you how busy they are, as they are putting the chart in the doctor's pile, ask them : what color were their eyes?!



Clinic Is Too Busy

There are doctors that can create "calm" out of "chaos"... although they are often the reason for the chaos! These are the doctors that see high volumes of patients, patients have long wait times, but the doctor finds a way to make each patient feel special...so there is usually minimal complaints from the patients.



Keys To Good Care/Service

Patients want good medical care - and sometimes their description of what that is contains things that are not medical in nature: sympathy, empathy, paying attention and a confidante. But remember - no matter how nice a doctor or technician is, a patient will not feel good about their experience if they are misdiagnosed or not given good medical advice.

This includes: carefully examining and reviewing the chart, double checking prescriptions and addresses, listening to their concerns and explaining upcoming procedures.



Get the Bill Right !

Medical care is expensive, and billing processes (insurance, co-pays) are confusing to patients. Your office should make sure the patient knows upfront about what is covered and what is not covered in an exam (refractions, testing) and provide patients with invoices outlining the services they've received and the costs of these services. There should also be a gentle manner for the office and the patient if there is a dispute over the bill/exam.

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"...if you have already sent us your payment, please accept our apology for the death threat and warm wishes for the holiday season."

Watch The Information Part of It

Privacy is **mandated** by federal and local laws. You need to make sure that your office is up to date on HIPAA and the regulations that are in place to prevent any medical information being given out without the patient's knowledge. You need to always take the extra step to ensure that the patient's privacy is protected.



This includes not giving medical information to "friends" or family members without the patient's permission! Or *implied* permission (since they always come with the patient to their appointments, the patient is ok with them getting information...NO) And, having an area where the patient can ask medical or insurance questions out of the main area. You must ensure that all records are not left out where someone else can see them and that all computers are secured.



HIPAA
Health Insurance Portability
and Accountability Act

Professional, Patient, Courteous Staff

Staff should be friendly, courteous and respectful, and should help answer questions within their scope of training.

Patients are often anxious about going to any doctor appointment. They often have multiple questions that need answers.

When patients have approachable access to their doctor, they're more likely to be satisfied with their health care *and* they are also more likely to take *part* in their care (keeping their appointments, being compliant with their medications).



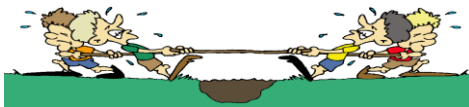
Remember when you threw a shoe at me and I fell somewhere behind the bed?



I remember too.

Patients Want The Same Things We Want - Just In Reverse....

We want the patient to be involved in their care (compliance) - they want information about their disease and will seek it on the Internet or from friends.



We want them to come to their appointment - they want us to stop rescheduling them all the time

We want them to ask questions but we want them to do it quickly - they want us to sit and answer the list they brought in.

We want them to allow us to examine them in a timely fashion so we can keep the schedule moving - they want more than (4) minutes in the exam chair after waiting 2 ½ hours to see the doctor.



We want them to care about their health - they want us to care about them.

We want them to be honest with their disease and symptoms - they want us to give them answers we often don't have about their health.

We want them to pay for services provided - and they want to understand why their insurance won't cover something we say is so important.



We want their endorsement and referrals - they want to "advertise" the care they received on Facebook and the Internet when they haven't had a good experience.

We want them back... and if we work hard enough - they will come back ...

Come back soon!

Your Duck Is Dead

A woman brought a very limp duck into her Veterinarian's office.

She laid her pet on the table. The Vet pulled out his stethoscope and listened to the bird's chest.

After a moment or two, the Vet shook his head and sadly said, "I'm sorry, your duck, Cuddles, has passed away."



The distressed woman wailed, "Are you sure?"

"Yes, I am sure. Your duck is dead," replied the vet..

"How can you be so sure?" she protested. "I mean you haven't done any testing on him or anything. He might just be in a coma or something."

The vet rolled his eyes, turned around and left the room.



He returned a few minutes later with a Labrador Retriever. As the woman looked on in amazement, the dog stood on his hind legs, put his front paws on the examination table and sniffed the duck from top to bottom. He then looked up at the vet with sad eyes and shook his head.

The vet patted the dog on the head and took it out of the room.



A few minutes later the Vet returned with a cat. The cat jumped on the table and also delicately sniffed the bird from head to foot. The cat sat back on its haunches, shook its head, meowed softly and strolled out of the room.

The vet looked at the woman and said, "I'm sorry, but as I said, this is most definitely, 100% certifiably, a dead duck."



The vet turned to his computer terminal, hit a few keys and produced a bill, which he handed to the woman.

The duck's owner, still in shock, took the bill. "\$150!" she cried, "\$150 just to tell me my duck is dead!"

The vet shrugged, "I'm sorry. If you had just taken my word for it, the bill would have been \$20, but with the Lab Report and the Cat Scan, it's now \$150."



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