Is a changing healthcare dynamic affecting patient service?

By Robert C. Bohlmann, FACMPE

Most of us know that positive management attitudes trigger positive staff attitudes, which have an effect on patient service. But are we losing this sensitivity as the medical practice profession experiences transition? Let’s step back and take a 30,000-foot snapshot to explore the question.

Medical practice, as a major component of the healthcare industry, has moved beyond the mom-and-pop days when a seller’s market frequently prevailed with respect to service-oriented attitudes. Today, group practice is characterized by larger physician-owned groups and, to an increasing degree, hospitals or integrated delivery systems. Even though demand might be exceeding supply for physician services, we have expanded our healthcare capacity as nonphysician providers (NPPs) have assumed a larger role as providers.

It is amazing to me that despite increasing competition, some practices retain the seller’s mentality of “you’re lucky we’re here!” This attitude is still present at the front-office, clinical and provider levels, as noted during the “Clinicaphobia” session at the MGMA 2012 Annual Conference and outlined in the feature story, “A matter of perspective,” last month. (Visit mgma.com/objective-virtual to read the story.)

In some respects, group practice today has many characteristics of big business in terms of size, opportunity and function. Physician groups use sophisticated operating systems, maintain human resources departments, create marketing plans and engage in creative financing. Even so, some practices lag behind other big businesses with respect to excellence in customer service or public relations.

Like it or not, public relations is a managerial responsibility. You create an environment that develops and sustains employee attitudes,
which translates to consumer (patient) service and experience.

I call attention to the *Dallas Morning News* “Top 100 Places to Work” issue,¹ which includes input from all business sectors of various sizes and industries, including healthcare (276 organizations). The piece that interests me relates to the following characteristics that employees assigned to three top executives:

- Communicates openly with each and every employee
- Possesses good vision of where the company needs to head
- Inspires and motivates
- Stays in touch with employees in an enthusiastic and passionate manner
- Adapts constantly
- Is open to change and information
- Has strong leadership skills and vision
- Is honest and truly cares

I noted with interest that employees give significant emphasis to team-building management styles. My concern is that increasing pressures on top and departmental management limit their abilities to provide this type of encouragement. As a result, lackluster staff attitudes are accepted as a given, and the patient experience takes a nose dive.

How does all of this relate to what MGMA-ACMPE members should do on a day-to-day basis? Here are my suggestions for management:

- Get the heck out of your comfortable office and adopt a “management on the move” approach to see, hear and experience how staff interacts with patients.
- Use MGMA-ACMPE resources to remain informed about changes in the industry and tips to tackle them.
- Recognize employee strengths and create plans to work on weaknesses.
- Understand where the organization stands and be able to identify its future path.
- Facilitate strategic planning as part of an organizational game plan, which might include affiliation.
- Motivate staff to execute the strategic plan with the understanding that modification could be necessary in a changing healthcare environment.

Above all, recognize that leadership attitudes are transparent and affect rank-and-file employees. This applies to top administration, department heads and supervisors. If the boss is grumpy, mad at the world and behind the eight ball, the same attitude is likely to prevail among his or her staff.

These challenges apply to physician-owned medical groups, where a greater entrepreneurial attitude may prevail, and to hospital-owned practices as well. The disconnect between a hospital and its integrated physician practices has resulted in confusing voids as C-suite and well-intentioned board members tend to lack full understanding of group practice operations and financial dynamics. I do not share

What concerns me most is the effect that stressed and negative managers have on patient service.

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