

Are Mystery Patients in Your Future? The Bright Medical Associates Story

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Everyone knows that satisfaction surveys tell you if your patients are pleased with “the caring concern” of your nurses, the doctor’s “willingness to listen” and other key aspects of a visit to a physician.

Surveys even go so far as to report the percent of your patients who would

enthusiastically recommend their doctor to friends or family. But survey results are limited to providing only dry statistics and benchmark comparisons to other practices. What survey reports lack is the “flavor” of a patient’s visit with the doctor.

Recognizing that there was more to learn about patients’ perceptions of their care experience, Bright Medical Associates, a 45-provider practice located in Whittier, CA, engaged Sullivan/Luallin, Inc. to conduct a series of “mystery patient” visits over

Yuliana Pantoja, Bright Medical Associates employee on the phone with a patient.



a period of five months. "Mystery patients" (the name is adapted from "mystery shoppers," employed by large retail organizations to assess the service aspects of a typical customer purchase) are experienced professionals who schedule appointments and go through the medical encounter from registration to checkout.

At Bright, the first step in the process had the faux patients telephone to schedule appointments with all of the group's providers using a structured checklist. The checklist ascertained a range of behaviors, including whether the call was answered in a cheerful, unhurried manner by an individual who gave his or her name, whether the caller was offered appointment time options, directions to the practice and other service dimensions.

Using a variety of symptoms from anemia to acne, the mystery patients scheduled appointments with pediatricians, cardiologists, orthopaedists, OB/GYNs and primary care physicians.

Next, the mystery patients visited each of the providers at Bright's various locations, using a customized checklist to assess all aspects of the encounter, including check-in procedures, friendliness of the reception staff, timeliness of the provider, caring concern of the medical assistant, provider communication skills and checkout procedures.

In addition, the mystery patients noted the overall practice environment in terms of orderliness, comfort, noise levels and other environmental issues. Also assessed were bathroom cleanliness and overall signage.

The mystery patient reports were submitted monthly and used by department managers to give feedback to physicians and staff. In cases where individuals had performed beyond expectations,

a common occurrence, the supervisor used the feedback to give well-deserved "pats on the back." In other cases, the manager was able to make timely interventions and change performance quickly.

Bright's management team was pleased to learn that the majority of mystery callers requesting an appointment were greeted by a friendly voice asking, "May I help you?" Mystery patients also reported that setting the appointment was easy and that they'd feel welcome on the day of the visit. However, more than half the time, the operator neither gave the location name nor asked if the new patient needed directions to the site.

On-site patient experiences were mostly positive, as noted by comments that the reception areas were clean and orderly. Further, most of the receptionists made a positive first impression by greeting the mystery patients with good eye contact and smiles. Unfortunately, as typical of most medical groups, name tags were visible less than half the time, either because they were worn on a chain, which hung low (and out of sight on a staff member seated at a front desk) or not worn at all.

Medical assistants, who are members of the care team and usually interact with the patient prior to the physician, have an opportunity to set the tone of the encounter. Frequently these staff members are juggling many tasks and may not focus on the need to smile and introduce themselves to new patients. While most employees smiled, the majority of Bright medical assistants missed the chance to



make a positive impression by telling the patient their name and welcoming the individual to the practice.

Overall, the provider phase of the visit was rated highly by the mystery patients, all of whom said that the doctor greeted them with a friendly handshake and "allowed them to finish describing the problem" and "explained things in an understandable way." Once again, typical of most physicians, very few patients received any written instructions or handouts pertaining to their symptoms.

Finally, it was puzzling that a fair number of the providers didn't end the encounter with a "warm, friendly handshake or touch," an obvious cue that the visit was over.

Mystery patient feedback is invaluable. It provides detailed descriptions of personal experiences that go beyond the dry data of a survey. Bright learned who of their providers and staff members consistently went the "extra step" for patients. Conversely, once they found which individuals weren't performing at the expected service levels they had the opportunity to make improvements.

Sullivan/Luallin, Inc., CAPG's preferred provider for patient satisfaction surveys and customer service training, has been an associate member for more than 15 years and can be reached at (619) 283-8988. ■