Skillful Physician Communication

Communication with Doctors

HCAHPS Breakthrough Series











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Communication with Doctors

Skillful Physician Communication [™] *Master the Communication Skills of a Compassionate Patient-Experience*

"The good physician treats the **disease**; the great physician treats **the patient** who has the disease."

-William Osler, MD, 1849-1919

Communication With Doctors Questions and Why They Matter

Common Sense Studies Show Patient Want...

- 1. Skillful Manners
- 2. Skillful Listening
- 3. Skillful Teaching

My belief is that this translates into:

- 1. Skillful Manners = Courtesy and time respected
- 2. Skillful Listening = Attentiveness and needs addressed
- 3. Skillful Teaching = Questions answered, and information provided

Patients want to be cared for by competent people in a caring and comfortable environment.

HCAHPS Domain - Communication with Doctors

Survey Question #1:

During this hospital stay, how often did doctors treat you with courtesy and respect?"

Survey Question #2:

During this hospital stay, how often did doctors listen carefully to you?

Survey Question *3:

During this hospital stay, how often did doctors explain things in a way you could understand?

Domain Leadership Owners:

CEO, CMO, Chief of Staff, Physicians, Nurse Practitioners, Physician Assistants

Current National Threshold is;

(Rated a 4 – "Always"/50th Percentile)

80%

Note: Communication with Doctors Questions 1, 2, 3 are the same for ED CAHPS – Emergency Survey





Compassionate Physician Communication really matters because:

- 1. It provides Loving-Kindness
- 2. It creates Loyalty
- 3. It prevents **Lawsuits**

Compassionate Communication provides Loving Kindness

Loving-Kindness affirms and honors a core of goodness in others and in oneself.

"My religion is kindness."

– The Dalai Lama

Compassionate Communication Creates Loyal Patients

- They tell me critical information more readily; I can diagnose them more accurately...
- They comply easily with my therapies/orders...
- They refer more patients to me... and the hospital

Compassionate Communication prevents Lawsuits

"People don't sue doctors they like."

– Alice Burkin

Poor Communication = Sentinel Events

JCAHO reports over 60% of sentinel events are attributed, at least in part, to poor communication. – *Research from 1995 - 2004*

Hard Facts about Patient Satisfaction

- "Physicians with the lowest patient satisfaction ratings had twice as many 'risk management episodes' as those with the highest satisfaction scores." JAMA, October 2005
- "Almost one third of litigated complaints relate in some way to communication, such as inattentiveness, discourtesy and rudeness, a general breakdown in communication, and inadequate information."—Brennan TA, Leap LL, et al Incidence of adverse events and negligence in hospitalized patients Harvard Medical Practice Study I. NEJM 1991
- Deposition transcripts from malpractice litigation involving obstetrical care demonstrated that four types of communication problems were present in more than 70 percent of the depositions:
 - 1. Deserting the patient
 - 2. Devaluing the patients' views
 - 3. Delivering information poorly
 - 4. Failing to understand the patients' perspectives

 Byinton M. Bender A. Commentary: communicating with patients. Harvard Risk Management Foundation Forum. 2000;20(6):1 − 5.

Let's make a new rule of hospital life: Always try to be a little kinder than necessary.

Question: If **you** were charged with **being compassionate and kind** with your patients... Would you **happily plead guilty**?

earning Systems



What Patients Really Want

What do patients want? And what do they expect?

- At bedside?
- In the examination room?

They want:

- Skillful manners
- Skillful listening
- Skillful teaching

Secret:

"You never get a second chance to make a positive first impression." - Anonymous

People judge people within 4 seconds.

"Customers judge you by:

The way you look, what you say, how you say it, what you do, and how you do it."

-Dale Carnegie

Skillful Manners

How good are you at putting patients at ease and establishing a warm rapport?

Skillful Manners begin with a warm introduction:

- Establish eye contact
- Be alert, courteous and smile
- Shake hands
- Introduce your name(s)
 "Hello, my name is _____, and you are?"
- Make amends if you are late!

"Create a relationship first then get down to business in reverse."
-Brian Lee, CSP

In Praise of Authentic Introductions:

Have you ever considered introducing yourself by your first name?

- It puts patients at ease
- It levels the playing field
- You're on equal footing
- You've removed a barrier to open dialogues
- You're not relying on the referent power/authority of your physician-ness
- Patient buy-in and rapport increases immediately

These are 'Skillful Manners':

- You've read the chart before you start
- KB4E (Knock Before Entering)
- Settle in. Your "open" posture is friendly
- You face the patient, not your laptop
- You thank them for being your patient
- Create some physical contact





'Join Up' with your Patient:

- There's always time for a personal moment
- Small talk is **BIG** talk
- Topics guaranteed to jump-start introductory conversations:
 - Where are you from?
 - Kids
 - **Hobbies**
 - Pets

Poor Manners that are Not Skillful:

- Rushed behavior
- Delayed appointments
- No attempt at establishing rapport
- "All business." No emotional connection
- Limited eye contact
- The interview becomes an interrogation
- Abandonment (Intellectually) if lack of interest in the case

"Good manners are a way of showing patients that we have respect for them." - Bill Kelly

By The Way.. Whatever happened to bedside manner?

Skillful Listening

"I sit down, relax like I have all the time in the world." - Dr. Reg Williams

Skillful Listening Chat Time!

"When you sit, you're heart-to-heart." -Brian Lee, CSP

Move the Chair to the Bedside

Do your patient rooms have an easily-moveable chair you can bring to the bedside? This is important. Here's why...

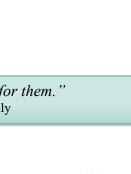
Provider Seated Is Time Well Spent

A study asked hospitalized patients to estimate the amount of time their doctors spent with them.

- All the doctors were instructed to have visits lasting exactly five minutes
- Patients who saw a standing physician estimated the visit lasted about two or three minutes
- Patients whose physicians pulled a chair up to the bedside perceived the visit to last 15 minutes

What Message Do You Want to Send?

- The message of the standing physician is, "I'm in a hurry. Let's get this over with!"
- The message of the physician who sits is, "I've got as much time as you need."
- To show courtesy and respect to patients, what's the message you need to send?







Skillful Listening Engages the Patient

- Let patients tell their stories. No interruptions!
- Use "Uh-huh's"
- Use head nods, and sounds of agreement

Listen for what isn't said:

- Establish rapport by not only hearing what the patient's symptoms are but what they mean to that patient
- Example: The patient may be asking himself: "Will my life ever be the same again after this?"

Skillful Listening Allows You to:

- Steer clear of misunderstandings
- Give patient opportunities to voice expectations, preferences and responses
- Remind patient: "There's no such thing as a silly or foolish question when I'm in the room with you. *I'll listen and respond.*"

To Summarize:

You don't need to have all the time in the world for the patient to feel like you do.

Skillful Teaching

"I know that you believe that you understood what you think I said, but I am not sure you realize that what you heard is not what I meant."

- Robert McCloskey

Skillful Teaching Allows You to:

- Educate by partnering with patient
- Turn patient concerns into understanding
- Empower the patient: present treatment options
- Explain and thus resolve worries or frustrations
- Gain patient buy-in to a shared plan of care
- Create a patient well informed about his health

Never assume...

- That patients have an easy understanding of numbers and percentages, especially when you describe treatment risks
- That you don't need to watch for patients with "low numeracy skills". Proceed/explain carefully when outlining relative risks of diagnostic procedures and treatments

The Three Minute Factor:

"Surgeons who've never been sued spent 3+ minutes longer with each patient than did those who have been sued." – Blink Malcolm Gladwell Little, Brown & Co, 2005

Use this time to educate your patient!





The patient may be asking himself:

- "Do I understand what is going to happen to me?"
- "Does this procedure make sense to me?"
- "How do I feel about what's going on here?"
- "Does the explanation I'm getting from the Doctor satisfy my needs?"

So Ask Questions that Lead to Patient Education:

They sound like this:

- "Many times, patients worry about... Do you feel that way?"
- "Sometimes patients are confused about... Have you any concerns that I can help you with?"

Recommendation:

To ensure you understand a patient, reflect back or paraphrase and ask "Do I have that right?"

Conclusion:

Good manners, good listening, good teaching!

Question:

How will you use this information to improve your practice?

Three Thoughtful Questions that Guarantee Improved HCAHPS Scores

Wouldn't it be great if you only had to learn 3 questions to improve your patients' experience? There are!

Tying the Bow Around Your Patients' Visit

To ensure your patient's experience has been a communication success... Wrap up each patient visit with these 3 questions:

Ouestion #1 – **Skillful Manners**

This is your polite thank you for the opportunity to care for the patient:

- "How are you feeling about our visit today?"
- "Thanks for letting me take care of you... I realize that is of great concern to you, and I want you to know that I take your health very seriously...

Question #2 – Skillful Listening

- Cite the key points to assure/remind patient you heard him/her
- "I just want to make sure I've heard and addressed your concerns. They were..." (and enumerate the two or three major issues your patient presented)
- "Did I cover everything to your satisfaction?"

Question #3 – **Skillful Teaching**

To be certain the patient internalized what you taught:

- "I want to be confident you understand the steps/plan of care we'll take together to see that you get better as soon as possible."
- "Could you summarize what you see as our road map to return you to good health?"





Note: Validate the Client/Patient

- "You were right to come in. Your blood pressure was getting up there."
- "You were right to bring your mom in. Her thyroid was in need of attention."

Ouestion:

If you were consistent about wrapping-up with these three patient focused questions, how positive would the impact be on your patient experience scores?

Impressions...

How would this approach to your patients influence their care, experience and future health?

The Accountability First Step:

Who Will do What by When & How?

What's	the BEST idea you've heard on this webinar?
•	
•	
How so	on will you put it/them to use?

It is Just Manners

It is just manners.

There is nothing complicated about it.

It is just saying how does one human being relate to another human being.

We don't need complicated frameworks or communication stuff.

We just need a moment of thought, and then, the decency the situation requires.

- Arthur Frank, PhD., University of Calgary





Tools & Resources

To support your team to achieve its HCAHPS performance improvement goals, we are pleased to offer these value added Educational Resources and Implementation Tools. For more information give us a call at 800-667-7325 x2202, or email webinars@customlearning.com.

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Ignite the Patient Experience™ (Administrative fees only) A comprehensive 2 day Service Engagement and dynamic 4 hour HCAHPS Leadership Seminar
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Participant Satisfaction Report

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W	e totally employ about # full and part time staff, at facilities.
1.	For me, the most valuable idea I learned and intend to use is:
2.	What I would tell others about the quality of the speakers and value of the content:
3.	O.K. to quote me: YES NO Presentation improvements I would suggest:
4. 5.	On a scale of 1 - 5, this presentation: (Met My Expectations) 5 4 3 2 1 (Did Not) Featured Implementation Tool:
	 Yes A. Skillful Physician Communication at-a-glance Yes B. Interested in Scheduling Our Team Coaching Call
6.	P.S. – My Best Tip:
	rst/Last Name:
O A B	Position: Zip: Zip:

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