



Seven Reasons You Are Losing Patients to the Competition

These solutions will help retain patients

BY MARLENE CHISM

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In your perfect world, your practice operates seamlessly. The processes work together to provide a superior patient experience. Team members work together consciously and competently. Referrals come through word of mouth, and when a repeat procedure is necessary or desired, your patients return. The gap between the perfect world and reality is often miles apart, however: you lose patients to the competition, feedback is either nonexistent or negative, and your referral rate and return visits are low to average.

Unraveling the reasons for lost clients can be daunting. Is it the people, the process, or the product? Even a minor problem in people, process, or product can contribute to lost clients, especially if your offerings include elective procedures or services that are out of network.

From my research, observation, and consulting with healthcare organizations, I offer these seven reasons you are losing patients, referrals, and recurring revenues. This article explores what you can do in addition to increasing awareness through iden-

tifying the problem to course-correct in the areas of people, process, and product.

Problem 1: Inaccessibility

Small offices often struggle with getting back to patients, setting appointments, and general scheduling issues. Julie got the answering machine every single time she tried to schedule an appointment. Returned calls were left on Julie's answering machine. The phone tag was exhausting.

Julie could never be sure when the doctor would call back, and she often worried she would run out of her prescription medication. Getting an appointment or a returned call became so difficult Julie took her prescription to another physician who was happy to fill it.

Solution

Good processes can prevent these types of patient satisfaction issues with intentional planning. Set up times in advance to let patients know when you return calls. For example, calls are returned Tuesday through Thursday from 2:00 to 5:00 pm. Block out time, or use down-time between patient visits to make return calls. If you must leave a message on the patient's answering machine, let them know a specific time they can call back, so you don't play phone

tag. Give them two dates as an option for a scheduled appointment and ask them to call back only to confirm one of the dates.

Another possible solution is to use an online scheduling platform such as Time-Trade. You set the parameters of when patients can schedule appointments, and they take the initiative to schedule online. In short, patients will continue to come back if they know the rules and are clear about what you expect from them regarding setting appointments and returning calls.

Problem 2: Unconscious Conversations

Most physicians and clinicians have never been formally trained in customer service or strategic communication skills. Their client conversations, therefore, are misaligned with the mission of their organization. In an effort to build the relationship, some professionals cross boundaries and try to become too friendly with the patient.

Let me share a personal example. I chose a female doctor who specialized in hormone replacement therapy. She knew her stuff. In fact, she traveled the country lecturing on her research.

On my first visit, she proudly explained why she was an out-of-

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network provider: she wanted to spend more time with patients. While she did give me a full hour, at least 45 minutes of the hour were spent talking about her divorce, her ex-husband, her legal expenses, and how often she had to travel. I anticipated each visit with anxiety and dread.

Even though I got the results I was seeking, she spent my time talking about her problems. I tried on more than one occasion to let her know that I needed to get in and out in 15 minutes, but she continued to be attached to “giving each patient an hour.” I was more than happy to take my business to another physician.

Solution

The conversation needs to be about the patient. Train your team to know the difference between private and professional conversations. Make sure your team understands this point: your patient is not your best friend and should not be used as a therapist. Look at your processes and don’t confuse quantity with quality. Just because you have the flexibility to allot 45 minutes to an hour doesn’t mean you have to. If the appointment is finished, use the time to call back all those other patients who are having a difficult time reaching your office.

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Problem 3: Defensiveness

When you, your nurse, or another clinician drops the ball, disappoints a patient, or makes a mistake, there must be a process in place to keep the patient relationship on track. When a patient complains about a service, the tendency is to become defensive or to offer reasons why something didn’t go as planned. Making an excuse or offering up explanations in self-defense is the worst customer service mistake, whether you are the receptionist, the nurse, or the doctor. While doing some “secret shopping,” I overheard a receptionist (who just happened to be the physician’s daughter) tell a patient, “Well, I’m sorry we didn’t get back to you, but we were on our one and only family vacation of the year.” Another variation is, “I’m sorry I didn’t get you called back after your procedure, but I was out of town attending a medical convention.”

Solution

If there is an emergency that caused you or an associate to drop the ball, bring up that issue before the patient brings it to your attention. Then apologize profusely. If, however, the patient comes to you first with the problem, dropped ball, or disappointment, your first step is to listen and then acknowledge the patient’s disappointment. Teach your team members not to share details about why they messed up, for example, the family vacation, medical conference, or “I just forgot.” The patient doesn’t care about the family vacation or the conference someone had to attend.

Simply acknowledge the patient’s feelings and say something like, “I would be angry too if that had happened to me.” Or “That really wasn’t fair to you.” Then offer some small gesture to show that you care, perhaps a free product, a gift card for coffee at Starbucks, or some gesture to show that they matter to you. Bear in mind that a gesture that costs \$10 to \$50 may keep your patient returning and referring, generating thousands of dollars of recurring revenue each year. You’ve heard the saying, “People don’t care how much you know until they know how much you care.” To make sure your patients feel heard, you must acknowledge their inconvenience.

Problem 4: Surprises

Giving patients a feeling of security means providing the education and information to help them feel certain of what to expect. Unpleasant surprises come in all forms: for example, the pain was worse than imagined, or the recovery time is three weeks instead of three days. Stephanie was told she would feel no more pain than that of a sunburn when she signed on for skin resurfacing via laser. After the treatment, Stephanie felt nauseated and that her face was on fire. The nurse came to the recovery room and suggested that Stephanie go home and use some non-aspirin pain reliever and mix up a solution of white vinegar with saline solution to relieve the itching and swelling.

The problem was that Stephanie had none of these items at home, and she felt too sick to stop off at the

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store after the treatment. Before leaving, Stephanie was told she would need to purchase an additional \$100 skincare product to protect and moisturize her skin after treatment. Stephanie hadn't expected the additional expense, and she wondered if the laser clinic was just trying to increase its product sales.

Solution

The solutions to these kinds of problems are multifaceted. The first part of the solution is to stop overselling a procedure. When your technicians are excited about the results, it's easy to downplay the pain or the recovery period. Rather than justifying your position about the level of pain a patient should feel, plan for the worst to make sure those who are more sensitive receive adequate pain management. Next, set appropriate expectations by making sure your patient has a handout or a text message about the over-the-counter supplies he or she will need to have on hand a few days before the procedure.

Another possible solution is in the packaging. Your practice can go the extra mile and provide all that is needed instead of surprising the patient with requirements to purchase additional products after the fact.

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Problem 5: Distractions

Distractions take your focus away from the patient and disrupt the flow. For example, the patient is in the process of checking in, and in mid-sentence the receptionist diverts his or her attention and answers a ringing phone instead of attending to the patient at hand.

Helena said that every time she took her daughter to the pediatrician, right in the middle of their appointment, a nurse would knock on the door and interrupt the conversation to ask a question unrelated to their appointment. One time the conversation went on for five minutes as the nurse explained a process to the new nurse. There is nothing more frustrating to a patient than to finally get his or her time either at the front desk or with the health-care provider and then get interrupted.

The Solution

Focusing on the patient is tricky at the front desk while the phone is ringing. If you must answer the phone, ask the caller to wait while you finish with the patient. When you are finished with the patient, return to the phone and finish that conversation before ushering in the next patient. Alternate your conversation between the phone and the next patient, maintaining your presence with the one with whom you are speaking. Train your staff members to stop interrupting each other. If you are the one being interrupted, simply take a moment to say to the interrupter, "I can be with you in 10 minutes. Right now, I'm with my patient." This tells the patient that he or she is important. Another option is to create a signal that you need help, and do so in a way that is the least disruptive to the patient's experience of having your undivided attention.

Problem 6: Multitasking

Using technology to communicate with patients can contribute to mistakes that make the patient question your credibility. Kayla was impressed with the technology, expertise, and cutting-edge office decor of the new dentist she went to for Invisalign braces. The dental technician explained to Kayla that she would receive, by e-mail, a 3-D movie representation showing the shifts her teeth would make.

A week later, when Kayla opened her e-mail, the salutation read, "Hello Ryan, we are so pleased you have decided to invest in Invisalign." Kayla e-mailed back saying, "I'm excited too, although I'm not Ryan." The technician emailed back and said, "Oops, I was multitasking and got caught."

Solution

Mistakes like this are a gentle reminder to stop multitasking and start focusing. A general rule of thumb is that when you are working with people, or when your work requires detail and accuracy, avoid multitasking. Make it a point to work on only one e-mail at a time. If you use template e-mails, leave the name out of the template so that the worst mistake you will make is to not use a name

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at all. If patients see too many of this type of mistake, they may wonder if you pay attention to important details that affect their health, or they may worry that their privacy is at risk.

Problem 7: Unfiltered Emotions

Working with the public is challenging enough. Add to that the layers of working in the dynamically changing world of medicine, managing patient expectations, minimizing disappointments, and working with a diverse team and you have all the right components for drama. The problem occurs when team members share workplace drama with patients.

Jamie the esthetician didn't get along with the new office manager Kelly. While Jamie was giving a laser treatment to her favorite patient, she spilled the beans about the ongoing workplace drama between herself

and Kelly. Jamie did not know that her patient knew Kelly. Busted!

Solution

Small talk about the weather and local events is great for conversation starters, but the majority of the conversation should be about the patient's health, interests, and concerns. Sharing office gossip or repeating details about arguments, disagreements, and misunderstandings between the team members should be off limits, as should conversations about politics and religion.

Make it clear to the staff that these behaviors are subject to disciplinary action and even dismissal. Train your professionals to take charge of the conversations and guide the conversation to the patient's health and well-being.

Patients who choose elective procedures will leave your practice if their experience is anything less than favorable, even if they get the re-

sults they were seeking. It is up to the office manager to create the right environment and engagement from the staff to ensure sustainability. The first key is awareness. You can't change what you don't acknowledge.

Look at your people, process, and product through the patient's point of view. Are you easily accessible? Do you take responsibility for cleaning up mistakes? Are conversations about the patient? Are you focused and present? As the owner, do you invest in your people, giving them the skills, knowledge, and resources they need to help your practice thrive? **PM**



Marlene Chism is a consultant, professional speaker, and author of *Stop Workplace Drama* (Wiley 2011) and *No-Drama Leadership* (Bibliomotion 2015); phone: 888-434-9085; e-mail: marlene@marlenechism.com.