



Lights, Charts, Patients: What is the Key to More Effective Communication?

Learning to get a message across the office without walking can save some of the time you and your staff currently waste.

Webster's Dictionary defines communication as the imparting or interchange of thoughts, opinions, or information by speech, writing, or signs. Sounds simple, right? Well, it isn't exactly that easy off the page, because as we've all learned throughout the many complex relationships in our lives, communicating is not always simple.

This is especially true in medical practices, where the front office is trying to let the back office know a patient has arrived, the nurse is trying to tell the doctor which exam room is next, the doctor is trying to tell the nurse what follow-up work is to be done, then tell the business office what to charge and when the patient should come back for a follow-up appointment. All the while patients are trying to get in to see the doctor, and others may very well be calling in with questions about their medications or insurance coverage. With all this communicating going on simultaneously it's no wonder so many physicians run behind the appointment schedule.

Quick Communication Tips

So what is the staff of a practice to do? You cannot stop communicating, of course. One answer is to get messages across non-verbally and without walking. In other words, use technology such as computers, printers, light signaling systems and electronic medical records to transmit information.

For verbal communication to work efficiently, the people communicating must be at the same place at the same time. In a medical practice, you cannot

have this level of accessibility to your coworkers given the hectic pace of routine daily activity. For instance, a physician would need to have a nurse right outside the examining room to immediately relay an order; instead, the physician often has to walk around until the staffer is found.

To set up efficient communication systems, a practice must first understand its priorities. Since the only reason the patients and staff are there is for contact with the doctor, then allowing that doctor to spend as much time effectively practicing medicine should be the ultimate goal of the practice. This means less time walking and talking and more time in the exam room, reviewing charts, dictating, and so on. If the physician spends more time practicing medicine, most often this means more patients being seen, which is good for the community in that more patients are getting access to medical care and the practice is able to generate dollars to buy equipment and pay staff and physicians to provide that care.

There are several parts to the communication systems that allow physicians and their staff to be more efficient. We'll start with the doctor and work backwards

along the patient's process through the practice. For the sake of example we will assume the practice is still using paper charts; if your practice has Electronic Medical Records (EMR), talk to your system provider to see how these concepts can be achieved by the software.

• **Physician-to-Staff Communication.** Once the patient's visit is complete, the doctor needs to communicate billing and re-appointment information to the checkout staff. This can be done

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quickly by using the patient's encounter form. This document should have a place for the doctor to mark what they did and when they want the patient to come back so the patient can be allowed to self-exit to the checkout counter. Doctors and staffers can get to other patients more quickly if they do not have to walk the patient to the checkout.

If requests for test scheduling, follow-up work or counseling need to be communicated, the encounter form can be used with a light signaling system to eliminate the need for the doctor to walk around looking for staffers. The doctor marks the encounter form, places it and the chart in the chart rack, activates the light button of the needed staff, then the doctor goes off to the next patient. The



needed staffer will see his or her light button flash and come to manage the patient. This can create a very efficient, non-walking, non-verbal way of communicating when customized to your office.

- **See the Light.** To get the physician to the next exam room in order, the light signaling system can have a room-sequencing function. This works by having the nurse press the light button as they place the patient in the exam room. As the physician leaves an exam room, he or she deactivates the light button, and the light outside the next exam room in order begins to flash. All the physician has to do is follow the flashing light.

- **Patient-Ready Notification.** While doing observations at practices, I often hear the doctors tell me there is a back up at check in, that they seem to have no patients ready and then suddenly four are waiting in exam rooms, that the flow is far from smooth, or the nurse is never there when needed.

Usually, the reason behind this is the way the front office notifies the back office to indicate that a patient is ready. This plays out when the receptionist checks the patient in and then carries the chart to a “ready rack.” If more than one

patient is at the check-in counter the receptionist typically will check in several, and when there is a break will deliver charts. This creates the “none, then four ready” scenario. In the meantime the nurse has to walk up and back checking to see if patients are ready. This requires a lot of unnecessary walking and time away from the physician.

Each practice handles its charts differently; the key is to look for ways to electronically notify the nurse that a patient has arrived and is ready. This can be done by highlighting the patient’s name on the screen at the nurse station in the scheduling system, printing the encounter form to a printer at the nurse station when the patient arrives, light signaling system, email, public folders, etc. to rely the information.

Eliminating the need for the chart at the check-in desk and keeping them at the nurse station will further promote this system. This way, the receptionist will not have to leave his or her desk and the nurse will have all the information needed to prepare for the next patient prior to getting them from the waiting room.

- **Patient-to-Practice Communication.** The patient’s encounter and commu-

nication with the practice is much more than what happens within the walls of the facility. It all begins with the request for an appointment. The older the patient population is for your practice, the more difficult it is for the practice to use technology such as automated attendants, voice mail, etc. Since neurologists frequently find themselves in this situation it is best to have a person answer your phones when possible. This will assure the patient is getting to the person they need, as well as the referring physician office.

For specific queries such as prescription refills or questions for a physician or nurse, it is not as easy to have someone available to answer the phone. Depending on the size of your group you may have a nurse dedicated to phone triage, and even in this case the nurse may be busy when a patient calls. Voice mail is a valuable tool here as it allows the patient to leave a message and the nurse to return that call as they can. The key is to let the patient know on the recorded message or the person answering the phones that the nurse returns non-emergency calls between, for example, 11 a.m. to noon and 4 to 5 p.m. This will reduce the chance of patients calling back several times because they expected a return call sooner.

Efficiency for Everyone

Implementing efficient communication systems similar to the ones discussed here will allow you to spend your time more effectively in the office. The time currently wasted looking for staffers will be gone. The time now wasted looking for a next patient will be gone. This will allow you to either finish on time if you run late now, dictate during patient hours if you take it home, or possibly see more patients. The key is the time now wasted is up for you to spend as you want, not as the communication systems dictate. **PN**

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