2016

Impact of logo wear on provider perception of patient

Bill R. Gombeski Jr
UK HealthCare, bill.gombeski@uky.edu

Follow this and additional works at: http://pxjournal.org/journal

Part of the Health and Medical Administration Commons, Health Policy Commons, Health Services Administration Commons, and the Health Services Research Commons

Recommended Citation
Available at: http://pxjournal.org/journal/vol3/iss1/14

This Article is brought to you for free and open access by Patient Experience Journal. It has been accepted for inclusion in Patient Experience Journal by an authorized administrator of Patient Experience Journal.
Impact of logo wear on provider perception of patient

Cover Page Footnote
The author would like to acknowledge the analytical and statistical support provided by David Aker, Statistician, Department of Statistics, University of Kentucky and the helpful comments from Kent Seltman, Consultant, Rochester, Minnesota; Bill Sonn of the Sonn Group, Denver, Colorado; Rob Klein of Klein and Partners, Chicago, Illinois and Clayton Medeiros, Consultant, Bellingham, Washington.

This article is available in Patient Experience Journal: http://pxjournal.org/journal/vol3/iss1/14
Provider Perceptions

Impact of logo wear on provider perception of patient
William R. Gombeski, Office of the Executive Vice President for Health Affairs UK HealthCare, bill.gombeski@uky.edu

Abstract
Patient's appearance affects provider perception of patients and subsequent provider behavior. Based on anecdotal information, it was hypothesized that wearing a health organization's brand would result in a more positive perception of a patient by providers and subsequently a better patient experience. A study of 121 individuals with patient contact was conducted. Using photos of patients with and without a health care brand on their shirts, study subjects rated the attractiveness and willingness to engage with photos of patients. Patients with a Mayo brand and UK HealthCare brand showed some significant positive attractiveness over the same patient without the brand. Wearing a health organization brand may increase a patient's attractiveness. However, no differences in provider behavior were noted. Unexpectedly providers as a group viewed some patients significantly less desirable than others and indicated it would affect the amount of time they would spend and information they would share with a patient. Health care organizations need to regularly reinforce to their providers and front line staff, the human tendency to provide lower quality service and of care to less attractive or desirable patients.

Keywords
Brand, patient experience, patient interaction, medical center logo, patient attractiveness, patient satisfaction, training of physicians and front line staff

Acknowledgement
The author would like to acknowledge the analytical and statistical support provided by David Aker, Statistician, Department of Statistics, University of Kentucky and the helpful comments from Kent Seltman, Consultant, Rochester, Minnesota; Bill Sonn of the Sonn Group, Denver, Colorado; Rob Klein of Klein and Partners, Chicago, Illinois and Clayton Medeiros, Consultant, Bellingham, Washington.

Introduction
Numerous studies have shown that physicians' perceptions of patients and subsequent behaviors are affected by patient's appearance. (based on age, race, ethnicity, gender and education level). In all these studies patients viewed as less attractive or desirable were more likely to receive lower quality and service. Street described how physician’s perception of the patient affects the patient/physician interaction and communication, and suggests how it might affect service and quality experience.  

As healthcare organizations continue to focus on strengthening their brands the importance of providing a consistently positive experience to all customers is a key objective. When providers deliver varying degrees of service and quality, the likelihood all patients will return for care or recommend the organization decreases. All which lead to a weaker brand.

Background
The impact of patient appearance on patient experience surfaced as a brand issue recently when a member of a customer advisory group at UK HealthCare stated he wore his UK HealthCare-branded, polo shirt to all clinical appointments. His reason for doing so was that he believed he received better quality and service.

UK HealthCare is the medical arm of the University of Kentucky and consists of three hospitals, over fifty outpatient locations, 900 plus physicians and dentists, and over 9,000 employees seeing patients from Kentucky and surrounding states.

Research Question
To discover whether wearing medical center logo wear affects provider perception of a patient a study was initiated. The study was designed to determine if wearing a medical-center, branded shirt generates more positive attitudes and behavior from a provider towards the patient.
Methods

Positive behavior was defined as the likelihood a provider or front line employee would spend either (1) more time or (2) go into more detail when explaining a medical or service issue or solution with a patient. Patient attractiveness was measured using three attitudinal questions: 1) would you want to know more about this person, 2) would you ask personal questions or share personal interests with this person, or 3) does the person have qualities I would like other to see in me. A likert scale of strongly agree, agree, neutral, disagree and strongly disagree was used to obtain a mean score for each question.

Five photographs of potential patients were selected. In set one, a female had UK HealthCare, the brand name of the University of Kentucky’s medical enterprise, photo shopped onto her blouse. In set two, the same female had no logo on her blouse. In addition in set two, a male patient had the Mayo Clinic logo photo shopped on his vest. The same patient photo in set one had no logo. The Mayo Clinic logo was selected to provide a second logo to include in the test and was selected because it was believed to have high awareness among health care physicians and staff.

The alternate sets of five photos were systematically distributed to 121 physicians and staff employees at UK HealthCare who interfaced with patients in late 2014 and early 2015. Employees were told that the purpose of the study was to evaluate photos as a way to collect marketing information. Employees were asked to fill out the five question index on each patient. To increase visibility of the logos, each picture was blown up to 8 ½ x 11. Fifty-nine set one questionnaires (female patient had UK HealthCare logo on blouse) and sixty-two set two questionnaires (male patient had Mayo Clinic name on vest) were collected.

Analysis

A mean score for each question was calculated for each photo used in Group 1 and in Group 2. This allowed comparison of the two photos with and without logos and for comparison between groups.

The five individuals’ photos (combining group 1 and group 2 scores) were also compared to each other on the five questions. The least squared means were calculated for each individual photo, and the overall scores were compared with an ANOVA model. Pairwise differences were then tested using t-tests. These analyses were performed using SAS 9.4 (Cary, NC).

Results

To determine if the presence of a logo, influenced employee attitude or behavior, the mean scores between the photos of individuals with the UK HealthCare logos and the Mayo Clinic branded logos were compared to the same photos without the respective logos. Of the three attitudinal questions, the Mayo Clinic photo (C) scored significantly more likely (p<05) on respondents “wanting to know more about the individual” than the non-logoed picture. (2.81 vs 2.96) See Appendix for Figure 2. The UK HealthCare logoed photo (B) scored more positively (p<05) on “this person has qualities I would like others to see in me” than the non-logoed picture (2.67 vs 2.86). See Appendix for Figure 3. There was no difference for either
pairs of B and C photos on the third attitudinal question; “I would be more likely to ask personal questions or share personal interests with this person.” When the two behavioral questions were examined there were no significant differences between the logo vs. non-logo photos for “more likely to spend time” or “go into more detail.”

Comparison of the mean score of each of the five photos to each other regardless of which group or logo status did show that two individuals were rated more positively than the other three patients (p<.0001) for all three attitudinal questions. Figure 4 shows that the two individuals (pink lady B, gray man A) are viewed more positively than the other three individuals (C, D, E). This more positive rating was also similar for questions “I would want to know more about this person” (p<.0001) and “has qualities I would like others to see in me.” (p<.0001) And the two more attractive individuals were more likely to receive increased time during a visit (p<.0002) and more detailed information (p<.0005 respectively) than the three less attractive patients. See Appendix for Figures 5 and 6.

Discussion

There does seem to be some support for consumers wearing medical-centered logo wear to achieve a more satisfactory experience. For two of the three attitudinal questions, respondents were more likely to want to know more about the individual or indicate the person had qualities I would like others to see in me. There are a number of reasons why a medical-center logo could influence provider/employee attitudes and possibly behaviors. The patient may be perceived as part of the organization e.g. “family” and providers will want to provide a better experience to fellow employees. The patient may be perceived as being a health worker and having more knowledge or higher standards of health care and will expect/want more detailed health information or could understand more detailed information. The possibility that the patient may be someone important or know someone important in the organization and could report their experience could influence behavior. Also it is possible that the employees viewed the person with a medical center logo more positively because they perceived the individual was saying “I approve of you, your work in health care or your organization and that is why I wear a shirt with your healthcare logo.”

As individuals we all seek clues about new people we meet. Patients provide a lot of clues that providers may consciously or unconsciously process. For instance, styles of hair; the presence or absence of jewelry; the apparent value of the jewelry; dental clues like straight or white teeth; and even the titles of books they carry. Wearing a medical-center logo may be an important way to clue providers.

The literature suggests that providers liking a patient is the first step in a more satisfying patient/provider interaction and often does lead to more positive behavior. For patients, better understanding of how to dress for providers could lead to their physician liking them. Likewise for physicians, engaging more effectively with patients may generate more honest sharing of information to help with diagnosis and treatments, leading to a better provider/patient experience. However, in our study there was no difference in behaviors (spend more time or go into more detailed explanation) between the logoed and non logoed photos in our study. A patient may have to do more than wear a logo to initiate significant provider engagement leading to more time and receiving more detailed information.

As documented in the literature, our research finding support that other clues, such as a patient’s appearance can influence provider attitudes and behavior towards a patient. Three of the patients (older, non-smiling) had consistently less positive mean scores for both attitudinal and behavior questions than the other two (younger, smiling). While not measured it is likely that the age (older) and appearance (not smiling) of the three more poorly rated photos may have affected the employee rating of patient attractiveness. From a brand management perspective, providers and customer-interacting employees should be educated on how their perception of a patient can influence their behavior and lead to inconsistent quality of the patient care experience, especially for older and less attractive patients. For patients with less desirable traits, wearing a medical-center logo may provide an advantage when engaging with providers.

Limitations of our study, included small n’s of 59 and 62, use of photos to represent patients, use of primarily front-line staff in our populations as opposed to all providers, and self-reported attitudinal and behavioral actions may have reduced the power to statistically measure true differences. In addition, our study looked at the impact of a medical-center logo viewed as a quick initial mental note. How impactful that impression actually has over the course of a 15-20 minute interaction during a visit with a provider may be lost as other relevant clues such as education, and knowledge of medical language surface. Further research should be conducted.

Conclusion

Achieving a consistently high brand experience is becoming more important in health care provider organizations. Expectations that all patients receive a high quality interaction from providers should be reinforced and regularly refreshed. Training of providers and staff to understand how one’s perception of a patient can influence care should be implemented. There is some support that patients may be viewed more likeable by
wearing medical center logo wear. However, they may need to do more to influence provider behavior.

References

Appendix

Figure 2. I would want to know more about this person

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.32</td>
<td>2.36</td>
<td>2.81</td>
<td>2.96</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.53</td>
<td>2.71</td>
<td>3.08</td>
<td>3.20</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.17</td>
<td>3.39</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.62</td>
<td>3.80</td>
<td>3.81</td>
<td>3.84</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.54</td>
<td>2.48</td>
<td>3.37</td>
<td>3.47</td>
<td></td>
</tr>
<tr>
<td>E</td>
<td>0.18</td>
<td>0.12</td>
<td>0.22</td>
<td></td>
</tr>
</tbody>
</table>

Group 1  n=59
Group 2  n=62

Figure 3. This person has qualities I would like others to see in me

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.67</td>
<td>2.86</td>
<td>3.62</td>
<td>3.80</td>
<td></td>
</tr>
<tr>
<td>Group 1  n=59</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.54</td>
<td>2.48</td>
<td>3.81</td>
<td>3.84</td>
<td></td>
</tr>
<tr>
<td>Group 2  n=62</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0.19</td>
<td>0.18</td>
<td>0.03</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

p=.05
Figure 4. I would be more likely to ask about personal interests or share my personal interests

Figure 5. If I was explaining a complex topic I would spend more time with this individual
Figure 6. I would go into more detail if explaining something

n=121