

“Taking Responsibility”: Effective Methods of Responding to Patient Complaints by the Radiology Staff

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Introduction

- Modern radiology departments have strived and continue to strive for the highest efficiency and value in patient-centered care for cases occurring within the ambulatory and emergent settings
- Despite the greatest of intentions and efforts, circumstances can still arise in which patient or physician dissatisfaction can occur.
- While no individual truly enjoys receiving complaints, it is the duty and responsibility of the radiology department to acknowledge and manage such situations as they arise.
- In 2014, the department of medical imaging at The Ottawa Hospital reported a total of 69% of all complaints were directly originating from patients and 16% were received from referring physicians.



Potential sources of Patient and Physician Dissatisfaction within the Radiology Department

- Prolonged delay in actual performance of an imaging study.
- Study not efficiently protocolled or not tasked for protocol.
- Prolonged stay in hospital admitting due to large patient volume.
- Equipment malfunction or required maintenance.
- Delay of patient transport (Inpatient setting).
- Unavailable or unsafe IV access (contrast studies).
- Routine study delayed for an emergent examination (Inpatient setting).
- Patient contrast allergy necessitating premedication.



Potential sources of Patient and Physician Dissatisfaction within the Radiology Department, cont'd.

- Dissatisfaction with the care received at the Radiology Department.
 - Poor interaction with radiologists and staff.
 - Prolonged wait to contact a radiologist.
 - Not having imaging results relayed in a timely manner.
 - Failure to receive communication of a critical or life threatening result.
 - Receiving an inaccurate radiology report.
 - Witnessing an argument amongst healthcare professionals.
 - Disagreements can occur, but are best handled behind the scenes and not in the presence of the patient.

Potential sources of Patient and Physician Dissatisfaction within the Radiology Department, cont'd.

- Dissatisfaction with the care received at the Radiology Department.
 - Inattentive or impatient physician.
 - Not having questions answered or feeling heard.
 - Being chastised by the physician or staff.
 - Poor physical appearance / cleanliness of the facilities.
 - Disorderly workspaces or waiting areas.
 - Impatience amongst the radiologists and support staff can adversely affect a patient's perception of the department as well.

Potential Consequences of Patient Dissatisfaction

- Losing professional relationship with the physician or practice.
- Patient seeks care from another healthcare provider or hospital system.
- Injury to reputation and reliability of the Radiology and Nuclear Medicine Department.



Essential Strategies for Encountering an Upset Patient or Physician at the Personal Level

- 1. Acknowledge the patient or referring physician's complaint in a calm manner.
- 2. Be empathetic to the situation of the physician or patient making a complaint.
- 3. If in disagreement with a referring physician, be constructive by offering alternative imaging studies or solutions.
- 4. Notify that an investigation will be conducted into any errors or potential sources of error to avoid a similar situation arising in the future. Having such a system in place within the department is essential to maintaining a well organized practice.

BUT ABOVE ALL ELSE, REMAIN CALM AND PATIENT. BE **CONSTRUCTIVE** RATHER THAN **OBSTRUCTIVE**.



Department Strategies for Managing Patient Dissatisfaction

- Be available and accessible and coordinated
 - Provide a phone service that is easy to reach
 - Consider use of a patient portal system for access of radiology reports and other patient-centered healthcare information.
- Bridge the gap by providing a meaningful outlet for responding to patient dissatisfaction.
 - Create an email account or webpage that can be used for patient complaints.
 - Consider a public terminal or kiosk accessible for patients to issue complaints and grievances.
 - Be receptive and prompt in response to such issues as they arise. Do not ignore and do not delay.
- Be respectful overall to the patients' concerns.
- Plan a regular departmental meeting to discuss systematic patient complaints and use such meetings as a means to improve the department.
 - It is important to include nursing and radiology technologists as participants at such meetings as they have the greatest amount of direct patient contact.

Conclusions

- Over the years patients have taken on a more active role in the healthcare services they receive.
- Radiology departments need to be receptive to the thoughts and needs of their referring clinicians.
- Radiology departments should always be receptive to patient and referring physician complaints and be prepared to respond in a prompt and meaningful manner.
- It is important for radiology departments to bridge the gap and provide proper avenues for patients and referring physicians to be able to issue complaints and receive meaningful response.

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