

PHYSICIAN PRACTICE RESOURCE CENTER

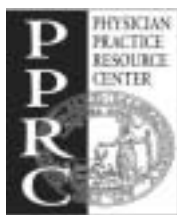
PPRC is a service for physicians provided by the Massachusetts Medical Society

Patient Satisfaction Surveys

Patient Satisfaction Surveys

Table of Contents

<u>Practice Evaluation</u>	2
Physical Appearance of the Office	2
Office Procedures and Staff	3
<u>Developing a Satisfaction Survey</u>	3
Survey Questions	5
Risk Management	5
<u>Conducting a Survey</u>	5
<u>Interpreting the Results</u>	6
<u>The Future of Patient Satisfaction Surveys</u>	7
<u>Sample Staff Evaluation</u>	8
<u>Sample Patient Satisfaction Survey</u>	10



Prepared by the Massachusetts Medical Society
Physician Practice Resource Center
© Copyright May 2004

This information is intended for use as a general resource. It is necessarily selective and is not meant to be an exhaustive guide. This information does not constitute legal or business advice of the Massachusetts Medical Society (MMS). A private attorney should be consulted about all legal matters, including the application of laws to specific situations. This information is current as of May 2004. MMS accepts no responsibility for any of the information once it has been downloaded or copied off of the MMS website. To the extent that any information herein comes from a source other than MMS, MMS accepts no responsibility for the accuracy and scope of such information.

Practice Evaluation

Patient satisfaction surveys can be a very useful tool for a medical practice if they are used appropriately. In many cases conducting a survey requires a fairly large investment of staff time, so it is extremely helpful to know precisely what you are trying to measure before conducting a survey. Sometimes potential problems are not obvious, but taking the time to discuss them as an entire office will usually help focus your surveying efforts so you can use everyone's time effectively.

The most difficult part of a self-evaluation process is to step out of your role in the practice and view the practice from a patient's perspective. A technique that is often used includes asking your staff to compare your practice's operations to those of other providers in the community. It is important to be open to every idea during this process to promote active participation and useful suggestions for how the practice could improve. You could distribute a list of questions or discuss issues with staff informally or at a special staff meeting. Some questions to consider asking staff include:

- Is it easy for our patients to get to our office?
- Does the office design need improvement?
- Does the traffic flow easily from the reception area to the examining rooms and back to the reception area?
- What equipment is currently not being fully utilized?
- What duties could be added to your workload to ensure that your skills are fully utilized and how would these new duties contribute to the improvement of the practice?
- What changes would be necessary in the practice if you accepted any new duties?
- What additional services or equipment are needed?
- Do you have any ideas for increasing or improving our office patient volume?
- Which physician practices are competing for our patients in the community?
- What services are offered by our competition and how do they market or sell these services?

In many practices, the office staff spends more time with the patient than the physician does. Consequently, one of the important assessments is how well staff members are performing their duties and not simply the examination and consultation provided by the physician. Asking staff to rate themselves on their service to patients is a good reminder of basic patient relations. You may find there are some differences of opinion that are worth discussing at a future staff meeting. Ask your staff to complete a survey anonymously and compile the ratings to see how you are doing.

Physical Appearance of the Office

Due to time restraints, physicians and office staff may not devote much attention to the small details of a practice's operations. In particular, maintenance and upkeep of the office's décor is often sidetracked by other demands. However, this is an area that should be carefully examined because a well-maintained reception area makes a good first impression with patients. A well-maintained reception area will welcome patients by creating a peaceful environment that can help to improve patients' satisfaction with your practice.

Windows that allow natural light to enter the room help reduce stress levels. Floors, walls, furniture and plants that are in your reception area should be durable so they do not deteriorate

quickly. Seating is also very important and depending on your specialty, should accommodate patients of all ages (infants, children, and adults), and also be easy for people to get in and out of that may be using wheelchairs, walkers, crutches, canes, etc. Other enhancements to your reception area could include a selection of magazines, games and coloring books for children, light music from a CD or radio station, a television for health education or network TV, an aquarium, or computers preloaded with disease specific information or with an internet connection for checking email. Your patient population will dictate which, if any, of these enhancements will work best for your practice.

In light of the HIPAA Privacy regulation, patient privacy is another common concern that should be addressed in a way that eases patient concerns and complies with the law. Discontinuing treatment discussions in the hallway and treating sensitive patient information with extra care are necessary and will go a long way to improve trust in the physician-patient relationship. The MMS Physician Practice Resource Center (PPRC) has a number of resources available to help you learn about HIPAA. In addition, the PPRC can refer you to a health care attorney if you have specific questions.

Your office's examination rooms should provide patient privacy, promote a calm environment, and be well maintained. Patients waiting to see their physician in an examination room will notice every small detail. Having patient education brochures or posters on the walls for illnesses that you commonly treat is helpful for patients and can even be useful to better educate patients and improve their clinical outcomes.

Office Procedures and Staff

The policies and procedures that are implemented by your office can have a profound impact on patient satisfaction with your practice. Although they may seem irrelevant on the surface, good policies and procedures can help an office run smoothly and can contribute to higher patient satisfaction. Important areas to consider include: promptness of answering telephone calls, ease of scheduling appointments, easy patient check-in processes, attentiveness of staff if there are delays, time patients spend in the reception area, time patients spend alone in the examination room before seeing the physician, easy check-out processes, and clear explanations of billing and collections procedures.

Cross training office staff can also help improve office efficiency and patient satisfaction. Successful practices have employees that understand the duties of their colleagues and are eager to help out with tasks that are not their primary responsibility. For example, if front desk receptionists are busy checking-in a patient, a nurse or medical assistant who has free time could answer an incoming telephone call or assist a patient to the examination room, even if that is not the typical workflow in the office. The best way to build a team environment like this is to have staff discuss the areas that may improve the overall practice operation and come to consensus on what can be done to improve everyone's work environment. When office staff members are happy it helps create a better working environment, which directly impacts the service provided to your patients.

Developing a Satisfaction Survey

Patient satisfaction surveys can differ from one practice to the next depending on the needs of the practice and the particular areas the survey is designed to address. The size of the practice also

plays a role in how sophisticated a patient satisfaction survey will be. Solo or small group practices, for example, may prefer to conduct an informal 5-question survey. Larger groups may conduct a more formal evaluation so the results can be incorporated into a compensation plan that is partially determined by patient satisfaction scores.

Many times, larger group practices will hire an outside organization to create and/or conduct the survey for them. This can be a useful exercise because many times these surveys have been conducted in practices that are similar to your own and reports can be generated that compare your satisfaction scores to industry benchmarks. The downside of some of these surveys is that there is very little flexibility in the types and number of questions that you can ask patients, not to mention the cost of hiring a professional firm to conduct the survey for you. For these reasons, many practices simply develop their own survey.

If you decide to create your own survey, it is recommended that you allow ample time to develop the survey questions. This time is needed to carefully craft questions that can provide data on specific aspects of your practice. As you develop your survey, be sure to keep it as short and concise as possible and try to limit questions to those that will help you address specific aspects of your practice. When writing survey questions, be mindful of the educational level of your patients. If space permits you might also consider collecting demographic data at the end of the survey to help identify patient populations that have similar concerns about your practice.

The survey method is something that should also be carefully considered. Surveys can be distributed numerous ways including traditional mail, e-mail, over the telephone, or collected during checkout in your office. The anticipated response rate will vary from one type of survey to the next. Response rates for surveys that are mailed to patients after a visit are typically 30-35%. Surveys collected at the end of a patient encounter are the most common because they typically yield the most accurate results and have the highest response rates. Whenever possible, surveys should be collected using a secure box that allows patients to anonymously provide feedback. Many times patients will say they don't have time to complete a survey. In these circumstances, you might consider distributing the survey with a postage paid envelope so patients can complete the survey in the privacy of their own home and mail it back to you at their convenience.

If you are conducting a survey in a group practice there are additional specific issues that should be considered. For example, are you going to track the results of each physician separately (be sure to review the section on Risk Management below)? If so, do all of these physicians work with the same support staff or does the practice function using clinical teams? You will also want to take into consideration practices that have satellite offices. Satisfaction results can vary from one practice site to the next so be sure to design your survey accordingly or simply separate the results by office location.

Finally, multispecialty practices should be mindful of variations based on practice styles and appointment types. For example, a primary care physician that treats a high percentage of healthy patients for routine physicals may have drastically different results than a surgical specialist that only treats patients with surgical needs. Taking all of these factors into account before writing the survey questions will help to produce results that are much more useful.

Survey Questions

Use the areas identified during your internal office evaluation to determine the questions to ask your patients in a satisfaction survey. For example, if you are considering refurbishing your office, you may simply want to limit the survey questions to the physical appearance of your practice. If you are interested in understanding how your communication style is perceived by patients you could create some questions about the clinical encounter (be sure to review the section on Risk Management below). Asking an open-ended question at the end of any survey is always helpful because it allows patients to voice their concerns, or praise, in their own words. These personalized responses often yield helpful feedback that can be used to determine areas of your practice that you would like to modify.

A simple, 5-question survey could include the following:

- 1) Were you able to schedule an appointment promptly?
- 2) Was our office neat and clean?
- 3) Were you happy with your overall experience today?
- 4) Did we answer all of your questions? (If not, please contact us immediately.)
- 5) Do you have any additional comments?

A more extensive patient satisfaction survey sample is included at the end of this PPRC Resource.

Risk Management

Before designing and conducting your own survey, including staff evaluations and patient satisfaction surveys, you should consider the risks inherent in collecting certain types of information. For example, if you ask questions about your clinical practice (e.g., whether you adequately explain risks and benefits of prescriptions and procedures, or whether a patient is happy with the health care services provided), a patient who has filed a medical malpractice claim against you could subpoena the survey results. These could be detrimental to your defense if the results demonstrate negative responses. On the other hand, there is some chance that the survey results could be helpful to your defense if they show a pattern of patient satisfaction with your clinical practice. Surveys that focus on the administrative and environmental aspects of your practice (e.g., comfort of the waiting room, amount of time patients are put on hold before a receptionist answers the call) are likely to involve less risk. You should consider consulting a private attorney to help minimize any risks that may be associated with your survey.

Conducting a Survey

A patient satisfaction survey should be the responsibility of the entire practice and not simply the office manager or another staff member. Everyone in the practice should know their responsibilities and be willing to support the project to help make it successful. Before conducting a survey, hold a meeting with all staff to review the purpose of the survey and the importance of the results. Determine an agreed upon process for distributing the survey, including a target for the number of surveys you would like to collect. There is no formal standard, but it is a good practice to collect at least 50 surveys per physician to ensure that your survey size is adequate. The more responses you collect, the more reliable and valid the data will be, so it is helpful to survey as many patients as possible.

If you are conducting a survey in your office as opposed to mailing it after a visit, pick a specific day to begin distributing the survey and give it to all patients that visit the office from that point forward. Everyone in the practice should take an active role in this survey process and be prepared to answer specific questions about the survey. Everyone in the practice including the reception staff, nurses/medical assistants, the physician, and the staff at the checkout desk should remind patients about the importance of the survey. In particular, everyone should stress that the survey will take only a minute to complete, is anonymous and confidential, and is important to the whole practice so you can provide even better services when they return to your practice at a later date.

Personalizing the survey with your practice name and address adds a level of professionalism to the survey that will be noticed by patients completing the survey. If you are conducting the survey in a group practice, you may wish to consider distributing personalized surveys with the name of the patients' physician in addition to the name of the group. (See the section about Risk Management on page 5.)

Interpreting the Results

As survey results begin to be collected and tabulated, it is important not to jump to conclusions before a thorough analysis of the data is complete. Even if the number of responses you have received is adequate, it is possible to have a sample bias that could affect the results of a satisfaction survey. This could be the result of a lack of patient population diversity during the survey period. It is also possible that you or an office employee may have encountered personal issues during the survey period that may have affected the service provided and thus the results of the survey. All survey results can have more than one explanation, so it can be useful to take various factors into consideration.

Many practices find it useful to have a staff meeting to discuss the results and the possible explanations for the survey data. Larger groups may assign this task to a small workgroup. In either situation this meeting should be focused on deciphering what the data is saying about your practice, notwithstanding any possible effects of the survey methods, sample bias, or any other factors.

Now that you have collected and tabulated the patient satisfaction surveys, the real work can begin. Survey results are a useful tool, but how you use them is much more important. It is helpful to conduct the survey more than once to compare results over time to better explain what changes might benefit your practice. After identifying an area of your practice to work on, develop a plan that will focus on a specific issue and try to avoid working on more than two or three areas at one time. If you are uncertain of the particular area to change, it may be necessary to repeat the survey with the same questions, or with a similar survey that will help clarify any uncertainty. In other situations, you may need the assistance of an outside person, such as a practice management consultant, to help you interpret the results and narrow the focus of any practice changes to make the best use of staff time. Finally, you may wish to consider re-surveying your patients at a defined period (3 months, 6 months, or a year later) to see how your patients have received the changes that you made to your practice.

The Future of Patient Satisfaction Surveys

Health plan and quality improvement organizations are becoming increasingly involved in patient satisfaction surveys. The Massachusetts Health Quality Partnership (MHQP), for example, was awarded a planning grant from The Commonwealth Foundation to develop a pilot collaborative physician office survey project. MHQP is proposing that in several stages over the three year period beginning in 2004, they will be able to provide health plans as well as physicians and their organizations with patient experience and clinical performance data that is aggregated across a health plan using validated measures and survey instruments. This data is a component of an initiative to align incentives, reward high quality, and improve the quality of care received by patients across Massachusetts. Health plans are becoming increasingly interested in these initiatives, so it will be helpful for physician practices to independently survey their patients to understand how well they are performing before an outside organization becomes involved in assessing the performance of physician practices.

Sample Staff Evaluation*

Staff Relations	Strongly Agree	Agree	Disagree	Strongly Disagree
1. It is easy to communicate with the other office staff in the practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I have opportunities to interact with the doctor(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It is important to hold regular staff meetings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The doctor(s) is/are appreciative of my work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. My duties are clearly defined.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I have opportunities to get training to do my work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I enjoy the work that I do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. My fellow staff members work as a team to foster a good work environment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I am well paid for my work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. The benefits and pay I receive are adequate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient Relations	Always	Usually	Sometimes	Not Often
1. We greet patients by name as soon as they enter our office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. We send practice information to new patients when they schedule appointments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. We answer patient questions thoroughly and courteously.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. We treat each patient as if he/she were a guest in our homes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The staff and the doctors have a friendly and caring attitude toward patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Patients generally are satisfied with this practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. The staff is liked by the patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* This staff evaluation contains questions that relate directly or indirectly to your clinical practice. Before using this evaluation, review the section on Risk Management on page 5.

Sample Staff Evaluation (Continued)

8. When Patients phone the office, we respond in the following manner:

9. Once patients arrive in our office, they are greeted in the following manner:

10. When patients arrive in our office, they are required to take the following steps:

11. The following techniques are used in the practice to build patient relations:

Fees and Payment Procedures	Strongly Agree	Agree	Disagree	Strongly Disagree
1. We make it easy for patients to pay their bills (use of credit cards, notification of copay amount given before visit, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. We provide adequate privacy for patients to discuss financial matters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. We have very few patient complaints about billing errors or problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sample Patient Satisfaction Survey^{*}

Dear Patient:

I am interested in finding out how you feel about various aspects of my office practice. Please take a minute to complete this questionnaire about your visit to my office today. Your responses are confidential and are greatly appreciated. Thank you.

Please rate each of the following:

	Excellent	Good	Fair	Poor
1. The convenience of the office location. (Consider travel time, access by public transportation, and parking.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The accessibility of the office. (Is the office easy to find, are stairs or elevators readily available, is handicapped entrance adequate, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The comfort of the reception area.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The attractiveness of the reception area.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The comfort of the examining room(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The cleanliness of the office, including the reception area and examination room.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. The promptness with which our telephones are answered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. The courtesy of the staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. The amount of time spent with your physician.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. The communication with your physician.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. The quality of the care you received.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. The privacy of the physician's consultation room and the examination room.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Overall, how would you rate your experience?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Do you have any suggestions for improving the reception area?	<hr/>			
<hr/>				
<hr/>				
15. Do you have any additional comments?	<hr/>			
<hr/>				
<hr/>				

^{*} *This survey instrument contains questions that relate directly or indirectly to your clinical practice. Before using this survey, review the section on Risk Management on page 5.*

References

ACP Observer

Patients uncooperative? Try these communication tips, May 2002

The link between trust and physician satisfaction, October 2001

Patient satisfaction surveys: how to do them right, April 2000

American Medical News

Quieting the squeaky wheel: Dealing with demanding patients, November 3, 2003

Comfortable investment: Making your office more patient-friendly, March 17, 2003

Family Practice Management

Strategies for better patient flow and cycle time, June 2002

What does Walt Disney know about patient satisfaction?, November/December 1999

Measuring Patient Satisfaction: How to do it and why to bother, January 1999

Improving service and increasing patient satisfaction, July/August 1999

Medical Economics

Create a first-rate first impression, November 7, 2003

Is a “mystery shopper” lurking in your waiting room?, May 21, 2001

Re-engineer your practice – starting today, January 24, 2000

Physicians Practice

He Said, She Said: Gender matters when communicating with patients, September 2003

‘Mystery Patient’ surveys uncover customer service flaws, September/October 2001

The survey says! Patient satisfaction surveys can help improve your practice, March/ April 2001

Creating a patient satisfaction survey that HMOs will value, Spring 1996