Make Your Practice the Best It Can Be

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Leading Service Excellence for Univ. of Michigan Health System
Coaching health systems and practices on improving service

I am Co-Director of Service Excellence in the University of Michigan Health System.
I consult with physician practices seeking to improve patient satisfaction.
I will NOT mention any medical products.
In compliance with regulations, I have relationships with:
• Patent Holder – Lattice System Psoriasis Assessment
• Editorial Board – VisualDx.com diagnostic and decision support software
• Consultant – AbbVie; Celgene; Gilead Sciences; GlaxoSmithKline; Medimetriks; Otsuka America Pharmaceutical; Perrigo

Potential Conflicts of Interest

Learning Objectives:
• Recognize how service excellence (customer service) represents quality in medicine and turns a good office into a great one.
• Use techniques for docs, staff to improve office overall
• Implement great service in dermatology offices for doctor, staff, and patient satisfaction.

I slept and dreamt that life was joy.
I awoke and saw that life was service.
I acted and beheld, service was joy.

-- Attributed to Rabindranath Tagore (Nobel Prize Literature 1913)

Service Excellence
• Why is this academic guy teaching this?
• We have:
  – large multi-provider office
  – phototherapy area
  – MOHS surgery area
  – one-provider office
  – cosmetic surgery area
  – offices in the VA
• With our size and number of providers, I’ve seen it all
• We are tops in pt satisfaction >15 yrs straight

Street Cred
• Derm is #1 in Patient Satisfaction Scores
  – All our offices are in top 10
• Patient satisfaction survey
  – 93 How close to ideal
  – 95 Overall satisfaction
  – 98 Willingness to recommend
  – #1 dept in 28 of 28 queries
• Employee engagement survey
  – 90 Willingness to recommend to work there
  – 89 Nurses
  – 88 Clerical

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Patient satisfaction

Important enough for U-M Health System to create Service Excellence Dep’t, which I lead

Coaching health systems and practices on improving service

What: Provide techniques to increase satisfaction.

How: Personal experience and evidence-based reports in clinical literature.

Service excellence (customer service) represents quality in medicine and turns a good office into a great one.

“Research indicates that better patient care experiences are associated with higher levels of adherence to recommended prevention and treatment processes, [and] better clinical outcomes….”

and higher patient QoL

Price, RA et al. Medical Care Research and Review 71:522-554, 2014

Why patient satisfaction is so important…

*it is high quality medicine*

Value and Quality are What the Patient Perceives Them to Be

• The new definition of quality in medicine is the existing meaning of “patient satisfaction”

• Pts infer quality from what they can observe
  • Proxy for quality of care

Patient Perspective of Quality

- Timeliness
- Attitudes of all staff & docs
- Information & explanations
- Body language, physical touch
- Sights, sounds, smells
- Sociability, supplies, smooth operations

- evidence shows that all these factors affect patient's experience of care.


What perception about docs generates the most complaints?

a) My doc has a bad personality
b) My doc is incompetent
c) My doc doesn’t have any open appointments
d) My doc doesn’t spend enough time with me
e) My doc doesn’t listen to me

What correlates with satisfaction with office and with physician

<table>
<thead>
<tr>
<th>Perception</th>
<th>Correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caring attitude/friendly</td>
<td>0.8 to 0.9</td>
</tr>
<tr>
<td>Time spent with physician</td>
<td>0.5 to 0.6</td>
</tr>
<tr>
<td>Waiting time</td>
<td>-0.4</td>
</tr>
</tbody>
</table>

Uhas A et al. Patient 2008; 1:91-96

Service Excellence

- Patient-centric
  - Some think it’s only for pts
- Service Excellence for all
  - Patients
  - Visitors
  - Our staff
  - Families
  - Referring docs
  - Ourselves

Does a Service Excellence program work?

- We love it
- Compliments >> Complaints
- Does not detract from finances, access, research, etc.
  - Requires a continuous focus and drivers
  - NOTE: Shifts culture, not work systems
Service Excellence Programs

- Spending minutes saves hours!
- A few minutes “maintenance” weekly → sustained benefit for over 15 years
  - Fewer complaints to deal with
    - From patients
    - From staff
  - Everyone is working more smoothly together and more gets done

Service Excellence Programs save time!

Why Do We Work on Service?

- For our patients
  - They see quality, value
    - “My pleasure” – has meaning
    - Anticipating needs – Wow factor
    - Service recovery – pts remember/tell others
      bad:good at least 4:1

Business case (in part)

- Retention of great people at all levels
  - Expensive to replace in $ and time
- Staff works at tasks, not service recovery
- Workplace more enticing
- Solve issues, eg, improve revenue flow
- Word-of-mouth advertising – free
- Patients less likely to dispute charges
- Reduced malpractice risk

Reasons for Service Excellence

- If you are in a competitive situation
  - Patients go where treated well
  - We can learn from hospitality industry
- We are all patients now or soon
  - Aren’t we looking for great service ourselves?

Service Excellence

Too touchy-feely for you?

Social science, not hard science

Service Excellence will be the best journey you ever took – for yourself!
Reasons for Service Excellence
For Idealists:
• It’s the right thing to do
• Plus, we’ll all be patients one day!

For Concrete-ists
• Frees up wasted time
• Evidence: SE \(\propto\) to higher CAHPS scores
  – Medicare public website: pt satisfaction scores for individual docs and NPCs

Concerns
• Patients want medical knowledge and skill, not “putting on a show”
  – Does that mean patients want skilful medicine without good service?
  – Studies show 90% of patients judge quality of their medical care on non-medical aspects
  – Service Excellence never advises on the practice of medicine

Service Excellence
• It’s not just being nice
  – That helps
• Opposite: Football team
  – Be aggressive
  – But requires teamwork, consistency
• Service Excellence
  – Requires teamwork
  – Consistency across people, locations

Service Excellence
• Change is constant
  – Big changes, concerns
• We & staff may be troubled
• Yet patients & staff have high expectations
  – Do they want to hear about our troubles?
  – Can’t we give great service regardless?
• Treat pts/staff the way (we) they want to be treated
  – They are + when we are + but – \(\rightarrow\) –
The Michigan Experience    Service Excellence    Charles N. Ellis, MD

Service excellence improves the all-important online reputation.

Selecting a doctor

- Very or somewhat important
  - 85% - Word of mouth (family, friends)
  - 60% - Rating on websites
- Not as high as accepts my insurance and convenient location (95% each)
  - Can’t do much about these
- Website rating importance likely to increase

Online reputation healthcare – Yelp

- Yelp has 135M unique visitors/mo
  - All categories incl healthcare
- 70M looking for new docs every yr
  - 60% using internet for health info, incl doc ratings
- Dermatology second to last in healthcare
  - Derm 3.5, All MDs 3.8
  - Only psychiatry lower
  - Impatience with slow therapies
  - Teenager angst over acne
  - We need great service!

Use your reviews!

- Consistent and repeated critiques can help you!
  - Wait times, can’t park, etc.
  - If frequent, probably true
  - What can you do? Do something!
- Overall ratings matter, too
  - Patient impression of warmth, niceness
    - Top 20% specialists (best reviews) → ½ risk of malpractice claim vs avg
    - Worst reviews (bottom 10%) → 1.5x claims
      - If you are in this group, get a coach

Tips

For improving service without doing any extra work.

Whether you see a patient every 6, 16, or 60 minutes, you’ll find some...

Techniques you should consider adopting:
Office environment

- Physical improvements to reception room (not called the “waiting” room)
  - New layout, silk flowers with seasonal changes
  - Up-to-date magazines (check)
  - Avoid weekly magazines = out-of-date
  - Water dispenser
  - No clock in reception
  - Stress reduction: No TV, calming art & music

Tips

- People interactions >> physical plant
- Plan some phrases
  - For consistent high level service
  - Serving as a guide; not mechanical or phony
- More design from pt point of view
  - Especially scheduling
  - What plan if pt is late?
    - Pt transport issues? What can we do?

Tips

You are “ON STAGE” at all times
- Producer & Director
- Star
- Narrator
- Genius playwright
- Captain on the bridge
- You are “ON STAGE” for everyone; employees are “on stage” for pts

Tips: Set a tone of caring

Check in with your staff
Ask how they are/ how it’s going today

Sets the tone that staff pass on to patients

Tips

Handwashing

Everyone has heard about it

Make a show of it / announce it to pts

Starts the visit with obvious professionalism, know-how, and competence

Tips

- Mindfulness
  - Focus on the moment with purpose and no judging
  - Engage fully in what you’re doing and what is happening
  - See more, hear more
  - Reduces stress, removes other thoughts and concerns
  - Opens heart to compassion – instead of hurry, pushing away, fix-it mentality; what’s next issues
  - Six seconds:
    - Inhale thru nose for 1 sec; out thru mouth 5 sec; then knock on exam room door
Tips: ELATE

- Explain role & activity
- Listen
- Answer & Act
- Thank Everyone

Tips

- Sit down, albeit briefly
  - Spent 7 minutes more than actual
  - Doctors = more compassionate
  - Surveyed pts clearly prefer
  - Increases pt satisfaction
- Neurosurgeon on post-op rounds – time in pt room

<table>
<thead>
<tr>
<th>Actual</th>
<th>Standing</th>
<th>Sitting</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1.3 min</td>
<td>1.0 min</td>
</tr>
<tr>
<td>Perceived</td>
<td>3.4 min</td>
<td>5.1 min</td>
</tr>
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Tips

- Never let them see you sweat
  - Even if you feel rushed, acting flustered or in a hurry may generate a negative opinion
- Ask permission
  - Would it be ok for me to examine you now?
  - Would you like to hear my recommendations now?
- Pause and be thoughtful – even if not needed

Tips

- Use name 3 times
- Be in the moment
- Try not to interrupt – do exam
  - Pts will get story out somehow
  - Patients with poor boundaries for your time
- Pay it forward (manage up): staff → you
  - Great confidence builder!

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Tips

- Explain, esp meds
  - 1 min on spelling, use, and watch for
- Engage pt (esp younger)
  - We could do this or that. Which makes more sense to you?

Tips

- Empathy is a satisfier
  - Docs are analytical; tough to switch to empathic
    - Proven by brain-scan research
- NURSE
  - Name the emotion: You seem...
  - Understand: I can see why you are feeling...
  - Respect: You have done a lot toward...
  - Support: We will work on this together to control it
  - Empathy: 'I wish' we had a cure for this

NURSE acronym adapted from Nguyen TV, Hong J, Prose NS. J Am Acad Dermatol 2013;68:353.e1-8 from Smith RC

Tips

- Information is a satisfier
  - If running late, keep informed
  - If pt waiting in exam room, resident or nurse steps in q 15 min

Tips

- Doctors tell patients many items
  - 30 minutes later, patients only remember 2 things
  - Say the 2 most important things, answer questions, give written info/instructions
    - Available in EHRs, VisualDx.com, AAD brochures, disease charities, etc.
  - Say less, listen more
    "Talk less, smile more": Aaron Burr in Hamilton by Lin-Manuel Miranda

Tips

Your last words to each patient:

Thank you!

- Thanks for coming to see me for this. I will do my best for you.
- Thank you for using your medicine – I knew it would help you.
- Thanks for continuing to work with me on this tough problem – we’ll get to the bottom of it.

Do you measure your patients' satisfaction?

What's measured – moves!
Measuring Satisfaction

• A simple questionnaire will do
  – 3 or 4 questions are enough
    • You want to be able to tally easily
  – Deposit anonymously in a sealed box and/or business reply mail
  – Don’t allow survey to be “gamed”
    • You really want to know

Measuring Satisfaction

• Satisfaction questions
  – Examples:
    • How was your check-in experience?
    • How would you rate our nurses’ courtesy?
    • How would you describe this provider to your friends?
  – Rotate questions from time-to-time
  – Scored as Poor, Fair, Good, Excellent
    • You should tally % Excellent

Measuring Satisfaction

• Companies will do for a fee
  – Press-Ganey
  – AAD

Customer engagement

• Refers to your patients’ commitment to the health care you provide, and to you and your staff
• Characteristics include
  – Patients’ effort to use your services
  – Patients advocating for you
  – Patients recommending you
  – Patients are Loyal to you

Service Excellence tip

NON-PHYSICIAN CLINICIANS
  – Must be part of Service Excellence
  – Pt satisfaction survey may be enlightening

Staff critical to success

• HIRE THE RIGHT PEOPLE!!
  – Can’t emphasize this point enough
• Never, EVER “SETTLE” when hiring
  – Better an open spot than wrong person
• You can teach skills; you can’t teach attitude, compassion, smiling
• Interview process includes our philosophy and Gold Service Card
DERMATOLOGY PHILOSOPHY

- I treat each patient as if I would my own family.
- I pledge to provide the finest personal service.
- I will make all interactions positive and professional.
- I take responsibility for uncompromising cleanliness.
- I take pride and care in my personal appearance.
- I will do whatever it takes to exceed our patients’ expectations within our moral, legal, and University responsibilities.

DERMATOLOGY'S GOLD SERVICE

1. I will smile! (Even when on the phone.)
2. I will give patients a warm and sincere greeting, using their names when possible.
3. I will anticipate and meet patient needs.
4. I will "own" any problem brought to me and provide service recovery.
5. I will return telephone calls promptly, showing the caller that I care.
6. I will identify myself on the phone.
7. I will say "My pleasure" or "I’d be happy to" or "I’d love to" instead of "You’re welcome"
8. "I don’t know" in response to an inquiry is not acceptable. I will let the person know when I’ll give them the answer.
9. I will give patients a warm good-bye and thank you, using their names when possible.

What your staff may be thinking

Don't walk behind me; I may not lead.
Don't walk in front of me; I may not follow.
Just walk beside me and be my friend.

-- Attributed to Albert Camus

Tips

- Tasks vs. jobs
- Staff know what’s wrong & what to do
  - Staff mtg or "retreat":
    Put on wall 5 good, 5 bad service items

Tips

Incentivize your staff
Responding “extremely” or “very effective”

| Praise from manager | 67% |
| Attention from leaders | 63% |
| Cash bonuses | 60% |
| Salary increases | 52% |

Compliment better than bonus

Study over 4 days, 12 hr shift

- A- Control group: No intervention
- B- $ bonus if met productivity threshold: first day only
  - Day 1: ↑10%
  - Days 2,3,4: ↑15%
- C- Pizza party if met productivity threshold: first day only
  - In between
- D- Mid-day texted compliment on work
  - Day 1: ↑10%
  - Days 2,3,4: ↑10%
Tips

• So compliment and thank during the day
• Write a thank-you note every week or month, depending on size of staff
  – Send it to the employee’s home so they can share it with family!

• Compliment in public, criticize in private

Tips: Daily Huddle

• 5 min standing/stand-up meeting
• Information – consistent time and place
• Everyone, every day
• Structured for consistency and ease
• Use open-ended question to collect data
• Real time pulse check
• Info you can take action on
• Balance structure with fun!

Tips: Daily Huddle

AVOID:
• Negativity or venting
• One person to control, dominate or rudely interrupt
• Stopping to catch up late comers; do it after
• Running long

Tips: Daily Huddle

TO KEEP IT FRESH, TRY THESE:
• Everyone says “I’m thankful for…” (practice-related or not)
  – Gratitude → good mood
• Share what worked (or didn’t) yesterday
• Something to look forward to → makes day brighter
  – Holiday, project starting up, nice weather forecast

Coach your staff

When a pt complains → Service Recovery
• Take the HEATT
  – Hear them out
  – Empathize
    • “It sounds like you’re very frustrated”
  – Apologize (blameless)
    • “I am sorry for the inconvenience.”
    • “I am sorry that things are not going as you expected.”
  – Tangible response and Thank you
    • “I will bring your issue to our next staff meeting.”
    • “Thank you for bringing this to my attention.”
    • “Thank you for sharing your concerns with me.”

Maintaining enthusiasm and commitment

• Informal and formal surveys
• Measure performance (wait time, pt satisfaction)
• Must be constantly reinforced & demonstrated by you
• Continuous effort – can’t relax
  – Staff meetings, huddles, performance reviews
• KEEP TALKING ABOUT IT
Maintaining enthusiasm and commitment
- 5 to 10 min of weekly staff meetings
  - Review 1 of the steps of service each time
  - Talk about actual experiences; tell anecdotes
- Do something every year or two
  - Mention at holiday party, have a lunch with door prizes
  - Have a motivational seminar
    - Local coaches, other service or motivational speakers – maybe a pt of yours?
- Performance evaluations
  - Includes doctors in larger practices
  - A factor in raises/compensation

You may seek help
- Local service “stars”
- Hospital affiliations
  - Human Resources people and lectures
- Physician with special interest

Service Excellence
- Patients’ problems
  - Anticipate, anticipate
  - Look for unhappiness
  - Resolve on-the-spot
  - Always say what you CAN do

SERVICE RECOVERY
- Complaints result in action
  - Drop everything
  - Resolve on-the-spot
  - Everyone must do
  - No “handoffs”
- Find out why, fix root cause
  - Love complaints

Summary of action items
- Commitment for Service Excellence
  - Your office mgr also
- NO COMPROMISE IN HIRING program
- Pt sat survey now & after underway
- What you send to patients – up-to-date?

Summary of action items
- Find a focus/motto/mission statement
  - Best service in building/city/county
- Gold Service card w/ kickoff event
  - Announce culture shift; invite speaker
  - Tell stories – mostly success
  - Constantly reinforce; renew again q 1-2 yrs
- Celebrate successes
Service Excellence take-home

- Indicate your interest in SE
- Write a weekly thank-you note
- Staff huddles
- Seek mindfulness
- Sit if you can
- Create your “platinum service standards”
- Hire the right people

Now …

You recognize why: Great service is high quality medicine, improves pt’s adherence & outcomes, and makes a better day.

You have: Techniques to use in your practice.

From Where: Personal experience and evidence-based reports in clinical literature.

A Service Excellence journey
(and it will be a journey)
will be the best trip you ever took for yourself!

And it’s quality medicine!

Making your practice the best it can be

Every interaction
every single day
is a Moment of Truth

Attention to these moments by doctors and staff makes all the difference

It’s all about commitment and continual reinforcement

For more information on Service Excellence, contact:

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