

Conquering Patient Conflict in the Dental Office: Prevention, Preparation, Peer Review

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One of the greatest causes of increased stress and sleepless nights for dental professionals is unresolved patient conflict. No matter how good we are, or how experienced or how compassionate, errors (either clinical or clerical) will inevitably occur, resulting in an unhappy patient. Although most dentists recognize the importance of having policy and procedure manuals in place, few include the important area of conflict management.

The successful development of a clear prevention and dispute resolution program, with appropriate team training, can minimize patient disputes and the associated nightmares. When disputes cannot be resolved in the dental office, the Peer Review process, a valuable benefit of membership in the Minnesota Dental Association, is designed to help bring closure to conflict in a quiet and confidential manner.

Prevent Conflict by Building Trust

Patients are much less likely to write a bad review, bring about a Board of Dentistry complaint, or file a malpractice claim if they trust you or if a conflict is handled appropriately. I work with the Peer Review process in Minnesota, managing the intake for patient complaints about their dentists. Although the official complaints involve ill-fitting dentures, failed implants, restorations that lead to crowns or root canals, or any number of problems in which the patient believes he or she is due

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a refund, in almost every case, the claim is filed because the patient has lost trust in the dentist. When you think about it, even the dependence of patients upon internet medical/dental advice has, at its core, a lack of trust.

The best book I have read on trust building is *The Trust Edge* by David Horsager. *The Trust Edge* breaks trust into seven pillars: clarity, compassion, character, competency,

The Trust Connection

When it comes to understanding the importance of prevention, we dentists know what we are talking about! Much of the trust our patients have in their dental professional is the understanding that we are their partners in the effort to prevent oral disease or, when necessary, treat it as quickly as possible. The core to developing trust in a preventive way is to acknowledge the patient as the most significant person in the room, inform him or her about their treatment, and take responsibility for results over which you did have control.

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Start the initial contact (and every one that follows) by acknowledging the patient (greet by name, establish eye contact, and smile). Also, make certain to welcome any caretakers or friends in the room. Make your Golden Rule “It’s not about you; it is about the patient”. Show that you care.

After making it clear that the patient is the focus, introduce yourself by name and make sure he or she knows your credentials. If the patient has been given a beautifully written introduction of you and your philosophy (with a great smiling photo of you on your patient marketing materials), you don’t need to expound.

Cultivating the Connection

Make sure the patient understands the treatment plan, including the risks, benefits, alternatives, and associated costs. Also, make sure he or she knows how much time they need to invest. If you happen to be running behind schedule (which should be an infrequent occurrence), make sure someone is communicating the time situation, and give the patient options. It also helps to offer coffee, juice, or a little extra attention.

It is also important that, when a practice transition occurs, patients who have had special agreements with the selling dentist (maintenance of a bridge or denture or crown, special appointment times with patients with disabilities, or unique fee discounts) understand that the purchasing dentist may not offer the same arrangements. According to attorney Hillary Becchetti, founder of Pine Lake Dental Law and Transitions, failure to delineate these issues in a practice purchase agreement can lead

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to unnecessary complications between buyer and seller, and cause patients, who may already be suffering some anxiety about losing their long-term dentist, additional anxiety and frustration.

During treatment, do your best to explain what is happening, minimize pain during the delivery of anesthesia, and give the patient the option to provide a signal if he or she experiences discomfort during the procedure. Occasionally you will encounter a patient who does not want to know the details of what is happening. For any procedure, make sure the patient (*every patient*) provides written consent.

Each person is unique. Documenting their preferences will save time and frustration later. It is amazing how many patient complaints about the results of treatment also involve how

they perceived the dentist’s care about them while giving anesthesia and providing the treatment.

Finally, and most importantly, thank them for choosing you as their dentist. This spirit of gratitude should be expressed by every member of the team.

Select Your Words to Maximize Trust

Here are some examples:

“Please let me know if you have any concerns.”

These words encourage the patient to express any concerns or fears before he or she becomes a problem. Frequently patients are uneasy when it comes to expressing concerns with their dentist. This invitation gives them permission to talk to you instead of talking to an internet audience through a poor review, or to the Board of Dentistry.

“I have some dental fears myself (only if true).”

I am definitely not a great dental patient, and I admit this to my patients (using the term “dental fears” makes this statement non-judgmental). This statement signals to the patient that you understand their concerns and

The Pillars of Trust

Pillar 1: Clarity

People trust the clear, and distrust the ambiguous.

Pillar 2: Compassion

People put faith in those who care beyond themselves.

Pillar 3: Character

People notice those who do what is right over what is easy.

Pillar 4: Competency

People have confidence in those who stay fresh, relevant, and capable.

Pillar 5: Commitment

People believe in those who stand through adversity.

Pillar 6: Connection

People want to follow, buy from, and be around friends.

Pillar 7: Contribution

People immediately respond to results.

Pillar 8: Consistency

People love to see little things done consistently.

will take precautions to make the appointment as stress-free as possible.

“You are in control. If you have a concern, raise your hand (or establish another signal).”

Fearful patients are much more sensitive to the many triggers we have when it comes to providing dental care. Let us remember that we are drilling into human tissue, and patients frequently see that tissue dust flying up into the air and onto that beautiful napkin we put on their chests. They will be much more comfortable if they know they can take a break if necessary. Typically once they realize they have some control, they will be much less likely to ask you to stop.

“I have also had a root canal (or crown or implant).”

I am a grinder, and do not always wear my splint. I, therefore, have experienced my share of endodontic procedures. My fearful patients were comforted when I explained my own experiences with root canals (all good). We used virtual reality video glasses in our practice, and I would comfort my patients by telling them that when their movie was over, it was highly likely that their root canal would be done. This gave patients not only a distraction, but a more detailed understanding of the timing of the treatment.

“We are not here to judge you, we are here to help you.”

Frequently patients are afraid to go to the dentist for fear of being judged. If you want to keep those patients, it is essential that they understand that your role is to help them where they are. You can gently educate them about the importance of flossing without berating them for failing to do so. Also, if you complain about their behavior, they are much more likely to complain about yours.

“How are you feeling?” “Everything okay?”

Patients appreciate it when you check in with them. It shows that you are concerned and care that they are comfortable. Showing that you care is one of the best practice builders ever!

“What do you think? Does this treatment plan make sense to you?”

Give the patient a chance to express to you how he or she feels about proposed treatment and ask questions.

Never Judge or Patronize

It is crucial the patient knows that you take his or her concerns seriously. Sometimes they may present with significant oral disease due to neglect, and it may be tempting to get frustrated with them, but it is essential to keep your temper. Educate them for the future, and educate them about the cause of their current problems in a respectful way. Also, make sure to document that you provided oral health education and all the recommendations you made.

Prepare Your Team to Manage Conflict

When a patient lodges a complaint due to a clinical or clerical error, it is critical that the entire team knows how to address that concern. Having a conflict management policy in place which clearly delineates how patient disputes are handled will go a long way to prevent misunderstandings. Failure to handle complaints effectively can turn a simple private dispute into a nasty public altercation. Many of the claims I listen to from patients for peer review involve a simple dispute handled badly. When a patient complains, it is crucial that all staff follow simple guidelines.

Be Proactive, Not Reactive

Have systems in place to keep communication open so that patients can express concerns easily. Asking if the patient is okay or if he or she has any questions or concerns is a great preventive strategy. Standing behind your work is another. Most disputes I hear occur when a patient is unhappy with the treatment and the dentist refuses to take responsibility for reasonable re-treatment.

Address Conflicts/Complaints Quickly

The longer a complaint has to fester, the bigger it gets. Make sure the patient understands that he or she is being heard and that a path to resolution is proceeding swiftly.

Empower Front Line Employees

Give the team members who have direct contact with the patient the ability to solve simple problems. This may mean the ability to schedule time with the patient to address a

concern, assure him or her that your office stands behind their work, or offer small gifts (movie tickets, small gift cards flowers etc.) to thank a patient for their understanding of a mistake or misunderstanding.

Own the Problem/Own the Solution

If the dispute is the result of a clinical or clerical error, it is essential that the team own the problem. If there is an open margin on a crown, redo the crown. If there is a scheduling error, do whatever you can to consider the patient's time and think outside

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the box. The entire team sometimes must work together to help a patient. For example, if two patients are inadvertently scheduled at the same time, perhaps the assistant and hygienist can work together to take care of both patients.

Continuously Improve the Process

Every mistake or dispute is an opportunity to learn. Successful and unsuccessful examples of dispute resolution should be discussed at team meetings to seek ways to improve the system. Emphasis should be placed on acknowledging the complaint, apologizing sincerely, creating resolution, and tracking or following up on the claim to make sure it is resolved.

Formulate an Effective Apology

Nobody likes a fake apology!

Unfortunately, we hear them all the time. Fake apologies may work for politicians; however, they do not work for patients. To formulate an effective apology, is essential first to listen, listen, listen. Listen from the heart and listen with empathy. Resist the urge to blame others or make excuses. Take full responsibility. It is also important to acknowledge the patient's frustration.

Sample apology:

"I am so sorry that this happened. I understand why you are upset. This is what I am going to do about it (be specific). I will check back in a (specify a particular time) to ensure that everything has been resolved. Is there anything else I can do for you?" Note: Make sure to follow up within the time specified. If the solution is not yet determined, call the patient to let him or her know that you are working on it so they don't feel abandoned.

When All Else Fails: Mediation/ Arbitration for the Patient (Peer Review)

Unfortunately, not all conflicts with patients can be resolved. When your

If You Receive a Peer Review Complaint

1. Don't panic. This is not a Board of Dentistry complaint or a malpractice complaint. Your license and reputation are not in jeopardy.
2. Call the patient and try to resolve the dispute if possible.
3. Be assured that the Peer Review process is quiet and confidential.
4. Return your response on time. Delay inflames conflict.
5. Answer the complaint thoughtfully and respectfully. Avoid judgmental language or assumptions.
6. Read your response over from the perspective of the patient, and keep the ultimate goal of resolution in mind before submitting it.
7. Provide all avenues of attempted dispute resolution offered to the patient from your office in your response.
8. Cooperate with and respect your mediator.
9. Understand that those involved in the process are trained and working hard to be neutral.
10. Keep everything in perspective.

formal system fails, there are other, less desirable options. The Board of Dentistry (licensure), the legal system (typically costs, damages, and restitution), Peer Review (return of fees paid), and bad reviews (reputation) are options the patient may choose to express unhappiness with a clinical or clerical result. In my opinion, the best of these options when the dispute involves the patient is the Peer Review process.

Most state dental associations have a peer review system which begins

as a mediation process in which the mediator is a peer of the dentist. The first step is registering the complaint by the patient. All states are a bit different, but typically the claim is accepted, in writing, by the dental association office. It is then sent to the dentist for a response. In Minnesota, the person taking the complaint call encourages the patient to contact the dentist with the complaint, and the dentist response form encourages the dentist to call the patient to resolve the issue. Frequently this is all that is needed. If

the patient and dentist do not find a resolution, the claim and response are handed over to a peer mediator. The mediator contacts both parties and attempts to find common ground and an agreement. If a resolution cannot be found, the case is referred to the local or state Peer Review Board for arbitration.

Before the referral for arbitration, the hope is that the two parties can work things out and come to a mutual agreement. Once mediation fails, another neutral party, the Peer Review Board, is brought together to resolve the dispute. For the Peer Review Board to make a decision, the patient typically undergoes a Quality Evaluation

Examination (QEE) by trained neutral peer evaluators. That information, as well as the testimony of both the dentist and patient, is used to help the Arbitration Board of Peer Review make a final decision. States differ in the scope of their Peer Review process. In Minnesota, for example, the Board's authority extends only to a return of fees paid by the patient for work he or she is unhappy with.

Unhappy patients who cannot resolve their disputes within the dental office have many options. Some patients vent their frustration with their dentist by filing a complaint with the state dental board, some pursue a lawsuit, others write a bad review

or even contact the Better Business Bureau. One patient even threatened to picket his dentist's office. All of these options, which are potential nightmares for the dentist, are good reasons for dentists to embrace the concept of preventing as much conflict as possible in their offices by building trust, preparing for conflict by developing a conflict management program for their team, and embracing the mediation/arbitration peer review benefit when the in-office system fails. Taking these steps may not eliminate the stress of conflict completely, but it will prepare you for managing it and, hopefully, allow you to work — and sleep — more peacefully. ■

“What I try to do with myself is just avoid the success or failure thing. Because there is so much about writing that is out of the writer's control. Not the action of doing it, but whether it comes alive or not. If I begin thinking in terms of failure, what happens is I get really depressed, and the game is over, because I've already decided.”

David Foster Wallace

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