

Challenging Patient/Physician Relationships

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Patient Relations & Interpreter Services
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Department of Patient Relations

- Work with patients, family members, physicians, and staff to address and resolve patient problems or complaints anywhere across the health system
- Sharon Englert, Director
- Linda Rasmusen, RN, Coordinator
- Cynthia Wardlow, Coordinator
- Theresa Hindle, Office Coordinator

Why have a “Patient Relations” department?

- To fulfill regulatory mandates and LUHS policies that require the institution to inform patients of their rights, and to establish and maintain structures to support patient rights
- To provide a streamlined mechanism for patients to seek assistance or complain

Government and Regulatory Mandates

- *CMS Conditions of Participation*
- Joint Commission: *Rights and Responsibilities*
- IDPH *COP Interpretive Guidelines*
- *Section 504 of the Rehabilitation Act*
- Health Information Portability and Accountability Act (*HIPAA*)
- Civil Rights Act of 1964
- Illinois Language Assistance Services Act

How do we become involved in specific issues and complaints?

- Direct contact from patients/families via phone calls, letters, or in person
- Follow-up on patient survey comments
- As requested by physicians/staff to become involved in difficult situations, or when the patient needs assistance beyond his/her scope

What do we do?

We listen to patient concerns, identify issues, and work with physicians and staff to create a plan to move forward

Often involves talking with many people and many departments

What happens next?

- Complaints are documented in complaint management system; physicians contacted by Patient Relations
- Complaint data sent monthly VUMC “PARS” program, e.g., Patient Advocacy Reporting System
- PARS staff analyze and compile complaints, provide feedback reports to physicians who need support
- Physician mentors assigned to follow up with physicians
- Chief of Staff also receives information

Common Physician Complaints

- Perceived lack of timely or regular communication with the hospitalized patient or family
- Appearance of a lack of communication among physicians
- Inconsistency in information received from different physicians (same service or different services)
- Treating the “body part” and not the person; perceived lack of concern for patient’s overall condition or care
- Patient doesn’t know who is in charge of their care

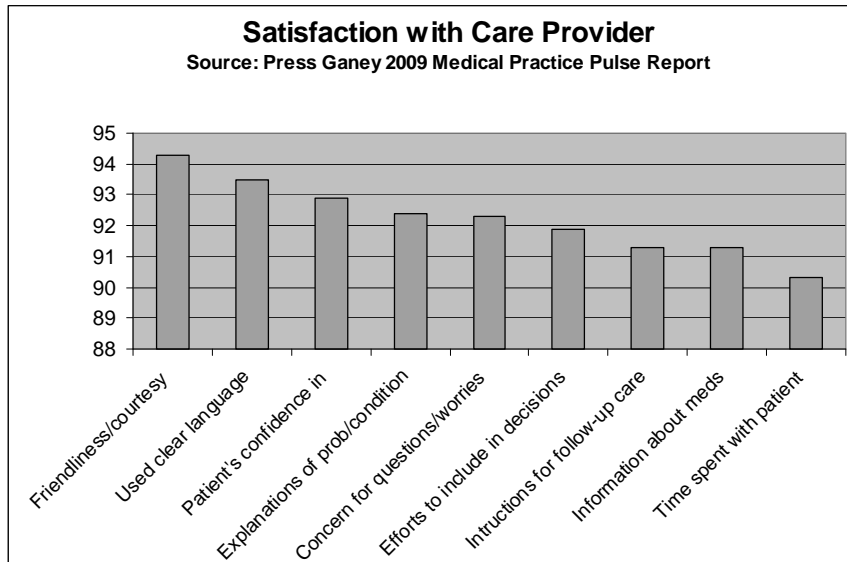
Common Physician Complaints

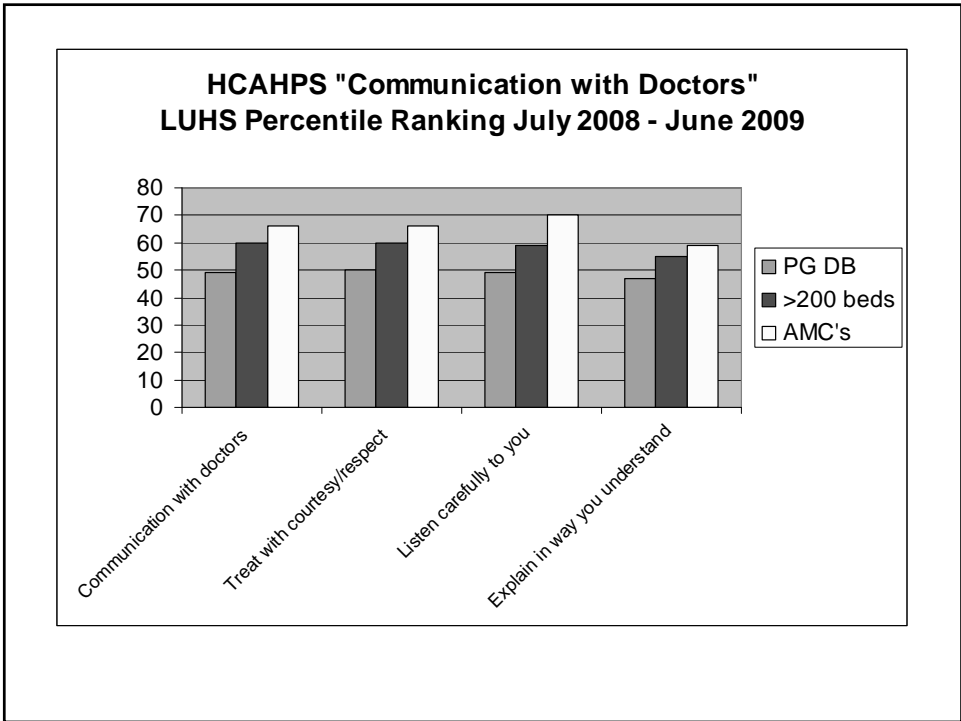
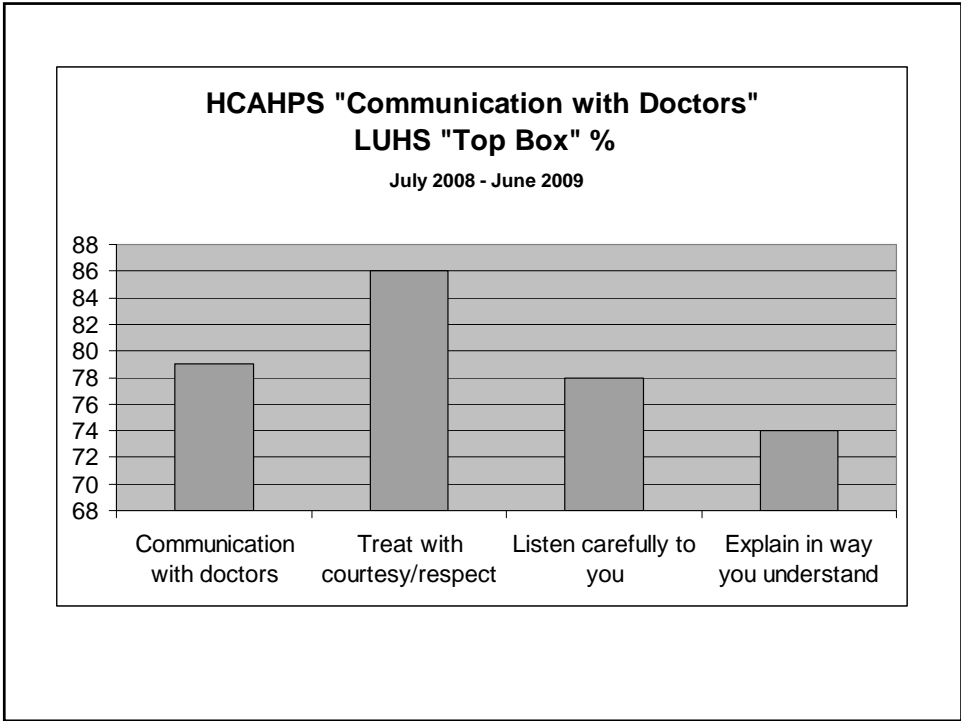
- The patient's perception about the way information is communicated, i.e., jargon, tone, manner
- Feeling that the physician doesn't care about them or their problem

Most Common Mistakes in Dealing with Challenging Patients

- Appearing not to be really listening to patient's concerns; having "one foot out the door"
- Missing cues that the patient doesn't understand what you're saying; failure to ensure understanding
- Controlling your emotions when a patient appears to be questioning your medical judgment; defensiveness, taking things personally
- Letting situations escalate before asking for help

Patient Satisfaction With Physicians





We're here to help

- Patient Relations is located on the 1st floor of the hospital, directly across from the cafeteria, in Room 1387.
- Open Monday – Friday,
8:30 AM – 5:00 PM
- We can be reached at ext. 6-5140