



# Prescriptions *Medical Alert*

*Winter 2007–2008*

## Building Effective Referral Relationships

When a patient develops an acute or chronic health condition, primary care physicians frequently refer the patient to medical specialists. Referring the patient to a specialty care physician is hardly, however, the end of the family physician's involvement in the referral process. To provide optimal care to patients, primary care doctors should take responsibility for ensuring that the recommended specialists are qualified to help the patient, that communication between physicians is ongoing, and that patients are satisfied with the care they receive outside of their family practice.

Patients who are told by their doctor that they need to see a specialist often experience considerable distress. They worry that their medical problem could be severe and may even feel frustrated that their own physician is unable to handle the problem. For elderly patients, in particular, the prospect of having to see an unfamiliar physician in a new location can be daunting. A patient's anxiety may be compounded when he or she must wait weeks, or even months, to see the recommended specialist.

Occasionally, a primary care physician may be uncertain about whether a specialist will be able to provide a particular patient with the type of care needed. To avoid making an inappropriate referral, the doctor may want to call the specialist to discuss the patient's clinical condition. The phone call can also serve as an opportunity for the physicians to discuss the urgency of the problem and how quickly the patient should be seen.

When a decision to refer a patient is made, primary care physicians should obtain the patient's permission to supply the specialist with all the pertinent information and

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## Diagnosing Your Practice with Patient Satisfaction Surveys

Improving the quality of care your practice delivers is about more than just hiring more staff, reducing wait times, or acquiring new equipment. Even practices that go out of their way to provide an excellent standard of care may not be adequately meeting their patients' needs in all areas. Fortunately, finding out whether your practice is succeeding or failing in the eyes of patients is not hard to do: simply ask them.

While medical groups that operate pay-for-performance programs administer patient satisfaction surveys routinely, many practices have never used a formal means of measuring how happy patients are with the care and service they receive. Instead, practices rely upon patient numbers, complaints, and anecdotal evidence to determine how effectively they are meeting patients' expectations.

But even if your practice remains busy, there are good reasons to conduct a patient survey. The results could uncover previously unknown problems that can be corrected, identify underperforming staff members, and flag potentially dangerous behaviors or forms of negligence that could lead to malpractice lawsuits. In addition, malpractice insurers and health plans are increasingly requiring practices to submit evidence of patient satisfaction levels before setting rates or agreeing to add a medical group to the network.

The least expensive methods of distributing a patient satisfaction survey also tend to produce the least reliable results. Asking front desk staff to distribute the questionnaire to patients in the waiting room may not be the best approach, as patients who are waiting to see a physician may be anxious, ill, or otherwise distracted, preventing them from providing useful answers. Mailing questionnaires tends to have a low response rate, and the patients who take the time to complete and return the

surveys may be unusually upset about a particular issue. While patients are more likely to answer surveys sent by e-mail, online questionnaires may not reach older or less affluent patients.

To achieve the most thorough and reliable results, you may wish to consider hiring a research firm to conduct telephone surveys. Not only do phone surveys result in higher response rates, professional pollsters can ensure that a representative sample of patients have been questioned. When the surveys have been completed, the research firm will provide your practice with a report outlining and

analyzing the results. This report, which may include visual aids such as charts and bar graphs, can be useful when presenting the findings to staff members. Firms may also offer to benchmark your practice's results against those of similar groups.

A consulting firm can help your practice design the survey, or you can use an off-the-shelf product as a starting point. When formulating the questions, consider what types of feedback would be most useful to your practice in improving the quality and delivery of care. Typically, a patient satisfaction survey includes questions

about issues such as waiting times, ease of getting an appointment, courtesy of the receptionist, helpfulness of the staff, billing practices, or the time it takes to get back test results. The survey should also include questions about the patient's interactions with physicians and medical staff. Does the doctor listen well and take the time to answer questions? Does the patient feel hurried through an appointment? Are the doctor's explanations and instructions clear, or are they confusing? Is the physician responsive when asked to alter a treatment? How does the patient rate his or her overall relationship with the physician? The survey should also include questions for demographic purposes, such as age, gender, income, and health status.



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send or fax the relevant documentation as soon as possible. Delays in sending recommendations and records make it difficult for specialists to determine how quickly a patient needs to be seen and the appropriate course of treatment. If the patient agrees, the primary care practice should also schedule the appointment with the specialist. This additional assistance can help to ensure that the patient adheres to the recommended course of treatment.

Primary care physicians should continue to track a patient's care after he or she has started seeing a specialist or been admitted to the hospital. In some cases, specialists' practices or hospitals may allow primary care physicians access to their patients' records online. If this access is not available, referring physicians should check that they have received discharge summaries and any other relevant information by the specialists or surgeons who have treated the patient.

There are many reasons why a primary care physician would routinely refer patients to a particular specialist. For example, the specialty care physician may have an outstanding reputation for medical expertise and competence, the doctor may be more accessible than comparable practitioners, or the specialist's location may be convenient to the primary care practice. In some cases, however, relationships develop between primary care physicians and specialists because the specialist has marketed his or her services to the family doctor or because the two physicians know each other socially.

Practices can take steps to build appropriate relationships with referral specialists by making formal referral agreements with specialist practices. A referral agreement generally outlines the types of services each practice will provide and under what conditions a referral will be made. The agreement may also clarify how access will be provided and include detailed procedures for exchanging information between the two practices.

When patients are unhappy with the timeliness or quality of care they receive from specialists, they often complain to their primary care physician. Family practices should track any negative or positive comments made by patients about their experiences with particular referral specialists. If it becomes necessary to intervene frequently on behalf of patients who are unhappy with the care they receive, practices should consider ending these referral relationships.

Because a negative experience with a specialist can damage not only a patient's mental and physical health, but also the relationship with his or her family doctor, primary care practices should make every effort possible to ensure that the referral process goes smoothly and that patients are satisfied with the care they receive from all their health care providers. *P*

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When the results are in, prioritize the issues highlighted in the survey, and work with other physicians and staff members to develop a plan of action to reinforce the policies and procedures that appear to be working well and to address the problems. The issues raised may be logistical and easily resolved, such as the discovery that more personnel are needed to answer phones during peak hours or the finding that appointment times require some tweaking. Occasionally, the problems identified will be more sensitive, such as a physician's poor interpersonal skills. Addressing a problem of this kind may involve a frank discussion about the need to pay greater attention to patients' concerns, or even

lead to a recommendation for additional coaching or training in communication skills.

Ideally, your practice should conduct patient satisfaction surveys on at least an annual or biennial basis. This will allow you to ask additional questions and get feedback on new staff members or any changes that were implemented since the previous survey was taken. Most importantly, regular surveys will help your practice track patient satisfaction over time, allowing you to pinpoint the areas where the practice is improving and where further work is needed. *P*

## Parents Want Physicians to Offer Interactive Websites

Busy parents want to be able to book appointments and request prescription refills using the office websites of their family's physicians, but more than half report that their doctors fail to offer these online services, a recent survey conducted by online parenting magazine InteractiveDad.com found.

The survey of InteractiveDad.com readers revealed that 76% of parents would use their family doctor's website to ask for prescription refills if the option were made available, with just 20% saying they would not take advantage of this option. In addition, 52% of respondents said they would prefer to book their doctor's appointments online, compared with 44% who said they prefer to set up appointments by phone. A full 88% of the parents surveyed agreed with the statement that all doctors should have a website to better communicate with patients.

Yet when asked whether each of their family's medical providers has an online presence, just 16% of respondents said their children's pediatrician has a website, and 24% said their own primary care

physician has a website. While some of the parents surveyed admitted they are uncertain whether their family's doctors have websites, 56% of respondents asserted that neither their children's pediatrician, nor their own primary care physician, has a website.

"The poll shows that busy parents want physicians and dentists to have websites to make life easier and more manageable," said Glenn Lawrence, editor of InteractiveDad.com.

In responding to the poll, several parents said they would not consider using a physician's practice that lacks an online presence. For example, one parent told researchers he uses web search engines to look for physicians and dentists, and he does not contact those practices that only list a phone number but no website.

Lawrence advised physicians to take advantage of services that allow practices to create customizable websites that meet patients' needs for convenient online access. *P*

## Dissatisfaction Runs High among Physicians

If given the chance to start their careers again, some 60% of primary care physicians would choose a different field, and many feel they are less respected than surgical or diagnostic specialists, according to a survey conducted by *Physicians Practice* magazine.

Conducted by physician search and consulting firm Merritt, Hawkins & Associates, the survey of primary care physicians showed that, if they had their medical education to do over again, 39% would become surgical or diagnostic specialists, while 22% would not choose medicine as a career.

More than 80% of primary care physicians surveyed indicated that they have busy practices, with just 17% reporting they are not busy enough. Meanwhile, 57% of respondents said they are contacted about job opportunities about 50 times per year by physician recruiters. According to researchers, these findings suggest that primary care physicians are in robust demand and that the job market for their services is strong.

Results also showed, however, that about 60% of the primary physicians surveyed view the income they derive from their practice as disappointing, with around 50% of respondents indicating they earn \$150,000 or less a year—far less than many specialists. Fewer than 15% of respondents said they consider themselves equal partners with surgical and diagnostic specialists, while 85% said they see themselves as either "junior partners" or "second class citizens." *P*