Service Recovery

Service Excellence
MGH/MGPO Practice Improvement Division
Today’s Objectives

1. To identify opportunities to implement the service recovery process.

2. To understand the MGH’s L.E.A.D. model and effectively utilize during difficult situations.

3. To be empowered to use vouchers / gift cards as a last alternative.

4. To confidently handle future challenging situations.
Unfortunately, things do go wrong …
... but how do we recover?
What is Service Recovery?

“Patient complaints are inevitable and are a gift – they give us a second chance to make things right.”

“They frustrated me, but when I told them, their response was impressive. They cared, they gave me alternatives, they acted, and they kept their promises. What more could I expect?”
Whose Job is Service Recovery?

Everybody! ALWAYS!

We are all Stewards of the MGH Reputation
When Things Go Wrong
### Let’s Look at Why Things Go Wrong….

#### Outpatient

<table>
<thead>
<tr>
<th>Patient Frustrations:</th>
<th>Practice Challenges:</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Waits times</td>
<td>▪ Arriving late</td>
</tr>
<tr>
<td>▪ Appointments changed or cancelled</td>
<td>▪ Unrealistic expectations</td>
</tr>
<tr>
<td>▪ Not returning calls or calling back in time</td>
<td>▪ Exam room Space</td>
</tr>
<tr>
<td>▪ Stress / anxiety</td>
<td>▪ New workflows - Epic</td>
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<td></td>
<td>▪ Stress</td>
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 MASSACHUSETTS GENERAL HOSPITAL

 MASSACHUSETTS GENERAL PHYSICIANS ORGANIZATION
Let’s Look at Why Things Go Wrong….

**Inpatient**

<table>
<thead>
<tr>
<th>Patient Frustrations:</th>
<th>Unit Challenges:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Waits &amp; Delays</td>
<td>• Patient Volume</td>
</tr>
<tr>
<td>• Call Bells</td>
<td>• Unrealistic expectations</td>
</tr>
<tr>
<td>• Noise</td>
<td>• Stress</td>
</tr>
<tr>
<td>• Stress / anxiety</td>
<td>• Emotionally reactive</td>
</tr>
<tr>
<td>• Roommates</td>
<td>• New workflows - Epic</td>
</tr>
<tr>
<td>• Uncertainty</td>
<td></td>
</tr>
</tbody>
</table>
What are Some Causes for Miscommunication?

1. Language barriers
2. Lack of listening
3. Unclear / unrealistic expectations
4. Lack of teamwork
5. Inability to understand terminology
Language Barriers

- Schedule *Interpreter Services* before the patient visit
  - Use the POP or VPOP services if Interpreter is unavailable

- Ask the patient to *repeat themselves*

- Recognize the patient may be *frustrated by communication barriers*
Lack of Listening

- Maintain *eye contact*

- Show *non-distractive behavior* (e.g., no use of phone, stop what you are doing, limit interruptions)

- Use encouraging *nonverbal cues* (e.g., lean forward, tilt your head)

- Listen to *hear patient’s perspective and respond empathetically* (“I can see that this is worrisome.”)

- Allow patient to finish before continuing the conversation

- *Repeat* some of their concerns and comment (“I hear you say…”) and try to clarify
Unclear / Unrealistic Expectations

- *Never assume* the patient understands / remembers everything from their visit
- *Confirm* patient’s understanding
- *Clarify* any misunderstanding
- *Fill in the gaps*
- Ask if they have any questions
Lack of Teamwork

- Openly communicate with peers regarding changes, updates and suggestions
- **Listen and respond constructively** to other team members’ ideas
- **Offer coworkers assistance** if they need help
- Proactively **keep manager abreast** of what’s working well and not working well
- Demonstrate **respect**
Inability to Understand Terminology

- Use *non-technical terms*
- *Avoid medical jargon and acronyms*
- Speak in *layman terms*
- Provide patient with paperwork that they can read on their own
- Encourage patient to call back with questions
Steps to Service Recovery
What is service recovery?

1. Chance to rectify our mistake
2. Chance to improve patient’s perception of our care
3. Opportunity to earn more loyalty than if the mistake never happened!
Then, we respond:
Service Recovery Steps – “L.E.A.D.”

**L = LISTEN**
Listen to what the patient has to say to understand problem

**E = EMPATHIZE**
Notice and acknowledge feelings

**A = APOLOGIZE**
Apologize for the error without placing blame

**D = DO THE RIGHT THING**
Ask how you can help and offer a solution
L = LISTEN

- Defuse the situation with active listening.
  - Establish eye contact
  - Use silence to let them vent
  - Use key words:
    - “I hear you saying…”
    - “I can hear you are frustrated…”
  - Repeat what they said
  - Ask open-ended questions
- Control your responses
  - Breathe deeply
  - Lower your voice
  - Speak slowly and clearly
E = EMPATHIZE

- Notice and acknowledge their feelings
- Make the patient/family member feel valued from the start and establish the impression that you are there to help
  - Use key words:
    - “I can understand why you are upset…”
Apologize for the inconvenience on behalf of the hospital (Blameless Apology).

- “I apologize for the wait. I realize that waiting is inconvenient. I will keep you informed. Is there anything I can do to make you more comfortable?”
- “I’m sorry there was some confusion about who you were scheduled to see today.”
Apologizing Tips

- Apologize no matter what the situation:
  - For expectations not being met
  - Even if you didn’t cause the problem
  - Don’t shift the blame to the customer, another employee or department

- An apology conveys your concern:
  - Is what the patient wants to hear
  - Always say I’m sorry not we’re sorry
  - You’re heart needs to be engaged - say it like you mean it.
D = DO THE RIGHT THING

- Solve the problem quickly if possible
- Offer options and ask the patient how they would like the problem resolved
- If you cannot solve, connect to those that can
- Most people just want a “fair fix”
### Avoid Fire Starters

#### Fire-starters:
- It’s the policy…
- I can’t…
- No, I don’t know…
- But…
- You should have…
- Why didn’t you…
- We can only do…
- I’ll try…

#### Fire-quenchers:
- Here’s the reason that we…
- I can…
- I can find out for you…
- And…
- I can understand why you…
- I can see why…
- The best option, I think…
- I will…
Additional Service Recovery Options

- When all other attempts fail, staff should use their discretion and feel empowered to offer:
  - Parking vouchers
  - Gift cards: Food & Nutrition, General Store, Flower Shop
MGH’s “L.E.A.D.” Model for Service Recovery

- http://www.youtube.com/watch?v=CAh27njQENk&feature=youtu.be
The Practice: Role Playing

Let’s practice in groups of three:

- One of you will be the **Patient:**
  - Will play out the scenario and challenge the staff person

- One of you will be the **Staff person:**
  - Will respond to the patient practicing the L.E.A.D. model

- One of you will be the **Coach:**
  - Will serve as timekeeper (5 min.), will provide feedback and help when necessary
Recap Service Recovery Goals

“Guided by the needs of our patients and their families…”

- Support a culture of service at MGH.
- Restore patient and family trust despite a service breakdown.
- Protect our reputation and well being.
Questions/Comments?