Creating a robust service recovery culture

Toya Gorley

Improvement Advisor, NRC Health



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Our conversation today

- Identify the three components of a service recovery program
- Collaborate with peers on successful service recovery tactics
- Compose an action plan on how you will implement one of these best practices at your own organization

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What is service recovery? Why is it important?

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"Service recovery is making right what went wrong."

LEONARD L. BERRY, 1995 TEXAS A&M UNIVERSITY

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Reflect and share

- Share a time you were the recipient of excellent service recovery.
 - What behaviors were present in the interaction?
 - What is your current impression of the organization/person?

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Cost of Dissatisfied Patients

Patient Encounter
People Reached
*Level of Influence
People Influenced
NPR Per Encounter
(Net Patient Revenue)
Financial Impact

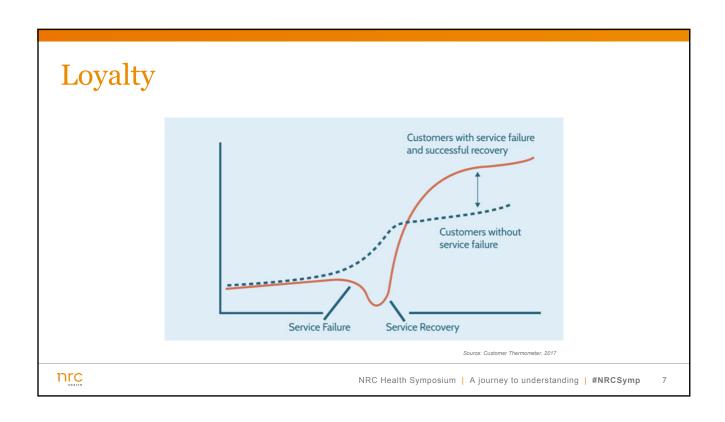
Word of Mouth	Social Influence
1	1
2 ") 12	500
× 30.9%	× 30.9%
4	155
x \$2,774	x \$2,774
\$11,096	\$429,970

NRC Health | Market Insights National Healthcare Consumer Study | 2018 | N = 298,565

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The right thing to do



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Comprehensive service recovery strategy



01

POINT-OF-SERVICE



02

SERVICE ALERTS



03

GREIVENCES & COMPLAINTS ALIGNMENT

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Point-of-Service

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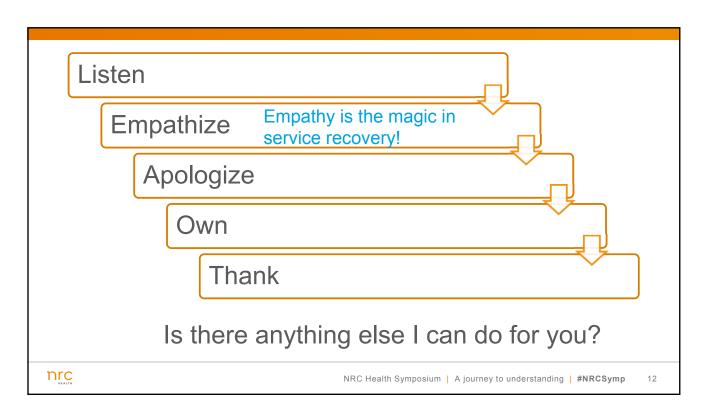
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Philosophy and skillset

Every person in your organization should have the skills to embrace concerns, respond with empathy and take ownership to address the concern.

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Point-of-Service

- → 65% of complaining customers will verbalize it to the front-line staff*
- Point-of-service issue resolution decreases formal complaints
- Patients report having a better experience when issues are addressed before they leave

*Research from John Goodman, President, Technical Assistance Research Programs (national expert on complaint research)

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The right thing to do for employees

- → More professional, confident and composed
- → Experience less stress at work
- → Can directly impact the experience
- → Learn specific skills to convey empathy

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Example

Patient says: "I've been waiting forever! What's going on around here?"

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Communication model

Listen: Give undivided attention. Display positive body language.

Listen for facts and emotions.

Empathize: "Waiting is frustrating."

Apologize: "I'm sorry you've been waiting"

Own: "I'll check to see how much longer it will be."

Thank: "Thank you for bringing this to my attention."

Is there anything else I can do for you?

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Example: Employee

Employee says: "I'm working as hard as I can. It's never good enough for these patients."

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Communication model: Employee

Listen: Give undivided attention. Display positive body language.

Listen for facts and emotions.

Empathize: "It sounds like you're having a hard day."

Apologize: "I'm sorry."

Own: "Would it help if I..."

Thank: "Thank you for letting me know."

Is there anything else I can do for you?

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Tips

- Ask the person how they would like the concern to be handled
- → Explain what can be done
- → Give realistic time frame. Follow through.
- → Manage up

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Managing-up

Use positive statements to demonstrate everyone is working together.

These statement provide assurance and build trust.

Statements that Cause Anxiety and Reinforce Silos	Statements that Build Trust and Strengthen Teams
"We're short staffed."	"We're committed to taking the best possible care of your husband."
"That department is always behind."	"That department works really hard."
"That nurse is new."	"We support and help each other."
"I'm not sure why the doctor told you that."	"Dr. Jones is a skilled and caring doctor. I'll confirm your plan of care with her."
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Really challenging situations

- → Adjust your tone of voice
- → Maintain a safe distance
- → Let the person know that you want to help, but can't/won't under these circumstances
- Leave the situation and allow time for the situation to de-escalate
- → Involve your manager. Follow protocol

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Discussion

How does your organization support employees to handle patients who demonstrate difficult behaviors?

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Service recovery tools

- → A token given to emphasize regret for a service breakdown.
 - Should be used if the tool matches the complaint (viewed as a kind gesture)
 - Should not replace the communication model (viewed as condescending)

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Suggestions: point of service

- → Empower staff to address concerns/complaints
- → Offer training on service recovery skills
 - New employee orientation
 - Unit/department learning bytes
 - Annual competency
- Build service recovery into recognition/reward programs and performance evaluations

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Suggestions: point of service...continued

- Address service breakdowns through process improvement efforts
 - Involve staff in solutions
- Help staff establish acceptable boundaries/actions
 - Don't discourage, coach
- → Develop and share an escalation process

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Escalation process

Level 1

Employee uses communication model and takes ownership of concern

Level 2

- Employee involves supervisor if assistance is needed
- Supervisor uses communication model and takes ownership of concern

Level 3

 Involve others to assist supervisor/employee to address and resolve concern

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Service alerts

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Definition

Patient comments that are eligible for service recovery. Some criteria includes:

- → Malpractice and medical errors
- → Mention of a specific incident of abuse, harm, or neglect of a patient
- → Threat of lawsuit
- → Direct request to be contacted.
- → Threat of Violence/Suicide

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Global triggers

Will not recommend

Never again

Never recommend

Never return

Upset

Mad

Dissatisfied

Not apologize No apology **Unsafe**

Uncalled for

Inappropriate behavior

Unsafe behavior

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Service alert stats

84% 74.8%

46.3%

of patients expect you to follow up with them if they have a bad care experience.

of patients want you to follow-up within 48 hours of providing the feedback.

of patients say phone is their preferred contact method.

of patients consider the situation unrecoverable if not contacted within 48-hours.

Service Recovery is critical to your success.

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Service recovery flow chart Determine criteria for follow-up. For example: Share with unit/department Yes Medical urgency Does comment leader for follow up within 48 Patient requested follow-up hours and document Concern may be escalated into No something more serious Document **Develop process** appropriately If/then logic Who will follow-up When/time frame Documentation nrc NRC Health Symposium | A journey to understanding | #NRCSymp

Process without the skillset is just a task. Whomever follows up with service alerts must have the skills to take ownership and address with empathy.

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Grievance and complaint alignment

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Aligning with processes to address grievances and complaints can maximize workflows and expertise.

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Two Approaches

- → Centralized: service recovery is managed by a specific department or designated individuals.
- → De-centralized: service recovery is handled by the unit / department / practice where the breakdown occurs.

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Reflect and share

- How would you describe your process for handling grievances and complaints – Centralized or Decentralized?
 - What works well?
 - What improvements can be made?
- How have you aligned point-of-service skills and responding to service alerts with how you handle grievances/complaints?
 - What opportunities exist for better alignment?

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Suggestions: maximize advocate's role

- → Patient advocates triage appropriate service alerts
- → Patient advocates teach service recovery skills
- Patient advocates coach leaders to handle difficult service alerts
- → Advocates involved in PI projects
- Risk data used with PX data to tell the complete story of the patient's experience

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Action plan

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Thank you!

Additional questions or comments?

Toya Gorley

Improvement Advisor, NRC Health tgorley@nrchealth.com

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