INNOVATIONS IN PRIMARY CARE Patients Deserve Great Service: The Waiting Room Concierge

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THE INNOVATION

Reports show that primary care practices that include patients in their quality improvement efforts have stronger relationships and interactions with patients.¹ Knowing this, we involved our Patient Family Advisory Council (PFAC) to help us improve 2 key areas of the Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CG-CAHPS) survey: "communication about delays" and "wait times in clinic." A creative idea that emerged from our PFAC members was to create a novel position, the "waiting room concierge." This person's responsibility would be to provide personalized service to our patients in the waiting room.

WHO & WHERE

Stony Brook Primary Care is an academic faculty practice affiliated with the Renaissance SUNY Stony Brook School of Medicine and located in East Setauket, New York, a suburb of Long Island. It is a patient-centered medical home where medical students, residents, and geriatric fellows do their ambulatory internal medicine training.

HOW

Since 2018, we have trained our front desk staff for the position of "waiting room concierge." This assigned person is physically in the waiting room with patients instead of behind the glass-enclosed front desk. With their own desk and computer in the waiting room, the concierge helps to check in patients, and is analogous to the greeter at Walmart who interacts with them, assisting with office navigation, form completion, and patient portal sign up, as well as providing assistance for those with mobility issues. The concierges are also assigned to monitor wait times for appointments on the computer. If a visit is delayed more than 15 minutes, the patient is verbally notified about the cause of delay with the option to reschedule if the delay is more

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Susan Lee Stony Brook University Department of Medicine Stony Brook Primary Care 205 North Belle Mead Road East Setauket, NY 11733 susan.lee@stonybrookmedicine.edu than 30 minutes. Our practice also created a prominent notification board (**Supplemental Figure**) with colored magnetic buttons that indicate if their doctor is on time (green), 15 minutes behind (yellow), or 30 minutes behind (red). The notification board concept is meant to emulate airport flight boards that display and update gates and times. After the implementation of the waiting room concierge and several plan-do-study-act (PDSA) cycles, our CG-CAHPS surveys in the 2 areas of "wait time in the office" and "communication about delays" showed improvement. Our score went from 60% to almost 90% of patients indicating top scores of satisfaction. Patients commented that they felt more respected by being informed and welcomed in the waiting room. Based on feedback from patients, staff, and clinicians, we are continuing to fine tune the role of the "waiting room concierge."

LEARNING

The waiting room is often cited as a major cause of anxiety, and lack of communication and personal attention degrades the patient's experience.² Additionally, patients dislike having to wait for extended periods of time, especially when they are sick. The concierge is able to assist their front desk colleagues who are often busy assisting patients with appointments, handling emergencies, collecting copays, and answering questions, in addition to the usual interruptions that prevent patients from getting their full attention. Physicians report that patients who are informed about delays are more understanding and better prepared for their visit. Additionally, physicians who were more than 30 minutes behind appreciated when patients did take the opportunity to reschedule their appointments and patients felt that their time was respected. The waiting room concierge is easy to implement without having to add additional staff. We plan to continue with this model and continue to refine and adjust the tasks for this new role. We learned that personalized service helps patients to feel understood and informed so they can have a more meaningful and satisfying visit with their physician.

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Supplemental materials

References

- Johnson KE, Mroz TM, Abraham M, et al. Promoting patient and family partnerships in ambulatory care improvement: a narrative review and focus group findings. Adv Ther. 2016;33(8):1417-1439. <u>10.1007/s12325-016-0364-z</u>
- 2. Bleustein C, Rothschild DB, Valen A, Valatis E, Schweitzer L, Jones R. Wait times, patient satisfaction scores, and the perception of care. *Am J Manag Care*. 2014;20(5):393-400.

