



HOW TO IMPROVE COMMUNICATION WITH PATIENTS AND STAFF



Optimize communication at every level of your practice with these pearls.

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In conversation, we assume that we're coming across clearly to people and that people are paying attention to us as we speak, but it's important not to make that assumption. Instead, we should assume from the outset of any communication with another person that we're not as good as we think. We'd better slow down, pay attention to how our interlocutor is responding, and lay it out overtly at the end of an exchange—whether an email thread or a phone discussion: This is what's been discussed and agreed upon.

Communication in a business environment is different from communication with friends and family. Communicating with someone we're intimate with is an organic, natural process. This doesn't mean that we do it any better, but we probably don't sit down and write out our talking points ahead of time or craft our message units to get our points across to family. It tends to happen on the fly, which is different from how communication should be executed in a business environment.

ENGINEERING COMMUNICATION

Certain tactics can be helpful when engineering communication with patients and with staff.

With patients. In business, communication must be engineered if it is to be effective. A simple way of orienting to this engineering process is by creating a table with four columns. The first column should list the intended audience of your communication (eg, the patient). The

"THE SINGLE BIGGEST PROBLEM IN COMMUNICATION IS THE ILLUSION THAT IT HAS TAKEN PLACE."

— GEORGE BERNARD SHAW

second column should list what your goal concerning that audience is. There can be many goals for a given audience. For example, if the audience is your patient, you might want him or her to understand that it's important to arrive on time or to adjust to new COVID-19 care pathways. The third column is the communication channel. Physicians have a number of channels by which to reach patients. Examples include in-person channels, both with doctors and staff, and digital channels via websites or emails, in addition to things like printed educational materials and signs in the office. The last column is the message, which must be consistent and must be framed with the audience in mind if it is to be effective.

With staff. A crucial communication audience is our staff. Let's go through the four columns again, but with the audience being your technical staff members, and the goal being to increase their career satisfaction. The channels are, again, multifaceted, as you can communicate with staff through their position descriptions, training and training materials, standard operating procedures, periodic formal performance reviews, and informal check-ins. The message, with your goal of increasing career satisfaction, should

certainly include praise and reassurance that the employee is progressing, career-wise. Most of all, if you're trying to generate career satisfaction for any worker—not just technicians—the message should help that person gain a sense of mastery. If you frame your communication in terms of developing mastery over the skills that the employee is learning, you will best be able to choose the channels you use and the types of materials you need to further that message.

GETTING IT RIGHT

The core of communication within an ophthalmic clinic is the communication between the doctor and the patient during those 5 or 10 minutes of face-to-face examination. The average ophthalmologist probably has 150,000 patient visits and encounters in the course of a 30-year career. And each one of those is an opportunity to either get it right or get it wrong.

Use surveys. Any initiative to improve communication can be aided at the front end by survey work. Rather than launching intuitive efforts that may or may not get to the heart of the matter, it's helpful to be better informed by doing research, even

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relatively informal research. Let's say that you are concerned about your communication with patients. A routine exercise is to call a random cross-section of patients, maybe five patients per doctor every month, to learn how their last appointment went. What did the patient like or dislike? Did the patient understand what the doctor or the staff members said? Is there anything that the patient was confused by? Pay attention to the answers and move to solve problems if you find any.

Monitor online reviews. Every practice should be checking Yelp and other review sites to see how patients view their experiences. If you find adverse reviews, particularly if patients are describing poor communication, that's evidence that you can use to frame a better communication plan with your staff.

Hold more meetings. Most practices, whether before or after the pandemic, simply do not have enough meetings. There's a false economy in the thinking that meetings take too much time. If meetings are planned and conducted in an effective way, a lot of time will be saved. If you're not meeting, you're not coordinating your team. If you're not giving clear instructions during meetings, things can go awry later,

and you run the risk of creating more problems that need solving. This is all the more important in the era of COVID-19 because the quickly changing protocols can cause stress for patients, staff, and doctors alike.

Engineer time into the day's schedule to communicate clearly with your staff. Have a short 5-minute staff huddle at the beginning of the clinic day to go over what the day has in store, what you noticed that worked or didn't work well yesterday, and a few things to be on the lookout for. Having regular meetings boosts cohesion and fosters communication.

Words meet actions. Make sure what you say is aligned with how you act and what you do. If a doctor turns to the staff during a general meeting and says, "Our patients are No. 1. We have to do everything to please our patients," but that same doctor arrives late, runs behind in the clinic, or is harsh with a patient, that misalignment is harmful to the goals you have for communication in your practice. It's good to check in, both for yourself and for others that you supervise, to make sure that what we say, what we do, and what we write are in line with each other.

Parrot. In a submarine, if the captain says to a crew member, "All ahead, right rudder," the crew member is expected

to echo back, "Aye, captain. All ahead, right rudder." The captain then knows that the command was heard correctly.

The same thing can be put in place in your clinic. If a doctor turns to a staff member and says, "Please open a half-hour break in the middle of the day for an important call I'm taking at 3 pm," the staff member should know to parrot back, "Yes, Doctor, I'll make sure that you're free for half an hour at 3 pm." This helps to ensure that the message got through correctly and will be carried out.

CONCLUSION

Effective communication is not easy. It takes effort to coordinate your messaging with staff members and patients. Paying attention to the points outlined in this article can be helpful in boosting your communication skills and fostering better relations among your staff, your patients, and yourself. ■

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