Patient Experience
Topic: Handling Patient or Family Complaints

Ivan Guerrero, MSHCM
Patient Experience Program Manager
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A little bit about Ivan Guerrero, MSHCM

• Ivan is the Program Manager for the Office of Patient Experience at Cedars Sinai. Ivan has over a decade of healthcare experience as well as a Master of Science in Health Care Management from California State University, Los Angeles. Ivan has worked for multiple hospitals and health systems, where he gained experience as an Admin. Supervisor for Radiology, a Process Improvement Specialist, and other Management roles. For most of his career, the major focus has been the Patient Experience and leading improvement projects that help provide an exceptional experience to patients and families. In his prior organization, Ivan successfully implemented a Patient Experience program that led to him receiving the National Hospital Foundation -Hospital Hero Award 2016. Ivan also has experience working with physicians and providing staff with training on customer service.
Agenda

❑ First Response Tendencies – Good and Bad
   ▪ *Self-assessment completed prior to webinar
   ▪ Types of listening

❑ Classifying Reaction Types
   ▪ “I don't know” & “No”
   ▪ Patient scenarios

❑ Countering Challenging Patient Situations
   ▪ All service recovery is not created equal
   ▪ Building an empathy statement
Activity: What is Your First Response?

1. Turn to the **Self Assessment: Response Tendencies** worksheet.

2. Select the response that is what you would **most likely say first**.

3. After you have completed the self-assessment, tally the number of each of your response types.
Types of Listening Responses

There are five types of listening responses.

Most individuals tend to operate within 1-2 of these categories as their first response.
Response Types Example – A friend tells you, “I’m thirsty...”

- Solve
- Criticize
- One-Up
- Probe
- Empathize
Response Types Example – A friend tells you, “I’m thirsty…”

- Solve
  - “Here, have some water.”
- Criticize
- One-Up
- Probe
- Empathize
Response Types Example – A friend tells you, “I’m thirsty…”

- **Solve**
  - “Here, have some water.”

- **Criticize**
  - “You know, I don’t think you drink enough water.”

- **One-Up**

- **Probe**

- **Empathize**
Response Types Example – A friend tells you, “I’m thirsty...”

**Solve**
- “Here, have some water.”

**Criticize**
- “You never drink enough water.”

**One-Up**
- “I’m parched! I haven’t had a sip of water all day.”

**Probe**

**Empathize**
Response Types Example – A friend tells you, “I’m thirsty…”

- **Solve**: “Here, have some water.”
- **Criticize**: “You never drink enough water.”
- **One-Up**: “I’m parched! I haven’t had a sip of water all day.”
- **Probe**: “Have you been drinking enough water?”
- **Empathize**
Response Types Example – A friend tells you, “I’m thirsty...”

- **Solve**
  - “Here, have some water.”

- **Criticize**
  - “You never drink enough water.”

- **One-Up**
  - “I’m parched! I haven’t had a sip of water all day.”

- **Probe**
  - “Have you been drinking enough water?”

- **Empathize**
  - “When it’s this hot, being thirsty is miserable, isn’t it.”
# First Response Tendencies – Good and Bad

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Negative</th>
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<tbody>
<tr>
<td>Solve</td>
<td>Allows you to quickly address the patient’s issue</td>
<td>You may not have identified the real issue.</td>
</tr>
<tr>
<td>Criticize</td>
<td>N/A</td>
<td>Elevates emotions or forces patient to withdraw</td>
</tr>
<tr>
<td>One-Up</td>
<td>When personal, may help you “connect” with patient.</td>
<td>Over time, patient becomes frustrated. Feels he can’t “win.”</td>
</tr>
<tr>
<td>Probe</td>
<td>Allows you to get the answers you seek.</td>
<td>May not be the right questions.</td>
</tr>
<tr>
<td>Empathize</td>
<td>Helps to manage patient emotions and open up communication.</td>
<td>Can sound insincere if listener is not committed to this approach.</td>
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Patient Situations
Reality Check: “I Don’t Know.”

When will I see the doctor?

Why was that other patient seen before me?

What’s holding things up?

If you can’t say, “I don’t know” or “I’m not sure,” what can you say?
What to Say When You Don’t Know the Answer

1. Share what you **do** know with certainty.
2. Acknowledge patient’s need for an answer.
3. State what you will do to follow up.
Alternative to “I Don’t Know.”

When will I see my doctor?

1. **Acknowledge the patient’s need for an answer:** I know you have important questions for your doctor about today’s visit.

2. **Share what you do know with certainty:** Dr. Moore usually takes a couple minutes between patients to look at the schedule for any changes.

3. **State what you will do to follow up:** I’ll leave a message next to the schedule to let Dr. Moore know that you have questions and really need to talk with her before you leave.
Reality Check: “No.”

I arrived before my appointment. Can I be seen earlier?

Can I get a refill on my prescription?

If the answer is “No,” what do you say?
What to Say When The Answer Is No

When possible, clarify expectations proactively.

However, if that doesn’t address the question or concern …

1. Acknowledge the patient’s feelings about his request.
2. Reset the expectations.
3. Identify how you can address patient’s needs that emerge because the answer is “No.”
1. **Acknowledge the patient’s feelings about his request:** I know you’d like to be seen as early as possible this morning.

2. **Reset the expectations regarding the request:** We’ll certainly do that if we’re able. Right now, we’re on track to see you at your scheduled time.

3. **Identify how you can address the patient’s needs that emerge because the answer is “No”:** In the meantime, is there anything we can do to help you while you wait?
Listening at its Toughest: Addressing Patient and Family Complaints
Spoken Needs: Classifying Reaction Types

- Blue: Low intensity of expressed emotion
- Orange: Moderate intensity of expressed emotion
- Red: High intensity of expressed emotion
Stories Are Same...Reactions Are Different

Scenario: Patient is told the doctor is behind schedule because of an emergency.

- Feels angry and frustrated.
- Believes (s)he is the victim.
- Reacts emotionally.
Stories Are Same...Reactions Are Different

Scenario: Patient is told the doctor is behind schedule because of an emergency.

- Feels annoyed.
- Believes experience has fallen short of expectations.
- Expresses irritation.
Stories Are Same...Reactions Are Different

Scenario: Patient is told the doctor is behind schedule because of an emergency.

- Appears to roll with the situation.
- Looks for resolution.
- Does not express emotion.
- But is she hiding her true feelings?
All Service Recovery Is Not Created Equal

Blue
Needs assurance situation is not typical.

Orange
Needs a quick solution and validation that his needs are important.

Red
Needs a shoulder to cry on/ an active ear.
Six Things You Should Never Say

Avoid these phrases when you are trying to convey empathy and validate a patient’s feelings:

• “I know how you feel.”
• “I understand.”
• “Everything happens for a reason.”
• “I’m sure it’s nothing to worry about.”
• “At least you …”
• “How are we today?” (patronizing or belittling the patient)
Building an Empathy Statement

“I can understand …
“I can see …
“I can hear …

WHY / HOW / THAT

- this is frustrating.
- you’re angry.
- that would be upsetting.
- you’re disappointed.
- this would make you anxious.
- this would be difficult to understand.
Empathy and Emotions

Listener: “I can see how hard this has been on you...”

Listener: “I can hear that you’re disappointed...”
Communication

Mouth
What unspoken messages does your mouth deliver?

Eyes
What emotions do your eyes express

Limbs
What do your limbs convey?

Body
What does your body say to your patient?
Handling Patient Complaints

The “C.A.L.M.” Approach

C: compose
A: apologize
L: listen
M: make it right
## Handling Patient Complaints

<table>
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<tr>
<th>Compose &amp; collect</th>
<th>Eliminate distractions and focus on purpose of communication.</th>
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<tr>
<td><strong>Apologize</strong></td>
<td>Listen actively, ensuring understanding even when you disagree with the other person’s message.</td>
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<tr>
<td><strong>Listen</strong></td>
<td>Reply in a way that reflects your understanding of the other’s point of view.</td>
</tr>
<tr>
<td><strong>Make it right</strong></td>
<td>Continuously assess communication, adjusting or emphasizing other aspects of the CARE model as appropriate.</td>
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Which of the C.A.L.M practices should be emphasized for a **RED** patient?

Which of the C.A.L.M practices should be emphasized for an **ORANGE** patient?

Which of the C.A.L.M practices should be emphasized for a **BLUE** patient?

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Summary

Handling Patient or Family Complaints

• Pay attention to your First Response Tendencies
• It’s okay, “not to know” & when the answer is “No”
• All Service Recovery is not Equal (remember the C.A.L.M model)
• Practice Building Empathy statements (...I can see...I can understand...)

Practice makes perfect!
Questions ?