

# *Excellent Customer Care*

(version 5)

Information Pack

2023

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## BACK TO BEGINNINGS

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First impressions really do count. You have about 12 seconds with a patient before they have formed an impression of you. And as we will discover later, you are the face of the practice.

There are generally 3 ways in which most people form a first impression. What are yours?

### ***The Halo and Placebo Effects***

The Halo Effect (<http://psychology.about.com/od/socialpsychology/f/halo-effect.htm>) shows that if we observe a single positive attribute in someone (i.e. they look nice) we tend to assume that everything about them is good (they are kind, they are bright) etc.

If a patient's first impression of a receptionist is not good, what does the halo effect suggest might be the patient's feeling about their experience in the surgery as a whole?

### ***Being welcomed on arrival***

In terms of excellent customer care, what should welcoming a patient actually look like?

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The Myth of the Queue
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Quick Wins
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### **Staff who listen**

In what ways can we **prove** to patients that we are listening?

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## SKODAS AND ROLLS ROYCES

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### ***Our Focus***

Patients want 3 things:

1. To feel **right** in how they feel
2. To feel **respected**
3. To feel **heard**

If a patient feels that these basic beliefs are being ignored (made to feel wrong, feeling a lack of respect, feeling that the other person is not listening), then they are likely to become defensive.

When patients complain to you, what are the typical reasons for complaint?
Reasonable?
Unreasonable?
Give examples below of when you last made a complaint, verbally or in writing KNOWING that you were being UNREASONABLE in what you were saying/writing.
Key Learning

## YOUR INNER CHIMP

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Different parts of your brain control different responses. When you hear/see/feel something that you find threatening, frightening, highly disagreeable, a part of your brain called the amygdala springs into life very quickly.

Dr Steve Peters, author of *The Chimp Paradox*, describes the amygdala reaction as your INNER CHIMP!

Located deep within your brain's temporal lobes, this almond shaped mood bender, helps to shape and store reactions to unexpected shockers in your day. Will you shout or smile? Will you freeze in fear or risk with courage? The little neuron group pretty much decides for you. Sit through an upsetting meeting, and this tiny arousal centre may well incite negative emotions in response. Have you seen it happen?

There's more too. This agitated control centre engages brain stem circuits that impact facial expressions and body language. It also triggers release of chemicals such as serotonin or cortisol into the blood, to trigger often unwanted emotional response. It's even activated by nasty odours on occasion. So why does the human brain come with such a pesky part?

It's quite straightforward. Without your *amygdala*, you'd have no response to screams, cries for help, shocking movies, or other horrific encounters. It can even help you to bypass bullies and cynics at work.

Unfortunately though, it tends to toss you into turmoil without much notice. Can you see why people develop skills to tame dysfunctional thinking and modify behaviours that follow their *amygdala* triggers?

<http://www.brainleadersandlearners.com/amygdala/tame-your-amygdala/>

## MANAGING THE CHIMP

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Let's have a look at how we can think differently. This can be difficult, because you are trying to think about how someone else sees a situation when it is different to how you see it.

Look at the list of Unreasonable Complaints we generated on the previous page. Write an empathetic description of why they may have made the unreasonable request.

Unreasonable Request	Empathetic Viewpoint

## HOW TO GIVE BAD NEWS

There will be many occasions when you have to give people the news that the specific thing that they wanted is not possible.

If the thing that they asked for was inherently reasonable then we tend to

You		Patient
Naturally empathise	Leading to	Doesn't feel wrong in their feelings - the patient gets this from your body language, voice tone etc
Apologise		The patient understands that you are genuinely disappointed that you can't help them
Try to find the best possible solution for them		That you are working FOR them to find a solution

If however the thing that they asked for seemed inherently unreasonable then we tend to

You		Patient
Can't really believe that they asked for the thing they did	Leading to	Patient feels that you disapprove of their request - the patient gets this from your body language, voice tone etc
Apologise (but it SOUNDS) different from above		The patient understands that you are being professional in your apology, but will recognise the difference between this and actually feeling sorry
Try to find the best possible solution for them		That you are working WITH them to find a solution

So in theory, the script is the same, but it sounds and feels very different.

If you can find the empathetic view point quickly, you have a chance of changing our second scenario into the first. What we need to do is add the language of empathy.

### The Language of Empathy

Rather than just apologising, instead try to add empathetic language which shows the patient that you understand WHY they asked for the thing they do. PROVE it to them with your language.



For instance:

I am really sorry that we can't get your prescription to you right now (APOLOGY). I can imagine that being without your medication is worrying. So what I can do for you (WORKING FOR) is arrange for your prescription to be ready in two days but in the meantime, I would perhaps suggest you try to get something from the supermarket or speak to a chemist to help you with any pain you are feeling. Would that be ok?

I am really sorry that we can't offer you an appointment with that specific doctor at the time you need (APOLOGY). I can understand that you have a really positive relationship with the doctor and seeing someone else will be a bit challenging, particularly if you need to explain your problem again (EMPATHY). So what I can do for you (WORKING FOR) is to find the best alternative for you. So what I will do for you is to make you an appointment with the doctor when they are next available, but it sounds like you are really needing to see someone today so is it OK if I also make you an appointment with the duty doctor. If you are not happy you still have the opportunity to see your doctor. Would that be ok?

In your group, look at another of the 'unreasonable requests' and try to work out the empathetic and working for approach.

## DIGNITY AND RESPECT

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Anger can be realised in a controlled manner, or otherwise in a manner in which the person is acting in a way that is unexpected and out of character. It is very difficult to make people act out of character and it usually requires a strong outside influence to create this emotion.

When people lose control, how does it manifest itself:

In the way people act?

Physiologically?

How do you feel if you complain about something, only to be told that it is not that person's responsibility and you need to do it again?

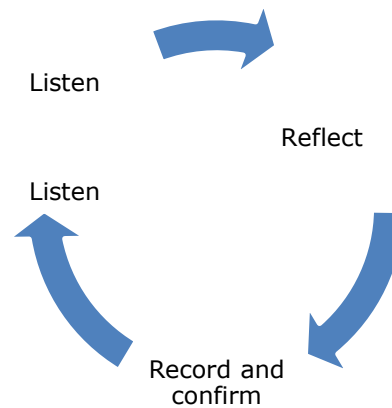
If a person comes to complain (or phones), because of the anxiety the person feels there is a good chance that they will tell the first person they see of their issues. It is good service to ensure that all staff members are therefore suitably trained to deal with the angry patient so that the individual does not have to explain things more than once.

If a person is very angry it is possible that they may lose control and not be rational. They may become verbally or occasionally physically abusive. It is necessary that staff members are well equipped to calm the situation.

## **The Steps**

1. If the person seems likely to become physically violent, then staff members should follow practice emergency procedures.
2. Ensure the team is aware of your complaints procedures and documentation.
3. Ensure the team is trained to deal with complainants.
4. If it is appropriate, safe and feasible, suggest that the complainant explains their issues to you away from front desk.
5. If the person is unlikely to become physically abusive, the person who the individual speaks to should record all information so that the individual does not have to explain themselves more than once.
6. The person dealing with the complainant should record all the facts and reasons for complaint, but not pass comment on the nature of the complaint.
7. The practice should have a policy for dealing with patients who verbally or physically abuse patients. If a patient does lose control and becomes verbally abusive, there is a danger that if the person is confronted about their behaviour the abuse may escalate. Everyone has a right to NOT be abused, but it may be safer to enforce that right by removing the patient from the list rather than confronting at the time.
8. The complainant should be told about the practice complaint procedure, given a copy of it, and told what will happen next and the time frames involved.
9. The person responsible for complaints should be given the information.

## Taking Notes



As maintaining eye contact is important in generating trust and demonstrating listening, the person recording the complaint should not write whilst the person is complaining. It is nearly impossible to listen to the present and record what has just been stated.

1. Explain that you will need to take notes about the complaints and at various points will need to interrupt to take those notes.
2. Listen
3. Politely interrupt and reflect what they have stated, proving you have listened
4. Ask them if it is ok to take some notes before they continue
5. Take the notes
6. Ask them to continue

This not only demonstrates that the employee is listening, but has an important side effect:

When speaking quickly, what happens to the breathing? What does this do to stress and adrenalin levels?
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If you are taking notes and the complainant is waiting for you to finish, what will happen to their breathing? What will happen to their adrenalin and stress?
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## MANAGING EXPECTATION: LEARNING FROM PARENTING

Have a think about the following. Whether or not you are a parent, you will almost certainly know what good parenting looks like!

Should parents/carers always try to give consistent messages to children?
What tactics do children use if they hear different messages from their parents/carers and wish to try to get their own way?
If parents/carers individually disagree with each other about the way they deal with their children, should this be done in front of the children?
How does it make children feel if they keep getting different messages about the same thing from parents/carers?
How would one parent/carer feel if they were not supported by their partner about an issue, particularly if this is in front of the children?
<b>Key Learning</b>

## LEARNING PLAN

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As a result of today please complete the following 3 statements:
1. The key thing that I have learnt today is:
2. When I get back to my workplace, I intend to:
3. The reason why I want to make this change is:

### **Why Do the Learning Plan?**

When you return to your workplace, please share this with your practice manager. By doing this, you will help to ensure that the learning you take from the course is not lost and will help to ensure that the relationship between general practice and patients is maintained at the very highest of levels. We need to help you in the face of ever rising expectations and feel that this course will begin this process.

## COURSE EVALUATION

<b>Trainer:</b>	Paul Edwards	<b>Course:</b>	Excellent Customer Care
<b>Date:</b>		<b>Your Name:</b>	
<b>Job Role:</b>			

Complete the following question at the start of the day please.

What are your key learning goals for today?

### Review of the Day

1=very poor, 6=excellent

	Score /6
To what extent were your learning goals met?	
How effective was the trainer in communicating with the group?	
How useful are the training materials you have received?	
Was the day enjoyable?	

### Your Comments

Please detail any comments about any aspect of the course or feelings that you have in the box below. What would you say to other people about this course?

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<b>Need a certificate</b> <input type="checkbox"/>	Then please insert an email here clearly & we will send it to you.
<b>Would you like information on our other courses</b> <input type="checkbox"/>	

*Thank you for your time in completing this evaluation.*