

Darnall committed to customer service; wants patient feedback

By Patricia Deal, CRDAMC Public Affairs

FORT HOOD, Texas--Good customer service costs nothing, but it is priceless in terms of what it means to the patients and staff at Carl R. Darnall Army Medical Center.

"Wherever they go, people have high expectations for quality service, and they shouldn't receive anything less when visiting Darnall," said Col. Patrick Sargent, CRDAMC commander. "My signature on the Army Medicine Healthcare Covenant shows my commitment to ensure quality health care to Warriors and their families. We're taking big steps everyday to help improve and enhance our services that will provide the best patient care experience possible."

"But we can't change what we don't know. That's why it's so important for patients to provide us with feedback. We need to know how they feel about their providers, the services at the hospital and clinics and access to their health care needs," he said.

Patients have the opportunity to anonymously provide feedback on their hospital visit by either completing an Interactive Customer Evaluation (ICE) comment and/or filling out the Army Provider Level Satisfaction Survey (APLSS).

The installation-wide ICE form is a commonly-known method for people to leave comments about the service they received, but not as many are familiar with APLSS.

The program, launched in 2005 by the Department of Defense and the Army surgeon general, is conducted by an outside contractor, who mails a 24-question, confidential survey to randomly selected patients approximately one to two weeks after their visit. Patients are asked to assess satisfaction with the provider and services at Darnall and their level of overall satisfaction with the entire visit, from making the appointment to the delivery of care.

Results from the surveys are analyzed for specific comments and trends. Reports are provided every two weeks to the hospital commander, individual clinic and department chiefs, customer service, and administrative officers. In addition, all providers have access to their own scores.

Providers and leadership at Darnall do look closely at the data from the results of all surveys returned, according to CRDAMC's Customer Service Division Chief, Kim Reed.

"The information is very detailed and is broken down by specific category and by provider. It is an ideal way for us to identify areas we're doing well in and those areas that we may need to improve," she explained.

The numbers by themselves aren't an exact measure of actual performance, but serve as a benchmark for military hospitals to compare themselves to each other and to the civilian health sector. Darnall currently has an 88 percent overall

visit satisfaction rating and an overall provider satisfaction rating of 92 percent.

“An important aspect of the program is that the Army Surgeon General rewards military treatment facilities for both the number of surveys their patients return and the percentage of patients who rate their visit as completely satisfied,” Reed said.

Every returned survey equates to a certain amount of funding for the hospital, with more money given for higher overall satisfaction ratings in certain categories. The hospital can also lose money from its operating budget if its averages fall below a certain percentage.

Any funding received through the APLSS program is re-invested back into the hospital. Last year funding was used to pay for amenities such as new awnings in the patio area and a dayroom for CRDAMC Soldiers.

“It is so important that patients complete those surveys. More than 10,000 surveys are sent to Darnall beneficiaries in a month, but we only receive anywhere from 800-1,200 responses in a four-week period. As it can impact our overall patient satisfaction rating, we need everyone to return the surveys, especially our happy customers,” Reed said. “If possible, patients should complete the survey on-line or mail it in, as the option to do the survey by phone, is not tied to the incentive program.”

Whether it’s good or bad, incentive-based or not, any type of feedback is important, Reed said, adding that the ICE program is another great way for patients to let the hospital know how it’s doing.

Every ICE comment is seen by supervisors to department chiefs to the commander all the way up to the III Corps commander. Anyone who completes an ICE comment has the option to request a response from management, and III Corps policy dictates that management has to respond to that request within 72 hours.

“It just shows that we are serious about customer service and that your comments won’t fall on deaf ears. Our goal is to provide quality service and we need to hear from you how we’re doing,” Reed said. “If we know about it, we can work on ways to improve our deficiencies and reward those who went above and beyond to help.”

Right now the hospital receives an equal amount of positive and negative ICE comments. But Reed added she is seeing more positives lately.

“Typically we’ll get complaints about the lack of parking and long waits for appointments or to pick up prescriptions,” she said. “While we can’t resolve every issue, such as parking, we do offer assistance and make suggestions when we can. Patients may not be aware of other options available to them when making appointments or ordering prescriptions.”

Responding is just one way to promote better customer service. Reed said the hospital has recently become more proactive by educating staff members and initiating recognition programs to highlight exceptional customer service.

Darnall will begin a "Customer Service Champions" program in August. Each clinic will nominate a customer service role model to attend a training seminar taught by a customer service expert from the Army surgeon general's office. The idea is that the designated Champions take the knowledge and skills gleaned from the training back to their clinics and get everyone to practice good customer service, according to Reed.

"For the most part, we do well on customer service, as the number of complaints we receive about staff being discourteous or not being helpful is not comparable to the number of patients we see on a daily basis," Reed said. "But if the last thing patients remember at the end of their visit is that someone was rude to them, then most likely the entire visit is rated poorly. Customer service is just common sense, remembering the basics, and to treat people how you want to be treated."

Michelle Knight, medical support specialist at CRDAMC's new Women's Health Center, agreed.

"I put myself in the place of the patient, and think about how I would be like to be treated," she said. "I always try to make it a personal experience for them, too. If it's their birthday I make sure to wish them a happy birthday, or if they have children with them I take time to find out the child's name and talk a bit with them. It's all just about making the patient feel that they are more than just a number to us."

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Michelle Knight (left), checks a patient in at CRDAMC's new Women's Health Center. Although they may see hundreds of patients a day, Knight and the other medical support specialists work hard to provide the best customer service possible, striving for positive comments back from patients through the Army Provider Level Satisfaction Survey or Interactive Customer Evaluation (ICE) programs. (U.S. Army photo by Patricia Deal, CRDCAMC Public Affairs)

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