What do patients really want ... and do docs care?

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by Andrea J. Simon

I have been conducting innovation games with consumers for a healthcare system client and have been struggling with the huge disconnect between what patients really want in the care and caring that physicians and healthcare systems are supposed to deliver, and what they're getting.

As I help patients deconstruct the healthcare system, they readily express their total frustration with a system that is broken.



The overwhelming disconnection - "This doctor doesn't talk to that doctor, or this office is not part of my insurance network so I cannot go there but that is where my records and past physician relationships were created."

The degree of confusion and lack of integration seems out of control to these smart, insured consumers.

[More:]

The loss of trust - They repeatedly spoke about the loss of trust. They cannot tell if a doctor is prescribing something *they* need or that *the doctor* needs, for either an income stream, an insurance process or to protect himself from malpractice. The number of times they spoke about having to repeat a blood sample or a test was fascinating.

They have lost faith that the provider is actually providing for them.

- The misdiagnoses in urgicenters The number of times people spoke about urgicenters was very telling, particularly about the abundant misdiagnoses that had occurred there. What I heard is that these centers are not a convenience or an asset to the community they are serving. If anything, they are perceived to pose a risk. They are blamed for misdiagnosing a person's child or parent or the person themselves.
- The common belief is that these must be second-tier doctors or why would they be in an urgicenter? On top of that, there is a joke going around that urgicenters are merely aspirin or Tylenol dispensers--that is all a person ever gets, or so they say, regardless of why they went in. And if you go back to the center the next day, youâ€[™]II see a completely different set of healthcare providers. So much for personalized service!
- **The lack of consideration for their time** Everyone had a story about taking time off from work only to sit for far too long--even hours--in a physician's office, waiting to be seen for only 15 minutes or less.

The abuse as it was described was insulting and injurious to their health because by the time they got to see the doctor, they really just wanted to get out of the office and get better on their own.

The physician is not "engaged" with them - These are people. Yet doctors don't look them in the eye, don't spend time trying to understand what is bothering them, and are quick to prescribe medications but not interested in exploring other options. And it is not only the doctors but often the entire staff as well.

So much for feeling good about the experience, about being treated special and important.

I probably could go on but I think you get the drift. As an anthropologist interested in culture change, I sit



back and listen, trying to help our clients find ways to bring together the doctor and the patient in those unmet needs that people are searching for.

With high deductibles, consumers all expressed how they are less likely to go to the doctor unless they are really sick. A number of them spoke about preempting the healthcare system altogether and instead, using their personal network to speak with friends who are nurses about their situation or that of their child before going to the physicians.

Most interesting was the degree to which these consumers--all of whom were between 25 and 54 in age-were anxious to get mobile applications that they could use themselves to help diagnose and manage their conditions. DIY healthcare is going to be very hot if we can get it right.

After hearing all this, what became overwhelmingly obvious was that it's time to do something. To empower the patient, create relationships that will reduce utilization of healthcare facilities and improve outcomes, and reverse the lack of engagement with physicians. But how?

Maybe if there is an alternative that is grounded in science but made available through iPhones, we won't care so much about the doctor. That outdated model is ready for a retooling anyway. It's time for us to stop doing what we have done the same way for 80 years.

Why be stuck with the same processes today that were established for our parents when health insurance began? Once the doctor stopped his house calls, the office became his fieldom. There he controlled the setting, the patient played the sick role, and medicine became more efficient but not necessarily more effective--certainly much less engaged.

To read a great blog on this topic--improving engagement and communication between patient and doctor--check out Mind the Gap.

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