

Patient Satisfaction: The Increasing Significance of the Survey and How to Make It a Success

Exploratory Paper

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Introduction

The topic of patient experience has gained more attention in the healthcare industry because of changes in payer reimbursement and patients' online access to healthcare quality data. Patient satisfaction surveys have been a staple in virtually every healthcare delivery setting for years. However, because of patients' perceptions of their experience and many other confusing variables, it is important to challenge the effectiveness of the survey method.

This paper will assess the pros and cons of the patient satisfaction survey through literature search and interviews to determine whether it is effective in measuring and improving patient experience. Alternatives to the patient survey, including nonaction, will be explored. The steps to survey success, including how to address common survey responses, will be reviewed. To conclude this paper, an objective summary will be provided to include the impact of surveying patients as well as the reasons why focusing on patient satisfaction has become increasingly important.

Background

Changes in healthcare reimbursement and incentive programs have led to an increased recognition of the significance of patient satisfaction and experience. Patients have greater access to online data regarding quality healthcare and value and use such data to make healthcare decisions.

Healthcare has used patient satisfaction surveys to show interest in patient feedback for quality improvement. Approximately 86 percent of medical practices survey patients in some form (Hertz, 2018). Organizations have also been evaluating tools to better understand and improve patient experience. The survey process needs to be reviewed to see whether it is effective in measuring and improving patient experience. Also, the subjectivity of patient survey responses has been a source of concern, as they may contain a patient's biased perception of their

experience. Survey results also have many confusing variables which make it difficult to use the data to improve patient satisfaction.

A particular OB/GYN practice manager is skeptical about the cost- and time-efficiency of implementing a new or improved patient survey process. For years, management has intended to implement a patient survey, and like most practice managers, this manager was balancing a full plate of responsibilities and priorities. Also, this OB/GYN practice has been confronting the challenges of rapid growth; the surrounding area has grown quickly, and the community lacks providers that will address its needs. However, even after adding more providers, the appointment schedules at this practice are full, if not frequently overbooked. Thus, patient satisfaction issues, such as access to care and patient waiting time to see the provider, seem fairly obvious. Currently, the providers of this group are also apprehensive about conducting patient surveys, and similar organizations might consider surveys unnecessary when they are not actively looking to acquire new patients.

Reasons to Survey Patients

Financial Advantage

Organizations with current market shares could face a shift in competitive advantage. The link between financial incentives and patient experience scores has led to a growing emphasis on patient satisfaction. Payers are changing how they reimburse for services as they transition from volume to value. These external factors bring increased pressure with a more complex payment environment, and providers and hospitals are financially rewarded or penalized based on clinical quality and patient outcome scores from various external-reporting requirements. The Agency for Healthcare Research and Quality notes substantial evidence that points to a positive link between patient experience and healthcare outcomes (AHRQ, n.d.). One reporting requirement from Centers for Medicare and Medicaid Services (CMS) known as the

Merit Based Incentive Payment System (MIPS) incorporates Consumer Assessment of Healthcare Providers and Systems (CAHPS) and survey questions and brings national attention to measured outcomes. Organizations that accept Medicare and do not participate in this program could risk up to a 9 percent reduction in reimbursements.

Customer Value Demand

The demand for more customer value in healthcare is rising. The healthcare industry is far behind retail and finance in customer centricity. The retail industry is years, perhaps even decades, ahead in creating positive experience that drives customer loyalty, repeat business, and profits (Fletcher, 2018). For years, adherence to external government rules and regulations has made it challenging to focus first on customer experience. Customer-centric models, better known in healthcare as patient-centered models, include strategies involving transforming people, processes, and technologies so that the patient is at the focus of business operation strategies. Retail is setting the standard in customer centricity, and patients now have higher expectations for value when it comes to their healthcare.

Because of rising healthcare costs, patients are becoming shoppers. In 2017, 43 percent of patients had high deductible health plans. These plans start with annual deductibles over \$1,300 per individual (Fletcher, 2018). Insured patients have higher out-of-pocket costs than ever before motivating them to study their care options. Patients are gaining greater access to online data regarding quality healthcare and value and using it to make healthcare decisions. This online data may be a combination of CMS quality survey reporting and online reviews posted by patients. Online review platforms such as Google and Yelp have grown in popularity. Research shows that patients trust online reviews and use them to make treatment decisions (Heath, 2018).

Improved Patient Compliance and Health Outcomes

According to a recent study by Prophet and GE Healthcare Camden Group, 81 percent of surveyed patients are unsatisfied with their healthcare experience. Meanwhile, 63 percent of providers felt they delivered high-quality care (Prophet, n.d.), indicating a gap between patient and provider perspective of the care provided. Dissatisfied consumers are less likely to be compliant and pose a higher liability risk while those who are happier with their care are more likely to adhere to provider recommendations and return in the future (Mehta, 2015). Increased patient satisfaction is associated with fewer malpractice lawsuits and better patient compliance and outcomes (Medical Memory, 2015).

Reasons to Challenge the Survey Method

Subjective Results

The satisfaction survey aims to gauge whether the patient's expectations were met, but survey questions render subjective answers. Two patients can have identical care encounters but have two very different levels of satisfaction based on their unique expectations for their care (Heath, 2018). Take Andrea, for example, who visits her provider annually for a routine exam. She intentionally schedules an appointment over her lunch break from work, but her provider, Dr. Miller, is running over 20 minutes late. The staff works to keep her informed and apologizes for the delay. After her appointment, she rushes back to work. She receives a text message a shortly thereafter to survey her experience. One of the questions was "How satisfied were you with your medical care?" She loves Dr. Miller, and while the delay affected her schedule, Dr. Miller and the staff had been very attentive. She puts "5" on the questionnaire following a five-point poor-to-excellent scale. Meanwhile Joan, another patient, has an experience with Dr. Miller. She is informed that the provider was running behind, and again, the staff is apologetic. However, the problem is that such delay seems to happen in each of her visits with Dr. Miller, and thus, she puts "2" on her survey questionnaire. A patient's perception of a healthcare encounter can vary

greatly compared to their expectations for it. It is important to distinguish a low satisfaction rating from low-quality care, as they may not necessarily be equal. Running behind schedule was a poor experience for both Andrea and Joan, but the question and their answers do not effectively rate the value or quality of care Dr. Miller provided to them.

Also, an inefficiently designed survey may not ask the right questions. Strategic questions gather specific data needed to address issues. A survey that is not well thought out may serve as more of a “pat on the back” for what is going well instead of drilling into areas for quality improvement.

Variation of Results

Patient survey is only as good as the information it gathers. Variation in sample respondents and other patient characteristics affects results. Compared with satisfied patients, disgruntled patients may be more likely to respond to these surveys and vent their frustrations. Satisfied patients may not feel the need to respond to quality improvement because of their experience, and because of people’s hectic lives, they quickly forget to respond to requests to participate in surveys. Therefore, low participation is a common challenge to the survey process.

Surveys offer a macro view of the patient at a single point in time and are only part of the patient’s experience. According to the Agency for Healthcare Research and Quality, patient experience encompasses the range of interactions that patients have with the healthcare system, including their care from health plans and from doctors, nurses, and staff in hospitals, physician practices, and other healthcare facilities (AHRQ, n.d.). If the same survey were repeated, the numerical results will likely be different (Bachman, 2016).

Provider Impact

Providers fear receiving poor patient satisfaction scores, which affect their revenue. To avoid poor scores, a provider might develop habits such as overtreatment and overprescription. A

team of UC Davis researchers found people who are most satisfied by their doctor more likely to be hospitalized and accumulate more healthcare expenditures than less satisfied patients (UC Davis, n.d.). The national study by US Davis is the first to suggest that higher instances of adverse effects caused by unnecessary medications and procedures is due to over emphasis on patient satisfaction (UC Davis, n.d.). Using a patient survey to assess the quality of health services does not provide an accurate picture of quality of care (Jacoby, 2015). Poor reviews and scores can lead to unintended consequences, such as diminished physician satisfaction. In one study, 78 percent of clinicians said that scores moderately or severely affected their job satisfaction negatively, and 28 percent said that the scores made them consider quitting (Bachman, 2016).

What Are the Consequences of Not Surveying?

Organizations face several consequences if they do not survey patients. According to Kenneth T. Hertz, by not regularly surveying patients, healthcare organizations could be missing out on valuable feedback (Hertz, 2018). Despite the feedback's subjectivity, patient perceptions are indispensable insight. The potential for higher reimbursement, incentives, more positive online reviews, and better patient outcomes are good reasons for integrating or optimizing a survey.

Steps to More Effective Surveys

Patient survey methods include post-visit surveys, patient shadowing, and focus groups. Post-visit survey methods can be internal or automated through third-party vendors. While some internal processes can be time-consuming and costly, a third-party vendor may be better at analyzing survey data to target certain areas for quality improvement. Medical organizations are balancing various dynamic external reporting program requirements with internal quality

improvement goals. These growing demands require practices to transition to more efficient workflows, and an automated survey method that meets multiple needs and goals will be optimal.

Because of rapid improvements in technology there is a wide range of survey vendor options. Third-party survey vendors cost more upfront but potentially save time and money in the long run. Some vendors offer a series of standardized surveys to measure and rate healthcare experience, and CMS has a list of approved vendors for CAHPS surveys. Many vendors can interface to export data from electronic health records so patients automatically receive a survey invitation via electronic survey or text. Survey data is aggregated and organized on an online dashboard. Results can then be used to compare to similar organizations. Outside vendors may offer ongoing advisory and support for quality improvement goals.

Press Ganey Associates, Inc., a well-known third-party vendor in the medical industry, offers a comprehensive suite of solutions to help manage surveys, data collection, and online reputation. They offer various survey modes to include email, text, and written mailers. Benchmarking against other practices is included with the Press Ganey Medical Practice Database, which has 18,000 sites and 222,000 providers in 92 specialties. Further, the Press Ganey CGCAHPS database has experienced substantial growth over the last few years, growing to 25,000 sites, 125,000 providers, and 6,860,167 questionnaires (Press Ganey, n.d.). The Press Ganey Medical Practice Survey, one of the more commonly used surveys by medical practices, has a standard of 17 questions and was priced higher per provider annually compared to other third-party vendors.

SurveyMonkey is an online survey platform that claims 20 million questions are answered on their site every day. They have built a suite of Health Insurance and Portability and Accountability Act (HIPAA) compliant healthcare products that include patient satisfaction and CAHPS surveys. Organizations use templates created by experts, or they create custom health surveys that fit their needs. These surveys can be distributed by email, website, or mobile device, and the data can be analyzed on the site platform and exported into professional charts.

SurveyMonkey offers a pricing range lower than \$100 per month for a practice, making it an affordable automated option.

Interviews performed with various colleagues managing practices in the surrounding area provided further insight. Results reflected that most practices surveying patients use an internal post-visit survey method. The practices interviewed provided the frequency of reviewing survey data and it ranged from monthly to bi-annually. Responses regarding patient's perception of quality of care and customer service were listed as key benefits of using surveys.

Alternatives to the Post-visit Survey

Patient shadowing can be a powerful tool to measure the full cycle of patient experience. Shadowing involves witnessing everything the patient experiences, recording and observing each step of the process, and then seeking feedback from the patient at each point of care. Ideally, shadowing is carried out by a variety of staff. Senior clinical and administrative staff is recommended to provide different perspectives. After patients complete an informed consent form, a shadowing individual can be the eyes and ears of patient experience through the environmental, waiting time, and verbal communication process. A summary is then prepared from the patient's point of view. The summary includes what went well and what could have gone better along with the shadowing individual's report of what they heard and saw.

Patient focus groups can also be a great source of knowledge. Meeting and exchanging ideas with patients and their families can bring an important perspective to the patient experience. While surveys focus on how the patient was treated during their visit, focus groups can concentrate on creating a positive experience even before the visit. By assembling a diverse group of members, practices can boost recognition, improve satisfaction, and create a more comfortable environment. Bonnie Roberts, RN, of the Owensboro Kentucky Hospital, states, "When you listen to the patient's point of view, you realize how hard it can be for them." Organizations have the ability to simplify things and make life easier for patients as well as staff (HCPro, n.d.).

Selecting Survey Questions

Regardless of the chosen method, it is important to select survey questions that obtain the necessary information to make improvements. According to SurveyMonkey, a common survey design mistake is phrasing a question to make the responder answer a certain way, for example, “How short was Napoleon?” One must also avoid asking questions that may force patients to address multiple issues at once. If a question does not apply to a patient, instruct them to skip to the next. Also, avoid asking questions that include absolutes such as “always” or “best” as well as questions that may not be applicable to the patient’s situation. Provide a space for patients to freely write comments on good or bad experiences.

Ask simple, easy-to-understand questions that minimize subjective answers. Using consistent scales to rate answers is recommended; the most widely accepted is the five-point, very poor–to–very good scale (Boyer, n.d.). Common questions in the CAHPS and medical practice surveys include top categories for patient satisfaction, such as access to care, quality care, patient engagement, and overall satisfaction.

Access-to-Care Questions

Rate the ease of your appointment scheduling.

- Ask patients to rate their experience regarding the process of calling the office to schedule an appointment and the efficiency of completing that request. This potentially subjective question offers feedback on a specific area for improvement.

How many minutes did you wait (including waiting area and exam room) after your scheduled appointment time?

- No one likes waiting, but it is a common patient satisfaction issue in organizations. According to SurveyMonkey, 8 in 10 healthcare professionals believe that most appointments start on time, but only 52 percent of patients agree (SurveyMonkey, n.d). Measuring wait time ranges from hold time to schedule an appointment to time spent

waiting in the exam room to be seen by a provider. This may also include waiting for results post-visit and for provider instructions on follow-up plans.

- It is critical to keep patients comfortable and informed of any delays in their appointment. Asking a specific number of minutes reduces subjective answers and provides measurable data for improvement.

Quality-of-Care Questions

How satisfied are you with our patient communication?

- Patient communication may include informing patients of what to expect at the appointment as well as delays, returning calls in a timely manner, and even providing an estimate of their patient responsibility. In this digital age, patients expect automated communications for appointment reminder emails and texts.

How attentive, caring, and understanding was our staff?

- This question aims to obtain data on how well the nurse or assistant listened to the problem or concern. Effective, empathetic communication with patients makes them feel much more satisfied with their care experience (Minemyer, 2017). Empathy and the anticipation of patient needs are part of patient-centered focus, and quality training contributes to a higher-quality patient experience.

How would you rate the concern the care provider showed for your questions or concerns?

- This question specifically obtains feedback on how the provider answered patients' questions or concerns. Providers who listen, demonstrate compassion, and empathize with patients rate higher. Eye contact, relaxed muscles, and open posture contribute to patients feeling recognized and appreciated.

How satisfied are you with your provider?

- Caregivers various personal qualities such as empathy, warmth and understanding, give patients hope and the support they need. Providers generally face burnout because of overbooked schedules, reduced time for visits, and tedious government requirements. Seventy-three percent of provider executives have stated that balancing patient satisfaction and employee job satisfaction, including providers, hinder efforts to improve patient experience. Addressing provider satisfaction may improve patient satisfaction. The Cleveland Clinic saw major improvements in patient experience measures after implementing programs to engage employees in their caregiving mission (Merlino & Raman, 2013).

Patient Engagement and Education Questions

How would you rate your care provider's explanation of your problem or condition?

- Patients are afraid, confused, and anxious about their care. Studies show that half of all patients walk out of the office not knowing what to do and that only half of patients' retained information is correct. Department of Health and Human Services data shows that 12 percent of patients have proficient health literacy. Only 37 percent of patients understand their treatment plans, yet 80 percent of physicians believe patients understood their instructions. Quality explanations and instructions for care and treatment include access to printed or online educational materials and videos. Incorporate the "teach-back method" and include written instructions for greater patient engagement and healthcare outcomes (Dickens, n.d.).

Overall Rating Questions

How would you rate your most recent experience in our office?

- Patients' perception of experience can vary greatly in each encounter. For a more specific rating, ask for feedback on a specific encounter rather than generalizing care, which may include multiple encounters.
- Patient experience includes promoting a healing environment. Patient comfort and safety should be a priority. Practices need to create a safe environment by ensuring proper hand washing and enforcing OSHA safety measures. It is also crucial to offer a clean office environment with comfortable furniture and easy flow for patients. Studies show that patients prefer natural décor with plenty of natural light through windows and plants (HCPro, n.d.). Design flexible rooms for consultation that offer more room for a wheelchair or a guest.

How would you rate our concern for your privacy?

- For optimal privacy, create a sound-absorbing space with carpets and acoustic ceilings where possible. Practices are wise to consider greater privacy for registration and payment-processing areas. Performing vital and weight measurements in a private area is appreciated by patients. Distractions such as an education loop on a waiting room television, efficient technology, e-visits, or telemedicine contribute to greater privacy and easier flow for patients.

What is the likelihood you would recommend our practice to others?

- Practices that ask their patients about their intent to return and whether they would recommend them to friends gain valuable insight. The “intent to refer” measurement is a powerful metric for predicting customer loyalty (Schlesinger, 2017). Press Ganey research has shown that when patients are provided clear communication, perceive

teamwork among staff, and are shown empathy, they will recommend their doctor and the practice 99 percent of the time (Press Ganey, n.d.).

Increase Survey Participation

A survey is only as good as the data it collects. An estimated 40 percent of surveys will be returned, with the margin of error up to 14 percent (Ross, n.d.). If too few patients participate in the survey process, the data may not be meaningful. To offset the margin for error, practices need to survey the largest group possible. The Agency for Healthcare Research and Quality recommends at least 50 responses per provider and a minimum of 300 participants for group practices.

For greatest participation, studies show that a survey must not take longer than five minutes to complete. After five minutes, participants are more likely to abandon the survey. Practices should aim for three- to five-minute surveys. The best survey methods vary and are related to patient demographics. Younger generations tend to participate more via text invitation or online or electronic surveys while older generations may prefer mail, phone, or census-based surveys. Also relevant is the timing of the survey request. If patients receive an invitation long after the visit, they may not remember the details needed to complete the survey. If possible, strive for anonymity, as patients are more likely to answer honestly if their identity is protected. Third-party vendors can de-identify patients from general data. However, if high-risk survey results are obtained, practices can identify the patient to manage a potential high-risk outcome or liability.

Leverage Surveys to Boost Online Presence

A survey process should be leveraged to obtain reviews and boost a provider's online presence. A survey provides the opportunity to gain insight and improve common satisfaction issues before unsatisfied patients voice their concerns online. Dissatisfied patients may be more

inclined to post a negative online review post-visit. Poor online reviews can be difficult, if not impossible, to remove from the public eye (Sickler, 2018). Poor reviews and negative word of mouth can impact provider reputation and potentially affect future revenue if it is not managed closely.

Reputation Management professionals recommend creating meaningful content and posting positive reviews to push down negative search results (Sickler, 2018). It's common for internet users only view the first page of search results when researching online.

Asking patients to leave positive reviews is key to building online presence. Data shows 71 percent of patients would leave a review if asked (Boyer, n.d.). A request to provide a review can come from staff or from an automated email or text post-visit. Various vendors offer an additional service that tool turn highly graded patient surveys into five-star ratings directly on a website. Patients trust online reviews, which make them a critical component in a competitive market both now and in the future. Positive online reviews are useful in recruiting new patients, quality employees, and new providers to the practice. Even if a practice is not looking to attract new patients, they should still manage online reviews.

Include the Team for Quality Improvement

Be ready to address trending survey results with the whole organization. Review data regularly and focus on trends, not outliers. In the 2017 MGMA Data Dive, practice operations indicate that 74 percent of organizations review surveys monthly.

Select one to two areas to improve, and engage the staff to cultivate an environment of quality improvement within the practice. The abovementioned OB/GYN practice manager found it helpful to hold staff meetings on patient satisfaction and explain the purpose and process of obtaining patient feedback through surveys. Practices should create a culture that fosters a high-quality patient experience. Encourage kindness, compassion, and constant dedication to patient safety. Every member, from their behavior to their performance, is a part of the patient

experience. Practice managers need to provide clear patient experience expectations for staff members. Engage the staff on improvement goals and offer team rewards for achievements.

Also, be sensitive at the individual provider level, as low scores do not necessarily mean low quality. While some organizations offer financial incentives, it is important to avoid penalties for low scores. Identify providers with low scores and establish individual improvement goals with providers in specific areas.

Conclusion

Why it Is Increasingly Important to Survey	How to Improve Surveys
86% of organizations survey patients 74% review surveys monthly	40% of patients return surveys; participation can be improved through brief surveys with simple questions
81% of patients are not satisfied with their care	63% of providers felt they delivered quality care; surveys highlight areas that need improvement
37% of patients understand their treatment plan, and only 12% have proficient health literacy	Provide quality printed or digital patient education to ensure greater comprehension.
71% of patients are willing to leave a review if asked	Take the opportunity to obtain reviews from satisfied customers for competitive markets.
99% of patients would recommend if provided with clear communication, perceive teamwork, and empathy	Include questions on communication, teamwork, and empathy in the survey process for improvement.

Summary

Organizations are rewarded or penalized based on clinical quality outcome scores, which will continue to affect practice revenue. Data collected from national outcome scores and online reviews are being used to empower patients in decision-making; however, the patient survey may not provide an accurate picture of quality of care. Nevertheless, patients are studying their care options because of rising healthcare costs and are using clinical outcome data and online reviews to make healthcare decisions.

Eighty-one percent of patients are unsatisfied with their healthcare experience and the industry has shifted to a customer-first mindset. Patients now have higher expectations for value when it comes to their health, and healthcare organizations need to follow other industries and prioritize customer objectives.

Patients' viewpoint, while subjective, still offers valuable insight. Despite variations in feedback, the patient satisfaction survey has become more important than ever, and it should be used to drive strategy and improve patient acquisition and retention. Organizations can build patient loyalty and improve outcomes by addressing target areas identified in the survey process.

Practice managers should also expect continuous change in the healthcare industry. Building a competitive advantage in patient experience is an ongoing process, and practice managers would be wise to regularly review their survey process for efficiency as well as monitor Medical Group Management Association (MGMA) community blogs and networks for advanced technology and electronic health record (EHR) integration.

Discussion

The aforementioned manager will start by selecting a survey method that best fits the organization's current needs. For optimal efficiency, the manager will also consider an automated process to produce patient survey results and leverage online reviews. The organization will focus on selecting specific questions to obtain information needed for improvements, and the survey will be simple and is expected to be completed in less than five minutes. The manager will review monthly and will work continuously with the entire team in their mission of high-quality caregiving and empathy. Trending survey results will be shared with the entire organization at quarterly staff meetings. The manager plans to engage the whole team to determine one to two specific areas for improvement. The team will be rewarded for improvements in focus areas, and the organization will reevaluate the survey method after approximately 12 months to see if it still helps improve patient satisfaction.

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