

ENHANCING THE PATIENT EXPERIENCE

LINDSEY A. BULL, OD, FAAO

1

FINANCIAL DISCLOSURES

- Abbvie
- Viatrix

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GOALS OF THIS COURSE

- Discussion around why the patient experience matters
- How we as physicians can enhance our patients experience in our offices
- How the staff plays a role in the patient experience
- What the biggest patient complaints are in healthcare
- How we overcome patient experience challenges to ultimately provide a safe space for patients, a happy work environment for staff, and a positive workplace where patients can trust the care they receive.

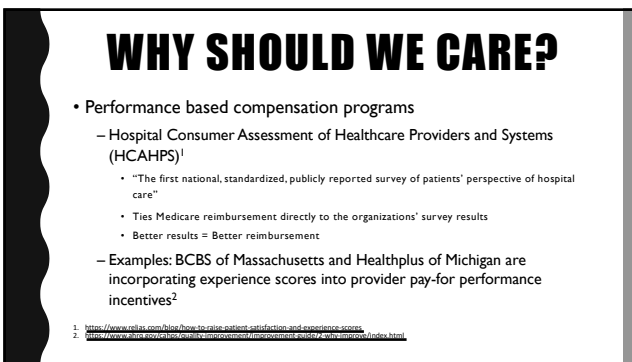
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WHY SHOULD WE CARE?

THEY HAVE TO GET EYECARE FROM SOMEWHERE!

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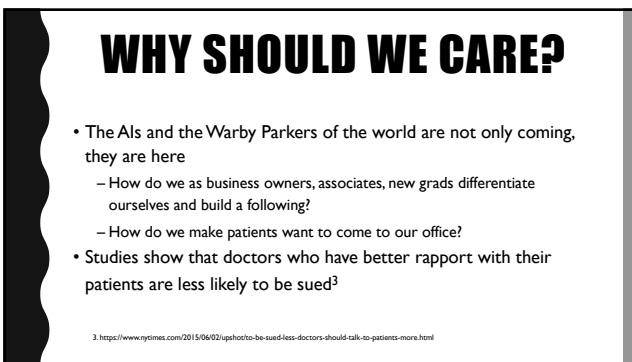


WHY SHOULD WE CARE?

- Performance based compensation programs
 - Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)¹
 - “The first national, standardized, publicly reported survey of patients’ perspective of hospital care”
 - Ties Medicare reimbursement directly to the organizations’ survey results
 - Better results = Better reimbursement
 - Examples: BCBS of Massachusetts and Healthplus of Michigan are incorporating experience scores into provider pay-for performance incentives²

1. <https://www.aetna.com/blogs/how-to-improve-patient-satisfaction-and-experience-scores>
2. <https://www.bcbstx.com/insights/healthcare/medicare-reimbursement-2019/#:~:text=The%20survey%20results,are%20used%20to>

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WHY SHOULD WE CARE?

- The AIs and the Warby Parkers of the world are not only coming, they are here
 - How do we as business owners, associates, new grads differentiate ourselves and build a following?
 - How do we make patients want to come to our office?
- Studies show that doctors who have better rapport with their patients are less likely to be sued³

3. <https://www.nytimes.com/2015/04/02/upshot/to-be-sued-less-doctors-should-talk-to-patients-more.html>

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WHY SHOULD WE CARE?

–Satisfied patients become loyal and make a free referral source

- When you begin thinking of patients as customers:⁴
 - Almost 85% of all consumers rely on the opinions of their family and friends when making a purchasing decision.
 - 92% of consumers trust the advertising that comes from other people than those that come from brands.
 - Customers referred to companies by word of mouth have a 37% higher chance of remaining a customer long-term than those that were not referred in that way.

4. <https://www.referralmiq.com/10-staggering-referral-statistics/>

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WHY SHOULD WE CARE?

– Because we took an oath!

- The Optometric Oath⁵
- With full deliberation, I freely and solemnly pledge that:
 - I **AFFIRM** that the health of my patients will be my first consideration.
 - I **WILL** practice the art and science of optometry faithfully and conscientiously and to the fullest scope of my competence.
 - I **WILL** uphold and honorably promote by example and action the highest standards, ethics and ideals of my chosen profession and the honor of the degree, Doctor of Optometry, which has been granted me.
 - I **WILL** provide professional care for the diverse populations who seek my services, with concern, with compassion and with due regard for their human rights and dignity.
 - I **WILL** work to expand access to quality care and improve health equity for all communities.
 - I **WILL** place the treatment of those who seek my care above personal gain and strive to see that none shall lack for proper care.
 - I **WILL** hold as privileged and inviolable all information entrusted to me in confidence by my patients.
 - I **WILL** advise my patients fully and honestly of all which may serve to restore, maintain or enhance their vision and general health.
 - I **WILL** strive continuously to broaden my knowledge and skills so that my patients may benefit from all new and efficacious means to enhance the care of human vision.
 - I **WILL** share information cordially and unselfishly with my fellow doctors of optometry and other professionals for the benefit of patients and the advancement of human knowledge and welfare.
 - I **WILL** do my utmost to serve my community, my country and humankind as a citizen as well as a doctor of optometry.
 - I **HEREBY** commit myself to be steadfast in the performance of this my solemn oath and obligation.

5. <https://www.aoa.org/about-the-aoa/ethics-and-values/sooty>

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WHY SHOULD WE CARE?

–Positive patient experiences correlate to:

- Improved health outcomes
- Better disease prevention and management
- Patient loyalty
- Patient retention
- Improved clinic performance
- Higher financial performance

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WHY SHOULD WE CARE?

–Positive patient experiences correlate to:

- Improved health outcomes
 - Study followed patients hospitalized for heart attacks:⁶
 - Patients who reported better clinic/hospital experiences had better health care outcomes a year after discharged
- Better disease prevention and management
- Patient loyalty
- Patient retention
- Improved clinic performance
- Higher financial performance

6. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2706570/>
 https://doi.org/10.1186/1475-2875-9-133 Source: CDC, American Heart Association, Kaiser Family Foundation, and the Institute of Medicine. Retrieved 12/20/2010. Available at: <http://www.cdc.gov/nchs/data/infodiv/infodiv02010.pdf>

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WHY SHOULD WE CARE?

–Positive patient experiences correlate to:

- Improved health outcomes
- Better disease prevention and management
 - Encourages patients to be involved in their care!
 • Involvement leads to accountability
- Patient loyalty
- Patient retention
- Improved clinic performance
- Higher financial performance

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WHY SHOULD WE CARE?

–Positive patient experiences correlate to:

- Improved health outcomes
- Better disease prevention and management
- Patient loyalty
 - Patients reporting the poorest quality relationships with their physicians were 3x more likely to leave the physicians practice compared to patients with the highest quality relationships.⁷
- Patient retention
- Improved clinic performance
- Higher financial performance

7. <https://www.pdq.org/info/quality-management/relationships-between-pdq-7-why-patients-leave.html>

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WHY SHOULD WE CARE?

–Positive patient experiences correlate to:

- Improved health outcomes
- Better disease prevention and management
- Patient loyalty
- Patient retention
 - Clinical trials show if a patient does not have a positive experience, they are unlikely to return
- Improved clinic performance
- Higher financial performance

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WHY SHOULD WE CARE?

–Positive patient experiences correlate to:

- Improved health outcomes
- Better disease prevention and management
- Patient loyalty
- Patient retention
- Improved clinic performance
 - Happier patients = happier staff
 - Happier staff = higher quality care = better patient outcomes
- Higher financial performance

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WHY SHOULD WE CARE?

– Positive patient experiences correlate to:

- Improved health outcomes
- Better disease prevention and management
- Patient loyalty
- Patient retention
- Improved clinic performance
- Higher financial performance
 - Good patient experience is associated with higher hospital/clinic profitability⁸
 - Some studies have shown margins that are up to 50% higher than those with average experiences

8. <https://www2.deloitte.com/consulting/dam/Deloitte/tr/Documents/life-sciences-health-care/htu/the-value-of-the-patient-experience.pdf>

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SO HOW AND WHERE DO WE BEGIN?

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TOP 6 PATIENT COMPLAINTS...

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TOP 6 PATIENT COMPLAINTS?

1. LONG WAIT TIMES
2. SLOW OFFICE RESPONSE TIMES
3. LACK OF PROVIDER AVAILABILITY
4. NOT ENOUGH TIME WITH THE PROVIDER
5. A SUBPAR CHECKOUT EXPERIENCE
6. POOR COMMUNICATION

1. <https://www.terra.com/theintake/patient-experience/independent-practices/top-6-patient-complaints-about-medical-offices>

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TOP 6 PATIENT COMPLAINTS?

What should we consider with these complaints?

1. LONG WAIT TIMES
 1. Child care, caregiver availability, work, medication/eating schedules, transportation
2. SLOW OFFICE RESPONSE TIMES
3. LACK OF PROVIDER AVAILABILITY
4. NOT ENOUGH TIME WITH THE PROVIDER
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TOP 6 PATIENT COMPLAINTS?

What should we consider with these complaints?

1. LONG WAIT TIMES
2. SLOW OFFICE RESPONSE TIMES
 - a) Provide patients with a reasonable response time
 - i. 24 hours or less during weekdays
3. LACK OF PROVIDER AVAILABILITY
4. NOT ENOUGH TIME WITH THE PROVIDER
5. A SUBPAR CHECKOUT EXPERIENCE
6. POOR COMMUNICATION

1. <https://www.terra.com/theintake/patient-experience/independent-practices/top-6-patient-complaints-about-medical-offices>

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TOP 6 PATIENT COMPLAINTS?

What should we consider with these complaints?

1. LONG WAIT TIMES
2. SLOW OFFICE RESPONSE TIMES
- 3. LACK OF PROVIDER AVAILABILITY**
 - a) Who do they contact during an emergency?
 - b) How far are you scheduling out?
4. NOT ENOUGH TIME WITH THE PROVIDER
5. A SUBPAR CHECKOUT EXPERIENCE
6. POOR COMMUNICATION

1. <https://www.terra.com/theintake/patient-experience/independent-practices/top-6-patient-complaints-about-medical-offices>

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TOP 6 PATIENT COMPLAINTS?

What should we consider with these complaints?

1. LONG WAIT TIMES
2. SLOW OFFICE RESPONSE TIMES
3. LACK OF PROVIDER AVAILABILITY
- 4. NOT ENOUGH TIME WITH THE PROVIDER**
 - a) Always ask if they have any questions
 - i. And then give time for the answers!
5. A SUBPAR CHECKOUT EXPERIENCE
6. POOR COMMUNICATION

1. <https://www.terra.com/theintake/patient-experience/independent-practices/top-6-patient-complaints-about-medical-offices>

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2. SLOW OFFICE RESPONSE TIMES
3. LACK OF PROVIDER AVAILABILITY
4. NOT ENOUGH TIME WITH THE PROVIDER
- 5. A SUBPAR CHECKOUT EXPERIENCE**
 - a) Patients expect ease of payment with no surprises
6. POOR COMMUNICATION

1. <https://www.terra.com/theintake/patient-experience/independent-practices/top-6-patient-complaints-about-medical-offices>

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2. SLOW OFFICE RESPONSE TIMES
3. LACK OF PROVIDER AVAILABILITY
4. NOT ENOUGH TIME WITH THE PROVIDER
5. A SUBPAR CHECKOUT EXPERIENCE
- 6. POOR COMMUNICATION**
 - a) Clearly advertise/list medical services available

1. <https://www.terra.com/theintake/patient-experience/independent-practices/top-6-patient-complaints-about-medical-offices>

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THE 4 PILLARS OF THE PATIENT EXPERIENCE

10. <https://www.geteverywhere.com/mads/4-pillars-of-patient-experience>

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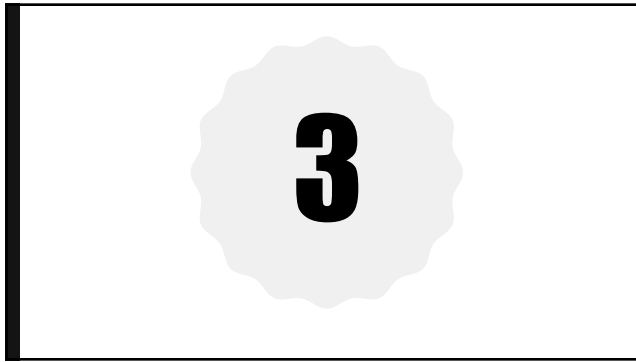
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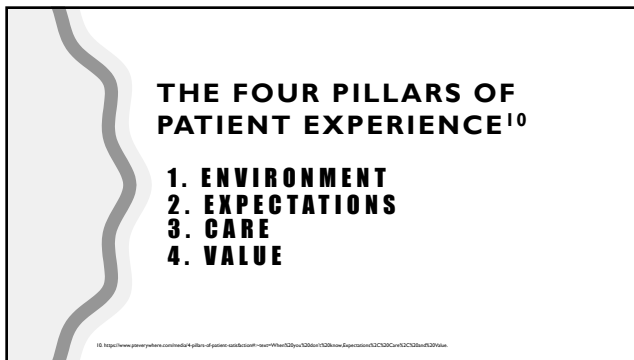
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FROM THE MOMENT THE PATIENT WALKS INTO THE DOOR UNTIL THE NEXT APPT AND BEYOND

- Digital efforts
 - Includes:
 - Appointment scheduling
 - Online booking vs in person/phone booking
 - Gen z and millennials vs baby boomers and the silent generation
 - Paperwork
 - Offer both a digital and printed option
 - Patient portal
 - With instructions
 - Reminders
 - Ask patient preference on how they would like to be contacted
 - Text, phone call, email
 - Best way to make digital options effective is to have the patient engage with the message
 - Include convenient option for rescheduling

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WHEN SHOULD WE REMIND OUR PATIENTS?

- Three-three-three rule¹²
 - Researchers studied 20 million patient appts to determine optimal reminder frequency.
 - Immediate reminder at time of scheduling= no effect on whether patient will appear
 - 3 weeks: most effective
 - Keep in mind not effective for postops, emergency appointment, etc
 - 3 (to 5) days: this is the minimum notice people require to adjust their work schedules
 - 3 hours: that last minute reminder
 - Don't like the 3-3-3 rule?
 - At minimum do the day prior to the appointment
 - Afternoon reminders better than morning reminders

12. <https://www.webbt.com/blog/how-many-and-how-often-when-to-send-patient-appointment-reminders#:~:text=50%2C%20%20you%20not,the%20day%20before%20each%20appointment.>

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TIPS FOR PATIENTS

- When scheduling- especially new patients
 - General office/appointment info- the expected things
 - What do they need to bring with them?
 - Insurance cards, contact lenses, current glasses, current meds, etc
 - How long should the patient expect to be there?
 - Will they be dilated?
 - Do they need a driver?
 - Where should they park?
 - Info about pricing/insurance copays
 - Be open and transparent! Set the expectation.
 - The unexpected things
 - Does the office run cold?
 - Will there be a lot a walking/moving about the clinic

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UPON ARRIVAL

- New patients
 - Welcome email
 - Include picture of the outside of the building and signage
 - Introduction of doctor
 - Time and date of the appointment
 - Parking details
 - Handicap accessibility
 - Digital paperwork for submission
 - TIP: Same logo on everything! Makes identification easy.

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CLINIC EXTERIOR APPEARANCE

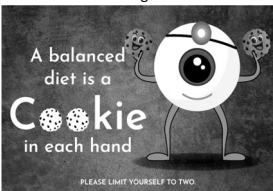
- This is your first impression!
- Patients will use the appearance of the exterior to determine the cleanliness of the interior.¹³
 - Exterior
 - Sign- is it in working condition?
 - Landscaping- is it overgrown?
 - Sprinkler system- timed to run outside of patient hours
 - Parking lot- potholes, cracks?

13 http://www.researchgate.net/publication/26233966_An_exploratory_study_into_the_factor_that_influences_patient_perceptions_of_cleanliness_in_hospital_waiting_rooms

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Front desk/Waiting area

- Coffee bar? Water accessibility? What differentiates your waiting room
 - Cookies with sign



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Staff


Happy staff = Happy patients

- Demeanor and behavior of staff members sets the tone
- Well trained staff can handle different situations gracefully
- Tips for staff:¹⁴
 - Say hello!
 - Acknowledge the patient by name
 - Have staff introduce themselves and their role in the examination process
 - Apologize for wait time (if there is one)
 - Start conversation with something non-medical
 - Acknowledge their concerns


14. <https://www.usmhealth.com/news-and-resources/featured-article/improve-patient-experience/?r=1>

UPON ARRIVAL

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WAIT TIME



- Average medical office wait time= 18 minutes¹⁵
 - 20 minutes is the maximum amount of time patients are willing to wait before becoming frustrated
- 68% of patients say the wait times at their practice are unreasonable.¹⁵
- 30% of patients walked out due to an extended waiting room stay.¹⁵
- 1 in 5 patients say they've switched doctors because of long wait times.¹⁵

15. <https://www.zdrosync.com/blog/long-wait-times-in-the-waiting-room-7-ways-to-improve-wait-times-in-the-office-when-youre-waiting>

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RUNNING LATE?

- COMMUNICATION IS KEY!
 - 86% of patients reported that if they were told in advance, they would feel less frustrated!¹⁶
 - Have staff call ahead to warn patient.
 - See if they want to still come in or be scheduled to following day
 - Staff communicates with those patients who they were not able to get ahead of by call or text
 - Notifies patient's upon arrival that there has been an emergency
 - System for employee sticking head into room to get doctor out of exam room if they've been in there an excessive amount of time
 - Example- "Doctor _____ is on line ____"

16. <https://www.kaiserfamily.com/blog/long-wait-times-in-the-office-when-youre-waiting>

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KNOW YOURSELF... AND YOUR LIMITS

- Managing schedules appropriately
 - Be honest with how long your exams take and do not book more than this
 - Assess your operational and patient flow
 - How long does each type of exam take you?
 - How long does it take a patient to have a workup?
 - If you have a low no show rate- potentially add a “buffer” exam

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CLEANLINESS

- A proven factor into patient's deciding to stay at your office
 - Appearance of the environment
 - First impression: entrance, grounds, reception
 - Maintenance, housekeeping, design
 - Physical cleanliness
 - Research shows that if the appearance wasn't clean, patients automatically determined that the physical cleanliness wasn't up to par!¹⁷
 - This includes updating the outdated!
 - Staff behavior
 - Hand washing, looking professional
 - Uniforms!

17 https://www.researchgate.net/publication/324207614_An_exploratory_study_into_the_factors_that_influence_patient_perception_of_the_medical_office_environment_in_a_primary_care_setting

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UNIFORMS

- First impressions matter!
 - 55% of first impressions are made by what people see!¹⁸
 - This goes for the clinic in general as well as the staff/doctor
- 53% of people say physician attire is important when receiving medical care!¹⁸
 - 1/3 of people reported attire influenced their satisfaction of care!¹⁸
- What does that mean?
 - Physician= business attire with white coat or medical scrubs with white coat
- Professional appearance:
 - Builds trust
 - Prevents distraction

18 <https://www.nabillmedicalnews.com/article/6652/the-impact-of-professional-workwear-on-patient-experiences>

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NOW FOR THE EXAMINATION...

HOW TO MAKE THE PATIENT LIKE YOU 101... JK...KINDA

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EXAMINATION

- How did the patient get to your office?
 - Referrals
 - Familiarize yourself with the referral
 - Previous exam records
 - Why is the patient coming to you?
 - Additional testing?
 - Uncertain diagnosis?
 - Referred from a family member or friend?
 - A "thank you" for the referral
 - Referred from a colleague?
 - Report back to that office

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FACE-2-FACE

- Studies shows that patients preferred:¹⁹
 1. Intermittent typing to handwriting or continuous typing
 2. Body turned towards the patient and hands off the keyboard
 3. Open the EHR before inviting the next patient in the consultation room
 4. Explore and negotiate the patient's agenda before using the EHR
 5. Move the computer's screen to offer the patient a visual access to the screen/EHR during the clinical encounter (when possible)
 6. Indicate when the EHR is used and explain what is done with the HER
 1. Sign posting use of EHR
 7. Indicate to the patient where the physician's attention is directed (EHR or the patient) by using verbal and non-verbal clues
 8. Invite the patient to consult the information displayed on the screen
 9. Give full attention to the patient by not using the EHR when he/she expresses emotions or psychosocial issues
 10. Type during appropriate time sets (i.e., just before or after the physical examination)

19. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC328679/>

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USE OF SCRIBES

- Study showed that scribes produced significant improvements in overall physician satisfaction and no effect on patient satisfaction²⁰
 - Some physician reports on decreased patient comfort with disclosing information
- Another study showed that 57% of patients report their doctor spending less time on the computer when a scribe is present²¹

²⁰ www.ncbi.nlm.nih.gov/pmc/articles/PMC4553724/
²¹ <http://www.ama-assn.org/practicing/education/continuing-education/overlooked-benefits-medical-scribes>

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EMPATHY AND COMPASSION

- 64% of US adults want healthcare providers to spend more time understanding them²²
- 49% report healthcare providers do not listen to them²²
- Journal of General Internal Medicine poll showed 87% of physicians rated their listening skills as high. Study showed that 67% of clinicians interrupted their patients²²
 - Median time before interruption = 11 seconds
- Studies demonstrate that effective communication leads to higher levels of patient satisfaction AND improved outcomes and increased adherence to treatment plan²³
- Empathy and compassion to the caretaker as well!

²² <https://www.performanceinhealth.com/blog/10-strategies-to-improve-patient-experiences>
²³ <https://msurgery.ie/wp-content/uploads/2019/09/How-Does-Communication-Heal.pdf>

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COMMUNICATION

- Again... COMMUNICATION IS KEY!
- Use patients' preferred communication method
 - Translation service?
 - Do you have a staff member who speaks multiple languages?
- Involve the patient
 - Ask for verbal understanding
 - Never leave an exam room without asking "Do you have any questions?"
 - Allow the patient to have a say in their own care and decision making

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TAKE HOME INFO

- Easy to get overwhelmed!
 - Stress and anxiety effect the patient’s ability to recall important information
 - Perceived importance affects memory for medical information
 - Diagnosis = highly important
 - May be easier for patient to recall
 - Treatment protocol = less important
 - Easier for patient to forget
 - Pamphlets/printouts explaining diagnosis
 - Helps them not to google!
 - Studies suggest the average human brain forgets 50% of the information within 1 hour, 70% in 24 hours, and 90% in a week.²⁴

24. <https://simpletexting.com/blog/appointment-reminder-phone-call-script/>

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TAKE HOME INFO

- Spoken vs written/non-verbal²⁵
 - Spoken = least effective
 - Written = better remembered and better treatment adherence
 - Know your patient demographics (literacy)
 - Non-verbal?
 - Cartoons with demonstration
 - Spoken medical instructions = 14% of information remembered correctly
 - Pictograph medical instructions = 80% of information remembered correctly

25. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC324271/>

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MERCH

WHAT IS YOUR PATIENT LEAVING WITH?

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TO GO SWAG

- "Goody bag"
 - Medical diagnosis/treatment information
 - Put logo, location, phone number, doctor name on it!
 - Dilation sunglasses?
 - Regular 50 for \$20= \$0.40-\$0.50 each
 - Plastic with your logo= \$0.74 each



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AND NOW IT'S OVER

- Do you offer an on call service?
 - Is the patient aware?
- Transparent cost on goods
 - Who in the office knows how to decipher insurance
- Follow-up surveys
 - How could the exam have been better
 - Then actually take that info into consideration!
 - Don't be afraid of the google review!
 - 72% of patients rely on online reviews to make decisions²⁶
- Ask for a review!

26. <https://chartrequest.com/improving-patient-experience-2023/>

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UNTIL THE NEXT VISIT

- I. Throughout the year
 - a. Be available!
 - b. Be involved in your community
 - c. Be a help to all patient's referred your way
 - i. Especially those from existing patients!
- II. Fake it 'til you make it!
 - I. One bad day is possibly the only time that patient will see you!

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