

# Listening to Your Patients

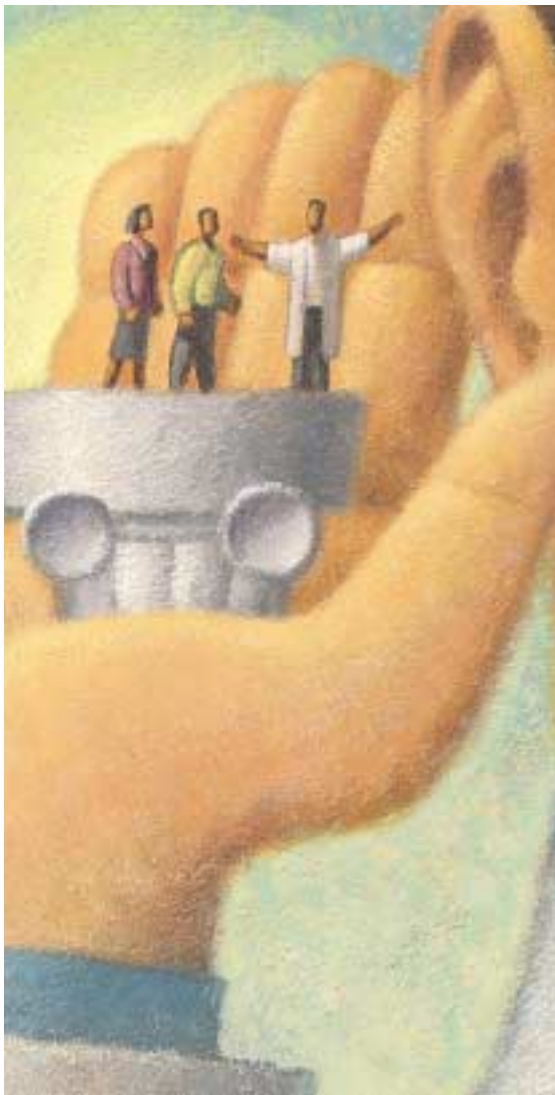


ILLUSTRATION BY ROB COLVIN

## Assessing Service Quality in Cancer Care

by Sabina Gesell, Ph.D.

**H**ospitals across the country are trying to increase patient satisfaction with the quality of services they offer. Although a full range of excellent services is critical to remaining competitive in this age of Internet-savvy health care consumers, the real force behind the patient satisfaction improvement campaigns is the recognition that a hospital's reputation is heavily influenced by the perceptions and good will of the patients and community it serves.

Patient satisfaction has been linked with heightened treatment compliance<sup>1</sup> and improved medical and surgical outcomes.<sup>2</sup> Furthermore, patient satisfaction is now widely considered a legitimate measure of quality of care<sup>3,4,5</sup> and is required by credentialing organizations such as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).<sup>6</sup> While national surveys on patient satisfaction may provide important insights on how well hospitals are performing on average, facilities that are truly committed to increasing their levels of patient satisfaction should conduct their own surveys and perform them on a regular basis. Only continuous surveys will allow hospitals to understand the perceptions and needs of their unique patient population, and

assess the success of the performance improvement projects they initiate.

### Patient Satisfaction with Inpatient Cancer Care

Word-of-mouth referrals are probably the best and most influential form of marketing in health care because Americans favor personal recommendations by friends and family over any other source of information. The word of someone they know carries more weight than recommendations from independent evaluation organizations, employers, health insurance plans, government agencies, or the media.<sup>7,8</sup>

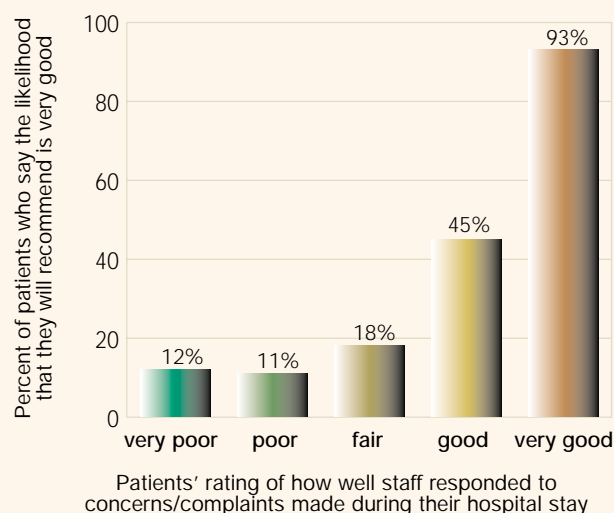
In 2001 Press Ganey, an independent vendor of patient satisfaction measurement and improvement services, surveyed tens of thousands of oncology inpatients about their hospital experience within days of discharge. This survey data provided a clear snapshot of the current state of satisfaction in this population. When surveyed about the likelihood of recommending the hospital to others, only 64 percent of the patients surveyed selected very good (the highest possible rating or best indicator of complete satisfaction). The remainder of the respondents (36 percent) did not feel positive enough to make such a recommendation without hesitation, selecting either good, fair, poor, or very poor. In 1998, Press Ganey's Standard Inpatient Survey found that 66 percent of oncology inpatients were very likely to refer their hospital to others, indicating that patient satisfaction on this front has not improved in the last four years.

Knowing the importance of personal recommendations, Press Ganey set out to answer the question of what would make an oncology inpatient refer another person to a specific hospital. A review of the 2001 survey data found that certain aspects of service are more important to oncology inpatients than others and are correlated to the likelihood of whether a patient will recommend the hospital to family and friends (see Table 1, page 27). Topping this list is the way in which the staff responds to patient concerns and complaints (service recovery), followed by the amount of individual attention patients receive from the staff. Amenities relating to rooms and meals have a weaker relationship to patient recommendations and appear at the very bottom of the list.

Patient loyalty is created by prompt and compassionate service recovery. A patient voicing dissatisfaction should not be written off as a lost reference. Although the most immediate response to a complaint is defensiveness, a more appropriate and productive response is acceptance of the critical feedback, concern about what happened or failed to happen, and quick and complete

Figure 1. Likelihood to Recommend by Response to Concerns and Complaints

(Data collected Jan.– Dec. 2001 from 56,867 oncology inpatients at 386 hospitals)



Source: Press Ganey, Inc.

resolution of the problem. Attempts should be made to acknowledge and rectify the perceived shortcoming, not only because it is the right thing to do but also because patient satisfaction and loyalty can become even stronger after successful service recovery.

Figure 1 illustrates the strong relationship between excellent complaint resolution during an inpatient stay and increased patient referrals following discharge. Press Ganey's 2001 data show that 93 percent of patients who rated the hospital's response to their concerns and complaints as very good (the highest possible rating) said that the likelihood that they would recommend the hospital to others was also very good.

Press Ganey's Standard Inpatient Survey also asks patients to rate their care providers on interpersonal skills. A review of the data found that, while patients reported satisfaction with staff friendliness and courtesy, they gave low ratings to personal attention and providing information and identified these areas as the ones they most wanted staff members to improve.

Statistical analysis of the data identified several service areas that could be improved, based on how satisfied

Table 1. Top 10 Service Issues Most Highly Correlated With the Likelihood that Oncology Inpatients Will Recommend a Hospital to Others

Rank	Service Issue	Correlation With Referral
1	Response to concerns/complaints made during the patient's stay	0.68
2	Attention to the patient's special or personal needs	0.65
3	Staff sensitivity to the inconvenience of health problems and hospitalization	0.65
4	Staff effort to include the patient in treatment decisions	0.64
5	How well nurses kept the patient informed	0.64
6	Nurses' attitude toward the patients' requests	0.63
7	Friendliness/courtesy of the nurses	0.62
8	How well hospital staff addressed emotional/spiritual needs	0.61
9	Promptness in responding to the call button	0.58
10	Staff concern for the patient's privacy	0.57

Data are based on responses to Press Ganey's Standard Inpatient Survey collected January through December 2001 from a random sample of 56,867 oncology inpatients at 386 hospitals across the U.S.

patients were with the service and how the area correlated to overall patient satisfaction.

For all oncology staff, patients reported that improvements in the following four service areas would likely increase recommendations: 1) responding to concerns and complaints, 2) addressing patients' emotional and spiritual needs, 3) including patients in treatment decisions, and 4) increasing staff sensitivity to the inconvenience of health problems and hospitalization.

Specific to physicians, conveying concern for each patient's questions and worries was the best way to improve the likelihood that patients would favorably recommend the hospital to others. How well physicians kept patients informed and the amount of time they spent with each patient were patients' second and third priorities.

For nurses, patients noted that keeping them informed and spending time attending to their personal needs were the top two items needing improvement. Patients also identified promptness in responding to the call button and the nurse's attitude toward patient requests as other services where they wanted to see improvement.

### Patient Satisfaction with Outpatient Cancer Care

Press Ganey's 2001 Standard Outpatient Oncology Survey identified staff understanding and sensitivity to the personal difficulties and inconveniences caused by cancer and its treatment as the service issue most associated with increased patient recommendations. Other service issues highly correlated to patient recommendation involved keeping the patient's family informed and delivering thorough, timely, and practical information, including information on home care instructions. Table 2 lists the top 10 service issues as identified by oncology outpatients.

Unfortunately, while staff sensitivity to the difficulties caused by cancer and its treatment was highly correlated with patient satisfaction, it was also the number one service issue needing improvement. Therefore, many hospitals place staff sensitivity at the top of the list of service areas that need to be addressed when institutions want to improve patient satisfaction with services. Other service areas identified by patients as needing improvement included keeping families informed and addressing patients' emotional needs. (Note, this is national data and some hospitals may not need to focus energies on these areas, but instead may choose to focus on other issues relevant to their specific patient satisfaction data.)

Both outpatient chemotherapy and radiation personnel scored low on providing information that would help patients manage treatment side effects. Outpatients said that more (or more useful) information was given about some symptoms than others. They were most satisfied with the support they received for managing nausea and vomiting and least satisfied with the support provided for coping with depression.

### How Patient Satisfaction Affects Your Bottom Line

Private practices are particularly vulnerable to the effects of patient dissatisfaction on their reputation and revenue. Dissatisfied patients don't return and are likely to speak poorly of the medical group. One study estimates that even a 5 percent patient dissatisfaction rate can cost a private physician \$150,000 in lost revenue.<sup>9</sup> This figure does not include the profit forfeited when potential patients shun the practice because of negative word of mouth from dissatisfied former patients.<sup>9</sup>

Patient satisfaction has also been linked to doctor switching<sup>10</sup> and willingness to sue.<sup>11,12,13</sup> A recent study in the *Journal of the American Medical Association* (JAMA) found that the more complaints patients had

Table 2. Top 10 Service Issues Most Highly Correlated With the Likelihood that Oncology Outpatients Will Recommend a Hospital to Others

Rank	Service Issue	Correlation with Referral
1	Staff sensitivity to the personal difficulties/inconvenience of having cancer and undergoing treatment	0.58
2	Keeping the patient's family informed about what to expect	0.57
3	Instructions for care at home	0.55
4	The degree to which staff addressed the patient's emotional needs	0.55
5	Efforts to include the patient in treatment decisions	0.55
6	Staff concern for patient privacy	0.54
7	Explaining how to manage the side effects of chemotherapy	0.47
8	Staff concern for patient's comfort during chemotherapy	0.45
9	Explaining what to expect during chemotherapy	0.44
10	Staff courtesy during chemotherapy	0.44

Data are based on responses to Press Ganey's Standard Outpatient Survey collected February through August 2001 from a random sample of 8,999 oncology outpatients at 24 hospitals in the U.S.

about a doctor, the more likely that doctor would be sued for malpractice.<sup>14</sup> This projection was still accurate even after adjustments were made for the differences in clinical activity. The authors suggested that monitoring patient satisfaction levels would help doctors stay aware of their risk of being involved in litigation.<sup>14</sup>

Patient satisfaction also plays a role in physician recruitment and retention. The level of satisfaction physicians and other hospital staff members feel about their work is directly related to the level of patient satisfaction with the hospital.<sup>2,15</sup> In a recent survey,<sup>15</sup> 88 percent of the oncologists questioned considered a strong reputation for excellent patient service either extremely important or important in their selection of a workplace. The relationship that service excellence has to patient compliance, clinical outcomes, malpractice risks, and employee/physician satisfaction easily justifies this preference.

For a great number of patients, diagnosis and treatment of cancer can be the most physically and emotionally challenging time of their lives. The best way for providers to create a positive treatment experience for their patients is to listen to, validate, and systematically address the expressed needs and preferences of the people they serve.

Hospitals and private practices that make service excellence an integral part of their care philosophy are certain to see enormous payoffs in both the well-being of their patients and the well-being of their organizations. ■

*In accordance with HIPAA, the data used for these analyses were de-identified.*

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