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## Administrative Risk Management: How Feedback Improves Quality

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### Learning Objectives

- ▶ Recognize the process of managing patient complaints within the health center
- ▶ Outline the steps involved with selecting and implementing a patient satisfaction survey
- ▶ List the various ways to use feedback to improve quality
- ▶ Identify different types of feedback that are important to analyze and monitor

## Sources of Patient Feedback: Where Do We Hear about It?

- ▶ Patients
  - Patient complaint made verbally to someone in the health center
  - Patient satisfaction survey
  - Patient portal or via practice web site
- ▶ Staff
  - Incident report
  - Patient complaint or experience recounted by member of frontline staff



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## Sources of Patient Feedback: Where Do We Hear about It?

- ▶ External facilities or referral providers
  - Phone call about a complaint or issue from hospital or outside provider
  - Referral or external hospital satisfaction survey
  - Federal or State Agencies
- ▶ Social media
  - Patient experience posted online (Yelp, Facebook, Twitter)

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## Patient Feedback: Patient Complaints

- ▶ Studies have shown that patient complaints are positively associated with malpractice risk. (Hickson et al.)
- ▶ Trends or repeated inappropriate behavior can prompt intervention before patients decide to leave the practice or initiate lawsuits.
- ▶ Complaints need to be prioritized on basis of severity level. Complaints which are more important are addressed first. Complaints of a serious nature warrant reporting to risk management and organization leadership.
- ▶ An effective complaints management system supports compliance with regulations by ensuring streamlined workflow and the correction of complaints.

## Patient Feedback: What is a Complaint?

- ▶ A statement that a situation is unsatisfactory or unacceptable
- ▶ Complaints are predictors of malpractice risk
- ▶ Common types of complaints

Compliance	<ul style="list-style-type: none"> <li>• He said he ordered antibiotic but the drug store didn't give it to me</li> </ul>
Continuity of Care	<ul style="list-style-type: none"> <li>• Never see the same provider twice</li> <li>• No appointments? I'll go to the urgent care center</li> </ul>
Staff/Physician Performance	<ul style="list-style-type: none"> <li>• Provider consistently keeps me waiting forever</li> <li>• My provider was too rushed. I barely saw him.</li> <li>• Doctor doesn't call back, he is mad at me</li> </ul>
Access to Care	<ul style="list-style-type: none"> <li>• Sent me to a dermatologist not on the bus line</li> <li>• Dr. Derm did surgery and never could reach him after</li> </ul>
Appropriateness of Care	<ul style="list-style-type: none"> <li>• I have a cough, not sure why I need a mammogram</li> <li>• Mammogram results not discussed for 3 years</li> </ul>

## Complaint Can Become a Claim

- ▶ Claim: Demand or request for something considered one's due

Compliance	<ul style="list-style-type: none"> <li>• Provider didn't re-order antibiotic; led to massive wound infection and deep debridement of upper arm. <b>Delay in treatment</b></li> </ul>
Continuity of Care	<ul style="list-style-type: none"> <li>• Mammogram ordered by one provider in 2010 had abnormal findings. Missed by several different providers at several visits and finally discovered in 2013 patient was never notified of findings <b>Delay in Diagnosis</b></li> </ul>
Staff/Physician Performance	<ul style="list-style-type: none"> <li>• Doctor was rushed, talked fast and I didn't get all of the information; no chance to ask questions <b>Noncompliance in care</b></li> </ul>
Access to Care	<ul style="list-style-type: none"> <li>• Never made it to dermatologist; widespread melanoma and chemotherapy. <b>Delay in treatment</b></li> </ul>
Appropriateness of Care	<ul style="list-style-type: none"> <li>• I have a cough but Dr. said the important thing is the mammogram. Didn't give a follow up appointment. I guess I don't need antibiotics. Pneumonia, hospital, non-responsive ventilator care. <b>Missed diagnosis</b></li> </ul>

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## Establish a Policy for Handling Patient Complaints

- ▶ Develop a written policy so that any verbal complaint made by a patient is handled the same manner
  - Identify specific individual(s) by job title that are responsible for managing patient complaints
  - Develop a tool to document a patient complaint (can be an incident report)
  - Include specific details about the complaint and make sure that there is a plan of action to investigate the complaint within a specified time frame
  - Develop a contingency as to what to do when a patient wants to make a verbal complaint and the individual(s) are not in the health center

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## Managing Patient Satisfaction Surveys

- ▶ Select a satisfaction survey
  - Internal Satisfaction Survey
  - CAHPS <https://cahps.ahrq.gov/about-cahps/index.html>
- ▶ Set time parameters for distribution of surveys
- ▶ Determine an active vs. passive distribution process
- ▶ Choose drop off locations/mail in/other methods
- ▶ Analyze results
  - Enough sample size for each provider
  - Create a standardized report for comparison
  - Identify who reviews the results in the health center
- ▶ Develop action plans to address identified issues

## Patient Satisfaction Survey Sample

Thinking about your visit with the provider you saw today, how would you rate the following:

	Poor	Fair	Good	Very Good	Excellent
1. How long you waited to get an appointment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Convenience of the location of the office	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Getting through to the office by phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Length of time waiting at the office	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Time spent with the physician/health care professional you saw	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Explanation of what was done for you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Technical skills (thoroughness, carefulness, competence) of the physician/health care professional you saw	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. The personal manner (courtesy, respect, sensitivity, friendliness) of the person you saw	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. The visit overall	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Key Points for a Satisfaction Survey



- ▶ A patient satisfaction survey can demonstrate that a health center or free clinic is interested in quality and in doing things better.
- ▶ When choosing (or designing) a survey questionnaire, look for three things: brevity, clarity, and consistency.
- ▶ Would you recommend this provider to another patient?
- ▶ Always ask an open-ended question at the end which encourages people to identify issues that may NOT be on the survey.

## Can Satisfaction Survey Data Prevent a Claim?

- ▶ We all know what is supposed to happen during a patient experience with our health center or free clinic
  - Patients are our best source for finding out what is really happening
- ▶ Sometimes we are so busy getting through the day that we miss the little things
  - Patients are keenly observant and can offer great input on both the providers and the environment
- ▶ Never underestimate the power of the sentinel effect
  - The theory that productivity and outcomes can be improved through the process of observation and measurement

## Managing Other Feedback: Social Media

- ▶ Blogs that allow patients/families to give opinions about their healthcare experience
- ▶ Facebook
  - Do you have a Facebook page?
  - Policy on staff using Facebook and HIPAA privacy issues
  - What if it is not true?
- ▶ Twitter
- ▶ Snap Chat
- ▶ Keep centers' leadership informed about social media



## Is There a Way We Can Prioritize Different Types of Feedback to Limit Exposure?

- ▶ Issues resulting in injury to patient or visitor
- ▶ Any issue that has resulted in a perceived delay [appointment, lab result, diagnostic test result]
- ▶ Miscommunication involving providers [*one provider told me this and another told me something else...*]
- ▶ Document feedback and have designated staff analyze and trend it to determine risk

## How Do We Use Complaints and Satisfaction Reports to Improve Care?

- ▶ Three weeks to get an appointment
- ▶ No one answers the phone at lunch time
- ▶ Only appointments are during my work hours
- ▶ Too much paperwork at sign in
- ▶ Wait time in exam room
- ▶ I did not understand what the doctor said
- ▶ They gave me an appointment on the day I babysit

## What Can We Do to Improve Satisfaction?

- ▶ Address two to three top complaint areas as part of center's quality program. Get the front and back office involved.
- ▶ Remember that what is important to the patient may not be important to the provider.
- ▶ Ensure that communication among providers is consistent. If you don't agree with your colleague, discuss in private.
- ▶ Ensure good documentation and feedback to patients and providers.



## What Can We Do to Resolve Complaints?

- ▶ Step back and consider whether you have done everything you reasonably can to salvage the relationship.
- ▶ Patients sometimes escalate their behavior when they feel they aren't getting the services they expect or when they feel their needs aren't being addressed.
- ▶ The quickest response is often a defensive one. Deferring the patient to another member of your staff who is less invested in the relationship or the process of care can be quite helpful.
- ▶ Chronic complainer or non-compliant, consider one-to-one assessment to determine the cause. If unable to resolve move to a formal team care conference.

## Review the Patient's Record

- ▶ Provider should have objective and factual documentation that supports any next steps and referrals
- ▶ Examples:
  - Have patient instructions and education been documented in the patient's record?
  - Have patient complaints or accusations against the practice, or inappropriate remarks to providers or staff, been documented?
  - Does documentation objectively note that the provider and staff have attempted to resolve the problems or address the issues?
  - Has the provider consistently documented treatment recommendations and warnings to the patient about possible negative effects of noncompliance?

## Solutions for Ms. Key

- ▶ Set up a care conference involving multidisciplinary staff and the patient to solicit feedback from both sides and recommend solutions
- ▶ Think about Ms. Key's behavior and perhaps set up a "behavior contract" with her to provide documented evidence that the health center tried to work with her on her compliance issues
- ▶ Make sure that front desk staff always verifies address and phone information at EVERY visit so that old contact information is not used when sending out patient materials

## Summary

- ▶ Manage complaints
  - Policy and procedure
  - Learn
- ▶ Improving patient satisfaction
  - Top two to three areas of concern for quality program
  - Prevent recurrence or a more serious situation
- ▶ Individual patient response
  - Team care conference
  - Defer case to another team member



## References

- ▶ Hickson GB, Federspiel CF, Pichert JW, et al. Patient complaints and malpractice risk. *JAMA* 2002 Jun 12;287(22):2951-7. PubMed:  
<http://www.ncbi.nlm.nih.gov/pubmed/12052124>

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