

CUSTOMER SERVICE: HANDLING TOUGH SITUATIONS

David Colaiuta
Coach

October 14, 2020



Healthy Idahoans Living in Healthy Communities



Our Mission

To promote and support vibrant, effective community health centers in providing accessible, affordable, and high quality healthcare to all Idahoans

Our Work

Health center administration

We help health centers strengthen business operations through support in financial management, health information technology, emergency preparedness, workforce development and medical, behavioral health and dental practice integration.

Quality improvement

We assist health centers achieve the best patient outcomes through innovative quality improvement programs utilizing the highest clinical standards, fostering patient engagement and coordinating care within the larger healthcare system.

Outreach and enrollment

We help health centers provide health insurance education and enrollment assistance to community members, many of whom face barriers in accessing healthcare.

Governmental relations

We monitor the changing healthcare policy environment and connect health center leaders with elected officials on the local, state and federal levels. We engage with the Idaho Department of Health and Welfare and the Department of Insurance to create strong and lasting relationships.

Network management

We support payment reform and value based reimbursement by collaborating with insurance companies to control costs and increase quality of care.

Webinar Housekeeping

We are Recording

Mute/Unmute
Mics

Asking Questions

Evaluations

- Questions?
 - Use the chat function for questions
 - Email: dstewart@idahopca.org

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Please turn on your camera!
We want to see you and
engage in conversation.

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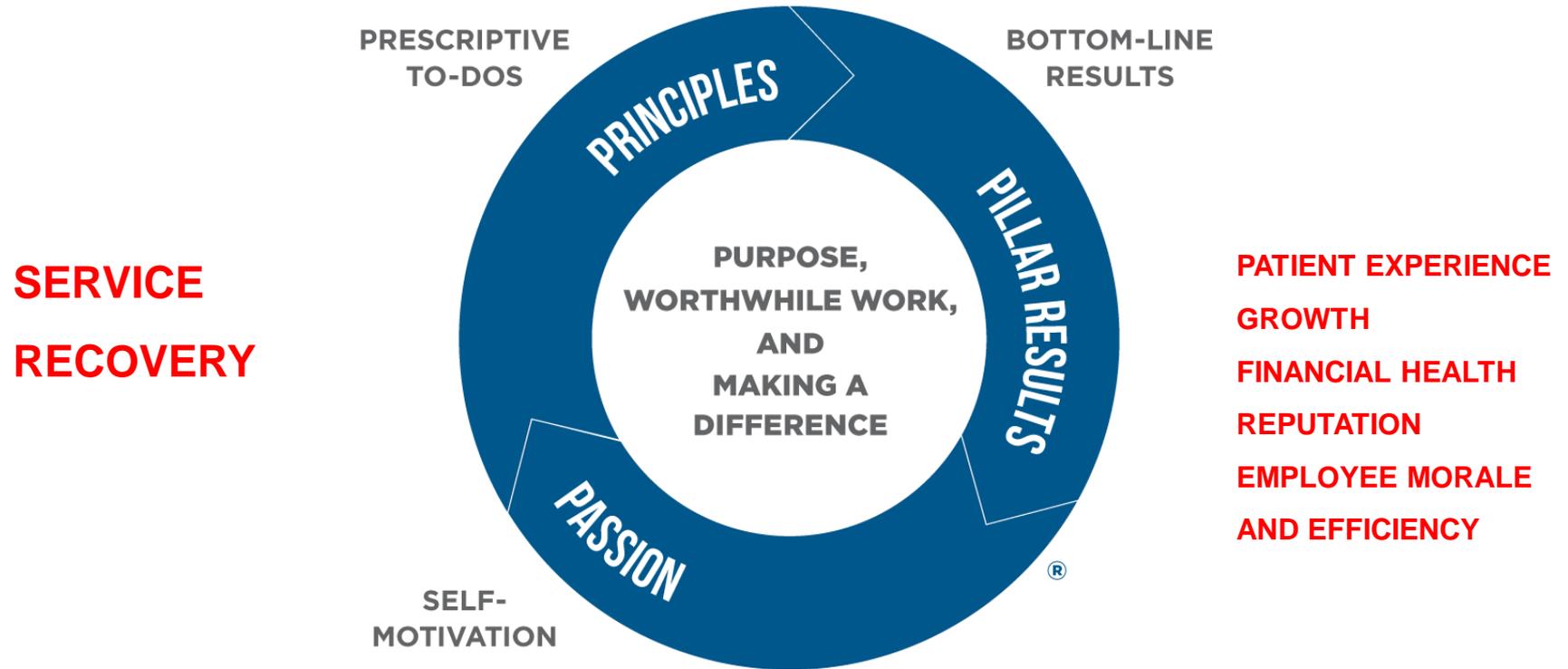
Today's Presenter

David Colaiuta, JD



With almost 30 years of experience in healthcare, David combines his unique medical practice operations background with a passion for creating the best possible experience for patients and those that care for them. That passion aligns perfectly with the mission-driven community health center leaders, providers and team members he has the opportunity to coach every day. With evidence-based practices and tools, David supports CHCs on their journey to become the workplace of choice and healthcare provider of choice in their communities.

THE HEALTHCARE FLYWHEEL®



Quality

To provide a level of patient care and service good enough for our own mothers, without the need for special arrangements

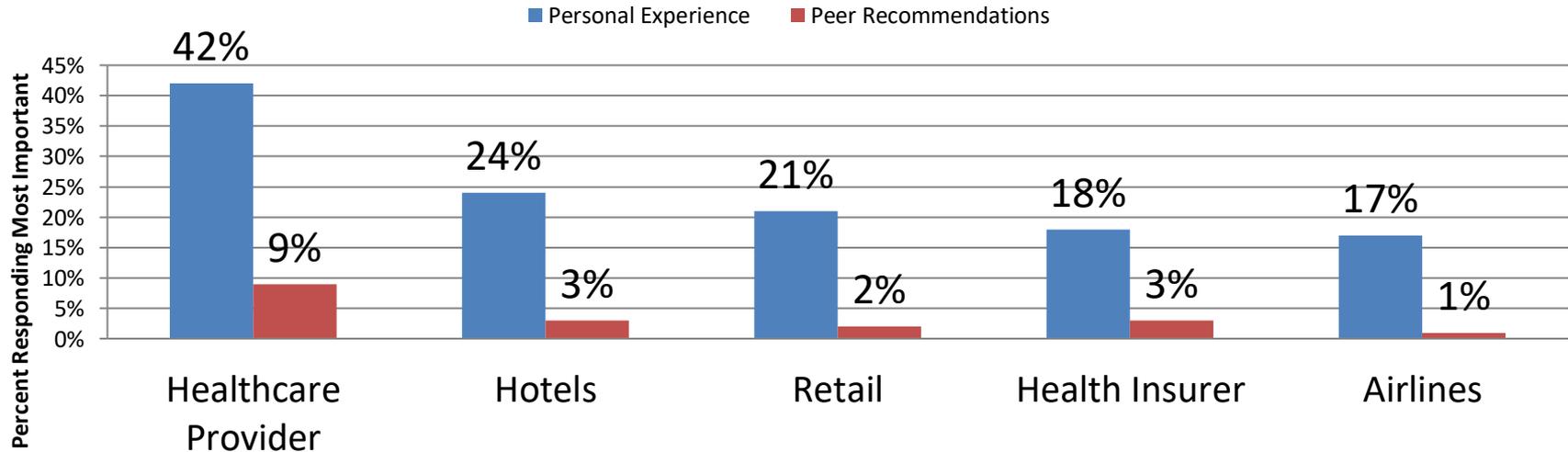
WHY THIS MATTERS TO ME

1. IT'S PERSONAL
2. IT'S THE RIGHT THING TO DO
3. POSITIVE PATIENT EXPERIENCE PAYS AND YOU WIN
4. NUMEROUS STUDIES ARE SHOWING A STRONG CORRELATION BETWEEN EXPERIENCE OF CARE WITH QUALITY AND SAFETY

Patient Experience Drives Financial Outcomes

Personal experience is 2.6 times more important in choosing a doctor than other industries and peer recommendations are twice as important

Influence of Personal Experiences and Peer Recommendations in Selecting a Provider - Percent responding "Most Important"



WHY should we Improve Patient Experience?

- Reduces patient and family anxiety by establishing trust
- Improves compliance for better outcomes because patients will cooperate more readily with their plan of care as a result of that trust
- Creates a safe environment to receive care
- Helps us build customer loyalty; we want to be their preferred healthcare provider of choice



A New Perspective

Traditionally, health care patients have been treated by health care professionals as people with needs rather than as customers with options.

Let's change that!

WIZARD OF ID PARKER & HART



Complaints as Gifts...

- The “Service Recovery Paradox”
 - When a customer has a problem but encounters someone who goes above and beyond to fix the situation, the customer tends to remain loyal...often more loyal than someone who has never had a bad experience (McCollough and Bharadwaj, 1992).
- 81% of customers who complain will continue doing business with you if you resolve their complaint (Accenture 2013 Global Consumer Pulse Survey).

Accenture 2013 Global Consumer Pulse Survey. Accenture. Retrieved [here](#) on 2/22/17.

What is Service Recovery?

- Service recovery is defined as the handling of customer dissatisfaction, complaints or any problems or difficulties with our organization.
- Service Recovery is initiated when a customer receives less than excellent service.

Simply Stated...

Service Recovery is the art of making things right when things go wrong!

POLL #1:

Why do patients change healthcare providers?

1. Concerns about quality
2. Dissatisfaction with personal treatment
3. Concerns about time issues

Why Would Customers Leave Us?

- When patients were asked why they would change healthcare providers:
- **60** percent cited concerns about quality
- **40** percent cited dissatisfaction with personal treatment
- **20** percent cited concerns about time issues

Gail Scott. (2009, January). Service Recovery. Healthcare Executive, 24(1), 44,46-47. Retrieved February 23, 2009, from ABI/INFORM Global database. (Document ID: 1625297771).

Why Do Customers Leave Us?

- When patients were asked why they *did* change healthcare providers, a different picture emerged:
- **54** percent cited personal treatment
- **23** percent cited time issues
- **20** percent cited quality issues

Gail Scott. (2009, January). Service Recovery. Healthcare Executive, 24(1), 44,46-47. Retrieved February 23, 2009, from ABI/INFORM Global database. (Document ID: 1625297771).



**BUT WE ONLY GET A
FEW COMPLAINTS A
MONTH...**



How Do We Lose Customers?

Findings indicated that for every 100 customers who experienced **deficient service**, about 70 customers would be unlikely to patronize the same organization again.

Pui-Mun Lee, PohWah Khong, Dhanjoo N. Ghista. (2006). Impact of deficient healthcare service quality. The TQM Magazine, 18(6), 563-571. Retrieved February 23, 2009, from ABI/INFORM Global database. (Document ID: 1146577451).

Uh-Oh... It Gets Worse

For the same 100 customers who have experienced **deficient service**, about 75 of them will go on to tell on average **nine** family members and friends about their experiences.

Pui-Mun Lee, PohWah Khong, Dhanjoo N. Ghista. (2006). Impact of deficient healthcare service quality. The TQM Magazine, 18(6), 563-571. Retrieved February 23, 2009, from ABI/INFORM Global database. (Document ID: 1146577451).

Impact of Service Failures

Through word of mouth:

75 turns into 675

Pui-Mun Lee, PohWah Khong, Dhanjoo N. Ghista. (2006). Impact of deficient healthcare service quality. The TQM Magazine, 18(6), 563-571. Retrieved February 23, 2009, from ABI/INFORM Global database. (Document ID: 1146577451).

Best Strategy

Do it right the first time!

When that doesn't happen, be proactive:

Take steps to address the service failure, *before* customers complain



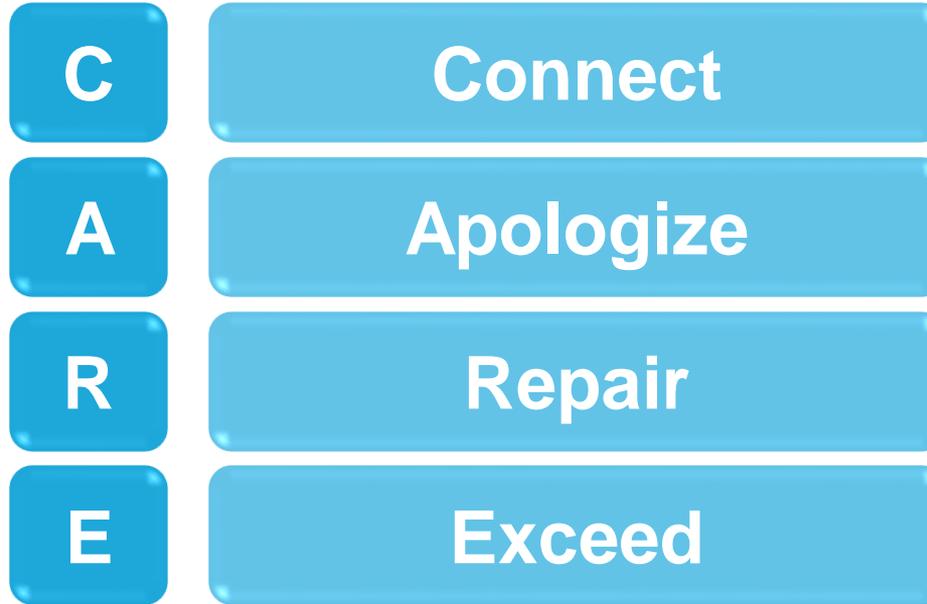
FOUNDATIONAL ELEMENTS OF SERVICE RECOVERY



Before You Begin

- Don't take it personally
- Focus on the problem, not the person
- Remain calm and in control: be professional

Service Recovery: CARESM



C

Connect

- Create a personal connection
- Use AIDET Plus the PromiseSM
- Make eye contact and display open body language
- Find the appropriate / private location

WHY?

This part of the process puts a face with the solution and allows the customer time to vent.

Listen

- Refrain from interrupting until the person is finished
- Avoid rushing them
- Let them vent
- Use good listening skills

Repeat

- Repeat back the customer's concerns to be sure you heard everything correctly.
 - Don't add anything
 - Keep a positive mindset
 - Avoid sarcasm
- “Mr. Jones, I want to be sure that I didn't miss any of your concerns. You said xxx, xxx and xxx. Is that correct? Did I miss anything?”

A

Apologize

- Say, “I’m sorry”
- Don’t use excuses or place blame

WHY?

This part of the process allows you to acknowledge that the customer’s experience is not the norm and take ownership of a solution.

Apologize

Regardless of fault, a GENUINE apology makes the angry customer feel heard and understood and allows you to reestablish trust with the customer.



Saying “Sorry”

- Use empathy during the act of apologizing by showing that you really understand how and why this is affecting them
- Validate and acknowledge that something is a real problem
- **Don't say:** “I'm sorry that you feel that way” or “I'm sorry that you think I'm not being clear”
- **Do say:** “I'm sorry WE caused this frustration,” or simply “I'm sorry for the trouble”
- **Take responsibility**

Express Empathy

- Empathy is expressing that you understand, not necessarily that you agree
- Shows you genuinely care about the inconvenience experienced by the customer
- Helps you begin to see the problem from the customer's perspective
- “I'm sorry we took so long. I'd be upset, too. I'm going to take care of you right now.”
- Avoid saying “I know how you feel...”

Show Empathy Nonverbally

- Eyes
- Eyebrows
- Forehead
- Nodding
- Posture
- Open arms

If you feel for the person, show it in your face



Guillermo Mota's Apology

"To my teammates and the entire Mets organization, I am sorry. I truly regret what I did and hope that you can forgive me. To baseball fans everywhere, I understand that you are disappointed in me, and I don't blame you. I feel terrible, and I promise this is the first and last time that this will happen. I am determined to prove to you that this was one mistake."

Mota was suspended Nov. 1, 2006 for the first 50 games of 2007 for violating Major League Baseball's performance-enhancing drug policy.

The Blameless Apology

- “I am sorry this wasn’t what you expected”
- “I am so sorry we inconvenienced you”
- “I am really sorry this has been so uncomfortable”



Steps to Effective Apologies

- Apologize, regardless of the situation or who is at fault
- Apologize, even if you didn't cause the problem
- Always say I'm sorry – not we're sorry
- Make the apology a blameless apology
- Apologize at the right time
- Say it like you mean it
- Do not place blame

Steps to Effective Apologies

- Address and consider solutions to solve the situation, not those that “smooth things over”
- Take responsibility for the customer’s satisfaction
- Be proactive; prevent the negative before it occurs. If you know in advance of a potential issue, be prepared for service recovery

Practice: Saying “Sorry”

Do you ever hear staff apologizing to patients or other customers?

As leaders, do you apologize?

What were the circumstances for the apology?

What are key words or other considerations in offering an apology?



R

Repair

- Determine what would make the customer happy
 - Ask questions and wait for responses
 - “What can I do to make it better for you?”
- Empower employees to act!
- Sometimes a simple explanation or more information is what is needed

WHY?

This part of the process asks the customer how we can make it better.

Take Steps to Repair

- Explain what happened. This shows that you truly understand how and why something is a problem and builds trust and transparency
- Explain what is being done OR what you will do to fix the problem. Don't make excuses or place blame. Don't manage down!
- Take the extra step of mentioning the names of the people working to fix the issue, which will further humanize the support experience and help the customer feel especially connected
- Never take a customer's anger personally. Don't get emotional.
 - Words, tone and attitude must be professional
 - Professionalism diffuses and disarms angry customers allowing you to control the situation
 - Focus on the problem, not the person

Show Appreciation in Reparation

- Thank them for bringing the issue to your attention and providing an opportunity to make it right. Let them know how much they are valued.
- An important part of an apology is making reparations. This might be an offer for some personalized attention (a demo, a consult, a phone call) or perhaps simply an overture to “let me know if there’s ever anything I can do to help.”
- The apology should invite a response, such as “let me know if you have any questions about what happened” or perhaps “let me know if this was solved to your satisfaction, and if not, what more can we do?” This makes the customer feel involved and respected – and possibly even part of the solution – and assures him that we’ll here for him and are not going anywhere, even after it’s resolved.

Barriers to Employee Empowerment

- Formal structures make it difficult to act.
- A lack of needed skills undermine action.
- Personnel and information systems make it difficult to act.
- Bosses discourage actions aimed at implementing the new vision.

Result:

Employees understand the vision and want to make it a reality, but are boxed in.

E

Exceed

- Attempt to go above and beyond the customer's expectations
- By exceeding expectations after a service recovery issue, we start to build loyalty

WHY?

This part of the process helps build customer loyalty.

Key Words & Actions

- DO NOT “manage-down” anyone else on the team. DO NOT position yourself as the hero
- Always follow-up and get all the facts, so your solution is effective
- Work with relevant team members to develop next steps (coaching); Leaders, don’t simply give orders or fix it yourself
 - “(Name), Mr. Smith shared with me that (situation). I think it’s important that (expectation). How do you want to follow-up?”
- Don’t Panic. The purpose of service recovery is to uncover what’s going wrong and **FIX IT!**

POLL #2:

What steps do I follow in Service Recovery?

1. CARESM - Connect, Apologize, Repair, Exceed
2. CARESM - Connect, Appreciate, Relate, Empathize
3. CARESM - Concern, Apologize, Relate, Exceed

Practice your CARESM

What are key words or other considerations in offering an apology?

Using the following case studies, practice how you would apologize to the customer:

- Customer has been waiting in the waiting room for their scheduled appointment for 1 ½ hours. They arrived on time and no one has communicated with them about the cause of the delay. They are now agitated and threatening to take their business elsewhere.
- A customer asks to speak to Administration about how she was treated when calling the clinic for an appointment. Her perception of the experience was one of disrespect. She was not greeted, abruptly put on an extended hold and not given options about when she could be seen. She was demanding something be done! “No patient should be treated that way. If I didn’t like my doctor, I would go somewhere else.”

Key Words When Things Go Wrong

- “I’m sorry this has happened.”
- “This certainly does not meet our standards, so I’ll take care of this right away.”
- “Here’s what I want to make sure happens first.”
- “Either (name and role) or I will follow-up with you on the next steps.”
- “You can expect that by (time) (improvement made).”
- “Thank-you for bringing this to my attention.”

Don't Lessen Your Impact

- Avoid “but”! (As in “I’m sorry, BUT...”).
- Tying an excuse to an apology takes away from its impact.

Key Points: Service Excellence...

- Empowers everyone to have a positive impact on the customer experience (Accountability)
- Decreases anxiety and improves clinical outcomes (Patient-centered)
- It is the right thing to do (Integrity)
- Provides a competitive edge for success (Excellence)

Preventative Steps toward Service Excellence

- Walkthroughs
- Rounding on Patients
- Survey Comments and Complaint Letters
- Standards of Customer Service

Intervention: Walkthroughs

- A walkthrough may be the easiest way to give your staff the patient's perspective and the fastest way to identify system, flow, and attitude problems, many of which can be fixed almost overnight
- Performing a walkthrough is an effective way of recreating for staff the emotional and physical experiences of being a patient or family member.
- Walkthroughs provide a different perspective and bring to light rules and procedures that may have outlived their usefulness.

Intervention: Walkthroughs



- During a walkthrough, one staff member plays the role of the patient and another accompanies them as the family member. They go through a clinic, service, or procedure exactly as a patient and family does. They do everything patients and families are asked to do and they abide by the same rules.
- They do this openly, not as a mystery patient, and throughout the process ask staff members a series of questions to encourage reflection on the processes or systems of care and to identify improvement opportunities.

Conducting a Walkthrough

Document and Follow-up on Findings

- The staff conducting the walkthrough take notes to document what they see and how they feel during the process.
- They then share these notes with the leadership of the organization and quality improvement teams to help develop improvement plans
- Walkthroughs usually turn up many problems with flow, signage, and wasteful procedures and policies that can be fixed almost immediately.

Intervention: Rounding on Patients

A strategy to engage patients in a brief dialogue to solicit feedback about their patient experience to date

Use foundations elements of AIDET®



Intervention: Rounding on Patients

- Informs the patient of the goal of the clinic
- Manages up staff
- Reinforces actions that support the provision of **excellent** care
- Hardwires behavior
- Connect staff back to purpose, worthwhile work and making a difference
- Proactive service recovery

Key Words

- ▼ Acknowledge
- ▼ Introduction
- ▼ Duration
- ▼ Explanation/Validate Behavior
- ▼ Closing/Thank You
- ▼ Recognition/Coaching
- ▼ Knock on door (if done in exam room), address by name, ask for permission
- ▼ Provide your name and title
- ▼ I would like to spend a few minutes with you.
- ▼ Our goal is to provide you with **excellent** care. How **well** are we doing with XXX?
- ▼ Thank you for your time and feedback
- ▼ Share feedback with staff

How WELL are we doing....

- keeping you informed?
- explaining test and treatments?
- explaining what will occur during the visit?
- responding to your requests for assistance?
- addressing your questions and concerns?



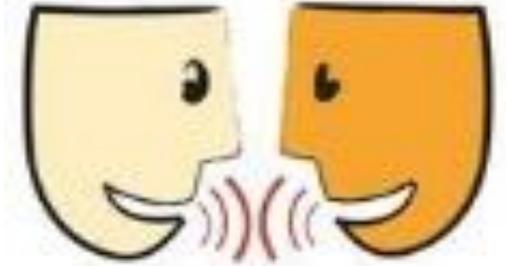
TIPS for Rounding on Patients

- Round on staff **first who are most familiar with the patient if possible.**
- Know the patient (name).
- Set the time expectation up front.
- Focus the patient on the positive.
- Share what you hear with the staff.



Who Rounds? Frequency?

- Clinic Leader or designee
- Target a minimum of 10-15 patients/week.
- Use Rounding logs targeting 2-3 questions only
- Use findings and trends to inform 90-day action plans and reward and recognition



Which Rounding Option Best Fits Your Clinic Flow?

Waiting Room?

Exam Room prior to exam?

Exam Room prior to exit?



Intervention: Survey Comments and Complaint Letters



- By reviewing comments and letters from patients, you can often get a better picture of where you need to do more “background research” with staff and patient focus groups or a walkthrough versus when you need to get a manager involved to address a personnel problem
- Comments and Letters can be reviewed by the Patient Experience Team or Service Recovery Team

Intervention: Standards for Customer Service

- **Achieving high levels of customer service requires two ingredients:**
 - A deep knowledge of what constitutes high quality service from the perspective of your members and patients
 - Service standards that clearly tell your staff what is expected of them in their interactions with members and patients



Sample Customer Service Standards

Start with Standards of Behavior/Codes of Conduct as a Base

- 90 percent of patients who call for an appointment will receive one for the same day.
- Patients will wait 10 minutes or less in the reception area before being placed in an exam
- All telephone calls will be answered within three rings.
- All test results will be communicated in writing to the patient after an ambulatory care visit.

Establishing Service Standards

Great focus for Patient Experience Team!

1. Work with staff and managers to resolve any mixed feelings or uncertainty about setting high standards and holding staff accountable
2. Help your team to commit to aiming high and setting ambitious goals
3. Engage your customers and staff and providers in identifying basic service behaviors that reflect memorable customer service
4. Use these guidelines to identify job-specific behaviors
5. Create scripts and protocols
6. Design and institute measurable service standards that you expect your people to meet regularly
7. Set service targets – stretch goals – that will have a significant impact on customer experience and that can become standards
8. Monitor performance
9. Include in Onboarding; Annual Competencies and Training

POLL #3:

How is your organization doing?

1. No preventive measures and I can't do anything about it!
2. No preventive measures and I am going to help fix it!
3. Preventive measures implemented but not working well.
4. Preventive measures implemented and working well.
5. We are perfect and never get any complaints!

Driving Collections

- Establish and train staff on collections key-words.
- Coordinate clinical pre-visit call to include collection reminder.
- Role play collections scenarios with front office staff.
- Develop collections targets at each point of service.
- Work with IT to insure accurate co-pay amounts are accessible to front-office staff.
- Improve accessibility of financial counselors.
- Implement “Prompt-Pay” discounts for self-pay patients.

It is our Policy...

- Take care not to “assign blame” – payment for service is every organization’s policy.
- Ensure a uniform message from every location and every department – standardization and “scripting” is vital.
- Train staff from the WRITTEN policies. Any verbal statements and signs about collections must match the written policy.
- Collection targets and any related bonus or compensation structures must be in accordance with policy and must be fair and equitable across the organization to enhance employee engagement.

Your insurance requires...

- Again, take care not to “assign blame” to the insurance company – they love to blame the provider. We want to be the patient’s advocate.
- Always explain the “Why” (provide the reason) behind any statements made about coverage and be sure the statements are accurate.
- Be caring and empathetic. “I understand that this is confusing...”
- Whenever possible, determine benefits BEFORE the visit so that the patient is made aware of their responsibility BEFORE they come to the clinic.
- Provide written estimates or copay policies from the insurance company to provide to the patient, whenever possible. These are their words, not ours.

Closing the Deal...

- “Have I addressed all of your concerns?” or “Have I answered all of your questions?”
- There may be additional charges based on the provider’s assessment that we cannot predict. If that does occur, we will explain those charges before providing those additional services.
- You have an outstanding balance from a statement we sent you after we have received an explanation of benefits from your insurance company.
- “How would you like to make your payment today? We accept cash, checks and all major credit cards.”
- “How much are you able to pay today? (suggestions only based on policy) When do you anticipate paying the balance, so that I can make note of your commitment in the system?”
- “Thank you” (for your payment, for clearing up this balance, etc.)

**WHY ARE WE HAVING THIS CONVERSATION?
WHY CAN'T WE JUST MOVE ON TO THE *NEXT* CUSTOMER?**



What are your current venues to connect the dots?

Steering Team/Patient Experience Team
Monthly Results Meeting
Department Meetings
Employee Forums
Joint Action Planning

Improvement
by design 

Exercise to Take Home:

What are your sources of customer dissatisfaction?

- Organizations can fall short of a patient's expectations at any point in the healthcare experience. The product, setting, or delivery system may be inadequate or inappropriate, or the staff may perform or behave poorly.
- The environment or setting can cause service failures (i.e., smells, unclean)
- Staff can bring about service failures if they are unfriendly or rude, poorly trained or inexperienced, and not forthcoming with information or misinformed
- All patients are not equally unhappy about the same thing. (i.e., The patient who ignores warning signs, fills out forms incorrectly also contributes to service failures)

Exercise to Take Home:

What's your current process for responding to a dissatisfied customer/patient?

- Initial contact with customer?
- Communication process - to whom, chain of communication
- Planned or Informal response, response time to customer, documentation?
- Available service recovery tools and/or tactics?
- Leadership (Organizational) follow up?

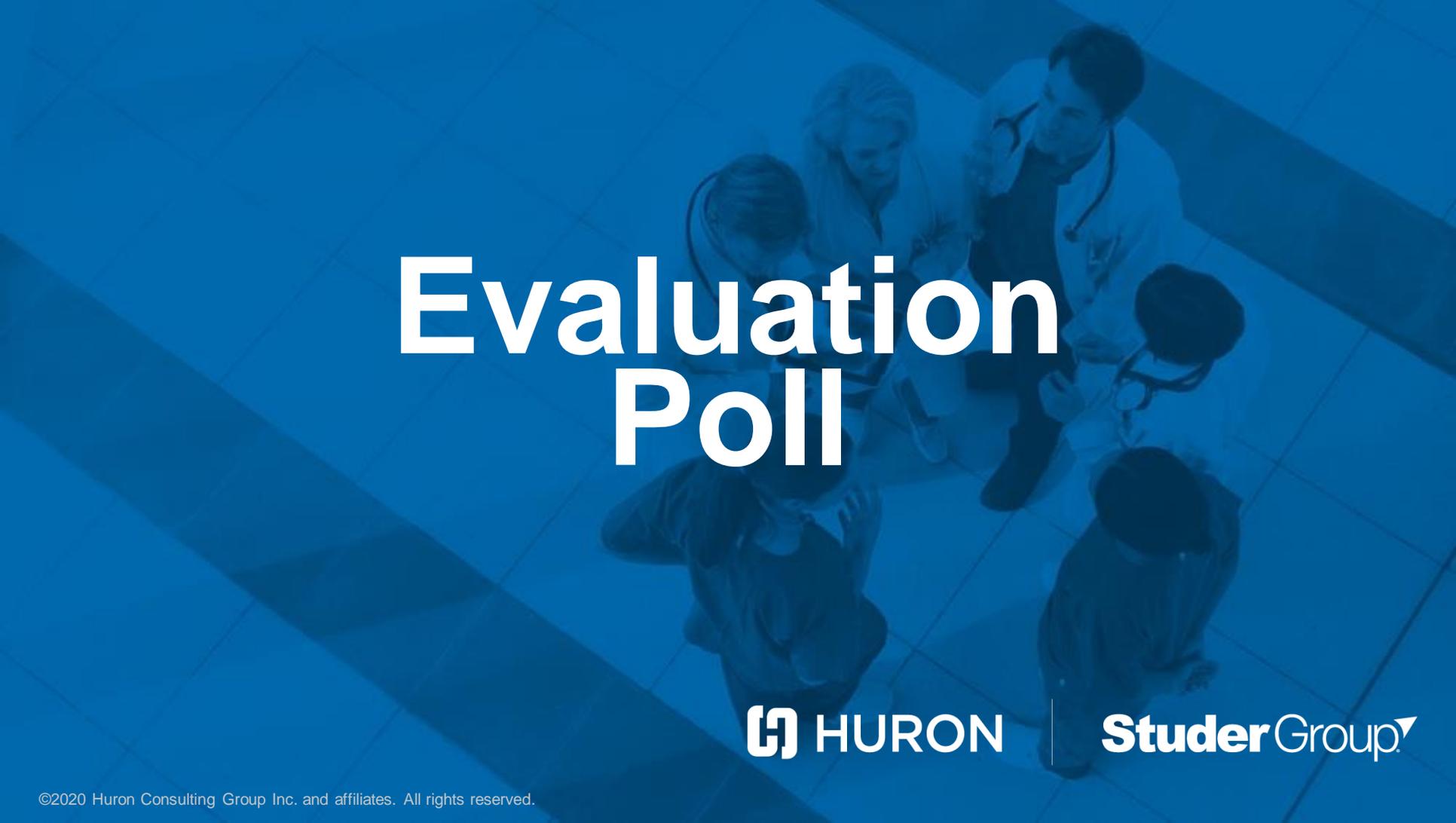
Recommended Next Steps

- Identify who (leader/team) owns accountability for service recovery oversight
- Develop a process that empowers all employees to rapidly identify and respond to unhappy patients and family members
- Educate leaders and staff to own the issue at hand
- Create sense of ownership; if you see a problem, find a solution
- Develop key words, reinforce AIDET® and validate regularly
- Implement a system to track service recovery incidents and issues
- Develop and implement guidelines for how to deal with service recovery issues
- Reward and recognize those practicing service recovery
- Train all employees on service recovery and practice “saying sorry” with patient/customer facing employees (including those who are engaged on the phone)



Questions?





Evaluation Poll





Thank You

 HURON

Studer Group 