# Reducing Glaucoma Patients' Dissatisfaction

One center's approach to improving the patient's experience.

BY JOSHUA W. KIM, MD

hen I think about dissatisfied patients, the famous comment of the poet John Lydgate come to mind: "You can please some of the people all of the time, you can please all of the people some of the time, but you can't please all of the people all of the time." These words may help physicians cope when an dissatisfied patient comes along, but with today's social media, one unhappy patient can significantly affect an eye care practice.

Every glaucoma doctor has encountered a dissatisfied patient in the office. Maybe his or her appointment started a few minutes late, or he or she did not realize how many visits would be required after a trabeculectomy. Alleviating dissatisfaction begins with determining its source. Once the cause of the unhappiness is known, physicians and staff can pull together to resolve the problem.

## **RECOGNIZE THAT MULTIPLE FACTORS AFFECT SATISFACTION**

In a study of satisfaction among glaucoma patients, Bhargava et al found that, at an academic center in Nottingham, United Kingdom, patients would rather travel less than 30 minutes (as compared to 60 and 120 minutes), and the health professionals' training was more important to patients than waiting time and the number of visits.<sup>1</sup> Other international studies have linked dissatisfaction to wait times, physicians not spending enough time with patients, ineffective communication, ineptitude, and disrespect.<sup>2</sup>

The perceptions of physicians and patients may be quite different. For example, patients reported complication rates that were many times higher than their surgeons' rates, because the former correlated their personal satisfaction with the outcomes.<sup>3</sup>

#### **ASK FOR FEEDBACK**

At Center For Sight, where I practice, patients who provide an email address receive a short survey after each visit. We ask patients to share their suggestions for "By monitoring patients' feedback about their experiences, we can directly acknowledge and address any concerns."

improvement and say if they would refer other patients to our practice based on their recent appointment. Positive comments are frequently shared with the staff and the physician. Likewise, all negative comments are addressed and shared with the administrator and the physician. By monitoring patients' feedback about their experiences, we can directly acknowledge and address any concerns.

### **DETERMINE CAUSES OF DISSATISFACTION**

My colleagues and I began tracking wait times after learning that they were our patients' biggest concern. Studies confirm that 97% of patients are frustrated by wait times at the doctor's office.4 To address our patients' dissatisfaction, we designed an objective system to monitor wait times. We tracked when patients checked in, when their charts were placed in the box, when patients were called back, and when they checked out. We discovered that our patients were frustrated by the amount of time that elapsed between when they checked in and when they were called back to see the doctor. Based on this information, we implemented an incentive program with a monthly reward to all staff members if the wait time from check-in to call back was less than 5 minutes. Within a few months, our patients were taken back to the examination room within 5 minutes of checking in.

We also improved patients' perceptions of waiting during other parts of the office visit. We try to keep them occupied with materials such as educational

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videos, magazines, and literature. Our practice provides free Wi-Fi so that patients can use their smartphones and tablets to entertain themselves. We also try to set reasonable expectations in patients by telling them ahead of time how long their initial visit will be. The second waiting room not only helps the perception that things are moving along, but it is also the location where patients' pupils are dilating, patients are awaiting further testing, or they are waiting to go into an examination room. If delays occur or are expected, the staff is trained to update the patients on the delay.

## **CONTINUE MONITORING AND MAKE ADJUSTMENTS**

We constantly monitor our patients' feedback to address their concerns and expectations. By improving their overall satisfaction, we not only enhance our patients' experiences, but we also improve treatment outcomes (other parts of medicine have seen correlations with reduced readmission rates and inpatient mortality). 5,6 As Bill Gates once said, "Your most unhappy customers are your greatest source of learning." My colleagues and I believe we are in a good position to learn and adapt to situations that might arise in the future.

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