CREATING AN EXCELLENT PATIENT EXPERIENCE

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Course Objectives

- Recognize that how patients evaluate their urgent care experiences varies depending on the relative importance they place on various service attributes.
- Utilize patient expectations in defining service delivery standards and appreciate the role of “tangibles,” such as the physical environment, in shaping patient perceptions of quality.
- Distinguish common causes of patient dissatisfaction in urgent care centers and develop measures and survey techniques to assess and monitor those causes.
- Explain the process for resolving patient dissatisfaction that includes active listening, acknowledgement, and follow-through communication.
- Understand the interaction of formal training, culture, and incentive programs in empowering staff to create positive patient experiences and to implement corrective action when patient dissatisfaction occurs.
Value of Positive Patient Experiences

- Urgent care is in the “patient satisfaction” business—in consumer eyes comparable to retailers, restaurants, banks and other service providers.
- Long-term success requires capturing repeat business and generating positive word of mouth.
- Patients evaluate the quality of their urgent care visit based on clinical outcomes and their feelings about the experience.
- Patients who don’t like the experience provided, don’t value it, or don’t think it meets their needs or expectations won’t come back.
Patients with negative experiences will tell others, complain to external agencies, and switch to competitors.

Internet social media has accelerated the diffusion of good and bad experiences.

Reach has expanded from a handful of “real” friends to potentially thousands of “virtual” friends.
Fantastic service organizations have “full-time” and “part-time” marketers.

“Part time marketers” include retail clerks, bank tellers, airline ticket agents, and appliance repairmen.

Everyone should look at how everything in the organization impacts the customer.

A “moment of truth” is any instance of contact or interaction between a customer and a firm.
'Urgent Care’…that’s a joke. I’m in pain, I’ve been waiting for an hour, and the staff is just hanging around talking.
When asked the cause of long wait times, “companies don’t care about my time” was provided three times as often as responses related to technology and process.
Reasons for Patient Dissatisfaction cont’d.

I asked for a z-pak; she said it was a virus and I’d just have to get over it. I can’t afford any more time off work. What a waste of a co-pay!
Why is your collections agency harassing me? You took my insurance. I owe you nothing...
I worked all day to pay his fee and he couldn’t take five minutes for my daughter...
Customer Service: Not for the Faint of Heart

- Patients don’t feel good—they’re sick, anxious, or in pain.
- Patients did not expect or desire to spend their money on urgent care.
- There are better things patients need to be/would rather be doing with their time.
When patients are rude, unreasonable... 

- People in “fighting mode” want to bait you into a fight.
- Emotional people are looking for an emotional response—don’t give in!
- Remain professional, objective and kind—it will disarm them and protect you.
- People know when they’re being “jerks”—they’ll usually walk away realizing their behavior was wrong.
When patients are rude, unreasonable...

- Patients will make disparaging remarks but their words should never be taken personally.
- This is about a situation—it’s not about you and it’s not about them.
- People cannot make you feel anything—only you determine how you feel.
- People respond to our reactions to them—if you react defensively, they’ll respond aggressively.
When patients are rude, unreasonable...

- Find points to agree with the patient—acknowledge how they feel (you don’t have to share their feelings):
  - 90 minutes is a long time to wait…
  - The lab should have had the doctor’s orders when you arrived…
  - $150 is a lot of money…

- Acknowledging what is wrong disarms the patient—it takes the “sting” out of the conflict.

- Interact with the patient to resolve the situation. Ask the patient what can be done to bring about satisfaction.
Avoid knee-jerk reactions. Take a mental pause and determine how you will react.

I think we’ve gone as far as we can in this conversation. I need some time to research/reflect upon your concerns. I understand there is more to talk about—can we continue this discussion at such and such time and place?

Follow-through on your commitments.
Be Empathetic, But Never “Fake” Empathy

- Nothing puts off patients more than a big phony.
- Statements like “I understand how you feel…” must be sincere.
- If you can’t be empathetic, just remain professional and neutral.
- Know the rules—what is and is not possible—don’t overpromise and under-deliver.
- Avoid negative, binding or absolute statements like “can’t,” “have to,” or “the policy states…”
No matter how rough it gets, remember...

- I'm rubber, you're glue, your words bounce off me and stick to you.
- Sticks and stones may break my bones but words will never hurt me.
- I know you are...but what am I?
If patient needs are violated, they won’t return.

- **Security**: Need to feel free from (unthreatened by) physical, psychological, or financial harm (transactions must be predictable).

- **Esteem**: Need to be treated as a unique and important individual who’s in control (acknowledge the patients’ perspective and rights, provide relevant information).

- **Justice**: Need to be treated fairly (in terms of financial and labor costs, policies/procedures, processes/systems and social interactions).
More than anything, patients expect to be treated fairly.

Benefits received relative to the costs paid or burdens endured (value delivered).

Steps a person has to go through to complete a transaction (hassle, fairness, flexibility of systems, rules and procedures).

Tone used by employees (bedside manner).
Patient Expectations Are The Basis for Performance Standards

- When patient expectations are met, they are neither excited nor disappointed (they’re satisfied).
- When there are gaps between what’s expected and what’s delivered, the result is delight or frustration.
- Patient “zone of tolerance” varies greatly depending on what service attributes are important to the patient.
Five Attributes of Service Quality

- **Reliability**: Ability to perform service dependably and accurately (mastering the fundamentals).
- **Assurance**: Knowledge and courtesy of employees and their ability to convey trust and confidence.
- **Empathy**: The caring, individualized attention provided to customers.
- **Tangibles**: Appearance of physical facilities, equipment, personnel and marketing materials.
- **Responsiveness**: Willingness to help patients and provide prompt service.
Zones of Tolerance Vary by Patient and by Service Attribute

Service Quality Perception

Most Important Attributes:

Low

Expectation of What Service Will Be

Adequate: Minimum Acceptable

Desired: What Patient Expects High

Zone of Tolerance

Least Important Attributes:

Low

Expectation of What Service Will Be

Adequate: Minimum Acceptable

Desired: What Patient Expects High

Zone of Tolerance
## Handling Patient Expectations

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Employee Attitudes Affect Patient Attitudes

- Seek employees with a positive attitude.
- Leading service firms expect employees to smile and project a friendly demeanor.
- Emotional labor of appearing happy, even if you aren’t, is to assume a role—it’s easier to act happy than be happy.
Role of the Care Environment on Patient Attitudes

- When patients lack formal training to evaluate clinical decision making, they look to the **physical environment** for cues.

- Clinical competence is generally assumed so patients focus disproportionately on the tangibles:
  - Décor, aesthetics, and layout of the physical facility.
  - Condition and cleanliness of furnishings, fixtures and equipment.
  - Appearance and dress of providers and staff.
  - Availability of Wi-Fi, current magazines, television programming, children's play areas, coffee or bottled water, etc.
  - Seating arrangement, spacing, and type of seating.
  - Signage and messaging.
  - Restrooms
Focusing on the Tangibles: Environment of Care
Tangibles: Environment of Care, cont’d.
Transforming the Environment of Care
Transforming the Environment of Care, cont’d.
Employee Rewards/Incentives Should be Based on Patient Satisfaction Measures

- If you’re not listening to your patients in an deliberate and intelligent way, you won’t know how to improve service quality.
- Measure performance relative to patient expectations.
- Link patient satisfaction to employee performance appraisals.
- Share “great care” stories and recognize/reinforce examples of “good service” as they occur.
Service Quality Information Sources

- Transactional Surveys
- Mystery Shoppers
- New, Declining and Lost Patient Surveys
- Focus Group Interviews
- Patient Advisory Panels
- Service Reviews
- Patient Complaint, Comment and Inquiry Capture
- Total Market Surveys
- Employee Surveys
- Service Operating Data Capture
The goal is to increase net promoter score by “neutralizing” detractors and “converting” passives.
Culture and Staff Empowerment

- Culture is the summation of what’s important to an organization—why it exists, what it stands for, how it does business, and what differentiates it from competitors.
- Culture guides employee behavior.
- Culture gives meaning and value to work.
- Culture fills the gap between what an employee can be trained to do and what an employee must actually do to meet customer expectations across a variety of situations.
- Culture is supported by formal development programs and reward systems to reinforce positive behaviors.
“The Orange Book is a little book with a big goal: to redefine the patient experience by performing welcoming, respectful, skillful actions—every colleague, every day, every location.”
Our Opportunity…

Research suggests consumers feel health care companies focus too much on their financial bottom lines, rather than a dedication to individual patient care. And they want a better patient experience.

The combination of a retail experience with quality health care is a unique offering.
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