

A Dozen Reasons to Care About Patient Satisfaction

THE TOP-OF-MIND REASON to provide a great patient experience is that it's the right thing to do. Physicians have uniquely intimate relationships with people who are sick, scared, and vulnerable. Being respectful to them should be a no-brainer.

But sometimes it's not, and leaders can be challenged by doctors with low patient satisfaction scores who make statements such as, "I just don't think satisfaction is that important." This chapter arms those leaders with a number of go-to responses.

Certainly, how satisfied or engaged a patient is with her experience is determined by a complex set of factors, including the processes and supporting structure in the healthcare setting. However, interaction with the provider is the key driver, a concept we consider later in the chapter.

In *Practicing Excellence: A Physician's Manual to Exceptional Health Care*, author Stephen Beeson, MD, makes compelling arguments in Chapter 2, "The Case for Service" (Beeson 2006). His rationale got me thinking about the reasons—12 in all—that doctors should care deeply about the patient experience.

CLASSIC REASONS

These have been around forever, or least since medicine entered the modern era 100 years ago.

Reason 1. Bottom Line, Healthcare Really Is About Caring

You may encounter a doctor who says, “We have more important things to worry about than patients being satisfied.” Is she right? No. Stellar clinical skills (one of those “more important things”) aren’t appreciated if the patient doesn’t like his doctor’s brusque questions or rushed exam. His basic expectation, that his doctor cares about him, was not met. His doctor failed, because healthcare really is about caring, and this is the best response to a physician who behaves otherwise.

Let me be direct: If a doctor isn’t appreciated by the vast majority of her patients, she is not a good doctor. After all, “caring” is what the healthcare industry exists to do. It means that the physician *gives a darn*.

It really doesn’t matter if a physician defines care solely as the provision of necessary services to ensure health and welfare or as a feeling of concern or interest, or both. Patients and their families expect both: skillfully provided services by someone who cares about their well-being.

Reason 2. Be Nice, or You’ll Lose Them

How the physician interacts with a patient has a lot to do with whether that physician will have a chance to interact with that patient—or her neighbors, her coworkers, or those who follow her posts on social media—in the future.

Beeson (2006, 11) cites a telling finding from a Harris poll published in the *Wall Street Journal* in 2004:

People place more importance on doctors' interpersonal skills than their medical judgment or experience . . . and doctors' failings in these areas are the overwhelming factor that drives patients to switch doctors.

A decade later, this statement is more true than ever. Take the experience of one of my client groups. Wanting to grow, it tried conducting outreach activities, advertising, joining new managed care networks, and other strategies. None made much of a difference. But when the group began to focus on delivering a great experience for its patients, it soon had a new problem: managing growth.

Volume swelled at this practice because far fewer patients left and more new patients showed up through word-of-mouth referrals, which are accelerated today by social media.

This group's approach can be likened to winning by playing a great defense, and it makes sense. We've all heard the management gurus say that the cost of acquiring a new customer is five to ten times the cost of retaining one. But the concept extends beyond economics. The foundation of patient loyalty is the relationship the patients have with their doctor. Loyal patients don't say, "I'm going to see *the* doctor." They say, "I'm going to see *my* doctor."

Reason 3. Malpractice Risk Drops

Cited over and over again in the literature is the notion that a doctor's relationship with her patients has a high correlation with whether they will sue her for malpractice.

Most catastrophic medical events don't result in lawsuits. In fact, a relatively small number of doctors generate disproportionately

more medical malpractice claims. But those doctors who do tend to have lower patient satisfaction scores.

Doctors who are not sued typically make an effort to partner with their patients, explain options and risks, communicate details, and make sure all questions are answered. In short, these doctors build credibility as skilled and caring people. Patients are less likely to sue individuals they appreciate and respect.

NEWER REASONS

These reasons have emerged more recently and still are in a state of flux. They relate mainly to ways publicly available patient satisfaction survey data are being used to compare healthcare providers.

Reason 4. Public Reporting Is More Metrics Based

Transparency is a beautiful thing, if your scores are good. If they're not, transparency is terrifying.

In the last decade, the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS, also known as the CAHPS Hospital Survey) and its sibling, the Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CG-CAHPS), have empowered comparison shoppers with new sources of information.

Until a few decades ago, the patient experience was measured subjectively. And physicians didn't pay the price for patient dissatisfaction unless it caused significant and protracted word-of-mouth grousing.

No more. Objective, hospital-specific patient satisfaction data are now available for those who seek it. Since 2008, hospitals have been required to post patient satisfaction results with Hospital Compare, a public website maintained by the US Department of

Health and Human Services (www.hospitalcompare.hhs.gov), or face a financial penalty tied to Medicare reimbursement. By 2012, those patient satisfaction results became part of the Centers for Medicare & Medicaid Services' (CMS) value-based purchasing formula that rewards or penalizes hospitals.

And data availability on office-based practices is on its way. Currently, CG-CAHPS is being piloted, just as HCAHPS was a decade ago. Experts predict that CG-CAHPS results will become a factor in physician reimbursement in the near future.

The private sector is following suit, with major insurers including patient satisfaction levels in their reimbursement formulas. Expect most payment systems to include patient satisfaction as a factor in physician reimbursement in the coming years.

Reason 5. Awards Are Worth Winning and Telling Everyone About

Patient satisfaction survey vendors are beginning to wield their influence by giving awards to the highest-scoring organizations. For example, National Research Corporation (NRC 2015) recognizes the nation's top hospitals with its Consumer Choice Awards each year. NRC fields a survey of more than 270,000 households to rate the hospitals in each market. The results are published, and the top-ranking hospitals in each community often promote themselves as award winners.

Imagine a future in which the top medical groups (or, heavens, individual doctors!) in a community are recognized for their scores on private and government-sponsored satisfaction surveys. The award winners would absolutely use that information to promote themselves, leaving the others vulnerable to loss of market share.

Information companies like Healthgrades.com and RateMDs.com don't give awards, per se. But consumers now know that they can

become informed on healthcare services, with just a few mouse clicks revealing past patients' comments on the quality of the doctors they are considering.

Reason 6. Value-Based Purchasing Is Here

When did hospital chief financial officers begin to care about patient satisfaction? When CMS launched its Hospital Value-Based Purchasing program, whereby a percentage of Medicare reimbursements to hospitals are put “at risk” on the basis of their clinical quality and patient satisfaction performance.

Some hospitals now receive more than they otherwise would have. Some get less. Regardless of outcome, all of them notice. Even more compelling is the thought that, for the first time, the financial impact of patient satisfaction performance can be objectively determined, at least to some degree.

It follows that the number of healthcare leaders interested in the causes of good or bad patient satisfaction performance has grown. Hospital administrators want to know how each doctor stacks up on patient satisfaction. Doctors who do an excellent job may be paid a retention bonus. Those who contribute to lower scores—or who refuse to take the issue seriously and try to improve—may be asked to seek employment elsewhere.

Reason 7. Social Media Are Present, and Growing

Never before have patients had the ability to share an unpleasant physician encounter with hundreds of friends, neighbors, and coworkers, and at lightning speed—maybe while they're still in the exam room. A single disparaging Facebook post can be devastating to a physician or practice. Patients visit the doctor when they are discouraged, angry, in pain, confused, and

exhausted. It doesn't take much to push them to make their dissatisfaction known.

FIVE REASONS YOU MAY NOT HAVE CONSIDERED

Reason 8. Patient Compliance Improves

How well patients benefit from a prescribed course of treatment is directly related to how well they follow their doctors' advice. Whether taking their medications as prescribed or rehabbing correctly after a total knee replacement, their choices post-visit or post-discharge affect the clinical outcomes for which physicians are responsible.

Fortunately, doctors can influence how well patients comply. It requires demonstrating thoughtful communication, taking the time to explain clinical thinking, and outlining what could happen if recommendations aren't followed.

Taking those steps will build a stronger relationship with patients. They won't want to disappoint their doctor—a caring person whom they trust and respect—by not following instructions.

Reason 9. Power and Influence Are Solidified

Doctors carry enormous clout as highly trained professionals who are in short supply. But doctors who do their jobs in exceptional ways earn the *most* power and influence in their organizations, whether at large hospitals, group practices, or smaller physician offices. They lead by example. Their opinions are sought.

Staff listen to doctors who have high percentile scores or are known for “being great with patients.” These physicians become an even more rarefied commodity than their peers.

Reason 10. Pride and Satisfaction Take Hold

This is a recurring theme among my clients. When they move the needle on their patient satisfaction scores, they're on top of the world. At work, they aren't merely applying their intellect or clinical skill set; they're making a significant impact on the lives of people who need help.

These physicians have the highest degree of satisfaction any professional could have. They respond to people in need and are often even worshipped by them. These doctors are fortunate people.

Reason 11. You Make Your Family Proud

That glow of pride and satisfaction radiates to moms and uncles and other family members:

My son is the best doctor in the world. He is smart as a whip. But he's also a great person who has patients who rave about him. He really makes a difference.

What a great reason, all on its own.

Reason 12. Better Relationships—and Reduced Turnover—Result

Professionals who have great relationships with their customers create a positive workplace—an environment that attracts and retains other energetic, like-minded people. An atmosphere like this cuts down on the cost and upheaval of staff and provider turnover. It also nurtures collaboration—which contributes to personal satisfaction. In other words, the physicians stay happy, and their coworkers do, too.

TAKING THE NEXT STEPS

We've covered why physicians *should* care about patient satisfaction. But what if they still don't? Or what if they do care but aren't sure how to improve their scores? Chapter 3 provides insights that can inspire physicians to make patient satisfaction a priority, gain traction in the process, and move toward high percentile scores.

REFERENCES

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