

Patients at the Center of Your Universe

Physicians are best served when the patients come first.

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How many doctors does it take to change a light bulb? (Just one—he simply grasps it firmly and waits for the whole universe to revolve around him.)

It's just a joke, of course, but we who work in practice management understand the underlying truth that makes it so funny. We've all had to deal with at least one doctor who behaved as if he or she were the center of the proverbial universe.

Now don't misinterpret these observations as disrespect. Physicians are among our favorite people, and you don't have to be a doctor to be destructively self-absorbed. The medical profession doesn't have a corner on the ego market.

Human nature includes an almost inexorable drive for self-preservation. Our survival instinct underlies the desire to see our needs met. That's why it feels so good when we receive excellent customer service. And that's why customers respond so well

commitment and convince your patients that you always want what's best for them. When what they want conflicts with what you know is best, you face the additional challenge of correcting their flawed thinking. You won't always succeed in changing

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when they recognize that a business considers their needs and desires as priority number one.

Keeping Patients at the Center

When we talk about a "patient-centered" practice, we're talking about an organization-wide commitment to putting patients' needs and desires first in every strategic, financial, operational, and clinical decision.

That means, of course, doing everything you can to demonstrate that

a patient's mind, but how you handle this process will also reveal your priorities. There's a big difference between compassionate explanations and authoritarian decrees. The former approach builds a patient's self-esteem with constructive listening, while the latter can belittle a patient by dismissing his or her opinions and concerns as "ignorance."

Better-performing practices consistently "wow" their patients by

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meeting their needs and exceeding their expectations. Experts in patient satisfaction have identified six aspects of medical care in which patients often voice concerns. Rand Corporation's health division has studied patient satisfaction surveys extensively and has developed questionnaires that ask questions about all six categories:¹

- Technical quality;
- Interpersonal manner;
- Communication;
- Financial concerns;
- Time spent with the doctor; and
- Accessibility of care.

Your practice faces “moments of truth” in each of these categories—points in your processes wherein you have opportunities to demonstrate that it really is all about the patient. Let's take a look at each of these medical-care aspects.

Technical Quality

When patients visit your practice, do they think you have up-to-date technology, furniture, and equipment? Or do they feel as if they've been helicoptered into a M*A*S*H unit with aging or inadequate facilities where they can be patched up until they can get to a better facility?

Do they wonder whether your staffers are fully trained in the technical skills needed to provide excellent care? Do they wonder about the doctors? Do you provide them with a smooth-working phone system, an attractive and practical website, and computerized health records? Do your exam tables, office scales, or x-ray equipment look like exhibits from a medical-history museum?

Interpersonal Manner

When patients call your office, what does the first voice they hear sound like? Even the warmest, most cheerful recording brings disappointment to a caller who just wants to talk to a real, live human being. If you provide a human, does he or she sound like a harried switchboard operator or a cordial host or hostess? Do patients feel as if they've interrupted something important when

they approach the front desk, or is the receptionist's attention focused clearly on them? Do nurses or assistants rush patients back for triage and vitals, or do they conscientiously reach out to them with empathy? Do patients feel “naked and vulnerable,” or protected and dignified through all the processes involved in an office encounter at your place? Do they feel as if they've been taken seriously? Is anyone listening?

Communication

Even if your staff members are listening to patients, do they know how to demonstrate it? Do the pa-

that it leaves patients with the impression that there was plenty of time for each of them? Does the doctor make this “gift” evident by how strongly and obviously s/he cares about people to be disciplined to stay on track and on time?

Accessibility

What does your office schedule say about how you value your patients' time? If physicians believe that their time is somehow more valuable than that of their patients, the appointment roster will be designed for the doctors' convenience. Overbooking the office to minimize

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tients receive feedback that lets them know they are being heard? How effectively do you communicate medical information? Office policies and procedures? Test results? Treatment options and recommendations? Financial obligations and resources?

How promptly and effectively do you and your staff members handle phone messages from patients? Have you opened all the channels you can—for example, can patients use the Internet to communicate with you?

Finances

Do patients feel like a trip to your office threatens their financial well-being? Do they think your staff members are insensitive and hard-nosed about collecting their balances? Or do they sense that your employees are their advocates, trying to help them find a solution that will help them satisfy their obligations?

Doctor Time

When patients look at their bills, do they feel they got their fair share of the doctor's time and attention? Are they consistently pleased with the “amount of time spent” in patient encounters? Further, does the doctor almost never run overtime in the office schedule? Is the doctor so attentive and patient-focused in the exam room

“dead” time eventually leads to patients wondering why a 30-minute doctor appointment will necessarily shoot an entire morning and cost lost wages or used-up personal time.

How many weeks must a patient wait to get an appointment? Seeing a solidly packed appointment book gives a doctor a certain sense of security, but it discourages patients who feel ill or experience pain.

To Take It a Step Further

Top performers go beyond developing a patient-centered practice. They actually maintain a variety of “centers,” depending on the task or process at hand. Building on the time-honored tradition of “the customer is always right,” the smartest practices recognize there are more “customers” than the patients they serve. As they serve each of them, they design their processes to say clearly, “You're ‘Number One’ with us!”

Consider these other customers, and analyze your practice through their eyes. (Better yet, design satisfaction surveys for each group, and get their honest feedback.):

- Referring doctors (and other referral sources): The further removed from primary medical care your specialty is, the more you rely on a loyal

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referral base for your very livelihood. How do your referring doctors relate to you? Can they count on quick and thorough responses? Do they feel as if you're a collaborator or some sort of clinical "superior"? Do they know what's going on with the patients they send your way? Do they know how grateful you are to them for selecting your practice?

- Parents and family members: Family members play a very important role in patient healthcare encounters. Do you acknowledge family members and include them (according to patients' desires and authorization) in critical decision-making and reporting?

- Local businesses and employers: Even if you don't serve the occupational health market directly, your local employers are part of the decision-making process that nets you volume. Minimally, the HR

departments at your area's major employers don't want to listen to complaints from their workers about physicians empanelled by their health plan.

Everyone Is "Number One"

You can expand this list for your practice to include various constituents. Smart administrators recognize that their practice physicians make up a primary customer for the services they provide. But often we have to remind them that at the end of day, the physicians are best served when the patients come first.

Treating employees like valued customers can pay off, too. Showing that you care about what's important to them, and letting them know you appreciate them and their excellent work, will encourage employees to turn in their best performances. Treating vendors and other business associates with respect and sensitiv-

ity to their concerns will yield good results, too.

Building and maintaining good relationships (both business and personal) boils down to understanding basic human nature—the tendency to "look out for number one." Even one of the most famous human-relationship directives says, "Love thy neighbor as thyself." **PM**

Reference

¹ Rand Corporation. Patient Satisfaction Questionnaire from Rand Health; www.rand.org/health/surveys_tools/psq.html.



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