How to Apologize to a Patient

I like to get complaints from patients. The best situation is when I have the opportunity to meet face-to-face with the patient when they are in the office. No, I’m not a glutton for punishment. What I like about complaints is that I get to hear directly from the patient what is bothering them, and I have an opportunity to let a patient know what we’re trying to do in the practice. Here’s my guide to patient apologies.

Step One: I introduce myself and shake the patient’s hand and the hand of anyone else in the exam room.

Step Two: I sit down. There are two reasons for that. One is to send the message that they do not need to hurry – this conversation can take as long as they need it to. The second is to place myself physically below the patient. If they are sitting on the exam table, I will sit in the chair. If they are sitting in the chair, I will sit on the step to the exam table. The message I am sending is “I do not consider myself to be above you.” It sends a very strong message.

Step Three: I say “I understand we have not done a very good job with __________ (returning your calls, giving you an appointment, getting your test results back to you, etc.) Can you tell me about it?” I do not take notes as I want to focus on the patient, but I take good mental notes. The patient and/or anyone with them needs to be able to talk as long as they want. They might need to tell their story twice or many times to get to the point where they’ve gotten relief. The patient has to get the problem off their chest before the next part can happen.

Step Four: I apologize, saying “I’d like to apologize on behalf of the practice and the staff that this happened. I want you to know this is not the way we intend for _______ to
work in the practice.” If anything unusual has been happening, a policy has changed, or new staff have been hired, I let them know by saying “So-and-so has just happened, but that’s not your problem. We know our service has slipped, but we’re hoping we are on the way to getting it fixed.”

**Step Five:** Answer any questions the patient has. How will you fix this for me? Why did the policy change? What’s the best way to get an appointment? Are you trying to drive patients away? Are you going to hire more doctors?

**Step Six:** I offer my name again and a way for them to contact me if they have further problems.

**Step Seven:** I follow-up on the information the patient has given me to find out where the system broke down or where a new system might need to be developed.

I had the opportunity to apologize twice last week. It helped me to keep a pulse on the practice, know what patients are struggling with, and of course, practice humility. All good stuff for a practice manager.

For an excellent article on how doctors can apologize to patients for medical mistakes (AmedNews, February 2010) click [here](#).