



# **Resolving Patient Dissatisfaction**

As a physical therapist, you take pride in your connection with patients and strive to ensure they are satisfied with their care. However, despite your best intentions, patients may complain about a variety of issues, ranging from delayed appointment times to billing amounts to treatment progress. If unresolved, these complaints can affect your relationship with the patient and your reputation as a PT. They can even result in legal action; dissatisfied patients are more likely to sue or file a formal complaint with a state licensing board. Even if the lawsuit or licensing board investigation is unsuccessful, it creates significant distress in a PT's life.

By managing patient expectations, taking prompt action when complaints are lodged, and engaging in effective conflict resolution, you can reduce the number of complaints and effectively resolve the ones that occur. To achieve these goals, however, you'll first need to ensure you have effective communication skills.

#### **Communication Basics**

Although communication is an essential skill, it receives little attention once a PT graduates and transitions into practice. That's unfortunate because poor communication frequently forms the basis of legal action, particularly when there is a dispute. Therefore, it's helpful to periodically revisit the basics, starting with understanding the foundation of effective communication: mutual trust and respect between PT and patient.

Building trust and respect depends on building rapport through verbal and nonverbal communication. Be clear, concise, and complete in your communication. Call the patient by their preferred name and using their preferred pronouns, position yourself to be at eye level, and maintain eye contact. Face the patient directly, rather than turned to the side, and lean forward slightly. Keep in mind that cultures differ on the degree of personal space needed. Nod at times to encourage the patient to continue speaking. Even when wearing a mask, you can use your eyes and body position to communicate effectively.

PTs have heavy workloads, so it can be difficult not to show impatience when someone takes a long time explaining a problem or takes the conversation off track. Avoid fidgeting, glancing at the clock, or multitasking (for example, documenting as you listen). Instead, listen closely, with your body in a relaxed position, and avoid interrupting.

Although it takes a bit of time, learning about the patient's occupation, interests, and hobbies is key not only to developing a plan of care, but also to promoting an effective relationship. Each patient appreciates being treated as an individual. Keep notes of what you learn so you can refer to them in future interactions.

Using informational tools such as websites, videos, and brochures in the patient's preferred language can help streamline communication. Be sure to document use of these tools in the patient's health record. Remember to avoid jargon, and ask questions to ensure patient understanding. Don't speak too fast, and use short sentences.



A good way to wrap up the session is to ask, "What else can I do for you today?" If there is nothing else, end on a positive note, such as commenting on how well the patient is progressing or saying you look forward to the next visit. Of course, be sincere in what you say.

## **Managing Expectations**

Patients often enter physical therapy with preconceived ideas of what to expect based on their past experiences, the experiences of people they know (for example, friends and work colleagues), and what they read in print and online. When these expectations aren't met, they become dissatisfied.

### **Communicating With Angry Patients**

Here are some tips to facilitate communication when a patient is angry:

- Talk with the patient privately (unless the situation has already escalated to the point where you feel unsafe).
- Ask the patient to state the issue; do not interrupt.
- **Listen nonjudgmentally.** Don't cross your arms or interrupt.
- After the patient is finished, **restate the issue** to be sure you understand.
- Acknowledge their anger and concerns and note that they are taken seriously. "I can see that you are frustrated, and I want you to know that I take your concerns seriously." Keep calm and don't raise your voice or express annoyance or frustration.
- Engage patients in problem solving. Ask them for their ideas on how to resolve the issue.
- **Be honest.** You may not be able to fix the problem or in some cases, you will need to refer it to someone else.
- End the discussion with reviewing the actions that will be taken to address the patient's concerns.

If the patient's anger is such that you are worried about your safety, exit the area, and call for help. To safely leave, you could say something like, "You've raised some tough questions. Let me talk with my colleagues to see what can be done." If you anticipate a patient's response will be anger, position yourself between the patient and an unblocked exit door so you can leave quickly.

Document the conversation in the patient's record. Be objective and don't draw conclusions. For example, write "The patient's face was flushed, and his hands were clenched" instead of "The patient appeared to be angry."

A first step to preventing dissatisfaction, therefore, is to understand what patients expect from their therapy and share what is realistic. Open-ended questions, a mainstay of good communication, can be helpful here. For example, you might ask, "What is your goal for therapy?" Never guarantee or overpromise outcomes. For example, say, "The exercises are intended to help reduce your back pain," rather than "The exercises will reduce your back pain."

You also can help ensure patients don't have unrealistic expectations by asking them to restate information in their own words or providing a return demonstration. For example, after giving instructions for exercises to be done at home, have the patient show you each exercise and explain the expected outcome. Remember that few patients will have experience with physical therapy. It's up to you to clearly explain processes so the patient knows that to expect.

Finally, try to anticipate potential sources of dissatisfaction. For example, notify patients when there will be a delay in a session and keep them informed. Patients unhappy with the financial side of care may complain to PTs, so ensure that your organization provides patients with information about billing practices. Be sure you and other staff wear nametags with their name and role to avoid patient frustration with not knowing whom they should communicate with related to a particular issue.

## **Prompt Action**

Be alert to verbal and nonverbal signs of anger, frustration, and dissatisfaction. For example, asking multiple times about the effectiveness of an exercise may indicate the patient does not feel therapy



is helping the problem, which could eventually lead to a complaint, especially if the patient has unrealistic expectations about the outcome of therapy. A patient who is reluctant to speak up may express dissatisfaction using nonverbal cues, such as by not making eye contact.

Patients who become angry require special attention to address the issue and to keep yourself safe (see "Communicating With Angry Patients"). The most important action you can take in this situation is to remain calm.

Emotional intelligence and empathy can enhance your ability to detect early signs of dissatisfaction. El is the ability for us to recognize our feelings and the feelings of others. Empathy includes our ability to understand the perspective of the other person. Improve your EI by enhancing your communication skills and managing your own stress and possible biases. Improve empathy by thinking about what could be causing a patient's dissatisfaction, considering how you might feel under similar circumstances, and listening for both verbal and nonverbal messages.

#### **Problem Solving**

The following steps can help in resolving a patient's frustration. Be sure to focus on resolving the conflict and coming from a place of mutual respect, rather than focusing on being right or winning an argument.

Step 1. Define the conflict.

Step 2. Analyze the situation. Ask questions such as:

Who is involved?

What is the nature and scope of the problem? When did the problem occur? How much has it

In what context, situation, or place did the problem

How and why did the problem occur? How important is the issue (major or minor)?

Step 3. Generate alternative solutions and their possible outcomes. Before offering your solutions, ask patients what they would suggest. You might say, "What would you suggest we do to resolve this?"

El and empathy can also help you understand that dissatisfaction or anger may be unrelated to your care. For example, a patient may be experiencing family or work conflicts, may have lost sleep due to a crying infant, or simply been cut off in traffic. That's why it's critical to determine the source of the problem. If it's related to care, you can take steps to resolve it.

## **Resolving Disputes**

It's best to take a problem-solving approach to resolving complaints and disputes with patients (see "Problem Solving"). Tell the patient that you want to work through the situation to arrive at a mutually agreed-upon solution.

In some cases, you may decide you (or the organization) were wrong, and the patient deserves an apology. Factors to consider when deciding on whether an apology is necessary include the degree of certainty surrounding the event, the severity of the incident, and the elements of human and system error. Keep in mind that an apology doesn't always mean you were at fault, but it does convey that that you're sorry something happened.

If you are the one delivering the apology, do so in person if possible. Be calm and maintain open body language. Focus on the facts that occurred. Acknowledge the impact on the patient, and, if appropriate, the impact on the PT-patient relationship. If applicable, note what will change to prevent the situation from happening again (or reducing the chance of it occurring). For example, you may have implemented texting as an option for patients to be notified of appointment delays in real time.

Allow time for the patient to respond-don't expect an immediate acknowledgement of the apology and don't ask for forgiveness. Most patients will appreciate your efforts.



## A Proactive Approach

It's never easy to hear that patients are dissatisfied. To reduce the number of complaints, manage expectations and act quickly when you detect dissatisfaction or a complaint is made, using a problem-solving approach as needed. These actions will help you maintain a productive relationship with your patients and possibly avoid legal action based on dissatisfaction.

#### Resources

CNA and Aon. Risk management manual. 1-199. https://aonaffinity-blob-cdn.azureedge.net/affinitytemplatedev/media/dentistsadvantagedev/media/risk/risk%20management%20manual/cna\_drmp\_all\_093019\_cf\_prod\_asize\_da\_sec.pdf. CNA and HPSO. Risk management spotlight: Communication. www.hpso.com/Documents/Risk%20Education/individuals/Claim-Reports/Pharmacist/Communication-Spotlight.pdf.

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