

# Positive First Impressions

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## Objectives

Articulate critical components of Positive First Impressions, Patient Satisfaction and Patient Loyalty

Address Patient Financial Commitment as it relates to Patient Emotional Commitment to Therapy

List options available to succeed in a high deductible, patient as consumer world

Locate resources on Frankel's Four Habits Model of Clinical Encounters

Integrate The Productive Therapist Findings related to Patient Satisfaction, First Impressions and Loyalty into daily clinical practice

Complete a self assessment of personal clinical productivity

Develop a personal plan of action to incorporate this information into clinical practice with assistance from peers and managers

## Outline

Problem: You are a great PT - and not everyone knows it  
Patients have more at stake financially as co-pays and deductibles increase  
Consumerism has some down sides  
Patient Emotional Commitment  
Promises/Guarantees  
Measures of Success from Patient Perspective  
Satisfaction = Perceived Value / Expectation  
Positive Patient Impressions - Including First Impressions  
The Four Habits Model - Frankel  
The Productive Therapist Data  
Negative Packaging - Intro to Herzberg's Motivation Hygiene Theory of Behavior  
Strategies for 1st Impression Management  
Converting Patients into Lifelong customers  
Self Assessment of Patient Management  
Personal Action Planning

## Problem

- ❑ You are a great PT - and NO ONE knows it
- ❑ You are a great PT - and Not Enough People know it
- ❑ How do Patients Judge You?

## Consumerism Has Down Sides

- ❑ Patients have more at stake financially as co-pays and deductibles increase
- ❑ Patients now have “Skin in the Game”
- ❑ Liking You is not enough

## Patient Emotional Commitment

- ❑ Purchase Decisions
- ❑ Satisfaction Is Required
  - ❑ But Not Sufficient
- ❑ Loyalty is Needed
  - ❑ Real Loyalty

## Promises/Guarantees

- ❑ What You Must Promise
- ❑ What You Should Never Promise
- ❑ Patient:Therapist Relationship



- ❑ Measures of Success from Patient Perspective
- ❑ Review of Evidence

## Satisfaction

- Satisfaction = Perceived Value / Expectation
- Factors in Perceived Value
- Factors in Expectations
- Changing the Equation
- Satisfaction is Not Enough

## Loyalty

- Types of Patients
- Attenders
- Participaters
- Non Attenders
- Sneezers

## First Impressions

- Positive Patient Impressions
  - Including First Impressions
- Factors
- Review of the Evidence

## Four Habits Model

- The Four Habits Model - Frankel
  - Invest in the Beginning
  - Elicit the Patient's Perspective
  - Demonstrate Empathy
  - Invest in the End

## Invest in the Beginning

- Create Rapport Quickly
- Elicit Patient's Concerns
- Plan the Visit with the Patient

## Elicit Patient's Perspective

- Ask for the Patient's Ideas
- Elicit Specific Request
- Explore the Impact on the Patient's Life

## Demonstrate Empathy

- Be Open to Patient's Emotions
- Make an Empathic Statement
- Convey Empathy NonVerbally
- Be Aware of Your Own Reactions

## Invest in the End

- Deliver DX Information
- Provide Education
- Involve Patient in Decision Making
- Complete the Visit

## Productivity / Quality

- The Productive Therapist Data
  - Phil vs Bill
  - Perceptions of Time Spent by Patients
  - Video Available
    - PTManager.com
    - PTManager Blog

## Impressions / Packaging

- Negative Packaging
  - Herzberg's Motivation Hygiene Theory of Behavior
  - Expectation Theory

## Strategies

- First Impression Management
  - Physical
  - Verbal
  - Environmental
  - All Senses
  - Cognitive Dissonance

## Strategies

- Converting Patients into Lifelong Customers
- Creating Sneezers / Endorsers
- Rewarding Loyalty
- Rewarding Endorsers

## Creating Action Plan

- Self Assessment of Patient Management
- Assessment of Team Patient Management
- Gap Analysis
- Priority Actions
- SMART Goals

## Discussion

# THE FOUR HABITS MODEL

HABIT	SKILLS	TECHNIQUES AND EXAMPLES	PAYOFF
INVEST IN THE BEGINNING	Create rapport quickly	<ul style="list-style-type: none"> <li>Introduce self to everyone in the room</li> <li>Refer to the patient by last name and Mr. or Ms. until a relationship has been established</li> <li>Acknowledge wait</li> <li>Make a social comment or ask a non-medical question to put patient at ease</li> <li>Convey knowledge of patient's history by commenting on prior visit or problem</li> <li>Consider patient's cultural background and use appropriate gestures, eye contact, and body language</li> </ul>	<ul style="list-style-type: none"> <li>Establishes a welcoming atmosphere</li> <li>Allows faster access to real reason for visit</li> <li>Increases diagnostic accuracy</li> <li>Requires less work</li> <li>Minimizes "Oh by the way..." at the end of visit</li> <li>Facilitates negotiating an agenda</li> <li>Decreases potential for conflict</li> </ul>
	Elicit the patient's concerns	<ul style="list-style-type: none"> <li>Start with open-ended questions:                             <ul style="list-style-type: none"> <li>"What would you like help with today?"</li> <li>Or, "I understand that you're here for ... Could you tell me more about that?"</li> </ul> </li> <li>Speak directly with patient when using an interpreter                             <ul style="list-style-type: none"> <li>Make eye contact and smile at patient so you are perceived as attentive.</li> </ul> </li> </ul>	
	Plan the visit with the patient	<ul style="list-style-type: none"> <li>Repeat concerns back to check understanding</li> <li>Let patient know what to expect: "How about if we start with talking more about ..., then I'll do an exam, and then we'll go over possible tests/ways to treat this? Sound OK?"</li> <li>Prioritize when necessary: "Let's make sure we talk about X and Y. It sounds like you also want to make sure we cover Z. If we can't get to the other concerns, let's..."</li> </ul>	
ELICIT THE PATIENT'S PERSPECTIVE	Ask for the patient's ideas	<ul style="list-style-type: none"> <li>Assess patient's point of view:                             <ul style="list-style-type: none"> <li>"What do you think might be causing your problem?"</li> <li>"What worries or concerns you most about this problem?"</li> <li>"What have you done to treat your illness so far?" "Have you sought help in your community?"</li> </ul> </li> <li>Ask about ideas from loved ones</li> </ul>	<ul style="list-style-type: none"> <li>Respects diversity</li> <li>Allows patient to provide important diagnostic clues</li> <li>Uncovers hidden concerns</li> <li>Reveals use of alternative treatments or requests for tests</li> <li>Improves diagnosis of depression and anxiety</li> </ul>
	Elicit specific request	<ul style="list-style-type: none"> <li>Determine patient's goal in seeking care: "How were you hoping I could help?"</li> </ul>	
	Explore the impact on the patient's life	<ul style="list-style-type: none"> <li>Check context: "How has the illness affected your daily activities/work/family?"                             <ul style="list-style-type: none"> <li>"What are the main problems your illness has caused for you?"</li> </ul> </li> </ul>	
DEMONSTRATE EMPATHY	Be open to the patient's emotions	<ul style="list-style-type: none"> <li>Respond in a culturally appropriate manner to changes in body language and voice tone</li> </ul>	<ul style="list-style-type: none"> <li>Adds depth and meaning to the visit</li> <li>Builds trust, leading to better diagnostic information, adherence, and outcomes</li> <li>Makes limit-setting or saying "no" easier</li> </ul>
	Make an empathic statement	<ul style="list-style-type: none"> <li>Look for opportunities to use brief empathic comments</li> <li>Name a likely emotion: "You seem really worried."</li> <li>Compliment patient on efforts to address problem</li> </ul>	
	Convey empathy nonverbally	<ul style="list-style-type: none"> <li>Use a pause, touch, or facial expression</li> </ul>	
	Be aware of your own reactions	<ul style="list-style-type: none"> <li>Use your emotional response as a clue to what patient might be feeling</li> </ul>	
INVEST IN THE END	Deliver diagnostic information	<ul style="list-style-type: none"> <li>Frame diagnosis in terms of patient's original concerns</li> </ul>	<ul style="list-style-type: none"> <li>Increases potential for collaboration</li> <li>Influences health outcomes</li> <li>Improves adherence</li> <li>Reduces return calls and visits</li> <li>Encourages self care</li> </ul>
	Provide education	<ul style="list-style-type: none"> <li>Explain rationale for tests and treatments</li> <li>Review possible side effects and expected course of recovery</li> <li>Discuss lifestyle changes that are consistent with patient's lifestyle, cultural values and beliefs</li> <li>Provide resources, for example, written materials, in patient's preferred language when possible</li> </ul>	
	Involve the patient in making decisions	<ul style="list-style-type: none"> <li>Discuss treatment goals: express respect towards alternative healing practices</li> <li>Assess patient's ability and motivation to carry out plan</li> <li>Explore barriers: "What do you think we could do to help overcome any problems you might have with the treatment plan?"</li> <li>Test patient's comprehension by asking patient to repeat instructions. "Just so I am sure that I have explained things well, would you tell me your understanding of the next steps?"</li> <li>Set limits respectfully: "I can understand how getting that test makes sense to you. From my point of view, since the results won't help us diagnose or treat your symptoms, I suggest we consider this instead."</li> </ul>	
	Complete the visit	<ul style="list-style-type: none"> <li>Summarize visit and review next steps</li> <li>Ask for additional questions: "What questions do you have?"</li> <li>Ask family members if they have other questions</li> <li>Assess satisfaction: "Did you get what you needed?"</li> <li>Close visit in a positive way                             <ul style="list-style-type: none"> <li>"It's been nice meeting you."</li> <li>"See you in ____ months."</li> <li>"Thanks for coming in."</li> </ul> </li> </ul>	

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# Clinical First Impression Self – Assessment

## Rate Yourself and Your Team

**Instructions:**

Score yourself on each of the following indicators listed in the first column.  
 Indicate the extent that your typical current for yourself and your team match the indicator in the columns to the right.  
 If you indicate that you need help in an area – you may want to indicate where you will get that help.

<b>Key Issues</b>			<b>Priority</b>
<b>Environmental Attributes</b>			
Our location and facilities appear safe and attractive from a distance.			
Our signage is distinctive, professional and easy to see and read .			
Our waiting/entrance area is clean, comfortable and inviting.			
Our clinical areas are appropriately designed, clean and uncluttered			
Our restrooms are clean, nicely decorated and accessible.			
Other:			

<b>Physical Attributes</b>	<b>Self</b>	<b>Team</b>	<b>Priority</b>
Wardrobe/uniform are appropriate to the patient population and professional.			
Different staff levels are identifiable by uniform.			
Jewelry, cosmetics, body art and accessories are appropriate to the patient population and professional.			
Staff smile and demonstrate appropriate verbal and non-verbal recognition of each other and guests.			
Staff appear clean and neat from a distance and up close.			
Other:			



<b>Communication Attributes</b>			
	<b>Self</b>	<b>Team</b>	<b>Priority</b>
I quickly create rapport, elicit the patient's concerns and plan the visit with the patient each treatment session.			
Voice volume is appropriate to the patient population and issues of privacy			
Use of language including grammar is professional, respectful and appropriate to the patient population.			
Privacy appears to be a priority in clinical care.			
Phone and electronic communications are professional and appropriate to the audience			
Website design and staff information is professional and welcoming.			
Waiting room literature is current, specific and professionally enhancing.			
Other:			

<b>All Senses</b>	<b>Clinical Areas</b>	<b>Non-clinical Areas</b>	<b>Priority</b>
Visually, we are professional.			
Auditory, we are professional.			
Olfactory, we are professional.			
Tactilely, we are professional.			
Refreshments, including fluids are available and taste appropriate.			
Other:			

Value Proposition			
	Self	Team	Priority
The care provided is perceived as valuable by our staff			
Patient satisfaction is investigated at every visit.			
Patient expectations are investigated at every visit.			
Results and outcomes are reviewed very frequently with each patient as they are achieved.			
Interventions are explained and their complexities highlighted regularly by professional staff.			
Support staff members endorse professional staff to patients frequently.			
Other:			

Which areas are most problematic for you? Which areas do you feel you will need the most assistance with?

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What actions will you take to address the areas that you've identified as both problematic and important?

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What support systems will need to be in place to help you succeed as you address your problem areas?

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