Boot Camp – Reputation Management

Charles Crutchfield, MD, FAAD, interviewed by Steven T. Chen, MD, MPH, FAAD

M. LAURIN COUNCIL, MD: Hello and welcome to *Dialogues in Dermatology*. I'm Dr. Laurin Council, your Editor-in-Chief. We have another exciting podcast for you today. We hope that you enjoy.

STEVEN T. CHEN, MD, MPH: This is Steven Chen with *Dialogues in Dermatology*. Thank you to all of our listeners for joining us again today. For those of you who have been following with this series of podcasts, what we've been trying to do is to report from our Career Launch Boot Camp in Columbus, Ohio, where we had a series of speakers who really came to give senior residents and junior attendings some tips from the real world in terms of how to succeed as a new attending in the field of dermatology, be it in academics, be it in private practice, however that practice model might be.—

--Today, I am super-pleased to be joined by Dr. Charles Crutchfield. And I will let Dr. Crutchfield introduce himself in just a second. What I would say is that we have the privilege of recording this particular episode after the actual event has happened. And the reason I bring that up is because I also have the privilege of knowing what our evaluations from the event look like. And I can tell you that your talk, Dr. Crutchfield, was perhaps the favorite of the entire event, and certainly got great marks.—

--And I think that I would certainly echo those sentiments and say that it was a super-engaging talk that you gave. And so I'm super-excited to hear your tips and your tricks that you will hopefully be able to share with all of our listeners here on *Dialogues*. So thanks again for joining us. And if you don't mind, could you tell our listeners a little bit about yourself?

CHARLES E. CRUTCHFIELD III, MD: Oh, well, thanks. I'm absolutely thrilled to be here. I'm also a Clinical Professor of Dermatology at the University of Minnesota Medical School and

Department of Dermatology. And I'm also the Medical Director of Crutchfield Dermatology, which is in St. Paul/Egan, Minnesota. I've been in private practice since 1998 and I've had my own practice since 2002.

STEVEN T. CHEN, MD, MPH: That's amazing. I mean, clearly you do a lot and that's something that you shared with us when we were all in Columbus. The most high yield thing that I think you shared with all of us there were the many different tips and many different kind of how's. The one thing that you said that really stuck with me is how slick your clinic runs and how many ways you really work as a team, to give your patients the best experience possible, and to leverage that in a way so that you can really influence your reputation in a positive way.—

--And really that whole idea of reputation management is so critical now in this day and age, where there's so many online reviews, there's so many people that are talking about you on social media. So with all those wonderful tips that you've already shared at the Career Launch Boot Camp, I was wondering if you'd be willing to share some more of them with our listeners today?

CHARLES E. CRUTCHFIELD III, MD: I'd be delighted. So one of the things that I always tell different physicians and colleagues is nothing is perfect. And so I try a lot of different things. And I think it's good to be flexible. And I test them and if they work well, I keep them or I modify them, if they need to be beefed up a little bit, and I'll use them. Or if they don't work, I'm willing to change right away. So that's really important. So nothing is perfect. Try, test. If it works, keep using it.—

--And when it comes to reputation management, there are kind of two main areas: the reputation you have with your peers and colleagues but also the reputation you have with your patients, and also I consider that future patients. And so at the Boot Camp really what I focused in on and I'd like to focus in on today are the patients and also the future patients. And I think

that's really important. And I always tell residents, everything you do is reputation management and marketing, everything you do. From the way your reception area looks, from the way you treat patients, from the way your staff treats them, everything is reputation management.—

--In this day and age, with social media so prominent and dominating so much of life, my son was telling me that he and his classmates at school, they spend four to six hours a day either online or on their cell phones looking at things. So it really is controlling the way things are going. The other thing I always tell residents and also new dermatologists, when it comes to reputation management and posts that are made on social media, you have to first admit there's a strong selection bias.—

--Most people that are happy, their rash goes away, they're not itching, their acne is clear, they go on with life. They go shopping, they go to the movies, they do all kinds of fun stuff. It's people that are really angry or upset because the medicine wasn't covered or they have a condition that can't be cured right away, they're the ones that get really, really angry and they want to vent. And they go to the computer and they start plunking and they leave these terrible, scathing reviews. And I've had to teach myself, don't take it personally. Some people are just angry and mean. I've read reviews, people are making negative comments about the color of sprinkles on their doughnuts or the way their dog's hair was cut at the groomer.—

--So some people just like to complain. I also think it's important to be aware, because sometimes the reviews are not legitimate. Sometimes you'll have a disgruntled employee or a jealous colleague or something, so you have to keep those in mind. But overall, when you're dealing with negative online reviews or even your online reputation, one of the things that helps, be it online or even with patients in a room, is the ability to deal with an angry person. And that works well in life. Even if you're at the store trying to buy some tires for your car and the person is having a bad day.—

--So one of the things I teach the residents is the mnemonic that I learned years ago called Take The HEAT. And H stands for hear them out. And so the important thing is just to be quiet. Look around the room, bite your tongue. They say the average physician will interrupt somebody they're arguing with in about 8 to 9 seconds. So just let them go, it's cathartic. They get it all, let them go for 45, 60 seconds, let them get it all out.—

--And then E is empathize. And so I always tell patients, "Hey, you know what?" You don't even have to agree with what they're saying. I just say, "If what you're describing happened to me, I'd feel bad, too." And then A is apologize. Say, "I'm really sorry you feel that way." And then T is take action. And the real simple thing to do is just usually say, "Hey, what can I do to make you feel better?" And I tell you, H-E-A-T hasn't failed me in 20 years, it always works. So that's one of the things if you're dealing with an angry patient or an angry person in life, it works well.—

--There's another situation that we run into sometimes. We'll get a patient that has a high deductible and they want to somehow maneuver their way out of their co-pay or write something off. And so sometimes you'll get a veiled threat, sometimes not so veiled. They'll say, "You know, I think you should write this off," or "I don't want to have to pay for this. And if you continue to charge me, I might have to just leave some reviews on social media sites." And we get that a couple of times a year.—

--So usually what I do in a case like this, and we'll have references at the end of the talk. I'm sure you can contact me and I'll give you my template. But I send a letter to their insurance company and I call it the bully letter. I just tell the insurance, "Hey, you need to educate your member. They're trying to get us to engage in insurance fraud. We have to be paid fairly for the services that we're contracted for." And also let them know why we're discharging them as a patient. And the most important thing is I c.c. the patient on the letter I send to their insurance company, telling on their behavior. That's rarely employed but it's important sometimes.—

--So but what happens when you get the actual negative review online that you find out about? And so I always say there's four steps to handling a negative review. The first step is the most important, that's prevent it if you can. Prevent it from happening in the first place. The second step is you want to monitor your online reputation, so if anything does pop up, you can respond quickly. Which leads right into the third point, respond fast and carefully and reasonably. And then the last step is if you need to, you have to take additional action.—

--So the first thing I would talk about is prevention. One of the biggest problems that all physicians have and in fact, there are some review sites that won't even let patients comment on it if somebody is running late, because that happens in medicine. And we have a really, really nice letter and I can send anybody a template who wants it, but it's a real nice letter that explains that medicine is a little bit different than a restaurant and a reservation at a restaurant. Oftentimes, patients will have special needs, challenging diagnoses, and we have to spend a little extra time with them.—

--And someday if that patients needs it, we'll spend extra time with you. So it's a really great letter that we usually give patients if they make a comment, "Oh, you're running a little bit late today," or "Hey, I've waited longer than I really wanted to." My staff knows, immediately give them the letter that explains why sometimes doctors run late. That will diffuse a lot of situations. If they're still mad, we have a second prepaid envelope, it's called the complaint management letter. And so it's prepaid and so it's already filled out. Say, "Hey, it seems like you haven't had the best experience today at our clinic. Would you please let our satisfaction director know?"—

--So we give them the form and it asks about what is the problem, what happened, please explain what we can do to make it better. We love to give that to the one or two patients a month that are really upset because they will fill that out and send it back to our office, rather

than running out to social media and start leaving nasty things online about us. So that's the complaint management letter.—

--And the last thing I do as a preventive measure, every encounter that I have with a patient, within reason, at the very end of the encounter I look at them and I say, "Is there anything else I can do for you today?" And most people say, "No, thank you. You've done everything you can." And I make sure that we document that on our note. So if there is a concern or complaint later saying, "You know, Dr. Crutchfield said 'Was there anything else?" and you said no, you were satisfied."—

--And then also it is a way to make sure that they have had everything covered. Because sometimes they'll say, "Wait, you forgot. Remember I said I had a mole behind my ear, did you look at that?" So those are the three things as far as prevention. The other thing that you can do, and I learned this from a good friend of mine, this is Dr. Joe Eastern, and he's kind of an expert in the area, too, and he's written several articles in *Dermatology Times*. And we've got a website and we have links to his articles and we'll have that for the listeners.—

--But we do a thing called "Dr. Sheridan should call daily." Dr. Sheridan is a classmate of mine so we just use that as a name. But we've gone through all kinds of iterations of this. We have, anytime a patient says, "Thank you so much, my psoriasis is much better, my acne is clear, the rash is gone, I can sleep at night," any time they make a declaration about how happy they are, I will tell my staff, "Hey, there is a note for me to call Dr. Sheridan but I already called him." That's an indication for my staff to give them a form to fill out for a nice online review.—

--We used to give them an Apple pad and to fill out right in the room but that took too long. One of the things we've found out over trial and error over the last ten years, if you give somebody a clipboard and a pencil, they write like crazy, and it only takes them two or three minutes. And we also have on the form, we have them say, "You have the right, Dr. Crutchfield, if you have a

service, to post this on any review site that you deem necessary." And we have them sign off on it and put their email address and everything, we have everything filed.—

--So if anybody ever sees a review online and they say, "That doesn't seem right." Say, "What was the name? Let's go pull it from the file," and there it is in their own handwriting. So that's another thing, we call it the Dr. Sheridan letter. And we probably give two or three a day. Well, two or three a day, that's a thousand positive reviews a year. And this goes on to another thing that Dr. Eastern would say. If you don't have a website with your name on it, do so. And so we have one called CrutchfieldDermatologyReviews.com.—

--And so every time we have a patient that leaves a nice review, we make sure we put it on that. And we use that, it pops up in the search engines. But we also use it when we post remarks and other negative reviews. So I would encourage the listeners, if they don't have one with their business name to certainly do that. And also get your personal name, too. The other thing that's very helpful is we have a lot of staff that we see as patients, we ask them to write reviews. Because the problem with most negative reviews, it's very difficult to get the review sites to remove them unless they're totally egregious.—

--But you can drown them out with positive reviews. And, in fact, most people give it more credibility if you have a couple negative reviews but mostly positive, it seems more real than just all pure positive reviews. So whenever we treat a staff member, we ask them to write a review. We don't tell them what to say but we ask them to leave a nice review. And that tends to be very helpful. The other thing that I've learned to avoid negative reviews, if there's a language barrier, we always interact positively with our interpreters. And we have a lot of English as a second language patients.—

--And so we have a great line of communication with our interpreters and any time there's a problem, they always go to bat and say, "Oh, no, no, no. Let's try this. Let's call them back.

Don't get mad, don't leave negative reviews." So definitely interpreters are definite ambassadors. So the second thing that we talked about is monitoring and you can also mitigate. So there are many services that will monitor for you and let you know if there's any reviews posted for you on social media sites. You can also do a thing called an RSS feed and Dr. Eastern covers that in detail in one of the articles that we'll link to. So you can do it yourself or you can have a service do it for you.—

--We use one called Empathiq, E-m-p-a-t-h-i-q.IL. And they constantly monitor the Internet. Anytime anybody leaves anything with my name on it, we get an alert. And also, the nice thing about Empathiq is if there's something that's inappropriate, they'll also go to the review site and help you either get it removed or revised. So they're real nice in that respect. So the three companies that we tend to use for reviews in general are Doctor.com, Yodel.com, and Empathiq, as I mentioned.—

--Also, there are many others, so be sure and talk to your colleagues. And also if you have a Webmaster, an IT specialist, they might know about other ones. But that's what we use. And I like Yodel because Yodel gives us the ability to record incoming phone calls, so we can do quality assurance. I always tell my colleagues, if you've never, ever, ever called your clinic and tried to make an appointment, do it. It's very enlightening. I remember the first time I tried it several years ago. I had such a runaround, I thought I'm happy I'm still in business. I'm happy that anybody made an appointment to see me, it's so hard to make an appointment.—

--And so this is so nice, because when your employees do a great job talking to prospective patients and patients, you can encourage them. And if they're not, you can do some remediation. So I like Yodel for that reason. But they also create a second webpage that drives in more patients. And they also will let you put reviews on a thing called RateABiz.com, which tends to float high on Google every once in a while. So that's also very helpful.—

--The other thing that we like to use is Doctors.com. And Doctors.com will actively place the reviews that you get from your patients, the Dr. Sheridan letter, on Healthgrades, and Ask, and Healthline, Health & U.S. News, it goes to about eight or nine different review sites, which is extraordinarily helpful. So we use Doctor.com also. And what happens is you can give it to Doctor.com. They'll place it on all the websites. And the nice thing about Doctor.com is with the review, since you've already typed it up for the patient, that's what happens when we get the clipboard back. I've got a staff member that will type it up and enter it in the computer but they just do it verbatim.—

--They will send them an email asking, "Would you like to post your review on Google and Yelp?" which are the two hard ones to get on. And more often than not, it's a reflection exactly of what they've said and all they have to do is click and paste. So it really is very helpful in getting reviews beefed up on Google and Yelp. And so that's why we like Doctors.com. But I like to say when I talk about this subject, a negative review online is the same as putting a dirty diaper and stapling it to your front door. Because when people go online, that's what they see. They see a really negative thing about you.—

--And so the important thing with any negative review is to respond fast and to respond very carefully. And I always tell dermatologists, we're so lucky, we've got a great field. And for whatever reason, we have this very special skill set, where we can understand medicine well and we can help people with skin problems. And all of us, every day, that's what I do. I get up, I go to work, my goal is to help as many people with skin problems as I can, because I have that ability. I don't go there to be mean to people or do nasty things.—

--And that's why it's so hurtful to me when somebody says something mean about me online. But the key is you have to respond very fast. And I tell my staff, if we get a notice from Empathiq, take a look at it. If there's anything negative, we need to respond that day. But you

should respond to all reviews, even the positive ones. Say, "Hey, thanks. I'm glad you had a good time. Please share your feelings with your friends and family." There's another book that's out that talks about dealing with negative reviews and it's called *Hug Your Haters*. And I say kind of, but it's definitely worth looking at. But the most important thing if you're responding to a negative review is to be very calm and to be very reasonable.—

--In fact, one of my general managers and good friends is an attorney. He says during trials, he said it's quite interesting, the jury will always side with the calm and reasonable person. So your response to a negative review should always be very calm, very short, very courteous, and very reasonable. So, for example, if there was a negative review, I would say, "Hey, thank you so much for taking the time to write a review. We want all of our patients to be thrilled with their visit. Please give us a call, so we can find out how to make you happy. Patient satisfaction is our number one goal. By the way, to see hundreds of certified patient reviews, please visit," and this is where you come with the website, "CrutchfieldDermatologyReviews.com."—

--That's a perfect response. And you have to be very careful because you don't want to violate HIPAA. And one of the things that's come up is, well, if a patient has already said they've been to your office, they've revealed it. No, HIPAA is not a two-way street. So you can even get in trouble for identifying someone as your patient. So the important thing is to make sure your response is generic, polite, reasonable. "We want you to be happy, give us a call."—

--Sometimes, you can actually contact the patient and find out directly what you can do to make them happy. What's the problem? But once again, my friend who is an attorney said you always want to have a thing called agency in this. Never, ever, ever call the patient yourself directly. Always have a representative call. Say, "I'm Dr. Crutchfield's assistant. What can we do to make you happy? We saw a negative review." And you'll get a lot more response from that than if you try to engage somebody directly, so never do that.—

--The other thing, times are changing. Even though you can say anything you want, freedom of speech, but there's no law that protects people from issuing false and defamatory statements online. And so in the rarer cases, maybe once a year, we have to consult an attorney. And sometimes you can send a cease and desist letter saying, "Please, this is defamatory. Please remove it." And I think we've done that maybe two or three times over the last ten years. But all three were met with nice responses, they did remove it.—

--Recently, there was a doctor that sued a patient for \$1 million for posting a negative review. So the real key though, it's a balancing act. You want to have the freedom of free speech and the freedom to express your opinions versus the freedom from false statements. So it's always a balancing act. There's several great articles on the topic, several written by my friend, Dr. Joe Eastern. We have links to that. Also, we have a very mild attorney opinion letter by Darrin Rosha, who is an attorney that talks about this.—

--But in summary, the four steps when it comes to online reputation, you want to prevent it, prevent negative reviews. You want to monitor for any activity. You want to respond in a fast, careful, polite, reasonable manner. And if you need to, you can take additional action. And one of the things that I have above my door at my office, I have a little sign, and even after 20 years in practice, it's from Michelangelo, it says, "I am still learning." Every day, I'm learning something new.—

--So for the listeners, if you have any comments or questions, you want copies of any of the letters I talked about, you can reach me through my assistant, Kelly M., M as in Michael, Kelly M. at CrutchfieldDermatology.com. Her phone number is 651-209-3628.

STEVEN T. CHEN, MD, MPH: That's amazing. There's so many great pearls in there for all of us, in terms of how we can manage our patient population and really the patient satisfaction piece. And thank you for being so generous with all of our listeners, with sharing all of your

letters that you use, that really sound like they're such a valuable resource for you, as you navigate the difficulty sometimes that comes with an angry patient.—

--I think it's interesting, just thinking about that. Like I, myself, was dealing with an angry patient today and the first thing I did was pick up the phone and call. And now I'm learning that maybe I shouldn't have done that, I should have had someone else call for me. So I think that we all have a lot to learn from your tips that you've learned over the years. One thing that I should mention that I noticed is earlier when we were calling your office, your outgoing message is you. You're the one who records the outgoing message for your dermatology clinic, which I think is ingenious. I think so often we have someone else record that outgoing message.—

--And the second I heard your voice, I was like, "That's another great thing to do," that I didn't even think about. And in thinking about all that stuff, like how do you come up with all of these great ideas? Are you thinking them up yourself? Does your staff get involved? Do you have like a brainstorming session? I know that you are very open to changing things, as things evolve over time. But I think that you've come up with some really ingenious ways to manage this. So I'm curious about the creative process behind the scenes.

CHARLES E. CRUTCHFIELD III, MD: Well, there are two things that I do. As I've become more senior, I often think of great things, and I usually think of them in the shower. And by the time I get out of the shower, I forget about them. But I have an app on my cell phone that's a recorder. So any time I have an idea, I speak into it right away. It's amazing how many things you can capture if you're able to write it down right away. So I definitely do that. That's valuable to me and I give it to my assistant every day and she'll send me a list of three or four or five or ten things that I thought of the day before, to act on. That's number one.—

--And number two, we definitely engage our staff. We used to do a thing called Gold Nugget Ideas. If you have any great idea for the practice, you'd actually get a gold nugget. But my staff

didn't like gold nuggets, so we switched it to car washes and movie theater tickets. So we have a suggestion box for the staff and we get probably three or four suggestions a week on ways that we say, number one, at every meeting we say, "How can we serve our patients better? How can we make our practice run better?"—

--So any suggestions on that, if we adopt it, they get movie passes or free car washes. So that's another thing. So we recruit staff to do that.

STEVEN T. CHEN, MD, MPH: I mean, I think that sounds great. Clearly, it takes a village to come up with all these great ideas. I'm curious, you do so much. Not only are you giving talks about this stuff, you obviously provide excellent patient care, you're teaching at the medical school level, you're mentoring so many other people that are future dermatologists or just future physicians in general. And not just that, but I also think back to the fact that I've been receiving your newsletter ever since I was a resident. How do you find time to keep up with everything? Clearly, you are so busy, how do you make the time to do this?

CHARLES E. CRUTCHFIELD III, MD: Thank you so much for that kind compliment. It's having excellent support staff, that's exactly how you do it. You surround yourself with people that can help you and get things done. And I always say, to be the most efficient, do only that which only you can do and delegate everything else. So I've got excellent support staff around me. I also have two personal assistants that take care of everything for me. So it frees me up to really do the things that I can do quite well. And I let them support me on that. So that's probably the best thing that I do on that.

STEVEN T. CHEN, MD, MPH: That's great.

CHARLES E. CRUTCHFIELD III, MD: The other thing that I try to do also, it's really important, is you've got to reduce physician or decrease physician burnout. And there's a good friend of

mine, he has a series of articles, Dr. Peterson Pierre in California. But for me, to reduce burnout is having a personal assistant, but I also don't do any EMR. I absolutely don't do any EMR at all, I have scribes to do it all. And once again, that feeds in the philosophy, do only that which only you can do.—

--And I thought what a colossal waste of time for me to sit down and start typing information into a computer that I can have somebody else do for me, while I go see a patient. In fact, as I said in our meeting at the boot camp, I went to medical school and residency to see and treat and help patients. I did not go to be a data entry clerk. And so I think there's got to be a time for physicians where we take this back and we have support staff doing all the charting for us and we start seeing the patients and doing what's important: making a diagnosis or coming up with a plan to get the correct diagnosis and then implementing a treatment plan.—

--So that's another thing that's been really, really helpful for me to avoid physician burnout. But like I said, Peterson Pierre has a great series of articles. You can contact him, I'm sure he'd share those with you.

STEVEN T. CHEN, MD, MPH: That's great. As we come to the end of our time together for this episode, I really wanted to open it up a little bit to ask you, you've had such an illustrious career thus far and you certainly don't have any signs of slowing down, is there anything that you would identify as something that you wish you could go back and do over or to change? Or something that you might have done differently?

CHARLES E. CRUTCHFIELD III, MD: Yeah, I think that one of the things that's been real helpful that I would continue to do and even do more is to develop a mastermind group or group of colleagues that are friends of yours. And I've had Dr. Neil Shah, and Mohiba Tareen, and Joe Shaffer, and Barry Lycka up in Canada, and Phil Ecker, and also both my parents are

physicians. So any time I encounter a tough situation or problem, I always discuss it with my group and say, "Hey, how would you guys handle this?"—

--I'm also a member of the Board Certified Dermatology. A lot of times, you can make a post and get information from colleagues. But it's really important to have a group of colleagues that you respect and know, and bounce things off of them, that's so important. The other thing that I've learned is that no matter what challenging or tough situation, before you want to respond, and I'm really emotional, I want to respond right away, sleep on it. Sleep on it. It's amazing how much clarity a good night's sleep can bring to almost any problem.

STEVEN T. CHEN, MD, MPH: I think that last piece of advice is so important for all of us. My wife is actually a physician and I think the one thing that we do the best for each other is we temper each other's frustrations. And our entire job I feel like is to tell each other to sleep on it before we send that email, before we regret something that we say. I think that is great advice.

CHARLES E. CRUTCHFIELD III, MD: And it took me a while to learn that but it's worked out so well when I've employed it. And once again, having a personal assistant. So at the end of the day, I don't have to worry about doing anything. My dry cleaning is picked up, my car is filled with gas and it's washed. The groceries and loaf of bread is in the car. I can drive home and spend time with my family and that's the most important thing for me. I don't need to be running around doing those other things, I can have support staff help me with that. And for people that are afraid of getting a personal assistant, share one with two or three colleagues. You'll be amazed at how much nicer it makes your life.

STEVEN T. CHEN, MD, MPH: I think that's great advice for a lot of us, especially for some of us maybe in the future that's something that we can definitely think more about. Dr. Crutchfield, I wanted to thank you for your time, I know how valuable it is. So thank you so much for taking the time to share your great tips and tricks and all the lessons that you've learned over the

years, running your practice, serving as a professor up in Minnesota. And so really, a most sincere thank you for joining us on *Dialogues* today.

CHARLES E. CRUTCHFIELD III, MD: This is an absolute thrill. I've been listening to *Dialogues* every month since I was a resident. So it's so nice to actually participate. And thank you for inviting me.

STEVEN T. CHEN, MD, MPH: Absolutely. Hopefully, our paths will cross again soon in person.

CHARLES E. CRUTCHFIELD III, MD: I look forward to it.

STEVEN T. CHEN, MD, MPH: Take care.