

Positive Communication Standards: For Frontline Employees & Leaders

Presented by:

Jane McLeod
Principal/Co-Founder

Rita Jury
Transformational Specialist

The Presenters



JANE MCLEOD

Principal/Co-founder

Capstone Leadership Solutions



RITA JURY

Transformational Specialist

The WHY

Back at you Simon!

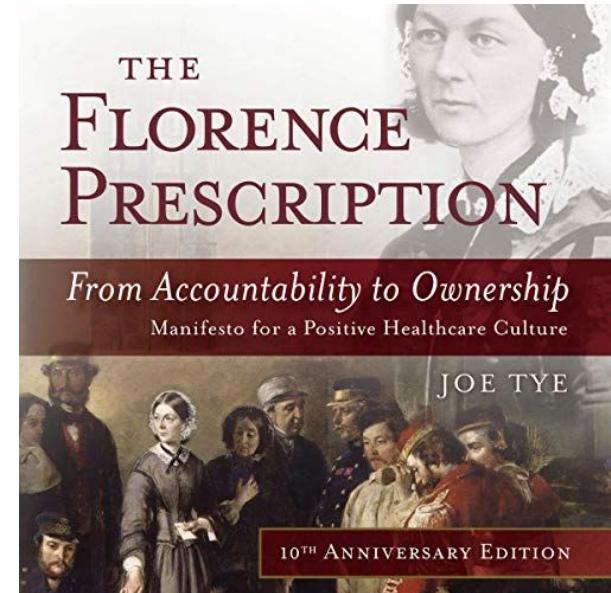


The WHY

Setting Standards for Positive Communication

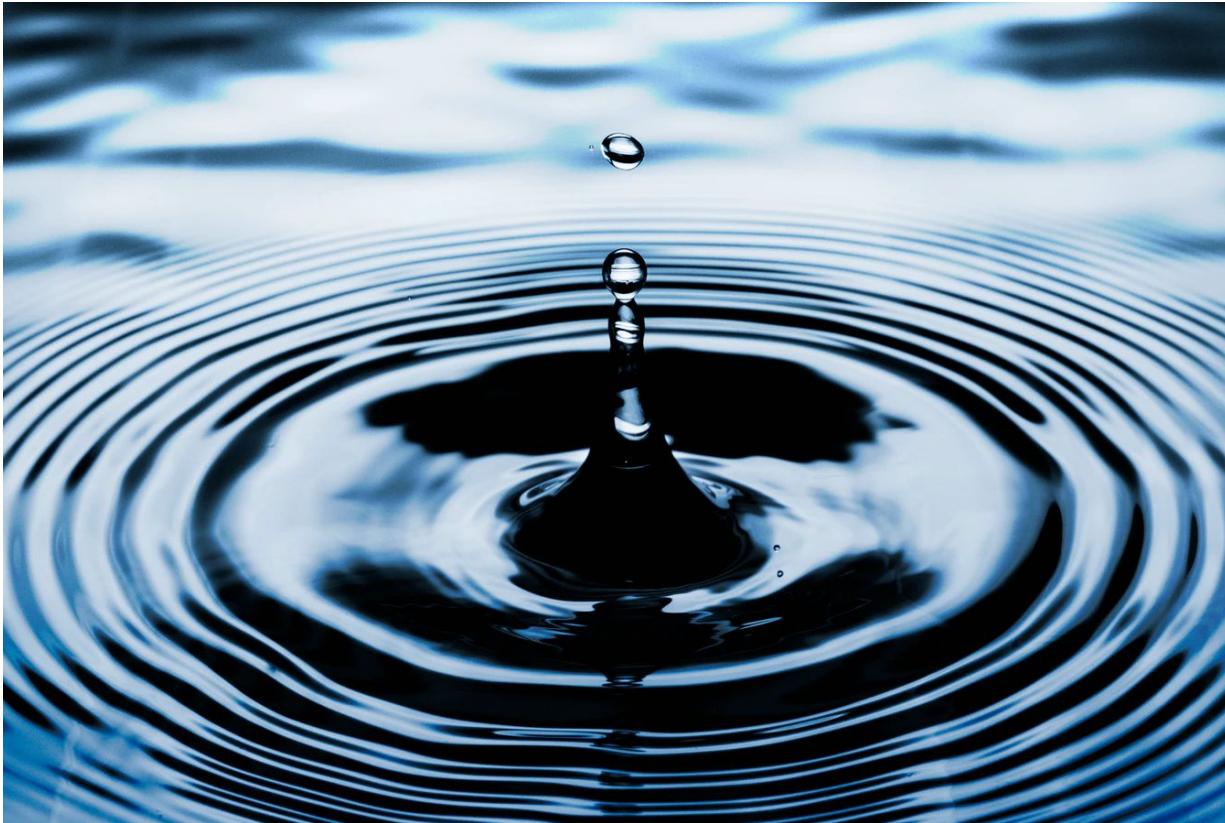
“You have to set high standards and train people to your expectations- you cannot expect your employees to behave in a certain way without communication and training”

--Joe Tye



The Ripple Effect

Begin the standards with self first, and team second.



Pre-Validate! It's vital

- Return to us for another great webinar on
Validating the Positive Communication Standards on
April 20 at 10a PST
- Meanwhile, Rita and I will connect the dots on what you
should **PLAN** to **improve** as you **implement**
- A hypothesis or vision statement!

The Positive Communication Standard Bundle

In order to provide a **safe** and **satisfying** Patient Experience we recommend you **“bundle”** your standards

Positive Communication Standards



Hallway Hospitality



Telephone Etiquette



Managing Up



Service Recovery



Listening



Banning Blame
& “We-They”



Body Language



Banned Words/Phrases



Attitude of Gratitude



Narrating



Teach Back



Handoff



CAPSTONE
Leadership Solutions, Inc.

www.CapstoneLeadership.net

Why a Bundle?

- We are not robots, but we need standardized tactics in many aspects of our work (checklists, policies and procedures, job descriptions)
- Communication Standards are evidence-based tactics that impact:
 - Patient safety
 - Patient satisfaction
 - Employee engagement
 - Employee satisfaction
- Must be implemented thoughtfully and compassionately
- Simply, the bundle of Communication Standards is
THE RIGHT THING TO DO!



Handoff

WHY DO YOU NEED THIS?

It's all about communication!

- Leading cause of medical errors (per The Joint Commission) is a breakdown in communication
- HCAHPS questions: Nurse Communication, Physician Communication
- Other survey questions related to teamwork



Handoff

HOW DO YOU DO THIS?

Use a standardized, structured methodology

- I - SBAR - Q
- Checklist/script
- Infused with compassion and individualized by the participants, because we are not robots



Handoff

WHEN DO YOU DO THIS?

- Bedside shift report
- Calling a provider for orders
- Transferring a patient to radiology or therapy
- Others!



Managing Up

WHY DO YOU NEED TO DO THIS?

- Impacts patient experience questions around teamwork, likelihood to recommend, nurse communication
- Impacts employee engagement and satisfaction

Managing Up = Transfer to Trust

Why would we NOT do this?



Managing Up

HOW DO WE DO THIS?

- Speak with confidence, support, and sincerity of the person to whom you are handing off care
 - **What you say**
 - **Tone of voice**
 - **Body language**
- Talk to others about the trust you have in your leaders and colleagues
- Support changes in processes and practices



Managing Up

WHEN DO YOU DO THIS?

Remember the definition of managing up - it is a transfer of trust - you do it **ALL THE TIME!**



Narrating

WHY DO YOU NEED TO DO THIS?

Literacy versus Health Care Literacy

- A person who is engaged and understands is more likely to be compliant!





Narrating

HOW DO YOU DO THIS?

- While you work, talk through what you're doing using common language
- Do not limit this to clinical care!



Narrating

WHEN DO YOU DO THIS?

- At every patient and family interaction
- Remember compassion



Teach Back

The WHY

AHRQ #11 Safety Initiative

“It is simply not enough that people understand healthcare information- they must be able to use it”

<https://psnet.ahrq.gov/web-mm/impact-communication-medication-errors>

Teach Back: An Evidenced Based Healthcare Literacy Intervention



Teach Back

A Day in the Life of a Patient.....

Not just any patient, MY PATIENT

How will you know you need Teach Back? Medication events anyone? Transition of care scores are low.



Teach Back

BIG BANG THEORY

This is a BEAST- where do you start?

Our partner's stories.



Teach Back

In Healthcare we LOVE our acronyms.

Ask-Teach-Ask

“If they don’t do what we want, we haven’t given them the right information.”

--Vice Admiral Richard Carmona
Former Surgeon General



Teach Back

Requires a Shift in Thinking

From: “Non-Compliant Patients”

To: What is our responsibility as the provider of information & teaching?



Teach Back

Ask-Teach-Ask

Ask questions to understand the patient's current knowledge and learn about their needs and concerns.

Listen *“Please tell me what you know about this medication.”*



Teach Back

Ask-Teach-Ask

Explain your positive intent.

Use simple, easy-to-understand terminology.

Listen for signs of inattention or confusion.

Invite questions along the way.

Address anxieties and clarify “what ifs.”



Teach Back

Ask-Teach-Ask

“So that I may check how well I’ve done at sharing this information, can you please tell me what you know about this new medication you will start taking?”



Teach Back

Ask-Teach-Ask

Do not ask:

“Do you understand?”

“Do you have any questions?”



Listening

The **LOUDEST** Positive Communication Standard

WHY a standard for Listening?



Listening

Imagine a world where everyone listened...

Part of the **WHY** needs to be how it affects your employees and their relationships.

Good communication skills require a high level of **self-awareness**. Understanding your own personal style of communicating will go a long way toward helping you to create good and lasting impressions with others.

How will you know you need a standard for Listening? Your HCAHPS scores will tell you!



Listening

Active Listening vs. Listening

- Pay Attention. Give the speaker your undivided attention, and acknowledge the message. ...



Listening

Active Listening

- Show That You're Listening. Use your own **body language** and gestures to show that you are engaged...



Listening

Active Listening

- Provide Feedback



Listening

Active Listening

- Defer Judgment



Listening

Active Listening

- Respond **Appropriately**



Service Recovery

66% of healthcare decisions are based on word of mouth

- Only 1 in 26 customers will tell us when they are dissatisfied with part of their care, yet.....
- Greater than 50% of your dis-satisfied customers will tell someone ELSE.
- Meanwhile, only a fraction of your satisfied customers will tell someone about GOOD care.
- How do you know if you need employee driven service recovery efforts?(response to concerns, likelihood to recommend)



Service Recovery

“Negativity screams at us, and positivity only whispers.”



--Barbara Frederickson



Service Recovery

When something is **GREAT**, behaviors change





Service Recovery

Set a Standard for Service Recovery

You cannot be everywhere, you do not have eyes in the back of your head.





Service Recovery

Set a Standard for Service Recovery

Employees are the true listening post for excellent service recovery.

(aka, a princess at Disney)



Service Recovery

We recommend:

4A+D=AAAAAD



Service Recovery

Anticipate



Service Recovery

Acknowledge



Service Recovery

Apologize



Service Recovery

Amend



Service Recovery

Document



Service Recovery

Make sure your Service Recovery is.....

1. Fast (prior to a social media post)
2. Personal
3. Fits the situation.



Hallway Hospitality

WHY DO YOU NEED TO DO THIS?

- This is simply the right thing to do!
- A patient's story



Hallway Hospitality

HOW DO YOU DO THIS?

Let's break it down into steps:

1. Eye contact - smile
2. Say hello
3. Ask if they need help finding where they need to go



Hallway Hospitality

WHEN DO YOU DO THIS?

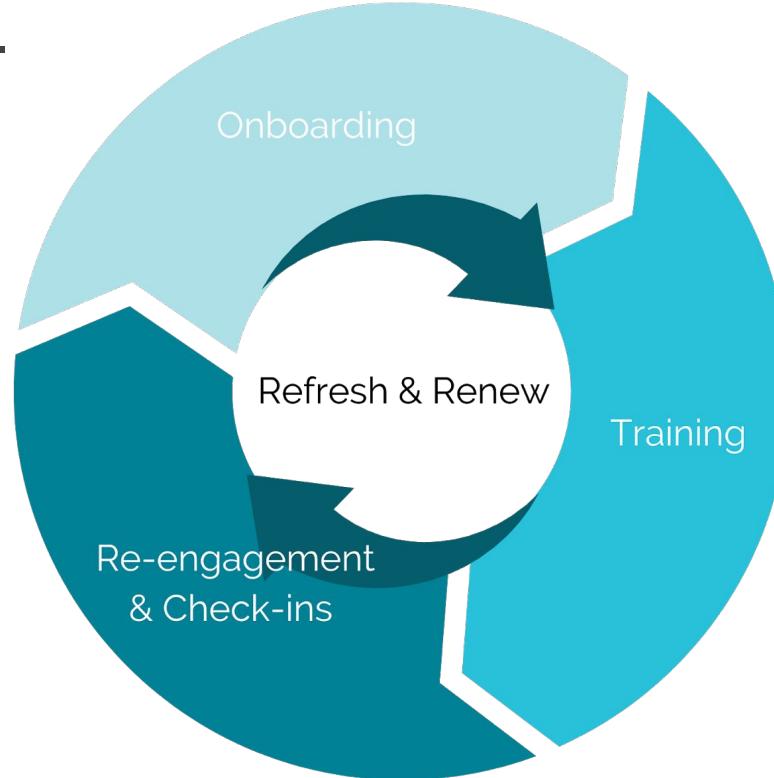
EVERY time you pass someone:

- Patient
- Visitor
- Vendor
- Provider
- Colleague

Yes, this simple strategy is **VERY** impactful!

Training Positive Communication Standards

Inconsistent and optional training leads to inconsistent and optional results.



QUESTIONS? CONTACT US!

Self-Schedule a Call:

www.CapstoneLeadership.net/Call

WEBSITE:

www.CapstoneLeadership.net

EMAIL:

Jane (Principal/Co-Founder) - jane@capstoneleadership.net

Rita (Coach) - rita@capstoneleadership.net

Whitnee (Sales/Support) - whitnee@capstoneleadership.net

PHONE:

(906) 259-0542