



First impressions count – a lot – with new patients

By Jenni Gritters | January 31, 2018

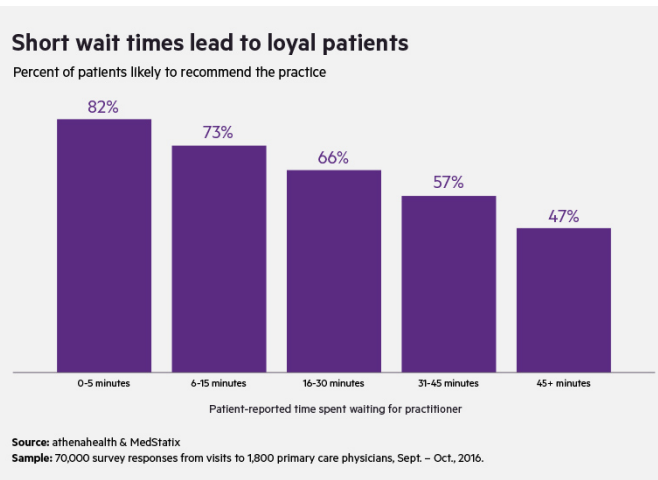
Patients checking for a first appointment at a CareMore Health facility can all but guarantee they'll be greeted warmly, and by name, by everyone they encounter, starting with the front-desk staff. "We prioritize eye contact, we smile, and we know our patients' names," says Sandra Perdomo, a nurse practitioner and regional clinical manager. "It's important for a patient's dignity and respect."

It's also important for a patient's inclination to recommend the practice, which in turn can impact a provider's bottom line.

Researchers from athenahealth analyzed data from more than 200,000 patient surveys issued by MedStatix. The results show that new patient retention is driven primarily by patients' perception of how competent their provider is, and also by how competent patients believe the staff and practice to be as a whole.

Patients who felt that their medical providers and staff were competent during a first visit were more likely to remain with the practice, according to the data.

What would drive patients away? Research shows the longer patients have to wait before meeting their provider during a first appointment, the less likely they are to recommend the practice to friends.



This is why healthcare providers like CareMore pay attention to small details at the outset of a provider-patient relationship – not just because it's the right thing to do, but because it's good for the health of their organization, too.

First visit sets the tone

CareMore, a California-based integrated health plan and care delivery system for Medicare patients, assigns new members their own “member relationship coordinator” during the process of joining the plan – which means they're able to establish a personal connection even before a patient's first clinical encounter, says Perdomo.

That coordinator will make a first appointment for new patients, arranging transportation or requesting an interpreter for patients who need one.

By the time of their first appointment, CareMore patients will have met with a medical assistant and a nurse practitioner and been enrolled in programs that address their unique health risks, from chronic disease to social isolation.

Connections like these make people more likely to return to their primary care provider over and over, says Perdomo.

“We're all about prevention, so we can prevent chronic diseases from becoming acute. We can prevent [emergency department] visits and reduce health dollars,” she says. “And we have higher retention, because when [patients] come to see us, it's not only about diagnosing, it's about teaching them. If you're not plugging someone into a program, they don't know what to do after their first visit.”

Navigating complicated care

At Beth Israel Deaconess Medical Center (BIDMC) in Boston, Barbara Sarnoff Lee, senior director of social work and patient/family engagement, sees similar payoffs when she pairs patient advocates with people just starting treatment at the facility.

She currently employs two cancer patient navigators, whose job is to guide new patients as they begin

a complicated medical journey at a large hospital. Navigators do everything from meeting patients at the front door, to helping them understand their diagnosis, to joining patients in the exam room, to translating complex medical language into something the patient can better understand.

BIDMC complements this human-focused programming with an online patient portal. New patients are enrolled in the portal before their first appointment and can use it to access information about BIDMC and its care providers. The site also offers details about the logistics of their first appointment. As they continue treatment, patients can check the portal for test results, reports, medications, and available notes.

The combination of human touch and digital tools helps patients prepare for their first encounter, and beyond, says Sarnoff Lee. “There are hundreds of people who walk in and out of your room at a big hospital like this. Patients want to know what's going to happen to them and when and why, and they want people to be kind and have an appreciation for the fact that this is a person going through a difficult circumstance.”

Simple changes, big payback

Implementing programming specifically for new patients can be tough when resources are limited and care providers have busy schedules.

However, there are some simple ways to get started, says Sera Larsen, chief operating officer of the Saint Agnes Medical Foundation in Fresno, California, a member of Trinity Health. Larsen recommends efforts at physician matchmaking, or setting up an initial call between a patient and a staff member to match patients with the care providers who can best meet their needs.

The medical team at Saint Agnes Medical Center helps patients choose between male and female providers, young grads and experienced practitioners, care providers who live in different geographic locations, and providers with certain personality characteristics and language skills. The team also has a dedicated phone line for new patient appointment scheduling.

CareMore's Perdomo says that giving patients easy access to clear resources, via online patient portals or an easy-to-contact relationship coordinator, can be a simple but game-changing addition to any clinical program. Perdomo also recommends that everyone in the office, from front desk staff to medical professionals, should learn (and use) people's names during appointments, even in the waiting room.

Sarnoff Lee of BIDMC likewise recommends that practices pair technology tools with kind, empathetic face-to-face touches like smiles and knowing names. "[Tech] should enhance the experience and give people access to information," she says. "But at the end of the day, when you're sick and scared, nothing can help you the way humans can."

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