# Attracting and Keeping Patients

BY RHODA WEISS

he continual restructuring in healthcare, the rise of the consumer as the primary decision-maker, the focus on access to information, and decreased reimbursement have all led healthcare organizations and physicians to search for methods to increase patient recruitment, retention, and satisfaction.

Since physicians are the referrers who "hold the pen" in terms of referrals, utilization of resources, and lengths of stay, the success of a healthcare organization is tightly related to the success of a physician practice. Here are some ideas that can help physicians and healthcare organizations recruit and retain patients.

#### FIRST IMPRESSIONS

If we define marketing as the "sum total of impressions, experiences, and relationships people have with a person or organization," then physicians need to identify those "moments of truth" that affect the decisions of people who come into contact with their practices. One such moment is a prospective patient's first telephone call, which introduces the practice and establishes the relationship with the doctor's office. This is when the caller's expectations for quality and service are met or exceeded. Based on the nature of the conversation, the caller forms an impression of the practice as too busy and uncaring or responsive and caring.

Staffers who answer the phone should obtain necessary information—the caller's name, reason for the visit, phone number and health insurance—on the initial call and then call the patient back a day or two before the appointment to confirm, get any additional necessary information, and provide details about the practice, such as what to bring and where to park. Consider sending new patients a "welcome to our practice" letter with a patient history form. The patient can fill this out at home, where he or she can look up answers to questions about medications, previous illnesses, and surgeries.



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If your office uses appointment cards, on the back print "questions to ask the doctor." Encourage patients to jot down their questions and bring the card to their appointment.

While a doctor and the office staff can provide all the telephone courtesies necessary, someone must also monitor the answering service to ensure the same level of service. To help bond the answering service to the doctor's office staffers, ask answering service staff to visit the physician practice to meet the doctor and office staff.

#### AT THE OFFICE

When patients arrive at the office, how are they greeted? Are names written in the appointment book phonetically so they can be pronounced correctly? Are patients asked how they would like to be addressed? Are they called in advance if the doctor is running late, or allowed to use the phone to call people waiting for them? Does the staff wear easy-to-read name tags?

What happens in the reception area? The average person spends five years in a lifetime waiting, and it shouldn't all be in the doctor's office. Attach a sheet to the patient's chart and note the time of the appointment, when the patient arrived, the time the patient was brought into the examination room, and the time the physician spent with the patient. If the doctor sees a lengthy wait, he or she can apologize and explain the reason for the delay.

Does the reception area offer current reading materials and pleasant piped-in music? To make the wait seem shorter, put out easy-to-complete, health-related crossword or other puzzles. Put together a scrapbook highlighting the physicians and staff with professional and personal histories, accomplishments, and awards. Add a treasure chest with inexpensive health-related items for children to select before they leave; a workstation with a computer; a telephone (restricted to local calls); or a bulletin board on which to post articles, doctor and patient achievements, patient

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### COMMUNICATION STRATEGIES

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testimonials, and patients' business cards.

Both the reception area and examination rooms can be mini-educational centers. Pharmaceutical companies, medical specialty organizations, health associations, and other groups have booklets, brochures, and healthy recipes that can be placed in take-one stands in both areas. A brochure can better acquaint current and potential patients with the practice and answer patients' questions about the practice. Even a simple fact sheet can list frequently asked questions and their answers.

#### USE VOLUNTEERS

A new trend to help doctors' offices run more smoothly is the use of volunteers. Recruited from among the practice's patients, volunteers make reminder calls to patients before their appointments, act as hosts to patients in the reception area, and organize support groups for specific diseases.

To increase word-of-mouth referrals, place this sign in the reception area: "A referral is the greatest compliment you can give our practice. Our appointment book is open to your family, friends and coworkers."

To generate visibility, physicians

- Sponsor a youth sports team (with the doctor's name on the uniforms)
- Sponsor an essay competition judged by community leaders
- Place an advertisement in the local high school yearbook
- Write a health column for a local, school, or university newspaper
- Collaborate with pharmacists for a "medication day," when people bring in all their medications to identify potential negative interactions
- Offer free sports physicals or serve as a team doctor

## next issue

### LIMITS: JUST RESOURCE ALLOCATION

How are healthcare resources to
be allocated justly in an era of
increasing constraints? In the
July-August Health Progress,
Daniel Callahan, PhD, of the
Hastings Center calls for a
national dialogue concerning an
equitably distributed "sustainable
medicine." Clarke Cochran, PhD,
and two colleagues discuss allocation factors in managed care.
Sr. Maryanna Coyle, SC,
describes the current thinking
about maximizing resources in
Catholic foundations.

#### MEDICAL FUTILITY

At what point does medical treatment become futile? Rev. Peter

A. Clark, SJ, and Catherine M.

Mikus, Esq., say the time may
have arrived for Catholic healthcare organizations to establish
a formalized policy.

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