Does Service Excellence Really Matter?

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What is the lasting impression you and your staff leave on patients? Is it one of service excellence? Does it really matter?

Consider the following true scenario: An established patient is seen at her physician’s office for a palpable breast lump undetected on a routine screening mammography. The patient is referred for additional radiological testing. The radiology technician advises the patient that the referring physician will receive the results within a week. Two weeks pass and the patient contacts her physician’s office to ascertain whether results were received. The office receptionist checks the patient’s chart and informs the patient that the results were not received. The patient asks the receptionist if there is anything that can be done to obtain the report for her physician to review, also explaining that in light of her previous history of cancer she is anxious to obtain the results. The receptionist asks, “Well, what is it you’d like me to do about it?”

What did the patient want the receptionist to do about it? The patient just wanted the receptionist to do her job with respect, dignity and compassion. Despite the fact that the patient had high regard for her physician, this encounter had a profound and lasting impression that led her to seek care from another provider.

Healthcare is a service industry, and while it requires the highest levels of skill, knowledge and professionalism, in a business context, you are providing a service. As in other service industry sectors, a customer whose needs are not met is a lost customer. That single lost customer is multiplied when they share their unmet needs with other potential customers. In order to meet their patients’ needs, providers must first understand what those needs are. Based on patient satisfaction surveys, Press Ganey’s 2007 Physician’s Office and Outpatient Pulse Report: Patient Perspectives on American Health Care indicates that patients are, for the most part, satisfied with the quality of service at their physician’s office. However, patients would like to be seen in a timely manner and for staff to be sensitive to their needs. The report also indicates that patients find it difficult to schedule appointments with physicians. It is anticipated that as healthcare continues to improve in general, patient expectations will continue to grow.

Providers’ perceptions of healthcare consist of two distinct aspects: the quality of clinical care and the quality of service. However, as the patient-receptionist encounter indicates, patient perceptions of healthcare are defined in terms of one aspect – service, of which the quality of clinical care provided, is an element. This is evidenced by The Picker/Commonwealth Program for Patient-Centered Care’s study that substantiated the premise that service, as perceived by patients, is an integral part of healthcare.

*Because of the current, broader use of the term in the industry, the term “electronic health records” or “EHRs” will be used in this article to include “electronic medical records” also (please refer to the discussion of the subtle differences between the two in this article in this edition of Risk Review)
that patients contextualize care in terms of service. The patients participating in the study identified service as respect for a patient’s values, preferences and expressed needs. Getting service excellence right is a high priority, since patients are becoming more discerning and are more likely to shop around for care that meets their needs.

At the core of healthcare is the provider-patient relationship. As in most aspects of life, the foundation of a good relationship is mutual respect and trust. Patients expect that you and your staff respect them and can trust you to look out for their best interest. Effective provider-patient communication is the key to managing these expectations. Unmet expectations can result in noncompliance, unanticipated outcomes, cancelled appointments, damage to a provider’s reputation, patient attrition, and lawsuits. Recognizing the importance of quality provider-patient communications (deficits in communication patterns with patients are allegations appearing with regularity in malpractice claims), Princeton now provides training in provider-patient communication. Literature also suggests that should an unanticipated outcome or medical error occur, the strength of a respecting, trusting provider-patient relationship based on effective communication can help restore a patient’s trust following disappointment in the actual outcome. To assist providers in communication following an unanticipated outcome or medical error, Princeton also provides training in communication with the patient and/or family following an event:

http://www.riskreviewonline.com/RiskReviewOnline/CMECDETraining/.

**Reason behind the less-than-excellent service**

So if service excellence is so important in healthcare, why is it that a customer receives a smile with their cheeseburger at the fast food drive-thru window but does not receive the same courtesy as a patient at the front-office receptionist’s window? The first reason is that fast food restaurants have a mission, vision, and goal that leadership supports and is ingrained throughout the organization. The second reason is that fast food restaurants design tasks to focus on distinct processes. The tasks at the drive-thru window process are to greet, take and complete orders. The employee stationed at the drive-thru window is not responsible for cooking the order. Front-office receptionists are often assigned multiple conflicting priority tasks, answering phones, checking insurance information, registering patients, monitoring waiting times, and retrieving files. There is little time to speak with patients, much less smile if they wanted to.

In addition to being a service excellence issue, this front-office scenario is also a patient safety issue in that lack of focus can lead to medical errors. Consider that reassigning tasks can improve patient safety, service excellence, and employee morale. The fix could be to redistribute tasks, so receptionists could concentrate on their primary duty – welcoming patients. At Brigham and Women’s neurology clinic, a space for two employees assigned the responsibility of phone service was implemented. Another office employee was assigned the insurance information verification process and billing trouble-shooter role. These two moves freed up the front-desk receptionist to greet patients and make sure they were comfortable. This simplification of tasks resulted in improved employee and patient satisfaction. A strong relationship exists between the two.

**Get patients involved**

Another patient safety component to service excellence lies in cultivating patient involvement and responsibility for their care. In our patient encounter example, this patient took ownership for following up on test results. What if the test tracking system in place at this physician’s office failed and the patient’s results fell through the cracks? The patient’s “fail-safe” call to the receptionist could represent the potential for improved outcomes.

Literature suggests that patients involved in their own healthcare may contribute to improved outcomes. Encouraging patients to take a more active role in their healthcare can improve patient safety and satisfaction (e.g. active utilization of Princeton Insurance’s Communication tools, the AM/AHRQ/HHS’s “5 Steps to Safer Healthcare” and/or The Joint Commission’s “Speak-Up”). Communication tools provided by Princeton Insurance are available to insured providers at www.princetoninsurance.com/pinsco/toolkitupdates.

The tools, including a poster and reproducible patient handouts, were designed to:

- Encourage patients to take an active role in their care.
- Lesson the likelihood of communication breakdowns.
- Enhance the patient experience while increasing your efficiency during office hours.
- Improve patients’ compliance with your recommended treatment plans.

At your office, is a patient’s call for test results viewed as another nuisance interruption? Do patients feel uncomfortable communicating questions or concerns with you or your staff? Are they intimidated or rushed off the phone or out of the examining room? Is your office’s attrition rate rising? If so, you may need to make service excellence matter. Here are some key points to consider:

- **Assess** your office practice to determine your core competencies, weaknesses and current culture.
- **Identify your mission, vision, and goals**, including service excellence as a priority - involve employees in determining how goals will be reached.
- **Prevent** service failures and problems by seeking input from employees in identifying where things could go wrong.
- **Create** and encourage a customer-focused culture.
- **Empower** patients and families to be involved in their own healthcare.
- **Recruit** and hire people who “love to serve” and “care” and are not just interested in a paycheck.
- **Predict** and plan for the kinds of healthcare patients will find satisfying.
- **Develop** action plans to implement customer service initiatives.
- **Train**, motivate, and inspire employees to provide outstanding service, positive team-building behavior and simple acts of kindness that will make a big difference in employee and patient satisfaction. Motivated employees are engaged in their work. They are rewarded and recognized regularly for their good work. They pass down the values they learn from you to your patients.

Want to know more about service excellence? Check out these resources:
Saxton, James W. Esq., “Five-Star Customer Service: A Step-by-Step Guide for Physician Practices,” HCPRO/Opus Communications. In addition to providing a resource for implementing a complete service excellence program in your practice, you are also eligible for 4 CME credits from the Accreditation Council for Continuing Medical Education.

Disney knows how to treat people the way they want to be treated, and many healthcare providers and organizations have turned to the institute to show them how.

The Ritz-Carlton has trained New Jersey hospital and physician group leaders in their Malcolm Baldridge Quality Award-winning method of service excellence. Effective communication is the heart of the Ritz-Carlton approach to service excellence in which the mission, vision and values are reinforced daily. Read how you can develop an outstanding patient experience in your practice.

Johns Hopkins Medicine Service Excellence website contains principles, tips, and tools for attaining service excellence in both the inpatient and ambulatory physician practice settings.

The American Academy of Family Practice website contains a tool entitled; “Building a Mind-Set of Service Excellence.”

The 5 Steps to Safer Healthcare by the US Dept. of Health and Human Services.

The Joint Commission’s Speak-Up Initiatives for patient safety.

Press Ganey’s 2007 Physician’s Office and Outpatient Pulse Report: Patient Perspectives on American Health Care report is a valuable resource to gain knowledge of patient perspectives and needs.

Resources
