Handling Patient Complaints

In an ideal world, your practice runs smoothly, your staff is sensitive and helpful, you’re always on time with your schedule, and patients never complain. As you well know, reality is a completely different story. This guide will take a look at what to do when a patient complains.

Few patients will sue a Physician that they like or trust. To sue would irreparably damage that relationship. If, on the other hand, the patient perceives that the Physician or staff is cold and uncaring or even rude, the patient may be more inclined to sue if something goes wrong.

How do you determine if the Doctor-Patient relationship is getting off track? Patients will often complain to staff members before they complain to the Physician. Staff members should be attentive to warning signs of a developing problem and notify the Physician. Here are a few common patient complaints and what the patient might really be saying:

“He interrupts me too often.”

It is not uncommon for Physicians to interrupt a patient as a way of keeping the clinical interview on track. Patients, however, perceive being interrupted as impolite, and may infer that the physician who interrupts doesn’t care what he or she has to say and just wants to move on to the next patient.

“He doesn’t answer my questions.”

This is a frequent complaint. If a patient or family member has a question that goes unanswered, the patient may get anxious, angry, or think the Physician has something to hide. Patients may then seek their answers by requesting their medical record and having it reviewed by an attorney. This evaluation can lead to litigation if the record suggests that the care was questionable in any way.

“The doctor talks down to me” or “The doctor talks over my head.”

Patients who feel that a Physician is giving them less credit than they deserve may end up resenting the Physician and seeking care from someone who “takes them seriously.” Additionally, Physicians who routinely use “medicalese” or terms that are not easily understood or explained can leave patients shaking their heads and without a clear picture of their care and their role in the process.

“The Physician doesn’t spend enough time with me.”

Patients that are sick are also anxious, and require reassurance that everything is being done to find a cause for their problem and to make them feel better. A patient’s perceived value of the amount of time spent with the Physician is a significant factor in communication.
“The Doctor doesn’t listen to me.”

This complaint is really the basis for many of the other complaints. It implies that the patient is being ignored by the Physician or that the patient’s concerns are not valid.

Now that you know what’s behind some common patient’s complaints, what do you do?

**Be an active listener.**

Listening is crucial to understanding and enhancing communication. Active listening techniques are those that encourage more than a “yes” or “no” response, such as summarizing or reflecting back information that the patient has provided.

**Make the most of your time**

There is no question that Physicians are caught up in a balancing act between accommodating scheduled patients, fitting in emergencies, fielding phone calls and catching up on paperwork or transcription. If, however, you’re always running behind, have staff members do a review of a typical week’s schedule to see where changes can be made to ensure that your time is spent as efficiently and productively as possible and that your patients are getting the most out of the time spent with you.

**Body language is important**

Eye contact, tone of voice and conversation speed suggest interest in the patient. Avoid non-verbal cues which suggest impatience, such as talking while writing, glancing at your watch or looking out the window. Sitting down to discuss the patient’s examination and findings has a dramatic impact on a patient’s perception of your time and the quality of the interaction as opposed to the Physician standing by the door as if he or she is in a rush to leave.

**How do you handle an angry patient?**

Allow the patient time to talk by sending non-verbal messages that you are interested in what they have to say. When they have finished, be patient and wait. Often, patients have additional things to say and this gives them the chance to vent without the frustration of being interrupted.

Avoid countering every charge with a rationalization. Select one point made by the patient and ask for additional information or clarification. This indicates to the patient that you are listening and committed to understanding what was being said before responding. Reflect back your understanding of the problem and then begin to explain or discuss. Let the patient know that his or her concerns are important and that you will look into the matter and get back to them within a specific period of time – and keep to that schedule.
If necessary, discuss the complaint with staff and get their input as to resolution and possible changes in the practice.

With the right approach in the Doctor-Patient relationship, Physicians can reduce the likelihood that the response to patient complaints might be a contributing factor in a malpractice claim.