Patient Satisfaction: Three Things Doctors Need to Know

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In these early days of Pay for Performance (P4P) reimbursement, as the size of your paycheck begins to reflect your patient satisfaction scores, let’s have a frank discussion about three important topics all health care providers and organizations must understand going forward: 1) how your performance will be measured, 2) how to get the highest scores and be a happier doctor at the same time, and 3) how to improve performance (in a healthy way) for you and your organization.

How Your Performance Will Be Measured

Whether a solo practitioner or tenured professor at a respected university medical center, a large component of your performance ratings will be based on patient satisfaction surveys very much like the HCAHPS inpatient or Press Ganey outpatient satisfaction surveys currently in use.

Here is a link to the HCAHPS questions where you can see the three doctor-specific satisfaction measures that are already publically reported on the Medicare Hospital Compare website (http://www.hcahpsonline.org/surveyinstrument.aspx).

These surveys ask patients a number of questions on a 4- or 5-point scale where the top score is “always,” “strongly agree,” or “outstanding.”

You may naturally assume that your personal rating is an average of the scores from individual patients. You would be completely wrong in that assumption.

Here’s how you are actually scored, and it is not an average. Your scores are reported as a “percentage of top” or the percentage of patients who gave you the top score. In other words, only the top scores count. Anything less than 5 out of 5 is thrown out. “Good” or “Above Average” is meaningless to these scoring systems.

Now that you understand how you will be rated in the near future, I invite you to take just a moment to recall your last personal experience with a customer satisfaction survey of any kind.

1. Are you a person who gives a 5 out of 5 under any circumstances? (Most doctors are not!)
2. When did you last give a retail transaction or online customer service experience top marks?
3. What did they have to do to earn that rating from you?

Imagine the experience your patients will expect and you will have to consistently provide to receive the all-important “5”. This is exactly how you will be rated by your patients more and more frequently in the years ahead. Soon these ratings will determine a portion of your pay as well.

How to Get the Highest Score and be a Happier Doctor

First you must understand what most health care administrators do not: Physician satisfaction is the only lasting foundation for patient satisfaction. It takes happy doctors and staff to have happy patients—in that order. This is not a “chicken or the egg” conundrum.

To understand this fundamental fact, let me ask you the following question: How can we reasonably expect a patient to give us a 5 out of 5 score on satisfaction when, if asked to rank our personal satisfaction with our workplace on that same day, we could only score it a 3 out of 5?

You might be able to goose your patient satisfaction numbers temporarily by cracking the whip and teaching some communication tricks to your staff, though it likely won’t last.

In the near future, the most successful health care organizations will understand you can’t create lasting patient satisfaction without a solid foundation of healthy, engaged physicians and a satisfied staff.

Let’s look at the current state of affairs, which could be better. An average of 1 in 3 doctors is suffering from burnout on any given office day. In a 2012 survey by the Physician’s Foundation, 60% of US doctors say they would quit practice today if they “had the means.” Patients notice this phenomenon. Their most common complaint is that the doctor didn’t listen to them. This is a cardinal sign of burnout known as compassion fatigue.

One of the main sources of the stress that causes burnout is patient flow systems (e.g. scheduling, using the electronic health record (EHR), billing) in your organization. Nothing is more stressful than an EHR that gets between doctors and their patients or billing, coding, and scheduling systems that seem to maximize hassle in the work day.

As P4P and the closely related “value-based purchasing” become more common in your marketplace, organizations that create a healthier, happier, less stressful workplace environment for their staff and doctors will establish a strong...
competitive advantage since: 1) patients will want to be seen there, 2) quality doctors will want to work there, and 3) your patient satisfaction scores will reflect the efforts to keep physicians and staff healthy and get systems out of the way of patient interactions.

**Your First Step to Higher Physician and Patient Satisfaction**

Here is a question to get you and your leadership team going. Start by looking back on the last three months in your own practice. What average score would you give your satisfaction level on that 5-point scale?

Take a moment to actually give it a number. Here is the scale: 1 = very low, 2 = low, 3 = OK, 4 = good, and 5 = excellent. Keeping your score in mind:

1. What is the first thing you would change at work to improve your satisfaction score? Even if you have given up on this change being possible, what is the one thing that would make all the difference for you?

2. What is the first step in making that change? Consider even the smallest step toward creating a better work day.

Now, grab your medical director (or your team if you are the medical director), and get on it.