

Lifeline



Managing patient complaints

Effective response: slow down, listen and understand patient expectations

If the thought of an unhappy patient sends a shiver down your spine, here's some good news: A patient with a grievance actually presents an opportunity to build a stronger relationship with that patient.

Certainly, no dentist would invite patient complaints. A staff-wide policy of fast and direct communication about patient concerns sets up a favorable practice environment and

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establishes what is known as “effective service recovery.” Through active listening, respectful conversation and an understanding of patient expectations, dentists can turn potentially unfavorable situations into positive experiences and add value to the service they provide. This also helps create a stronger bond with patients.

Risk management analysts, claims managers and attorneys agree that a “trigger” in many negligence cases is not the injury suffered by the patient, but the lack of an effective response from the dentist to the patient’s complaint.

“Poor communication is the great cause of litigation, not poor dentistry.”

DANIEL WATKINS, attorney



“Poor communication is the great cause of litigation, not poor dentistry,” said Daniel Watkins, an attorney with 22 years of experience handling professional liability cases. Communication is the key if a complaint arises, and dentists have one immediate priority, according to Watkins. “In general, the most important thing is to slow down and take note of the situation,” he said. “The complaint might not have real substance or it might be a real dental issue, but the important thing is to stop and pay attention. A lot of times this part gets missed.”

Taking the time to listen and act in a meaningful way is a personal touch that takes only a few minutes, but can make a world of difference.

“Some dentists tend to mistake promptness of treatment or provision of a clinical assessment as acknowledgment of the patient’s distress, but all too often the patient would simply like the dentist to say, “I’m sorry to hear that you are experiencing pain or that you feel that way,” said Carla Christensen, a senior analyst with The Dentists Insurance Company.

After listening and taking note of the complaint, dentists will have more information to analyze the situation and determine a treatment plan, but they must communicate the plan clearly and be sure the patient is not expecting something different or impossible to deliver. “There needs to be a meeting of the minds about the patient’s expectations and the limitations of dentistry,” Watkins said. “Communicate what you can accomplish compared to what the patient expects, and make sure the patient hears you.” Additionally, chart the complaint and have the patient sign a revised treatment plan.

Risk management analysts emphasize that a process of listening to and recognizing complaints does not mean that dentists are admitting to liability. “An apology is not an admission of guilt, but an appreciation of the good faith patients place in dental providers to treat them as they themselves would want to be treated,” Christensen said. “Too often, dentists mistakenly think that acknowledgement of a complaint equals agreement – that it validates a claim.”

In reality, documentation that a provider responded to the patient’s complaint helps diminish the damage with both the patient and any source of resolution, such as the Dental Board, that the patient may use. “In the event of a claim, the situation plays out far better if dentists can demonstrate to anyone who reviews the case that they listened and treated the patient with respect,” Christensen said.

TDIC Claims Supervisor Reggie Green said respect is essential when it comes to a complaint. “Patients who feel they were treated respectfully by their dentist will in turn respect their dentist.” Green added that an immediate face-to-face meeting combined with good documentation helps dentists when confronted with a difficult situation. He also recommended a no-charge consult with the patient to personally address complaints; discussions about patients’ clinical concerns should not be left to staff.

When meeting to discuss a complaint, active listening is an important factor in making the patient feel respected, and is an essential skill for the entire dental team. According to the late psychologist Carl Rogers, a pioneer in active listening, practitioners of the skill should:

- Avoid distractions,
- Turn toward the patient,
- Lean slightly forward,
- Establish eye contact,
- Nod occasionally and
- Add comments that elicit additional information.

Active listening also involves comprehension and genuine understanding of the patient's point of view. Comprehension includes paraphrasing in your own words what you understand the patient's complaint to be. This lets the patient know that he or she is understood. When paraphrasing, avoid the tendency to evaluate what the patient is saying. For instance, telling the patient that you don't agree with him or her is not appropriate when trying to comprehend a situation.

Dentists and staff can unknowingly trigger a patient's dissatisfaction by not actively listening to the patient, according to Christensen. For example, if a patient expresses a complaint to a dental assistant about pain and sensitivity following the placement of a crown and the dental assistant makes a note in the patient's chart, but does not make eye contact or acknowledge the patient's concern, the patient can feel disregarded. The patient's concern can be compounded if the doctor enters the room and proceeds to examine the tooth and make a clinical assessment without first directly acknowledging the complaint or asking questions to discover more about the patient's condition.

"Too often overlooked is the patient who complains to a staff member, but the information is not relayed to the dentist until after the patient makes a claim or writes a negative review," Christensen said.



"Dentists need to ensure that staff members participate as part of the dental team and share patient feedback when it is given to them."

CARLA CHRISTENSEN, senior analyst with The Dentists Insurance Company

Staff Interactions

Dentists must make sure that staff members tell them bad news and complaints as well as good news. Sometimes well-intentioned employees try to protect dentists from dissatisfied patients in the misguided belief that they are helping the dentist. In fact, however, they are doing both the dentist and the patient a disservice.

"Dentists need to ensure that staff members participate as part of the dental team and share patient feedback when it is given to them," Christensen said. "Staff are frequently protective and may think patients will not act on their concerns, or they assume patients have already mentioned their complaint to another member of the team who will share it with the dentist." It's better to

over communicate patient concerns than under appreciate the impact they can have when they go unacknowledged by the dentist.

One way dentists can encourage staff to share negative feedback from patients is to give them permission to do so, and then make sure to acknowledge them when they do. One of the most effective ways to do this is to meet with staff and explain how, when and where you want bad news delivered. For example, one dentist may ask his staff to report to him at the end of the day about any noteworthy incidents. Another dentist may prefer to get information in writing first thing in the morning so that she can respond to it during the regularly scheduled morning period when she

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returns phone calls and takes care of other patient relations.

If you have doubts about the best way to encourage staff to give you bad news, try asking for their suggestions. This might also be a good time to ask them if there is anything you do to inhibit candid feedback. Such a discussion with your staff might open up other areas where you can improve communication with both patients and staff. Try starting such a discussion with a positive statement: "I'd very much appreciate your telling me how I can be more effective at encouraging open communication between us. And, if there is anything I've been doing inadvertently that has gotten in the way of your being open with me, I'd appreciate your sharing that with me." After making such a statement, of course, it's important to listen nonjudgmentally and practice active listening skills.

Staff Interactions With Patients

Using active listening with staff and patients fosters a positive practice environment. "If you want staff members to treat patients with dignity and respect, it is critical that staff be treated with the same dignity and respect," Christensen said.

Hospital studies have shown that patient satisfaction is derived more from interactions with nurses than with physicians. For the best relationship with your patients, make sure your dental team is well trained, well treated and empowered to act with patients in the most effective ways.

Often the strongest image of your practice will come via telephone,

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including initial contact with prospective patients and follow-up with existing ones. All staff members should be thoroughly grounded in good telephone etiquette. Some callers will be experiencing at least some discomfort, and perhaps severe pain, when they reach your office. Consequently they may have short tempers and little tolerance for frustration, and may be prime candidates for anger. This means that staff must be especially skilled in preventing anger from occurring whenever reasonable and defusing it effectively when it already exists. In most cases, listening carefully to the patient's concerns, taking notes and paraphrasing the situation back to the patient will help alleviate anxiety and prevent or reduce anger. It's also good policy for staff to let patients know that their concerns will be communicated to the dentist as soon as possible.

Explain to staff how you want them to answer the phone, and ask them to give the caller the practice name and their name as politely and succinctly as possible. When people are in discomfort, being put on hold is especially difficult to tolerate. If it's absolutely necessary that patients be put on hold, ask staff to give them a good reason and an estimate of how long they can expect to be on hold. If patients have to hold longer than estimated, ask staff to give them the option of holding or being called back. When people have a choice they feel in control of the situation and are less likely to become frustrated. And if the patient chooses to be called back, it's important to do so within the time specified.

Anger Management

Whether on the phone or face to face with a patient, both dentists and staff

can be challenged with trying to defuse an angry patient, and unacceptable patient behavior must be recognized. While the goal is to treat everyone with respect, a disrespectful or hostile patient can cross the line into harassment. The best action for dentists is to have a written office policy that defines and prohibits inappropriate, rude and unprofessional behavior.

It is also important for all staff members to have a basic understanding of the difference between anger and hostility. According to the American Psychological Association, “anger is a negative feeling state that is typically associated with hostile thoughts, physiological arousal and maladaptive behaviors. It usually develops in response to the unwanted actions of another person who is perceived to be disrespectful, demeaning, threatening or neglectful.” The verbal expressions of anger include yelling, arguing, cursing and sarcasm. Where as hostility, in contrast, “refers to intentional behavior that aims to harm another person. Often, it reflects a desire for dominance or control,” according to the APA.

Dentists have an obligation as employers to maintain a safe workplace and protect employees from extreme anger and hostility by individuals in the work environment, including patients. A policy to immediately report hostility to the dentist helps protect employees, and dentists must be prepared to step in and mitigate the situation. If you feel that your personal safety or that of your staff is in danger, don't hesitate to contact security or the police.

Even patients who are normally calm may reach a boiling point due to anxiety, frustration, pain or fear. If a patient becomes angry, exercise your

active listening skills, keeping these key points in mind:

- Remain calm and professional,
- Speak softly,
- Call the patient by name,
- Don't be manipulated by the patient's anger,
- Try to understand what triggered the anger,
- Acknowledge the patient's feelings,

- Express that you understand his or her concerns,
- Ask the patient what he or she wants and
- Offer options by saying, “Here's how we could handle this.”

Dealing with an upset patient is a professional challenge, but dentists who successfully manage these situations can strengthen patient relationships.

It's often the case that a customer is even more loyal after a successfully resolved problem than he or she was prior to the issue.

Patients who complain are more likely to remain loyal



Research conducted by the Office of Consumer Affairs shows that a rapid response to a customer complaint is likely to ensure customer loyalty. In fact, it's often the case that a customer is even more loyal after a successfully resolved problem than he or she was prior to the issue.

This principle applies to the dental office where a patient with a complaint presents the opportunity to turn a potentially unfavorable situation into a positive experience. Dentists who successfully address patient concerns add value to the service they provide and create loyalty with patients.

Research on this subject by the Technical Assistance Research Project

for the Office of Consumer Affairs found that:

- Most dissatisfied customers don't complain at all — they just take their business elsewhere.
- Dissatisfied customers who complain are much more likely to remain loyal than dissatisfied customers who don't complain regardless of whether their complaint is satisfactorily resolved.
- Dissatisfied customers tell, on average, nine or 10 people about their experience. Satisfied customers, on the other hand, share their good experience with only four or five others. Therefore the impact of a dissatisfied customer is about twice that of a satisfied customer.

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Beyond the Science: Patient emotions in dentistry

It's estimated that 75% of U.S. adults experience some degree of dental fear. But fear, as well as anxiety and worry, may not be easily identified by the dental practitioner, which can cause big legal issues down the road. Learn to correctly handle patients who exhibit these emotions so you can keep your practice, and your patients, safe.

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Risk Management Seminar Schedule

Fall 2014

Friday, Dec. 5
9 a.m.—noon

Hyatt Mission Bay
San Diego, CA

Friday, Dec. 12
9 a.m.—noon

Sheraton Grand
Sacramento, CA

Spring 2015

Friday, Jan. 16
9:00 a.m.—noon

**Hawaii Dental Association
Convention**
Honolulu, HI

Friday, Feb. 20
1:30 p.m.—4:30 p.m.

Sacramento Midwinter Show
Sacramento, CA

Thursday, April 30
9 a.m.—noon
2:00—5:00 p.m.

Friday, May 1
9 a.m.—noon
2:00—5:00 p.m.

Saturday, May 2
9 a.m.—noon

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If you or someone in your group requires special assistance to fully participate in the seminar, please call TDIC at 800.733.0634 or email us at risk.management@cda.org.



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The brand promise is the promise a provider makes regarding the service patients will receive when they do business with the provider. There is also the brand character, which is the customer's perception of the quality of service delivered.

Inspiring patient loyalty: Understanding patient expectations for quality care

Because dentistry is a service, it's helpful to look at customer service studies as they apply to patient relationships. Studies show that the cost of obtaining a new customer is five times that of retaining an existing one. Given this statistic, it makes sense for dentists to take steps to retain existing patients.

To ensure patient loyalty, you can distinguish yourself from other providers by offering added value that others do not. The best way to add this kind of value is to create a strong relationship with your patients through clear communication, reliable performance and timely response when a result is less than expected. Additionally, you can add value by taking a few moments to call patients to see how they are doing after significant dental work performed by either you or a specialist to whom you referred the patient.

Most of the research conducted in the area of patient satisfaction has been done in hospital settings. For example, one group of researchers conducted patient and family focus groups to determine hospital patients' needs and concerns. Based on their findings, they described the following aspects of care that most affected patients' experiences:

- Respect for patients' values, preferences and expressed needs,
- Coordination of care and integration of services,
- Communication between patient and providers: dissemination of accurate, timely and appropriate information

and education about the long-term implications of disease,

- Physical care, comfort and the management of pain,
- Emotional support and alleviation of fears and anxiety,
- Transition and continuity of care and
- Involvement of family and friends.

Most of these findings are relevant to the concerns of dental patients, and they are valuable ideas you can apply to practice. In addition, you must ask patients what they expect and communicate clearly on meeting their expectations within the limitations of dentistry.

In addition to customer and patient satisfaction studies, there are marketing concepts that apply to the dental practice. There is the concept of the brand, which has two aspects. The brand promise is the promise a provider makes regarding the service patients will receive when they do business with the provider. There is also the brand character, which is the customer's perception of the quality of service delivered.

In terms of a dental practice, the brand promise is the commitment dentists make, both explicit and implicit, to patients. This might include courteous service, quality performance and if possible, satisfactory outcomes. The brand character is the sum total of what is delivered from the patient's point of view. This may or may not

include courteous service, it may or may not include quality performance of both you and your entire staff and it may or may not include satisfactory outcomes. It might include waiting a half hour, on average, to see the dentist because the dentist is a poor time manager. It might include being ignored during that half hour by the receptionist, who is too busy doing paperwork to have any time for waiting patients. You may believe that you performed within the guidelines of good care, but if the patient thinks otherwise, your brand name and your brand character, essentially your reputation, may be compromised.

Your reputation, or brand character, is your professional life's blood. This is why treating patients to the highest quality experience, from their point of view, is a sensible way to run your dental practice. It also improves patient compliance, which can in turn lead to improved dental health. Strong communication skills and excellent patient service are essential to a dental practice's reputation.

The steps you take to accomplish a successful brand will also generally improve patient loyalty. You may be reluctant to do this if it means such things as refunding fees to a dissatisfied patient or redoing a costly procedure that meets the prevailing standard of care but fails to satisfy the patient. However, consideration of the lifetime value of a patient shows the significance of patient loyalty. Careful attention to these recommendations can be the key to a successful and highly regarded dental practice.

Questions and Answers

Q: After several weeks interviewing for an X-ray technician position, I have identified an individual I think would be a good fit for my practice. The final thing left to do is seeing if she can take a quality radiograph. She is coming in next Tuesday to demonstrate her skills on some patients. I plan to pay her with a Walmart gift card instead of a check. Is that OK to do?

A: Employers often give candidates a “skills assessment” or working interview to determine if that individual has the skill level required to do a particular job. If the work that this person is doing during this assessment benefits the practice, then you should pay her with a check and not a gift card. Compensate the candidate for work he or she did even if you determine the individual does not have the skill level necessary to do the job.



In this scenario, the candidate is taking radiographs on patients that you will use for diagnostic purposes and will then bill the patients. Your practice is benefitting from the

work this candidate is doing. Do not give her a gift card. Pay her with a check.*

*Check with an attorney to ensure you are compliant with labor laws in your state.

Q: I have two former employees whom I treated as patients when they worked for me. Neither has any pending treatment. The office has sent recall cards, but neither has responded nor been in for any preventative maintenance. Can I deactivate them because they no longer work for me?

A: The fact that these individuals are former employees has no relevance. Treat each as you would any other patient whom you have not seen in a while and are attempting to get back to the practice.

1. Document all attempts to communicate with the patient. This includes recall cards, voice messages left and any conversations you or staff has had with the patient in question.

2. If you get no response from these attempts, you can choose to dismiss based on noncompliance. In this case, the patients are not compliant with regular hygiene appointments and examinations.

3. If the patient schedules an appointment then fails it, send a failed appointment letter. This template is available at thedentists.com. Click on Risk Management then Recordkeeping. Once there, click the Forms link.

A woman with short dark hair, wearing a black dress with white polka dots and a thin belt, stands in profile looking out a large window. She is holding a silver tablet. The window looks out onto a multi-story city building. In the foreground, a black office chair is partially visible.

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