Brian Lee CSP – "Healthcare's Mr. Loyalty"

Keep Your NURSES

& Healthcare Professionals for Life

The four imperatives to inspire, retain, motivate and empower, patient-focused nurses and everyone else

Rave reviews for

Keep Your
NURSES™
& Healthcare
Professionals
for Life

The 4 imperatives of how to inspire, retain, motivate and
empower, patient focused nurses, and everybody else.

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Association*

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work."

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"The quality and content are pertinent, realistic, and can be implemented in many ways with low or zero cost. The information, if used well, is invaluable."

Dee Nishioka – RN/AUM

"Very in tune with our vision and where healthcare is today. Creates a straight forward structure to implement great ideas."

Debbie Gac – Vice President

"The quality of the material is presented very effectively… with everyday scenarios, applications and solutions applicable to implement."

Debbie Firks – Team Coordinator

"Brian Lee is right on in hitting the issues of healthcare and planting the seeds for individual change."

Larky Blunk – Director, Acute Care

"Very down-to-earth with realistic strategies. Brian is more grounded in reality than most who deal with this topic."

Terry Scherl – Director, Women's & Children's Services

Keep Your NURSES for Life

& Healthcare Professionals ™

Brian Lee CSP
"Mr. Customer Satisfaction"
Healthcare's "Mr. Enthusiasm"

Profile of an author and world-class professional speaker

Brian Lee CSP

- Brian Lee, CSP is one of North America's leading experts in the fields of Healthcare Patient Satisfaction and Change Leadership and is the author of Satisfaction Guaranteed… How to Master the 6 Secrets of World-Class Customer Satisfaction.

- For two consecutive years, the International Customer Service Association Conference has evaluated Brian as the number-one-rated customer service speaker in the world.

- The healthcare industry's "Mr. Customer Satisfaction" travels over 150,000 miles a year, delivering over 120 keynotes and seminars, and has spoken in 58 states and provinces and 12 countries worldwide.

- As both a speaker and implementation consultant to over 100 Healthcare organizations and Fortune 500 corporations, Brian is sought after as an advisor/coach to senior management, specializing in long-term strategic solutions.

- He has been awarded the National Speakers Association Professional Designation CSP (Certified Speaking Professional), becoming one of fewer than 20 such designated experts in Canada, and one of fewer than 500 in the world.

- Brian Lee founded Custom Learning Systems Group Ltd. (CLS) in 1984. Headquartered in Calgary, Alberta, CLS has offices in Winnipeg and Toronto, and serves its client roster of 6,000 organizations with a team of 32 world-class trainers and communication professionals.

Put Brian Lee to work for your next conference or meeting.
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Mission

To provide healthcare leadership
with an implementable blueprint to
significantly improve nurse retention.

Dedication

I dedicate this book to
Nurses everywhere
who make a profound
difference in our hearts,
our health and in our lives
each and every day.

Acknowledgement

The following individuals are gratefully acknowledged for their contribution, encouragement and support:

Keep Your NURSES for Life™
Your & Healthcare Professionals

The 4 imperatives of how to inspire, retain, motivate and empower, patient focused nurses, and everybody else.

Foreword

Job #1 is to keep the good people we've already got."

— *Brian Lee CSP*

"We were once thought to have the best care in the world but it can't stay that way unless we're willing to make changes."

— *Canadian-raised Dr. Martin Shapiro, UCLA Faculty of Medicine*

Imagine that it's ten years from now. You're riding your bike through a scenic city park on a peaceful Saturday afternoon, skillfully meandering in and out of pedestrian traffic, when suddenly you come upon a steep gravel decline. As you descend, your wheel catches the corner of a large rock, causing your bike to spin out of control. Sliding sideways, the bike falls out of your grasp, leaving you lying bruised, battered and bloody as by-passers look on in horror. Shaken and light headed, you pick yourself up and notice a sizable gouge in your left arm that obviously needs stitches. Someone offers to take you to the hospital, but because it's the weekend, you find the waiting room filled to standing-room-only capacity with dozens of patients and no room to sit down. You wait, wait, and wait some more. Twelve hours pass and you're still

waiting. The lineup of patients has not depleted; in fact, it has increased. The unit clerks are visibly stressed and snap at everyone who comes in. There is only one nurse on duty; she is in her fifties and her face bears a permanent scowl. Doctors can be heard barking orders, but there's nobody there to answer them, so they have to take blood, fill nebulizers, and attach electrocardiogram leads themselves.

Unrealistic? Unfortunately, not at all. Scenes like this play out in hospitals and Healthcare facilities all too often.

Why?

Just for starters:

- Understaffing due to budgetary restrictions
- Mandatory overtime policies requiring nurses to work through physical exhaustion
- Early release of un-recovered patients in view of needed beds or because insurance companies won't pay for longer stays

While these are just a few of the contributing factors, most nurses will tell you that the main reason people would be leaving the profession is that they feel devalued and unappreciated.

A recent poll of 1,000 of the top companies in North America that was conducted by the Robert Half Corporation showed that lack of recognition and praise is the number-one reason employees leave an organization.

One of the healthcare industry's most formidable enemies is its culture and deeply rooted behaviors. Unless leadership and staff come together to make a concerted effort to change their culture and transform their environment, they are doomed to repeat the past. Band-Aid treatments, "flavor of the month" training incentives and policy disclaimers do not work.

Our goal in *Keep Your Nurses & Healthcare Professionals For Life* is to focus on an immediately implementable leadership strategy that works. This book will detail a process that will create a supportive organizational culture that promotes a quality of life so profoundly satisfying that nurses would never even think of leaving or working anywhere else.

It can happen.

Introduction

"Difficulties exist to be surmounted."

– Ralph Waldo Emerson

To begin with, a quick bit of history: in the period 1995-1996, my training company Custom Learning Systems Group Ltd. was able to achieve a dramatic breakthrough in the area of increasing patient satisfaction scores at St. Mary Medical Center in Long Beach, California.

St. Mary Medical Center (Long Beach California) increased its "Excellent" Rating of overall Customer Satisfaction by 21.5% in less than 120 days, and continues to improve it to a remarkable 98.2% overall Excellent and Good.

	Aug 1995	Sept 1995	Oct 1995	April 1995	Sept 1995
Total	87.7%	91.4%	95.5%	96.3%	98.2%
% Good	40.8%	36.6%	27.1%	24.1%	18.2%
% Excellent	46.9%	53.8%	68.4%	72.2%	80.0%

St. Mary ____% Goal

SMMC Catholic Healthcare West Patient Satisfaction Overall Rating Index
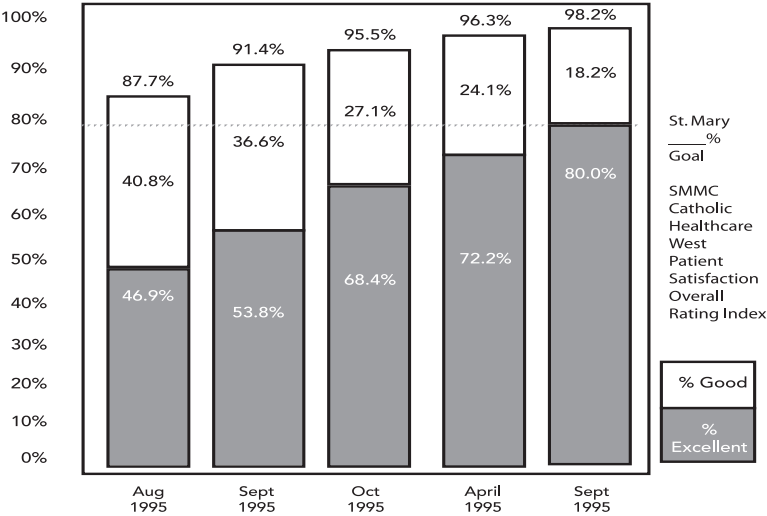
In less than 18 months, overall patient satisfaction scores increased exponentially. Previously, only 46% of patients at the hospital rated their experience as 'excellent'; by the end of the 18-month period during which we worked intensely with the hospital leadership and staff, 80% of patients were rating their care as 'excellent.'

We named this process The Service Excellence Initiative.

Since then, we've been discovered by one hospital after the other. Because of our success, I decided to devote our training practice to healthcare, with a particular focus on hospitals.

The evolution began with teaching customer service to front-line staff. Based on our previous experiences, we realized that we were wasting our time unless we inspired management to treat their front line personnel differently.

One manager asked me, "If I give you half a day to train my staff, how can you guarantee that they're going to change their behavior?" I replied, "If I train your staff for half a day, what guarantee will you give me that you will lead and inspire them effectively for the other 364 days, to reinforce what I teach them?"

It quickly became evident to me that in order to successfully train the front-line staff, we first had to provide leadership training, with special focus on empowerment. It had also become evident that the organization's culture had to change in order to affect appreciable changes in customer service and patient care. We discovered that to bring about meaningful culture change, the front line – the people who actually do the work – had to play a leadership role. The way I like to say it is, "For culture change to work just fine, it must be led from the top and the front line."

While our efforts were primarily focused on engendering world-class patient satisfaction, we began to notice an interesting by-product. Greg Harrison, Director of Business Development,

Central Region at Sutter Medical Center in Sacramento, California, reported to us that in two years of implementing Service Excellence, staff turnover went down 11 percent. That translated into at least a million-dollar-per-year savings for a hospital of 5,000+ employees and volunteers.

With the up-and-down trends of nursing recruitment and retention numbers, it occurred to us that we ought to be sharing this knowledge with other hospitals and patient care facilities. After consulting with several of our clients who had seen sharp drops in turnover, we began to develop a seminar focused on nurse retention called "*Keep Your Nurses & Healthcare Professionals for Life.*" This book is based on our live seminar, and covers much of the same material in a convenient written format, so that you can refer back to it again and again.

Think of this book as an implementable blueprint for nurse retention. We've created four key imperatives to help you inspire, retain, motivate, and empower patient-focused nurses – and everybody else. In the following chapters, you will learn how to:

- Implement these cultural imperatives so those nurses will never want to leave
- Unlock the genius of nurse empowerment through front line ownership and accountability
- Significantly enhance employee morale – and bolster patient/customer satisfaction at the same time
- Create powerful incentives to improve productivity
- Stimulate your existing staff to become enthusiastic salespeople for new recruits
- Involve physicians in improving nurses' quality of work life through teamwork, and reducing needless stress and conflict

There are four key imperatives of the "K.E.E.P." strategy that form the foundation of the KEEP Your Nurses for Life program:

K = The Key is Culture

E = Empowerment is the Way

E = Education and Engagement

P = Physician Acceptance

The Key is Culture: Culture is an organization's way of life. Short-term programs don't work. Campaigns don't work. We've all been through the "flavor of the month" change initiative that reflects the latest HR fad. If you have a staff retention issue, it's likely that your organization's culture has a lot to do with it.

Retention will be won or lost on the issue of culture, department by department, unit by unit, charge nurse leadership group by charge nurse leadership group. How else can you explain a situation we often encounter: two adjacent departments, one with a great culture and low turnover, the other with a lousy culture and high turnover? In this book, we are going to provide you with a guideline on how to create a preferred culture.

Empowerment is the Way: Another expression I like to use is: "Give your people the gift of adulthood." Until your front-line staff owns your organization's problems, you'll never solve them. The process of getting financially lean has preoccupied healthcare leadership for the past decade. We've stripped almost all meaningful decision-making power from intelligent front-line staff who want desperately to be able to use their own wisdom, experience, and good judgment. Throughout this book, you will be provided with the tools you need to empower your staff.

Education and Engagement: "When your people are learning, they're not leaving." To put it another way, when your front-line staff is engaged, they're not enraged. How do we empower staff so they're part of the process and not part of the problem? How do we make them our chief recruiters instead of pushing them out the door? Give your people a cause that captivates their imagination and stirs their soul. Let the provision of quality patient care become their primary focus. You will quickly learn how your front-line staff can become your organization's best recruiters, teachers, and role models.

Physician Acceptance: I believe healthcare's dirty little secret is the fact that way too many doctors treat nurses in an unprofessional – and wholly unacceptable – manner. There are exceptions, of course, but it's a sad commentary on the profession that there is so little literature addressing this critical problem. Fortunately, we have been able to achieve significant insights in this area over the last several years. I'm going to share with you a workable model to turn this problem around, complete with "how-to" action steps, over the course of the next several chapters.

Finally, I want to share with you the Keep Your Nurses & Healthcare Professionals for Life "DO IT" Action Plan (DO IT stands for Daily Ongoing Improvement Tactics), a step-by-step action blueprint to help you identify and achieve the goals you set for yourself as a result of this input.

To further clarify the scope of this book, let me identify a few of the topics I will not be covering.

I will not spend time discussing:

- **Legislative lobbying**

  While building political support for increased funding and healthcare reform is critical, national and state healthcare organizations are aggressively pursuing the necessary changes. I have, however, provided an addendum that

lists the names and contact information of nursing associations in the belief that all members of this worthy profession should actively support the advancement of their field.

- **Government or Managed Care**

  Although many believe government policy and managed care are the root causes of the problem, I respectfully refer these concerns to the democratic political process (and to the above-listed demurral to discuss legislative issues).

- **Public Relations/Professional Image**

  The image of healthcare as a whole and the nursing profession specifically have both suffered considerably over the course of the last decade, and while there is a significant need to re-educate the public about the noble mission of this occupation, this is clearly a long-term problem in need of long-term solutions. I believe that every nurse has to become an advocate for the profession by speaking in the community and to schools to present a better image of the profession. This book is dedicated to an action process that can make a difference in the industry now.

- **Student Career Orientation**

  Nursing leadership clearly recognizes the need to speak directly to junior and senior high school students and to encourage them to consider nursing as a career. While this initiative will likely produce results in three to five years, the oversight and development of this strategy is better left to local hospitals and healthcare associations.

- **Recruitment Strategies**

  When it come to sophisticated recruitment strategies, including the use of the Internet, there are literally hundreds of cool ideas floating around. I encourage you to

get educated about leading-edge best practices in nursing recruitment and to make use of them. However, in this book, our focus is to help readers begin to create a culture that new recruits and veterans alike will never want to leave. We also believe that the most powerful marketing tool you have are enthusiastic, loyal employees who recruit their former classmates, peers and friends to come to work alongside them.

By the time you reach the conclusion of this book, I hope you will share my belief that by inspiring, retaining, motivating, and empowering patient-focused nurses and other personnel, your organization – and your patients – will benefit substantially.

Brian Lee CSP

Brian Lee CSP – **Keep Your Nurses & Healthcare Professionals for Life™**

The
"**Big Picture**"
in
Staff Retention

Keep
Your
& Healthcare Professionals
NURSES
for Life™

Focus on What's Really Important

"Satisfied needs do not motivate. It's only the unsatisfied need that motivates. Next to physical survival, the greatest need of a human being is psychological survival – to be understood, to be affirmed, to be appreciated."

— Stephen Covey
The 7 Habits of Highly
Successful People

To look is one thing.
To see what you look at is another.
To understand what you see is a third.
To learn from what you understand is still something else.
To act on what you learn is all that really matters.

— Anonymous

Every once in a while a profound insight into life arrives unexpectedly, like this anecdote I was lucky enough to stumble across on a radio talk show a few years ago.

Tom and John were having a conversation and John said something about "a thousand marbles." I was intrigued, so I stopped to listen to what he had to say. "Well, Tom, it sure

sounds like you're busy with your job. I'm sure they pay you well, but it's a shame that you have to be away from your home and your family so much. It's hard to believe a young fellow should have to work sixty or seventy hours a week to make ends meet. Too bad you missed your daughter's dance recital."

John continued, "Let me tell you something, Tom. Something that has helped me to keep a good perspective on my own priorities." And that's when he began to explain his theory of a "thousand marbles."

"You see, I sat down one day and did a little arithmetic. The average person lives about 75 years. Now, I multiplied 75 times 52 and I came up with 3,900, which is the number of Saturdays the average person has in their entire lifetime.

"Now, stick with me, Tom. I'm getting to the important part. It took me until I was 55 years old to think about all this in any detail," John continued. "By that time I had lived through over 2,800 Saturdays. I got to thinking that if I lived to be 75, I only had about 1,000 of them left to enjoy.

"So I went to a toy store and bought every single marble they had. I ended up having to visit three toy stores to round up 1,000 marbles. I took them home and put them inside a large, clear plastic container, right here in the sack, next to my gear. Every Saturday since then, I have taken one marble out and thrown it away. I found by watching the marbles diminish, I could focus more on the really important things in life."

When it comes to healthcare, there are so many vitally important things to focus on: patient safety, clinical care quality, financial solvency, biotechnology convergence, joint commission accreditation, aging equipment and facilities, physician issues, patient privacy, and on and on.

Why would nursing become such an unappealing profession to a potential or current nurse? The reasons are multifarious

and complex. According to industry experts, it's a perfect storm of occupational, demographic, and workforce factors.

- New nursing recruits often have to navigate a significant learning curve and many physicians lack the tolerance or patience to recognize and accommodate this fact.

- Skyrocketing housing costs have made recruitment difficult, particularly for entry-level positions.

- While many experienced nurses may prefer 12-hour shifts and three-day workweeks, these arrangements can be extremely tiring for newcomers to the profession.

- Learning the new technology that today's healthcare infrastructure demands of workers can be a constant challenge.

- Many nurses prefer assignments in specialized roles, but rising costs have made it very difficult for hospitals to afford these dedicated units. As a result, there is an industry-wide dilution of specialty nursing.

- "Floating" roles and last-minute staffing cancellations can be frustrating.

- All too often, the time, effort, and resources dedicated to recruitment outweigh those that are invested in staff retention initiatives.

- Many hospitals and healthcare facilities have virtually no one available to train new employees.

- There are many attractive career alternatives to nursing. For example, many women are now choosing to become doctors instead of nurses.

- Despite its benefits, unionization of the workplace can also bring with it constraints and restrictions.

- It can often be very difficult to entice recruits to remote locations.

- In many instances, unacceptably low state-mandated minimum staffing ratios have had a negative impact on workload and quality of care.

- A growing number of nurses are worried that the standard level of care has become lacking in the focus on safety.

- Many physicians and administrators are perceived to be disrespectful.

- The average workload volume is regarded as overwhelming and many nurses simply aren't interested in working that hard.

- Many nurses are physically and mentally fatigued, tired, or teetering on the verge of burnout.

- Some hospital departments have unrealistic expectations about what nurses can or should do.

- Patient expectations are increasing exponentially.

- Work/life balance issues are a perennial challenge.

- Nurses believe they spend more time on paperwork than patient care.

- Mandatory overtime can be physically and mentally draining and it may, in fact, endanger patient care.

- Nurses are often required to supervise unlicensed staff, a situation that can detract from their level of engagement and sense of professional pride.

- In many hospitals, nurses are not only expected to work every other weekend, but are too often denied time off for breaks or vacations.

- Many nurses perceive hospital scheduling processes to be unfair.

Taking all of these factors into consideration, is it really any wonder that nursing has come to be known to some as "the reluctant profession"?

Like every other type of worker, medical personnel want to feel valued and appreciated. They want to be understood, affirmed and respected. Take a look at your own personal and professional relationships. How important is it for you to feel appreciated and valued?

Nurse leaders need to create an environment in which people actually want to come to work because they're made to feel like they really do make a significant difference.

Why do most nurses go into nursing in the first place? Often, it is to make a difference in the lives of their patients. In order to inspire staff, we need to give them a cause. What better cause than achieving world-class patient care and customer satisfaction? We all need to remind nurses that the ideals and beliefs that motivated them to enter the profession are more important than ever. If today's administrators and nursing leadership can tap into and re-ignite those core beliefs, your organization's potential for top-quality service is virtually limitless.

We need to get better at developing and implementing systems and operations. We need to improve clinical outcomes and focus on customer service – and we need to get the agenda centered on people issues again. In short, we all need to embrace change.

To make these changes, we have to do two things. Like the corporate world, whether it's for-profit or non-profit healthcare, we must find a way simultaneously to reduce costs and improve our outcomes, and therein lies the challenge. Like any other industry, people always want more value for less cost. The secret is to achieve cost savings in a way that doesn't alienate the industry's core resource – skilled and engaged nursing professionals.

Healthcare Trends

"Unfortunately "people" issues have dropped off the agenda in favor of cost-cutting. Most administrators are in a survival mode, just trying to keep the doors open."

— *Brian Lee CSP*

To make significant changes in the current situation and pull the healthcare industry back from the edge of the staffing crisis, we have to work together to reestablish the agenda. Unfortunately, what the previous chapters have said about the unprecedented challenge the nursing profession faces challenges today can be witnessed in every healthcare institution in the United States and Canada. Here are some of the most significant overarching trends that have shaped and will continue to influence the healthcare industry environment.

- Many nurses do not believe their salaries, wages, and benefits are keeping pace with today's economy.

- Much of the voting public harbors a strong antipathy toward taxes and the prospect of tax increases.

- The Internet is playing a key role by arming patients with a wealth of information. In fact, it was recently reported that the fourth most common reason people use the Internet is to search for health and healthcare information.

- Advanced surgical techniques and new drug therapies are expensive.

- There is widespread opposition to increases in taxes, insurance, and healthcare premiums at every level.

- Many administrators are reducing spending in the one area that gives them immediate bottom-line results — namely, staffing levels.

- In the next 10 years, nearly half of all registered nurses will be at or nearing retirement age.

- The largest segment of the population, baby boomers, will also begin to retire in droves in the next 10-15 years. This demographic tidal wave will put enormous strain on already-overburdened healthcare systems in North America and dramatically increase the need for skilled nursing professionals.

- In many hospitals and clinics, reductions in spending and an excessively narrow focus on the financial bottom line often outpace the focus on patient care and quality healthcare provision.

- The emphasis on customer satisfaction in the larger marketplace has increased patient frustration with the healthcare system. Long delays and months-long waiting lists are all too common.

- Many in the industry remain in denial over their responsibility in fostering and fomenting nursing shortages.

- Problems with insurance coverage, expense saving measures, and other policies have forced an increasing number of patients to access hospitals via emergency wards.

- Errors leading to patient deaths have increased precipitously.

- Some public inner-city hospitals are closing due to lack of funds, while the number of for-profit facilities in upscale communities has increased.

- Many in the medical profession are blinded by custom and precedent, and refuse to accept other treatments such as chiropractic and naturopathic solutions in conjunction with traditional medicines.

In the healthcare system, measures geared to help increase market share through mergers and acquisitions have enabled a smaller number of conglomerates to control a broad array of industry resources.

In the United States, billions of dollars have been funneled out of healthcare funding since the 1997 passage of the Balanced Budget Act, while in Canada, federal and provincial government cutbacks have squeezed the system to the breaking point.

A trend affecting the general workplace environment has also been brought to bear in the healthcare industry. For a number of reasons, institutional environments aren't all that attractive to Generation-Y workers (generally defined these days as people in their late 20s and early 30s). Younger workers prefer to choose independent contract work that is less stressful and time-consuming so they can opt for more personal and leisure time. Even the prospect of more money can't make them choose between a professional and personal life. However, a teamwork-centric environment and supportive management are much more appealing to these young workers than top-heavy, authoritarian bureaucratic institutions.

The Facts and Issues in Nursing Today

"The greatest discovery of my generation is that a man can alter his life simply by altering his attitude of the mind."

– James Truslow Adams

To fully appreciate the challenges to the healthcare industry, we need to take a closer look at a number of salient facts and figures that have influenced the current healthcare industry landscape.

Demand for Nurses Grows

With the passing of the Affordable Care Act, there is expected to be an influx of formerly uninsured patients. Some estimates by the American Nurses Association estimates an additional 30 to 32 million individuals could become regular participants in the US healthcare system. This could possibly cause a shortage of nurses.

Half the Workforce are Considering Alternate Career Paths

In a recent survey conducted jointly by AON Consulting and the American Society for Healthcare Human Resources, only half of the nurses and healthcare personnel who participated reported that they planned to remain with their current employer for more than one to two more years.

Nursing School Issues

Faculty and staff shortages at many nursing schools make it impossible for some potential enrollees to enter pre-licensure programs.

New Nursing Enrollments are Not Enough to Meet Demand

After several consecutive years of slight upticks, nursing school enrollments dipped in 2008. New admissions in pre-licensure programs decreased by an average of 2%, while overall enrollments remained steady. Furthermore, faculty and staff shortages at many nursing schools make it impossible for some potential enrollees to enter pre-licensure programs.

Baby Boomers aren't Babies Anymore

Many baby boomers, who comprise the largest population cohort, will likely retire within 15 years and begin to increase their demand for healthcare services dramatically. The impact: this onslaught of demand will coincide with the exodus of retiring nurses, creating a deficit in supply to meet baby boomer needs and expectations.

Retention and Turnover Continue to Plague Many Hospitals and Healthcare Facilities

According to a recent survey conducted by Nursezone.com, the average turnover rate for RNs is more than 20%, while the average nursing vacancy rate in the U.S. hovers around 13%.

The Cost of Housing is a Problem

Many of the metropolitan areas that have been hardest hit by the nursing shortage are also beset by high costs of living that can make it difficult to lure qualified applicants, whether they are entry-level nurses at the low end of the industry pay scale or experienced professionals who are unwilling to bear the significant standard of living hit that such a move would entail.

Canada's Nursing Crisis At A Glance

The U.S. isn't facing its healthcare challenges in a vacuum; Canada's healthcare industry is facing a number of significant challenges of its own.

Aging Nursing Population

In 1990, the average age of Canadian nurses was 39; in 2011 it was 44.8, according to the Canadian Institute for Health Information. The same report found that more than half the nursing workforce in Canada is older than 45 years of age, and more than one-third of all working nurses are older than 50.

Flight of Canadian Nurses to U.S.

One recent survey conducted by The Canadian Press found that there are more than 3,270 nurses in the U.S. who hail from Ontario alone, including 870 who are currently employed in Texas.

Asked about their reasons for leaving Canada, the nurses surveyed reported that they left for lack of jobs (68.2%), family issues (27.5%), pay and benefits (23.1%), travel and weather (18.9%) and cost of living (4.1%). The majority reported that they would consider returning to Canada if offered full-time positions.

A 2008 study found that a greater proportion of Canadian nurses working in the U.S. had full-time jobs than their American counterparts or Canadian nurses working in Canada.

Declining Nurse Population

From 1994 to 2000, the number of registered nurses per 10,000 people in Canada declined from 80.3 to 75.4, a decrease of 6.1%. In 2011, the number of registered nurses per 100,000 people in Canada was 785.

A University of Toronto study released in June 2001 estimated that 14,000 of Ontario's 81,000 registered nurses likely had retired by decade's end, a proportion that represented a staggering 17.3% of the city's nursing workforce and does not take into account the possibility of early retirement.

Why are
Nurses Leaving

"The human spirit is stronger than anything
that can happen to it."

– George C. Scott

There was a time when nursing was one of the few professions open to women. Not long ago, many ambitious and talented women bumped up against a proverbial "glass ceiling" that discouraged them from aspiring to positions such as doctors, lawyers, business managers and financiers. Today, women can be whatever they choose, but the fields of nursing and medicine historically have paved the way for women entering the workforce. Among those early pioneers who pushed for change in the medical profession in North America were:

Sara Josephine Baker. She was the first American woman named to an administrative or executive position within the Department of Health. Her travels through impoverished immigrant neighborhoods, where she witnessed babies dying at alarming rates due to often-preventable illnesses, led her to develop the idea of preventative medicine.

Clara Barton. Her profession was teaching, but during the Civil War, Clara Barton was called to nurse wounded soldiers. She would go on to found the American Red Cross in 1881.

Elizabeth Blackwell: Blackwell entered the Geneva School in 1948 after being denied access to eleven different medical schools. In 1949, she was refused work at every American hospital, so she traveled overseas to study and later returned to New York to open her own practice, becoming the first American woman doctor. Her New York Infirmary for Women and Children was the first American hospital to employ an all-woman staff.

Emily Howard Stowe: After being rejected by Canadian all-male medical schools, Stowe was forced to head south to pursue an education at the New York Medical College for Women. After her graduation in 1867, she returned to Toronto to become the first woman to practice medicine in Canada. Stowe founded the Toronto Women's Literacy Club in 1876 and coordinated the establishment of the Women's Medical College in Toronto in 1883.

Ann Augusta Stowe-Gullen: Emily Howard Stowe's daughter achieved what her mother couldn't: she was the first woman to receive a medical degree in Canada.

Adelaide Hoodless: A lobbyist for domestic and civil sanitation and the prevention of disease, she established a domestic science that would influence widespread reforms in the handling of food and basic cleanliness and hygiene. The Victorian Order of Nurses, the national YMCA and the National Council of Women were created as a result of her founding of the Women's Institute. While women still make up the majority of nursing profession, there are an ever-growing percentage of male nurses who are also serving patients.

Once regarded as one of the most desirable lines of work for medical professionals, there is now a growing perception that the nursing profession is filled with uncertainty. Here are just a few of the reasons why.

Compensation. Thanks to years of cutbacks and penny pinching, there is a growing perception that nursing is not a well-paid profession.

Less-than-ideal working conditions. Due to shrinking budgets, current staff levels are dangerously low, restricting time with patients and emphasizing emergency rather than preventative care. Bed shortages have led to long waiting lists, forcing ill and injured patients to line hospital hallways in gurneys in many facilities. This creates short tempers and frustration and places increased stress on nurses.

Non-healthcare options. Political science, engineering, law, finance, social work, business management, non-profit organizations, entrepreneurship… there are a multitude of choices outside the healthcare industry these days, many of which provide a closer match with what the Generation Y-ers (i.e., prime recruits) are looking for in a workplace, such as a better work/life balance and increased control over their futures.

The profession's perceived instability. When the public reads about the healthcare industry, they see turmoil. There are daily reports about budget shortages, disgruntled unions, liability claims, and premature patient releases that cause complications often leading to serious and terminal conditions. Nurses themselves have in many cases given up hope for the industry.

Declining funding for training and education. Education and training programs at many hospitals and healthcare facilities have been cut due to budget shortfalls and lack of faculty.

Computerized medicine. Many in the industry perceive the current trend towards computerized diagnostic and treatment methods as tending to depersonalize patient care and putting nursing into the hands of machines rather than people.

Increased stress. Staff shortages and long patient lines are forcing the issue of mandatory overtime. It's not unusual for nurses to work two 12-hour shifts back-to-back. Nurses typically have little opportunity for recovery time before they are called in to work their next shift. Many are physically and emotionally drained and see no end in sight.

Lack of appreciation. Many nurses don't receive as much as a "thank you" from managers or their physician colleagues. Even as demands upon their time increase, nurses receive very little acknowledgement or recognition. Every time we conduct a focus group with front-line staff, an overwhelming number of nurses tell us that the message they hear from physicians and management is that they aren't very good at what they do. Workshop participants say things like, "We never get any positive affirmation." "They'll always tell us we've made a mistake but where's the recognition when we do an exceptional job?" When it comes to staff motivation, this is a disaster in the making.

Primary "Soft" Concerns

If we analyze these reasons and read between the lines, we can conclude that there are three primary "soft" concerns that nurses and prospective nurses don't feel are being addressed:

- Lack of fairness at work. Both in the nursing field and beyond, a lack of perceived fairness in the workplace is constantly cited as a top concern. One recent study conducted by researchers at Ohio State University broke the issue down into a number of components, which include respectful treatment of employees, recognition of employee efforts, willingness to help with problems or to consider special circumstances, and fairness in the dispensation of wages and benefits.

- Lack of care and concern. This issue is often cited as a cause for employee burnout and turnover. Lack of care and concern on the part of employers also includes

elements such as a perceived lack of receptivity to employee concerns and an overarching lack of interest in employee well-being.

■ Lack of autonomy. In exit interviews, many nurses who are leaving a particular facility or are bidding farewell to the field altogether cite a lack of autonomy as a chief motivating factor. Although licensure statutes often limit the amount of decision-making power and individual discretion that nurses can be assigned, many hospitals have chosen voluntarily to limit nurse autonomy in recent years. A survey conducted by researchers at Florida State University linked a lack of nurse autonomy to employee burnout, dissatisfaction, and turnover.

These three themes come up again and again in exit interviews with nurses who are leaving to pursue another opportunity or another field altogether.

To combat these all-too-common problems, I offer four recommendations:

1. **Appoint a Chief Retention Officer**

   Make nurse retention a number-one priority in your organization. We've reviewed the figures. What's the alternative?

   If stemming the tide of turnover is a top priority for your organization, incorporate this goal into your organizational structure by appointing a Chief Retention Officer. Good candidates for this position include your current chief nurse executive or an operations officer.

2. **Create a Team of Nurse Retention Officers**

   Designate every nurse leader as a "Nurse Retention Officer." Combating the problems of turnover and poor retention should be an explicit part of every nurse leader's job description and responsibilities.

3. **Appoint a Nurse Retention Project Team**

Assemble a panel of nurses, administrators, and managers that represents a cross-section of your facility. Ideally, the team should represent all units and specialties with an approximately 50-50 balance between management and front-line medical personnel. The team will tackle issues such as:

- Improving selection processes and recruitment techniques
- Enhancing onboarding procedures and new hire support
- Identifying and addressing organizational problems that could stymie retention efforts
- Eliminating common sources of hassle and frustration
- Creating structured processes for individual career planning and professional development
- Increasing the frequency and quality of employee reviews and feedback
- Cultivating loyalty and buy-in among team members
- Instituting a formal incentives program to reward retention, referrals, and recruitment

4. **Ask Every Team Member These Three Questions**

Even if you read nothing further in this book, please take the time to read this section and follow up on this exercise. It may be the single most important piece of advice I can offer.

How many times have you had a valuable employee quit and then said to yourself, "If I had only known he or she was about to leave"?

The following three questions will help you to avoid this unpleasant surprise.

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1. **Ask everyone on your team: "If you were going to leave today, what would you identify as your number-one pet peeve?"**

   If they reply, "I'm not leaving," thank them, and then politely ask again (and again) until you get an honest answer. Assure your staff members that there will be no penalty for uncovering ugly truths about the workplace. Eventually, most will tell you what you really need to know.

2. **"Will you give us the chance to change your mind?"**

   By posing this question, you are signaling to your nursing staff that it's okay to change their mind and that in fact, is your intent.

3. **"What would cause you to change your mind?"**

   The answer that each team member offers in response to this question will give you some pretty good clues about what you need to do next.

Wouldn't you like to know the answer to these questions before someone leaves? Ask everyone on your team. The "data" you gather through this process will give you the necessary insight to know where your chief challenges lie and to determine how to begin fixing the problem.

Brian Lee CSP – **Keep Your Nurses & Healthcare Professionals for Life**™

The Link Between Employee Morale and Customer Satisfaction

A 1% change in employee morale equals a
2% change in Patient Satisfaction

– Press Ganey

A recent report issued by industry analysis firm Press Ganey concluded that every 1% improvement in employee morale results in at least a 2% change in customer satisfaction. Should this surprise anyone?

Until healthcare front-line staff feel as valued, appreciated, and cared for as your facility's "customers" (i.e., your patients), it is highly unlikely that there will be much of a positive change in patient satisfaction. Unfortunately, in many regards, today's healthcare facilities are treating their customers better than they are treating their own staff.

Decades of research have proven that there is a direct connection between nurse retention and patient satisfaction. To take just one example, most medical personnel want to be able to spend more time at the bedside. They want to establish a sense of

rapport and mutual trust with their patients. Remember the good old days when a nurse could afford to spend an extra five or ten minutes to give their patient a massage? I often hear nurses say, "We have time to ask the patients how they are feeling, but we don't have time to listen to the answer."

If you think that patients don't notice that today's nurses are overburdened and pressed for time, think again. As such, healthcare leadership must take the necessary steps to move on both fronts, because the seemingly unrelated issues of patient satisfaction and nurse retention are, in many ways, inextricably linked and interdependent.

A powerful motivator to encourage buy-in from staff administrators who are preoccupied with the bottom line is to share the frightening economics of staff replacement.

Let's calculate the organizational and financial costs of turnover. I want you to think about this guideline every time you lose a nurse. Experts estimate that it typically costs 150 percent of an employee's annual compensation to replace them. In other words, if you're paying a particular nurse $50,000 a year, it is likely going to cost you close to $75,000 just to replace him or her – and that figure doesn't include the cost of advertising, orientation, new equipment costs, and more. Those expenses come from different budgets, but if you add them in together with travel and time, the total costs associated with replacing a $50,000-a-year employee is closer to $95,000. Multiply that by however many nurses you have lost in the last several years. If you want to capture and hold on to the attention of the top executives at your facility, show them this formula. The business case for investing in nurse retention couldn't be more obvious.

Excellence
IS the Answer

"We should not let our fears hold us
back from pursuing our hopes."

– John F. Kennedy

Too many healthcare leaders today are overwhelmed by the complexity of juggling clinical and operational oversight along with an ever-evolving array of other problems and priorities. Not surprisingly, a number of recent surveys of C-level administrators in the industry indicate that many are hovering on the precipice of burnout as a result of the overload.

As an antidote for this malaise, I propose that you consider utilizing a powerful self-management tool, namely, the concept of excellence.

This is a good time to define excellence. First, let me say what it is not. Excellence is not doing one thing 1,000% better. In fact, I doubt that there is one that you could do one thing 1,000% better. If there is, it must either be a brand-new concept, or in pretty awful shape right now.

Yet, I'll bet there are plenty of things you could do one percent better – and better and better and better.

As Jan Carlzon, the President of Scandinavian Airlines once said, "Excellence is doing 1,000 things 1% better!"

Excellence is continuous improvement of every aspect of your organization.

Excellence is an abiding commitment to the little things that matter to your customers.

I saw a bumper sticker a few years ago that said, "The little things in life don't mean anything." To the contrary, I would counter that it's the little things that mean EVERYTHING!

I was visiting a friend on the West Coast recently and had an interesting conversation about relationships with his mother, who had been married to my friend's father for 45 years. She told me that in the 45 years they had been married, her husband had never said, "I love you."

I found this quite shocking, so when her husband, my friend's dad, dropped into the kitchen where we had been talking, I said, "What do you mean, you've never told your wife you loved her in 45 years of marriage?"

He said, "Look, on our wedding day I told her that I loved her and that I'd let her know if I ever change my mind!"

Now, is that a big thing or a little thing? In my view, it's a little thing that makes a HUGE difference.

When you look at it this way, it really is the little things that count.

What would be the value of improving 1% a day at your job? Let's test out this idea. Let's imagine you've completed an e-seminar and you're excited about applying what you've learned to your work. And let's say you're scheduled to work Monday through Friday the next week.

- On Monday, if you wanted to, could you improve the way you provide service to your customers by 1%? For example, after you say thank you to your customers,

invite them back and say, "Come again" or "When will I see you again?"

- On Tuesday, could you communicate with your co-workers 1% better?

- On Wednesday, could you become 1% more knowledgeable about your company's products and services?

- On Thursday, could you organize your workspace or desk 1% better?

- On Friday, could you organize and manage your time 1% better?

All right, so you've had a highly productive workweek, now you take the weekend off.

- On Saturday, could you exercise 1% more or eat healthier foods 1% more often?

- On Sunday, could you make your relationship with your life partner, family member, or roommate 1% better?

Is this kind of incremental improvement believable? Is it achievable? Very much so!

If you take on the challenge of making these kinds of little improvements for say, 250 days in a year, how much more valuable would you be to your employer, to your friends and family, or for that matter, to the world?

This is exactly what's so exciting about implementing the principle of excellence!

Recently, I was speaking to an association of professional speakers to which I belong. Afterwards, a friend came up to me and said, "Brian, I can't believe how much you've improved since I last heard you speak."

"I better have," I replied. "I've spoken 250 times since you heard me last."

I have a question for you. Have you amassed five years or 10 years or 25 years of experience in your profession? Or do you have one year of experience that you've just repeated one, five, 10 or even 25 times?

You see, excellence is nothing more than being the best you can be. What is the alternative to being your best? It's not being the worst you can be. I honestly don't believe that people set out to be the worst. It's being mediocre. It's being average. As a former girlfriend once described me, it's being "ADEQUATE." (Now there's a memorable epitaph for your gravestone. "Here lies Brian Lee. He was… adequate.")

Furthermore, excellence is not about embodying the creed of the fictional company Universal Widgets: "WE'RE NO WORSE THAN ANYONE ELSE."

The issue for you and I should not be how anyone else is doing; rather, it's about keeping tabs on how well we are doing compared to how well we know we can be. Comparing yourself to anyone else can only lead to one of two outcomes: to become vain, or to become bitter. Surely, that is not the answer.

In our company, we make it a policy to continuously improve our services and programs. Sometimes I think the constant onslaught of tweaks and changes drives the office team crazy, but as you are reading this book, I hardly think you want to waste your time with yesterday's concepts and ideas.

Irving Berlin wrote a famous song for his musical Annie Get Your Gun called "Anything You Can Do, I Can Do Better." I love the music, but not the words, so I rewrote them to better suit my purposes. My new and improved version is: Anything You Can Do, YOU Can Do Better!

"I can do whatever, just a little better. Aiming to aspire, just a little higher. Adequate is not enough. The mission for me is the best I can be."

Above all, it is important to recognize that excellence is not perfection. Perfection looks for what's wrong. Excellence looks for what's right. I really like the idea of perfection for manufacturing and products, especially when it comes to making the motor on the airplane on which I'm a passenger. But when it comes to service and people, we need to let them know what they're doing right.

A perfectionist can never be done, can never be finished, and can never get anything exactly right. What I observed many years ago is that if you stay at the job long enough to get everything done exactly right, you may never go home. And if you do go home, you'll never leave your work at the office.

In this new era maybe we shouldn't just learn from our mistakes; maybe we need to learn from Other People's Successes. For many of us, success may lie in doing something we haven't done before.

There's an old adage that holds, "Keep doing what you've been doing, and you'll keep getting what you've got." To put this sentiment in a slightly different context, Stephen Covey, the author of *The 7 Habits of Highly Effective People* (which I highly recommend), reiterates Einstein's definition of insanity as "doing the same thing the same way and expecting a different outcome."

Vince Lombardi, that great motivator and football coach, put it this way: "The quality of a person's life is in direct proportion to his or her commitment to excellence, regardless of their chosen field of endeavor."

Let's sum up what we've learned about excellence so far:

1. The secret of personal and professional excellence is to learn one new idea every day and do it in a better way.

2. Excellence means making a commitment to be the best you can be.

3. Excellence is NOT doing one thing 1,000% better. It is doing 1,000 things 1% better.

4. Learn one new idea every day, and do it in a better way.

5. In the quest for excellence, the only person we are really competing against is ourselves.

Ask yourself at the end of each day, "How much did I contribute to the world, compared to what I know I'm capable of?"

Use a journal or a log to chart your course toward excellence. Here's an example of a simple form that you can use.

DAILY EXCELLENCE DIARY

Year	*"Excellence is doing 1,000 things 1% better"*	
Month / Day	#	"Ideas, skills, improvements or systems that I learned or did today that will make me more effective in serving others tomorrow."

Learn from OPS

Other People's Successes

Best Practices In Nurse Retention

In my experience, I've found that the best way to solve a problem is to learn from what I call OPS – Other People's Successes.

In researching the literature pertaining to nurse retention issues, I discovered an excellent resource of best practices assembled by Washington, D.C.'s Nursing Executive Center. The report is entitled "Reversing the Flight of Talent." Let's take a look at the findings of the report as they pertain to two key elements of retention, namely, focusing on new hires and addressing hospital-wide priorities.

Focus On New Hires

Practice #1: Accelerated Specialty Orientation

Hospitals train new graduates and inexperienced nurses for specialty positions through the use of highly structured orientation programs that intersperse classroom and practical learning. The goal is to reduce vacancy rates and minimize training costs by hiring new graduates for specialty positions and accelerating their entry into the facility's staffing mix.

Practice #2: **Peer Hiring Screens**

By using behavioral interviewing techniques, staff nurses participate in the process of interviewing and selecting candidates for RN positions on their shifts and units. The primary goal of this method is to improve new employee selection by screening candidates for compatibility with the unit work environment. A secondary goal here is to improve the available support for new hires by giving current staff more accountability for hiring decisions.

In other words, it is important for your organization to improve its ability to make good hiring decisions the first time. Behavioral interviewing techniques are a great way to do this. For example, an inexperienced interviewer relying on traditional methods might ask, "We get pretty busy around here; how do you feel about overtime?" How do you think an applicant going to answer? Anything to get the job, right?

Using behavioral interviewing techniques, the manager might ask, "In the past, what has been your response to overtime requests?" This answer will likely be more honest and will lend more insight into the candidate's character.

It can also be helpful to implement the use of peer interviews. If you have three candidates on your short list, assign three or more members of your staff to interview them and make recommendations about who they think should be the finalist and why. This technique can come in handy whether you're hiring nurses, housekeeping personnel, or anyone in between. Think about it: these people have to work together. If you don't involve your staff in the hiring process, it's more likely that you will make a bad hiring decision, and guess what? Your existing staff won't give this new employee any support. On the other hand, if you call on your staff to help make the decision, they are much more committed to make the hiring and on-boarding process work. It also conveys to your staff that you trust and respect their judgment.

In our office, this practice is standard operating procedure. Before we hired one receptionist, Georgia, everybody in the office interviewed her. She felt honored that there was so much interest in her, and furthermore, she wanted to work for a company that took the time to really get to know her. And yes, she did turn out to be an excellent fit.

Practice #3: **New Hire Support Program**

As a supplement to the clinical orientation program, your hospital should schedule regular peer support groups, individual mentoring sessions, and social events for all recent-graduate hires. The goal of this practice is to improve new-hire retention by enhancing the support systems that are available to nurses.

Addressing Hospital-Wide Priorities

Practice #4: **Market-Based Compensation Recalibration**

Annual compensation reviews should be supplemented by targeted adjustment of pay practices throughout the year. The amounts of the increases should be set by using data collected from exit interviews and a variety of informal sources. The objective of this practice is to prevent compensation-driven departures by responding quickly to compensation changes at competing institutions.

In today's dynamic labor marketplace, you have to pay market value for skilled nurses and medical personnel. I recommend establishing a goal to set compensation in the fiftieth percentile of the range in your market area. This allows you to make timely adjustments and prevent costly and inconvenient compensation-driven departures.

Practice #5: **Compensation Fact Sheet**

A hospital's human resources department should regularly produce and distribute a newsletter to all employees that describes the organization's compensation strategy and policies. The goal of this practice is to prevent employee

dissatisfaction with compensation by improving the understanding of the full value of their pay and benefits package.

Every nurse knows someone at another hospital that's getting paid more for the same type of work. Although this is often more of an urban legend than a verifiable fact, this type of thinking often permeates the workplace, causing the hospital administration to appear unreceptive, uncompetitive, uncaring or a combination of all of these. By producing a compensation fact sheet, the figures are there in black and white. Make the document a one-page sheet that is categorized by occupation, and include research from the market area.

Don't forget to include the monetary value of employee benefits on your compensation fact sheet. Generally speaking, many employees have no idea how much their benefits cost. By framing this information in quantifiable terms, you might be able to quell some compensation-related dissatisfaction.

Practice #6: **Customized Scheduling**

Hospitals should adopt a policy of customizing schedules to better meet the needs of individual nurses whenever possible. In addition, each organization should establish processes for the timely evaluation of and response to all individual scheduling change requests. The goal of this practice is to prevent nurse departures by making it a priority to accommodate the specific scheduling preferences of individual nurses.

Practice #7: **Structured Staff Scheduling**

Ask your unit staff teams to create and implement a series of protocols to ensure that the self-scheduling process is equitable and meets nurse, unit, and hospital needs. The goal here is two-fold: to improve satisfaction with scheduling by increasing nurse involvement in the scheduling process, and to educate nurses about unit staffing needs.

K =
The **K**ey
is Culture

"The philosophy, drive and spirit of an organization (culture) are even more critical than it's people or physical attributes."

– Thomas Watson, Jr.,
CEO of IBM

There are four key imperatives of the "K.E.E.P." strategy that form the foundation of the KEEP Your Nurses for Life program:

K = The Key is Culture

E = Empowerment is the Way

E = Education and Engagement

P = Physician Acceptance

Keep
Your **NURSES**
& Healthcare Professionals **for Life**™

Brian Lee CSP – **Keep Your Nurses & Healthcare Professionals for Life™**

Change Your Culture

"Change your culture or be doomed to repeat the past."
— *Brian Lee* CSP

"In the final analysis, change sticks only when it becomes 'the way we do things around here', when it seeps into the very bloodstream of the work unit or corporate body. Until new behaviors are rooted in social norms and shared values, they are always subject to degradation as soon as the pressures associated with the change effort are removed."

– *John Kotter, Leading Change, Harvard Press*

When it comes to organizations, culture is the "way we do things around here." It's an organization's way of life. It's what people talk about on their coffee breaks, if they get coffee breaks. It's what comprises the rules when there are no written rules.

Whatever you decide to do after reading this book, avoid at all costs making it just a one-off program or campaign, because when the pressure is off, your people will revert to the way things used to be.

To take an analogy from health and fitness, as long as you call what you're eating a diet, you're implying that it's temporary. Afterwards, you're more likely return to your former eating habits and nothing will have changed.

I want you to think about a lifestyle change as opposed to a diet. When many in the healthcare industry were forced to resort to dramatic cost reductions, too many facilities attempted to take nurses out of the picture and foist a vast proportion of patient-care duties to assistants. This trend was referred to as "patient–focused care." How well did you see that work?

When a group of administrators or senior managers sit around a boardroom table to brainstorm ideas for a new strategy, on a scale of 1-10, how good are they at creating that strategy? Yes, pretty damn good, I'm sure. The group will throw out ideas, post them on a flip chart, have someone transcribe them, and then have them typed and printed out with an impressive-sounding title.

But despite the fancy optics that go into devising the corporate change effort du jour, how much planning is initiated prior to the strategy being executed? Oh, so you're going to increase the market share by ten percent in that specialty area? How? "Oh, well, we're just going to do it." Why do we always seem to gloss over the details and tangible action steps when it comes to executing the planning?

OK! Now that the fancy new strategy is in place, it's time to execute it. So when do we let everyone know what their role will be in executing the strategy? Um, usually the day before it goes into effect.

How much do we involve front-line staff in the planning process? Uh, hardly ever. What's the staff response to the strategy? Well, it's not that they don't like what you are attempting to do. It's likely that they just do not understand or buy into the change. They "FEAR" what they don't know.

In this instance, FEAR is an acronym for "False Evidence Appearing Real." Change is exciting when we execute it ourselves, but it is threatening when it is foisted upon us. If you don't involve the front-line staff in the strategy planning and implementation process, their likely response will be, "These people don't know what they're doing."

Strategy Execution Effectiveness Model*

*With thanks to Jim Beaubien of Hope Systems
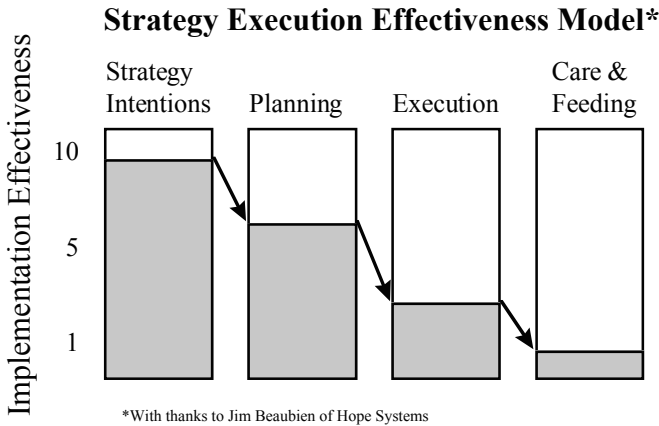
Your efforts to reorient or reinvent yourself as a nurse-friendly, customer- and employee-driven culture is all about change.

Most organizations do a poor job of executing their change strategy. To pull it off, you need to recruit an army of passionate allies. This entails involving the people who actually do the work in the processes of strategizing and planning from the very beginning.

In order for a culture change effort to culminate in lasting improvements, it must be led both from the top and from the front line. As a guideline, your nurse retention project team should be a joint initiative that involves both management and front-line staff in nearly equal proportion.

Together is the way!

Reinventing Culture

*Change is exciting when it is done by us,
threatening when it is done to us*

The world does not know much about cultural change.

If you were at a bar with your front-line nurses and their honesty was facilitated with the assistance of a few of their favorite alcoholic beverages, what words would they use to describe the culture of their work unit?

Invite your nurses to describe their work environment's current culture (preferably when they're sober!). Remind them that it's perfectly okay to put something positive on the list. However, in most cases, the list will not be pretty, so brace yourself for a harsh dose of truth.

After they have completed the initial exercise, ask the nurses to brainstorm a "preferred" culture. In other words, if, as a group, they could take complete control of their current work environment and reinvent it from the ground up, what would it look like? Here's an example:

Current Culture	Preferred Culture
Negative	Positive
Victimized	Empowered
Fatigued	Re-energized
Stinks	Challenged
Apathy	Involved
Task Driven	Customer Driven

This is an invaluable exercise. It not only provides your team with a picture of how their workplace environment is perceived; it allows people to talk honestly about problems in the current culture, which is likely an all-too-rare occurrence. Often, awareness of the problem is half the solution. Ask your team, "Would our current culture sustain world-class satisfaction for both patients and employees?"

I further recommend that you:

1. Conduct an assessment of your current culture and share it with everyone.

2. Utilize input from everyone to help you define your current culture and brainstorm your new preferred culture.

3. Make management accountable to institute the necessary changes "with and through" everyone else.

A great way to kick-start the culture change process is to write a vision statement for your team's culture. Make it an exciting description of what you aspire to become. Challenge your staff to take ownership by asking them to contribute to the process of outlining your organization's goals. Here are a few examples of effective culture-change vision statements:

- "A fully empowered cohesive team that feels recognized and rewarded for contributions to the organization."

- ■ "An empowered work force that feels valued."
- ■ "An energized staff that's a caring team; that's empowered to solve its own problems and feel good about it."

I once received an inspiring letter from Dr. David Tillman, MD, the current CEO of the Motion Picture Television Fund, who took the time to acknowledge how my team and I had successfully intervened at St. Mary Medical Center to help the organization transition to a better culture. Dr. Tillman's words are testimony to the strategy that culture can change, and that it is necessary that change goals are permanent and long lasting.

To wrap up this chapter, let's take a look at his view of the culture-change experience:

Dear Brian,

I am writing to thank you for the contribution that you and the Custom Learning Systems Group have made to St. Mary Medical Center. I would encourage you to use this letter as you introduce your programs to other hospitals. I am absolutely convinced that you can bring the same value to them that you have brought to St. Marys.

As you know, we identified service excellence as a key hospital goal during 1995. We wanted to design a program and change our culture in order to improve patient satisfaction with particular emphasis on increasing the number of patients giving us superior ratings. We wanted to involve our staff in designing and implementing this effort and we wanted it to become a part of the culture at St. Marys-not just a one time program that is quickly forgotten.

To date, we have accomplished each of our goals. With your assistance, about 55 of our staff – Service Excellence

Advisors – designed and presented a 3-hour program for all of our employees. On their suggestion we have initiated several efforts including modifying our patient satisfaction survey, establishing a fund so that employees can access up to $250.00 for solving patient problems, and established a similar program for the staff from our doctors' offices. Most importantly, I believe that our employees now feel a greater sense of responsibility for keeping patients, families, and doctors satisfied. They have welcomed this responsibility because we have also provided them with the tools needed to successfully improve service.

I hope that this letter captures my enthusiasm for our "Journey to World Class Patient Satisfaction." For us, it has been a sound business decision, and it has improved patient satisfaction and employee morale. The role that you have played in this effort is invaluable.

Sincerely,
David B. Tillman, M.D.
President and CEO

Defining Employee Cultural Expectations

Let's set the bar high. Let's define our vision as "creating world-class employee satisfaction."

However, if attaining a "world-class" level of service is truly our goal, we must begin with the rock-solid foundation of a skilled, engaged staff. In order to achieve this, we have to define our employees' expectations and meet – or even exceed – them.

Let's begin with you. What do you expect as an employee? How do you want to be treated by your manager or boss?

Listed below are the answers I have received from thousands of participants in my "Keep your Healthcare Professionals for Life Seminars."

How about marking the answers you agree with?

What do we expect as employees?

- ☐ We want to feel valued.
- ☐ We want to be trusted.
- ☐ We want to be listened to.
- ☐ We want to be respected.
- ☐ We want two-way communication.
- ☐ We want to be treated as an insider.
- ☐ We want honesty.
- ☐ We want to be paid market value.
- ☐ We want to feel connected.
- ☐ We want fairness.
- ☐ We want to feel supported even during cutbacks and tough times.
- ☐ We want to be recognized.
- ☐ We want to be mentored.
- ☐ We want to be treated in a consistent manner.
- ☐ We want opportunities for advancement and professional development.
- ☐ We want to be challenged.
- ☐ We want to be held accountable.
- ☐ We want to be subject to fair expectations.
- ☐ We want you to let us do the job.

Put them all together, and what do these expectations add up to? Employee satisfaction!

After you have completed this exercise, I have a series of questions I would like you to consider.

Q1: Can you name 3 employees that have consistently met your expectations as noted above?

1. _____

2. _____

3. _____

(Most people have difficulty thinking of even two.)

Q2: Do you think that you meet your staff's expectations? If you answered yes, how do you know?

Q3: What do you think is the point of making this list? Perhaps if these are the things that we expect from our employers, maybe this is exactly what we need to be providing to our direct reports.

Q4: What would be the value to your organization if you and your fellow supervisors, managers, directors, and administrators all understood these expectations and made a collective commitment to delivering them and making them part of your culture and standard operating procedures?

Here are just a few possible outcomes to consider:

People would look forward to coming to work.

Employee morale would go up.

Staff turnover would go down.

Your organization would develop a reputation that would attract potential new hires.

Q5: What if you don't succeed in consistently meeting your employees' expectations? Is it likely that your current situation will change significantly?

I believe that we can draw a few critical conclusions from this discussion:

Conclusion #1

We are either part of the solution, or we are part of the problem. Either we are proactively contributing to our staff's quality of work life or we're detracting from it. There is no neutral ground when it comes to the game of leadership.

Conclusion #2

Employee satisfaction can be distilled down to a passion for the intangibles. If we look at this list of commonly voiced employee expectations, with few exceptions, it is a list of intangibles, most of which cost nothing to provide, but are valued very highly.

Conclusion #3

Your staff is your greatest asset and should be your #1 priority. Without them, what have you got?

Conclusion #4

In a world where employee dissatisfaction is often the norm, if you can just manage meet and manage your staff's basic expectations, you'll be a star and turnover will likely drop precipitously.

Once again, to reiterate, don't forget to ask your employees these crucial questions:

1. Ask everyone. If you were going to leave, what would be your number one peeve? And if they reply, "I'm not leaving." Ask it again and keep asking until they give you an answer.

2. Do you reserve the right to change your mind?

3. What would cause you to change your mind?

E = Empowerment is the Way

Keep
Your
NURSES
& Healthcare Professionals
for Life™

Brian Lee CSP – **Keep Your Nurses & Healthcare Professionals for Life™**

Unlocking the Mystery of Empowerment

"The world is round, and the place, which may seem like the end, may also be the beginning."

– Ivy Baker Priest

About ten years ago, I had to fly out of Los Angeles en route to a speaking engagement. When I showed up at the ticket counter, the airline agent greeted me with the usual indifference. Then a co-worker interrupted to speak to the first agent, who was suddenly and mysteriously inspired to adopt a pleasant tone towards me.

She asked, "Mr. Lee, are you going up to the departure gate right now?" I replied, "As a matter of fact, I am."

She continued, "We have two physically impaired customers that need to have their tickets changed. It's a long way to the gate and we just don't have the staff or the time. Would you mind taking the tickets up for us?"

"Sure. You can trust me," I said.

I have this little ritual when I depart from Los Angeles International Airport (or any airport, for that matter). I like to arrive at the airport early to avoid stress. I pick up my ticket and go through security, stop at the newsstand to buy a copy

of USA Today (which is my adult version of a comic book) and The Wall Street Journal. If I'm in a good mood, I'll get another magazine like Forbes or Fortune.

My next stop is the men's room (a traveler can never make a pit stop too often). I then make my way over to Starbucks, where I order my typical grande, decaf, low-fat, sugar-free latté, extra hot. And if I'm in a really good mood, I'll get a low-fat poppy seed muffin. Then I dart for the gate – and I'm in seventh heaven. I get to read my paper, uninterrupted, and enjoy my gourmet delicacies.

That day was different. I had been given a task – in essence, I was empowered. I headed through security as per usual, but this time, I was a man on a mission. Although the newspaper headlines were beckoning, I walked right past the newsstand. I marched past the men's room. I smelled the heavenly odors wafting from the bustling Starbucks, but I kept on going. I arrived at the departure gate, put the ticket down, and eagerly announced, "Brian Lee reporting, here are your tickets, ma'am!" The departure gate agent replied, "Thank you."

What the hell happened? How did I become a volunteer employee for an airline that I don't really care about? In short, I had been given responsibility. I had been given authority and I had been trusted. I was empowered – paycheck or no paycheck.

That's empowerment defined. I believe that the best way to encapsulate what empowerment means is:

Seeing the best in others, helping them see to it themselves, and holding them accountable for results.

Please understand that if you want to help your staff develop into autonomous, accountable adults who take responsibility for and ownership of their own actions, a great deal of personal change and growth may be needed. I would estimate that eighty-five percent of the people that work for you have self-esteem issues.

How do I know? I suffered from the same problem myself. When I was in high school, I had an inferiority complex. My mother was on welfare and my prospects in life were not very good. And on top of that, I had no second parent – no father figure.

I ran for public office at a very young age because I wanted the whole world to say, "Brian Lee, you are okay; even if you don't have a father, you're okay." (Now, I can say unequivocally that politics is the wrong place to go for approval.) We are all in search of affirmation in our lives so you need to show your staff that you believe they are capable of more than they may currently be giving.

To begin with, you need to believe in them. They need to believe in themselves and their own capabilities. They need to know you have confidence in them.

Another definition of empowerment is "delegating power to satisfy the customer for the customer's convenience, not yours."

Still another definition is "giving responsibility, granting authority and requiring accountability."

I have noticed that, as managers, most of us are pretty good at granting responsibility, but we often don't do a very good job of giving our employees the authority and autonomy necessary to follow through fully on the responsibilities that we have handed to them – yet we still hold them accountable for their results.

Anita Roddick, founder of The Body Shop, has a unique take on empowerment. To her, it means, "each staff member is responsible for creating their organization's culture." I like that. That, to me, is the ideal – an organization in which each employee understands it is part of their job to make sure the culture they work in is a positive, supportive environment.

Assessing Staff Potential

Let's think about the concept of potential and complete a brief exercise. As a basis for comparison, we'll use a scale

of one to ten, with one being low, five being average, and ten being remarkable.

In terms of your staff, subordinates, and coworkers, how much of their potential productivity is being realized on a day-to-day basis?

What would you guess is the average answer I receive after having surveying literally thousands of managers?

It's between a 5 and a 6.

Is there an opportunity here to improve? You bet there is. And the opportunity is not just greater productivity for the good of the organization. The opportunity is to help your staff members move closer to fulfilling their inherent potential – to experience their personal and professional life to its fullest.

Think about the days that have been the most satisfying for you in your life. In most cases, these experiences have occurred when you contributing as much as you possibly could, right?

It is when we are giving, when we are contributing and stretching and slipping beyond our comfort zone to do the very best job we can – that is when we fully utilize our intelligence, our creativity, our knowledge, our wisdom. That is when we are truly experiencing life to its fullest. And when we don't show up fully, when we're only giving a middling '5' or '6' performance – what real and lasting satisfaction can we really hope to achieve?

Now I want to ask you to consider a few more questions.

Do you value your staff members as your greatest asset? Just think about that for a moment. What do you see when you look your employees in the eye? Do you see capable, committed, intelligent individuals who make sound decisions and exercise good judgment both in the workplace and off the clock? Or do you see people who need to be micromanaged and told exactly what to do?

You see, there are two theories of management: Theory X and Theory Y. One theory holds that most employees are motivated and proficient, while the other holds that most employees are incompetent and apathetic.

Which theory is true? In most cases, whichever theory you believe to be true is true.

I was speaking in Sydney, Australia a few years ago, soon after a large prison facility had just opened in the area. I read an interview with the prison superintendent, who stated, "If a prisoner comes in as an idiot, he or she will be treated like one." Now, my question is, do the prisoners really come in as idiots and then get treated like idiots? Or do they come in as human beings, get treated like idiots, and then, thanks to this self-fulfilling prophecy, become idiots?

Except in this case, we are not talking about prisons. We're talking about your organization's personnel. The critical concept I want to convey here is that people will almost always live up – or down, as the case may be – to your expectations.

My mentor, Roy Wilson, had faith in my abilities and believed that there wasn't anything that I could not do. And guess what that made me want to do? To become successful and to always aim high, because he believed in me.

Do you remember someone like that in your life? A special mentor or supporter for whom you wanted more than anything to succeed, just because they were on your side? Perhaps it was a teacher or maybe a grandparent who served as your cheerleader and your champion. No matter who it was who played this role in your life, thinking about this kind of mentoring relationship is a crucial part of understanding how to empower and motivate your employees.

On one occasion, I had a manager say to me, "Well, Brian, I have high expectations of my staff and they always disappoint me." What would it be like working for someone who was always communicating a message of disappointment?

After a while, I'm certain that most people would say, "If you are going to be disappointed, I'm going to give you something to be disappointed about!"

One young man told me that he had worked in a bottle depot and his boss was constantly telling him that he couldn't do his job right. Within a few months, the young man began literally making mistakes on purpose just to prove his boss right.

Sooner or later, even the most positive person is going to give up if they are not receiving positive affirmations combined with positive expectations.

Here's a tip: Take a look at the productivity of your staff and then take a good look in the mirror. Do you think that the poor results you get from your employees have anything to do with your expectations?

My next question is, who can be motivated? Answer? Nobody!

As hard as it may be to believe, and despite the ten million management books that have been written on the subject, I'm here to tell you that you cannot motivate another human being. You might be thinking, wait a minute, wait a minute, I thought this book was supposed to teach me how to motivate. To which I reply: where did you ever get the idea that you can motivate another human being?

Have you ever belonged to a union? If you have, then you might recognize the term "work to rule." Work to rule generally means that employees follow the exact rules to a 'T' – and that little, if anything, is going to get done. At the minimum, it results in a work slowdown.

My question for you is this: can you be forced to work hard if you don't want to? Can you be forced to care if you don't want to? Can you be forced to think if you don't want to? I'm curious to know what you can be forced to do. Show up for work approximately on time, maybe, but that's about it.

Think about it. The fact is, you're going to do what you want to do, and for your reasons, not mine. When you put down this book for the night or sign off from one of my e-seminars, it doesn't really matter what I say beforehand, you're going to do what you want to do.

So what's the answer here? Dr. Madeline Hunter of UCLA said, "You can lead a horse to water, but you can't make it drink. However, you can always salt the oats." So what's your role in creating an environment in which people want to contribute?

Fundamentally, the beliefs, values, and habits, both good and bad, that people have invested a lifetime acquiring are going to come with them, and that is what you get. So what does that say about the importance of choosing new employees with care? Everything!

Since people are going to do what they want to do for their own reasons, not ours, maybe it would be a good idea to try to figure out what their reasons are. In other words, what makes them tick? This segues nicely into our next topic.

What are the three primary human motivators? Well, according to the model proposed by renowned psychologist and motivation expert Abraham Maslow, they are food, clothing, and shelter.

Let's broaden the scope a little bit and discuss a few other motivating factors that often play a role in the workplace.

The first motivating factor is fear. If you don't do it, I won't like you. If you don't do it, I won't love you. If you don't do it, I won't hire you. If you don't do it, I won't give you a raise. I won't love you or care about you. It is also called 'the stick.' If by chance you happen to have children, you may have some first-hand experience with the use of this powerful emotion called "fear."

Does fear work? Yes, it does. For how long? In my experience, not for very long at all.

The next motivator is reward. If you do it, I will like you. If you do it, I will give you a cookie. If you do it, I will care about you. I will protect you. I will promote you. I'll give you a raise. Does reward work? Yes! For how long? Not very long at all. How long did it take you to spend the money your earned from you last raise? What happens when you run out of rewards to dole out? Well, you've got a problem. We call this 'the carrot.'

But I want to suggest to you a concept that I believe is the primary motivator of human behavior. The one that causes people to move mountains, leap over tall buildings, and do incredible, impossible things. I want you to think about those times in your life when you have accomplished achievements that were important to you, when you aspired to an important goal and finally reached it. You did it because of this factor, and it boils down to one simple word: choice.

So what does this insight say about the way we need to manage and communicate with our employees? My conclusion is that if we want staff to own the problem and help devise and implement the solution, then we had better give them the opportunity to make choices, the same way that we ourselves have been given the luxury of choice. That means we may have to spend more time giving them information about the big picture, and above all, explaining the how and the why.

"If you were me, what would you decide?" We have a crisis here. What should we do? "If it were your decision, what would you do?" It means we have to stop talking down to employees as if they were children. We have to talk to them adult to adult. "Here's the situation; what do you think?"

Here's another exercise I would like you to participate in. Jot down what you think really motivates people. Give yourself one minute. I want you to guess what you think are the three chief motivators for frontline employees.

_____

_____

_____

I want to share with you the results of a study that was conducted by Kenneth Kovach at George Mason University. I've seen 20 or more similar surveys, almost all of which substantiate this one.

Managers who were surveyed thought the following items were the most important to their employees: money, job security, and promotion opportunities.

I have a few questions for you. How much direct control or influence do you have over the amount of money that your staff members get paid? Virtually nothing. Who decides that? The employees themselves do, to a large extent, through factors such as education, experience, on-the-job performance, and attitude.

Ultimately, the job market establishes a "market value" for every occupation. If you significantly underpay your staff, your turnover rate will inevitably skyrocket.

If you significantly overpay, you'll eventually become uncompetitive and go broke.

Next on the list is job security. How much control or influence do you have over job security? Who decides that? Again, to a large extent, your staff members do, through factors such as the attitudes and skill sets they bring to their job. While union agreements and policy shifts may create certain demands and exceptions, few organizations today can afford to keep unproductive employees on staff for very long.

Number three is promotional opportunities. Now, this one presents a few interesting challenges. While managers do have some influence and ability to choose or recommend the staff members that are eligible for advancement, in reality,

most managers really do have to promote the best person for the job and that ultimately is a function of each individual's personal initiative.

Next, I want you to take note of the three motivators that the employees who were surveyed said were most important: being appreciated, being an insider, and empathy from the employer.

How much influence do you have over the appreciation you show your staff? A great deal.

How much control or influence do you have over how you communicate with your employees and make them feel like an insider? Virtually total control.

And finally, how much control or influence do you have over the empathy you show your staff members as human beings? Complete control.

Once, a woman who was participating in one of my seminars came up to me during a break and said, "This is all very nice, Brian, but I really deserve to be paid $1000 a month more." I replied, "I'll tell you what, if I was able to get you a $1000 a month raise, would you work any harder?" She replied, "No, but I deserve it."

Now, let's put things in proper perspective: If you were to go to an employee and ask them what it takes to motivate them, what do you think they would say? Of course they are going to say, "Pay me more!" But the key here is, we have to pay people within plus or minus 10% of the going rate in the marketplace. There is no way around paying competitive wages or salaries. It is possible to keep people who could make more money elsewhere, but that usually only happens if the job and work culture is an environment the employee looks forward to going to every day. And so much of that, as we've just learned, has a great deal to do with you and the leadership you provide.

The Six Steps of
Empowering
Leadership

In your role as a leader, there are only two jobs that really matter

> Job #1: **Keep the customers you've got**
> The fact is, the average business looses half its customers every 5 years.

> Job #2: **Keep the good people you've got**
> The cost of replacing a valued employee is likely to be at least 150% of his or her annual compensation.

So to simplify Job #2 (which is what makes Job #1 possible), I will summarize the six steps of an empowering approach to leadership:

1. Choose well.

2. Train well.

3. Give people the tools to do the job.

4. Get out of the way and let people do their job.

5. Be a coach, counselor, champion, resource, mentor, and cheerleader.

6. Recognize, celebrate, and continuously educate your team.

Let's go back now and talk about each of these steps in more detail.

1. Choose well.

Do we really choose well? This is a critical area – we must all work to sharpen our skills and get really good at hiring great people. One great person is worth three average people. Unfortunately, we often spend too little time selecting the right person for the job, then end up spending way too much time fixing the resulting mistakes.

2. Train well.

The key here is to get better at orienting new employees as soon as they start, especially to the policies and procedures of their department or work unit.

3. Give people the tools to the do the job.

There is no shortcut here. Your staff must be well equipped, and comprehensive training should also count as a key tool.

4. Get out of the way and let people do their job.

Instead of trusting the staff, many managers tend to meddle, control, irritate and discourage. It's come to be called the "Dilbert Principle" – you take people who have nothing to contribute to the team and you put them in a place where they will do the least amount of harm: management. Since they don't know what to do, they spend too much of their time tinkering around with dumb ideas.

5. Be a coach, counselor, champion, resource, mentor, and cheerleader.

Coaching is such an important skill. Do you value and appreciate the key elements of effective coaching?

6. Recognize, celebrate, and continuously educate your team.

Instead, we all too often simply ignore our employees. People like being liked and appreciated, and they dislike being disliked – but they loathe being ignored. Most of us simply can't stand it.

In the last two chapters, you have learned that the motivators that really count with your employees are appreciation, being treated as an insider, and managers that display empathy for their employees' problems. All of these factors are completely within your control and influence.

To sum up, I have a few action recommendations for you, and I encourage you to take them back to work with you to try them out right away.

1. To begin with, try to see your staff members as capable, intelligent individuals and communicate positive, supportive expectations that will help them learn, grow, and be empowered.

2. Do whatever it takes to hone your hiring skills and reward the best of the best by utilizing a personnel-selection-and-profiling tool.

3. Whenever possible, initiate procedures to permit a small group of employees to interview, choose and/or make the final hiring/selection recommendations from a shortlist of candidates. You'll find this will result in better personnel choices, and your staff will not only be honored that their input matters, but they will also be more likely to be supportive and helpful in orienting, training, and working to retain this new hire.

4. New hires are at their very best – and are the most enthusiastic that they are ever likely to be – during their first 10 days on the job. Initiate an on-boarding procedure to ensure that your organization offers a top-quality orientation process for new hires, including, at

the very minimum, the use of a positive buddy and/or mentoring system.

5. Above all, treat your staff as adults. Give them the gift of adult responsibility by explaining the "why" and "how" of your decisions whenever you can. If possible, encourage them to participate in decision-making. To do this, it's your job to keep them well informed.

6. To ensure that the pay level your organization offers is appropriate, conduct a semi-annual compensation survey and make sure your mid-range salary is in line with what your competitors are paying.

7. Keep firmly in mind the fact that workers are motivated primarily by appreciation, being treated like an insider, and the display of empathy toward staff.

8. Focus on your two critical jobs as a manager:

   – Job #1 is keeping the good people you've got.

   – Job #2 is keeping the customers you've got.

9. On a continuous basis, ensure that your people have the tools they need to do the job.

10. Master the art of coaching.

Five Employee Attitudes

I have a question for you. Does everyone have the same positive attitude that you do? I don't think so.

Let's take a look at the five types of employee attitudes. These are: Superstars, Winners, Grinners, Whiners, and Slugs. The following sections describe each of these attitude types in more detail.

SUPERSTARS

Superstars comprise about 3% of the work force. They will rise to the top wherever they go.

WINNERS

They're positive. They contribute meaningfully and they want the organization to succeed. They'll come early and leave late. They want to progress. They want to get ahead and above all, they want to make a difference.

"Superstars" 3%

"Winners"
• Desire to contribute
• Progress, get ahead
• Make a difference
20%

"Grinners"
• Just get by / sit on the 'fence'
• Can go either way
• Leadership / coaching vital
50%

Grinners attitude impacted by:
• Peers   • Leadership
• Education • Communication
• Culture   • Engagement

"Whiners"
• Do as little as possible
• Want something for nothing
• Peer presure/culture important
25%

2%

"Slugs" (2% – 10%)
• Counter Productive!

GRINNERS

The vast majority of the working population is sitting on the fence, waiting to be influenced and led. They can go either way. The reason I call them "Grinners" is that they come to my seminars, smile and nod at everything I say, then go back to work and do exactly what they did before.

WHINERS

Whiners make it their mission to do as little as possible. They want something for nothing. They come late and leave early. They can be counted on to use all their sick time, and can

often be heard saying, "That's not my customer; that's not my job." They are often openly hostile to management – and they brag about it in the employee lounge. They will challenge you in front of others.

SLUGS

The fifth and final category is the worst group. We call them Slugs. They make up anywhere between 2%-10% of your work force. They ought not to be working anywhere, but we keep them working because they are a live, warm body. We keep them working because the only way to get rid of them is to document their inappropriate behavior accurately and consistently, which is an awful lot of work and may actually require our performance reviews to be completed on time.

We keep slugs working for us because we do not want to burden the state with additional welfare. We keep them working for us because we don't have the courage to do what is required.

Besides, there's a better way to get rid of slugs. Just transfer them. One manager calls it "pass the trash"; this is an especially popular move when there's an unsuspecting new manager in a neighboring department.

Consider the mind-boggling fact that the bottom two groups even exist and get away with their negative and toxic attitude: what does it say to everyone else? That it's OK. Well, it's not OK. It's especially demoralizing to their co-workers.

Your role is to remove the bottom tier, to legally terminate them and give them the support they need to get on with their lives… some other place, not in your organization.

So what's our goal here? To grow the Grinners into Winners through the process of positive peer influence. We're going to grow them into Winners through your role as a positive empowering manager. We're going to help them evolve into Winners through continuous education. We're going to nudge them into a better attitude with high quality communication

that comes from you and your leadership peers. We're going to grow them into Winners through involvement, by making them part of the solution rather than allowing them to remain part of the problem. And when we make these changes, we are going to permanently change the culture of the workplace.

What's our goal with the Whiners? Get them to shut up and do their jobs! They have to receive a crystal-clear message: that it's no longer OK to be openly negative.

For those of you who are not quite sure how to terminate the slugs, there are entire manuals available that outline best practices in termination. Schedule a sit-down with your organization's Human Resource Manager or a skilled consultant to discuss this topic. He or she will know exactly what to do and how to advise you on these sensitive topics. But ultimately, the unpleasant but often necessary task of termination is your job, not theirs.

My next question is: which one of these attitude profiles fits you?

To summarize, here are three "DO IT" recommendations:

1. Focus on growing your Grinners into Winners.

2. Make sure your Whiners understand that a negative attitude is not acceptable and incorporate this approach into your performance review process.

3. Take steps to remove chronically non-productive staff. In other words, support your Slugs and help them get on with their careers some place other than working for you.

The 12 Imperatives of
Exceptional
Employee Morale

It has been said that leadership is the art of inspiring others to play your game.

I know a wonderful nurse leader at Hoag Hospital who implements all kinds of team-building activities for her staff. Her department has become a cooking club and the staff hosts frequent potluck dinners. They work together and play together… sometimes even playing games during slow periods on the night shift. People do not want to leave her department and there is a waiting list to get in. Her secret? She makes the job fun – and she makes doing so a number-one priority.

The benefits of high employee morale are self-esteem, increased productivity, employee retention, better outcomes, increased patient satisfaction – and a staff comprised of people who really like to come to work.

The barriers to morale are slugs, sick calls, stagnation, constant time crunches, negative leadership, patient complaints, and the department's past history—people tend to remember everything and let long-held grudges inform their current behavior.

I have two questions for you:

1. Are you interested in receiving feedback from your staff about what they like about the leadership you provide them?

Most supervisors and managers usually reply in the affirmative.

2. Would you be interested in receiving feedback about what your staff doesn't like about your leadership?

Interestingly enough, when I pose this question to an audience of managers, almost everyone enthusiastically replies, "Yes!"

When I ask them, "Why?" the usual reply is, "So we can improve and get better!"

So in the spirit of continuous improvement, I challenge you to utilize this Leadership Empowerment Survey twice during the next year.

Let's take a look at the survey form.

Please note the word "confidential" at the top of the page. It's critical that each respondent assured that his or her input will be absolutely confidential; otherwise, all you will get is political posturing.

All that employees will need to do is print the name of the manager/supervisor they report to and date the form.

The instructions then read as follows:

The Semi-Annual Service Excellence Leadership Empowerment Satisfaction Survey

Confidential

To assist your leadership team in its mission of creating a customer-driven culture through people empowerment, we sincerely appreciate your completion of this confidential survey. After you complete the survey, please forward it to the location and deadline noted below. PLEASE DO NOT IDENTIFY YOURSELF IN ANY WAY. Thank you.

Please respond to the following questions using this scale:
5 - Always   4 - Usually   3 - Sometimes   2 - On Occasion   1 - Never

The leader I report to:

1. Respect
   Treats me with courtesy, dignity and respect.

2. Communication
   Encourages open, honest two-way dialogue and actively listens.

3. Alignment/Trust
   Leads by example and practices what they preach (i.e., is customer-driven, pursues continuous improvement).

4. Recognition/ Feedback
   Values my contribution and recognizes service "above and beyond."

5. Empowerment
   Involves, consults with and empowers me. (Empowerment: "gives me sufficient authority to satisfy my customers' needs in a timely manner").

6. Insider/ Information
   Keeps me well-informed about changes so that I truly feel like a knowledgeable "insider."

7. Coach/ Champion
   Is an effective coach, who adapts his or her leadership style to my unique needs and helps me see the "big picture."

8. Training/ Tools
   Ensures that I have the tools and training to do my job in a timely and effective way.

9. Leadership
   OVERALL, I rate my satisfaction with the leadership provided as:

10. Friendship/ Empathy
    I really look forward to coming to work.   ☐ Yes *or* ☐ No

The survey form concludes by inviting the respondent to "Please insert into a 'confidential' envelope and return it to" a predetermined location on or before a specified deadline.

During the past decade, our clients have received and completed literally hundreds of thousands of these survey forms, and here's what we've learned from the results.

The key here is to look at the overall average from question #9, and /or the combined average of all 9 questions. Total the score of each survey and then divide that number by 9 to get your average score.

- **A 4.5 to 5 is excellent.** Keep up the great work and keep sharpening that saw.

- **A 4 to 4.5 is good.** I recommend picking the one or two questions you scored the lowest on and giving them extra attention.

- **A 3.5 to 4 is borderline;** however, you probably received a very low score in one or two questions, which means that those areas will need your priority attention.

- **A 3 to 3.5 is poor,** and a 3.0 or less should set off alarm bells that whatever you're doing is not working very well, or is not working at all.

If your average is a 3.5 or below, I strongly recommend you make every effort to put to work the concepts you have learned from this book. I also recommend that you consider taking one or more of these immediate action steps.

1. Secure the services of a personal coach.

2. Invite a seasoned manager who received a 4.5 to 5 score to become your mentor.

In addition to obtaining a personal coach or mentor, an immediate meeting with your supervisor or Human Resource Manager is recommended.

To assist you in leveraging the full value of this survey, I'd like to share with you a few more tips on how to administer, summarize, and utilize the information provided.

1. I recommend that the survey be given to all staff to rate all of their individual managers at the same time. If this is not possible, then please do proceed to distribute the survey in your unit or department.

2. Pre-arrange for someone to collate, organize, and oversee the returned forms. This should be someone within your organization who is perceived to be objective and independent. A second alternative is to get someone from outside your organization to do it.

3. Give a copy of the survey, along with a pre-addressed envelope, to every direct report in your unit or department. Please note that you must have a minimum of five participants, or respondents may have doubts about the confidentiality of their replies and the whole process will have negligible value.

If you have fewer than five direct reports, then I suggest you ask other individuals, with whom you work closely, to evaluate you. That means some people may complete more than one form.

4. When you give out the surveys, ask your employees to return them to you, to an alternate person, or to a specified location in a sealed envelope before the end of the day. The survey only takes a minute or two to complete.

5. Remind survey participants, as is stated on the form, not to identify themselves in any way.

6. If you are not happy with the responses you receive, I caution you not to reflect that negatively to your employees in any way or you'll undermine the future use of this process.

7. In the past, I've observed that the managers who benefit most from the survey process are those who initiate an open dialogue with their staff about the responses that provoked the lowest scores and make every effort not to be defensive.

8. As a guideline, I recommend that this survey be done twice a year.

9. Your goal should be to improve your overall average by one rating level every six months. If you're already in the 4.5 – 5 "A" category, then any improvement would be positive.

In closing, I trust you will find the Empowerment Survey a useful tool for personal and professional growth. As leadership expert Kenneth Blanchard once said, "Feedback is the breakfast of champions." If you do accept my challenge and choose to use this survey, I predict you'll find it to be a valuable and instructive new tool.

Respect

"No leader can be too far ahead of his followers."

— Eleanor Roosevelt

Common courtesy shouldn't be so uncommon that it is mistaken for genius. Respect is independent of how hard you ask someone to work. Respect is knowing what's important to people. It's an attitude that can't be taught.

When anyone came to see my mentor, Roy Wilson, they would also see his assistant sitting at her desk. Whenever a guest would leave his office, Roy would introduce him or her to his assistant. If the visitor already knew who his assistant was, why bother? Because it was a show of respect. If you take a visitor on a tour of your department, you should also make every effort to say something positive about each individual who works there. Acts of respect convey the unspoken message, "I value you as a person."

Here is a list of some of my favorite ways to show respect:

1. Use each employee's name.

2. Make each employee feel like an insider by keeping them well informed. Above all, avoid the "mushroom technique" – don't keep them in the dark and cover them with manure.

3. If someone calls in sick, give him or her a call to sincerely and empathetically see how he or she is feeling.

4. Recognize and understand the workload. Personally lend a helping hand if employees appear to be overwhelmed.

5. Make and maintain eye contact.

6. Ask for employees' input with the decision-making process.

7. Remember employees' birthdays.

8. Recognize the anniversary of the day each employee began working for you.

9. If an employee is a member of a minority group that celebrates special cultural days or festivals, make sure you let them know that you are aware of them. For example, members of the Greek Orthodox faith don't celebrate birthdays, they celebrate "name days." Every saint's name has a feast day associated with it, and if it happens to be yours, it's a special day, not unlike a birthday. For Muslims, Christmas is not a major holiday, but Ramadan is. It is amazing how even a little bit of acknowledgement goes a long way.

10. Organizing staff socials for appropriate occasions are very important and a lot of fun.

11. Acknowledge their children's achievements.

12. Say good night at the end of a shift and say "thank you" when they are done.

13. Be considerate of others. For example, if you're going for coffee, offer to bring back refreshments for others on your staff. You'll never know when this kindness might pay an extra dividend. I arrived at the airport one day and checked in early. I came to the departure gate, way ahead of schedule, so I decided to go for a Starbucks coffee. When I go to get a Starbucks for myself, I often feel guilty if I don't offer to get one for someone else, so I asked a lonely-looking ticket agent at the departure gate if she was interested. She replied "Yes" with a surprised smile. I proceeded to procure two lattés and gave one to her. Fifteen minutes later, while I was enjoying my latté and waiting to board the airplane, she came up to me and asked, "You're Mr. Lee, aren't you?" I replied, "Yes." She must have picked up my name when she issued me my boarding pass. "I'd like you to have this." She presented me with a ticket, upgrading me to business class! While my gesture had no strings attached, I must admit, her response was a nice dividend. The key here is to offer to help others unconditionally.

14. Show little signs of respect. For example, if you know you can't give your employees a raise, give them a meaningful new job title (although most people, including myself, would much rather have the raise!).

Communication

"To prevent your people's mood from turning blue, give them a chance to let you know what they do."

– Brian Lee CSP

One very powerful way to create positive attitudes and lead by example is to utilize the leadership empowerment tool I call "MBWA."

MBWA stands for "Management by Wandering Around."

MBWA is not walking around, slapping people on the back and saying, "Hey, how you doing? Looking good! How's it hangin', brother!" That would be more accurately described as "BS."

MBWA means taking the time to get to know each individual staff member, one person at a time. It's taking the time to say hello, knowing their name, and knowing the names of their children, grandchildren, or special pets. It's taking the time to know whether he or she is a star ballroom dancer, or a beach volleyball fanatic, or a mountain climber. It's about taking the time to get to know what makes them tick and what is important to them.

MBWA does not mean going around intimidating your staff and issuing threatening statements like, "What in the world is going on here?" I worked with one senior manager whose potential presence sent staff heading for the hills, because he made a point of noticing what was going wrong and finding fault. MBWA is more like asking, "What is happening around here that you'd like me to know about so I can help you?" MBWA does not mean you interrupt a staff member who's really busy or is already working with a customer so they can talk to you for your convenience. MBWA means being sensitive to their needs.

I had one hospital president say to me, "But I have 1000 employees! How do I MBWA with 1000 employees?" My answer to him is the same as my advice for you: budget 15% of your time for visiting with your staff without a specific agenda. So this hospital president proceeded to invest an hour a day to MBWA.

Now do you think we're talking about an hour per person or a minute per person? An average of one minute works just fine. This translates into interacting with 50-60 people per hour, multiplied by 20 days a month – that's 1000 people a month.

What are the benefits of MBWA? Here are 15 worth considering:

1. It's a chance for your people to get to know you. How else will they get to know you other than by talking with you? And when they do start to get to know you, that's when trust can begin to develop.

2. It facilitates communication. You can identify small problems before they become big problems.

3. It's an opportunity to catch people doing things right, or at least approximately right. You then have an opportunity to spontaneously let employees know that they're on the right track – especially in front of their peers.

4. Rumor control. You can nip false rumors or destructive gossip in the bud (or you can start a positive rumor that's actually true!).

5. It makes you accessible to your people – for their convenience not yours.

6. It develops team spirit.

7. It shows you care.

8. It sets an example for aspiring managers.

9. It may eventually help improve internal processes.

10. It gives you an opportunity to see and recognize your staff's potential.

11. It makes people feel important. Do you have any doubt in your mind that whatever you do or say (or don't do or say) gets repeated to your staff's family and friends that night at supper time?

12. It decreases the "intimidation factor." As much as we would like to think that we are not intimidating, any manager, any boss can be seen as being intimidating because you have the power. Most staff members know that their boss can help to make or break their careers, or could even decide to fire them. They may see you for more than you really are. Our job is to put them at ease.

13. You can pick up great new ideas.

14. It's an opportunity to do an informed assessment of your team's skills.

15. And, yes, it's good exercise!

Here are a few more thoughts about MBWA. Baseball great Casey Stengel once said, "the secret to managing is to keep the guys who hate you away from the guys who are undecided."

In addition to MBWA, you may want to promote an "open-door policy," which encourages staff to enter your office at any time, as long as the door is open and you're not already

busy on the phone. Just make sure that when they do come to see you, you stop working and give them your undivided attention.

When I was a member of the city council in my community, I practiced a reverse form of MBWA. I wanted City Hall to understand the problems facing the area, so I rented a double bus and then took the city council members and the press on a three-hour tour of the neighborhoods in my district. We visited the Greek Church and the senior citizens' drop-in center; we toured neighborhoods where the roads were full of potholes. I reaped dividends from that MBWA visit for years.

It can be very helpful to visit with your staff at their convenience, where they work, not necessarily in your office, especially if you want to avoid the pitfalls illustrated in one of my favorite cartoons, where an embarrassed manager is seen saying to the employee seated in front of him: "Let me start off by saying this; I called you in here by mistake and I now want you to leave!"

The farther from the front line you get, the less opportunity you have to build trust.

But before you set off on your next MBWA expedition, it's important to think a bit about communication styles. In most workplace environments, there are three types of communicators:

The Egotist: always talks about themselves

The Bore: always talks about someone else

The Brilliant Conversationalist: talks to you about you

You need to be accountable for 100 percent of your communication. You have to make sure that your staff hears you. It they get that perplexed look on their face, you know you have to clarify: "Is there anything else you need to ask me about what I just said?"

Management tends to forget what it's like on the front line. Any slight, however unintended, will become the subject of discussion at a subordinate's dinner table that night.

If an employee comes to see you when you're really tied up with something, you might say, "I'm a bit busy right now. When can I come to see you?" Effective managers make every individual feel like they are one of the most important people in the world. Everyone wants to be listened to.

I've prepared an outline for you for an exercise that I call "one hour of active listening." By way of background, one of my leadership empowerment students had just been promoted to manager in a hospital admissions department with 40 employees. There were bad vibes galore and department morale was terrible. Even worse, she had no previous supervisory or managerial experience. She followed the advice I'm about to give to you and enthusiastically reported that she was able to establish a solid rapport with her new staff.

I recommend this practice to new managers, and I recommend this if you have been around for a while. If you are not as close or tight with your people as you'd like to be, here is what you need to do.

1. Establish rapport with a little small talk to open up communication.

2. Get to know them by saying things like, "Tell me about your family." or "What are your interests, your challenges, and your successes?" Then really listen. If you sincerely take an interest in another person, within five minutes, they'll tell you the most important things going on in their life.

3. Ask about their training and education needs. What's important to them right now in terms of training and continuing education? I wish my past bosses had taken the time to ask me this question and stimulate my thinking in that direction.

4. Ask them what they want to be doing one, three, or five years from now? Be an "active listener" and offer encouragement. This would be a perfect time to be making notes.

Now, many of them are going to say, "I have no idea, but I sure would like to think about it." This is where you can play a useful role in helping to facilitate their career goals. Some may even say, "I want to have your job in three years."

This is good to know, because to be a successful leader, you eventually want people to replace you in your job – don't you?

On the other hand, if an employee tells you that he or she wants to stay at the same job forever, that's a different story – and it's perfectly okay.

5. This is the key question: "If you were me, what three changes would you make to improve customer satisfaction, communication, team morale, and employee retention?"

When they respond, ask questions, be encouraging and avoid being defensive. Draw out more comments and make notes.

By the time you are done with this dialogue, you will know exactly what needs to be done. Just add your own wisdom, your own vision, and your own common sense. You will have an absolute sense of what you need to do. You'll know who the winners are – and you'll know who the BSers are. That is called leadership.

6. Your final question is: "Is there anything else you want me to know?" I call this the "parking lot question." Have you ever noticed when you have been talking or visiting with someone for a lengthy period of time, just as you're about to leave each other in the parking lot and say goodbye, they save the most important information for the very last moment? "By the way, I quit." Or when you're just about to leave home in the morning to go

to work and your spouse says, "By the way, I want a divorce." It's like we save things up because we don't quite know when or how to share the really difficult information, so we say to ourselves, "Well, I guess this conversation is almost over; I better say it right now." Before you conclude your meeting, make a follow-up appointment so you can conduct a "peer audit," the details of which I am going to share with you in a subsequent section.

In closing, I promise you extraordinary dividends if you schedule a series of these one-hour, one-on-one meetings. You are going to find this an invaluable opportunity to get in touch and get in sync with your employees.

To sum up, let's review my DO IT recommendations for you, so that you can give priority attention to giving your staff the inspired leadership that they so richly deserve.

1. For the next month, invest a minimum of 15% of your time "managing by wandering around."

2. Within the next 60 days, invest a minimum of half hour to one hour in "active listening" meetings with everybody who reports directly to you. Take immediate action on the good ideas and insights that you're able to glean from this process.

Outline - Active Listening

Name:_____

Date: _____   Time: _____

1. Establish rapport; i.e. small talk
2. Get to know them, i.e.
    - ☐ family   ☐ challenges
    - ☐ interests   ☐ successes
3. What do you want to be doing 1, 3, 5 years from now?

    What can I do to help?
4. If you were me, what three changes would you make to improve customer satisfaction, communication, team morale and peer retention?
5. What are your training/education needs?
6. Anything else you want me to know?

P.S. Don't forget to ask:

1. If you were going to leave… What would you name as your number one pet peeve?
2. Do you reserve the right to change your mind?
3. What would cause you to change your mind?

Alignment and Trust

"Leadership is the process of creating trust,
so that change can occur."

– Bob Hamaberg, Standard Aero

By utilizing the skills and strategic processes described in this book, you can build a solid foundation of trust with your staff, and in so doing, you can create a reservoir of good will that will enable you to bring about the change necessary to create a customer- and employee-driven culture.

To better understand this issue, let's examine the four pillars of trust:

- **Acceptance**. We trust people who accept us unconditionally. That's why kids love their grandparents.

- **Reliability**. It's the little things that undermine our credibility. Do what you say you're going to do. I once read a very popular book in which the main character attended dog races in Calgary, Alberta. Well, I live in Calgary and we don't have dog races. So much for the reliability of all the other information in the book.

- **Openness.** Honesty can't flourish in a secretive environment. Pursuing a policy of transparency is a major part of building trust.

- **Congruence**. One's professed beliefs and actions should match. For instance, if I tell you I respect you, but then fail to consult with you before changing an important appointment, how does that make you feel?

If you're a senior manager, try taking a sabbatical from your current role to spend some time working in a front-line position. Instead of hiring someone else to replace absent staff, managers should work the vacant shift themselves. This will create a tremendous bond and sense of connection. A personal benefit will be the experience of humility and a greater appreciation for what your front-line staff does. Sometimes we can forget what it's like in the trenches.

I recall a time when I was working as the vice president and general manager of a retail furniture store. I was fed up with receiving so many customer complaints about furniture and appliances deliveries being damaged. Could our trucks deliver anything without the products being broken, scratched, or dented? I was whining about the problem at the warehouse one day and a supervisor said to me, "If you think you can do any better, why don't you come out and show us how?" I said, "Fine, I will." Three weeks later, I spent my entire day on a truck, delivering furniture as an "assistant driver." My less sophisticated title was "swamper."

Well, giving them advance notice turned out to be a big mistake. They took all the day's most challenging deliveries – mega refrigerators, formal dining tables, oversized sofas, etc. – and put them on my route. I learned a valuable lesson that day: I learned that furniture and appliances tend to get damaged when they're handled. They're put on trucks and taken off trucks, maneuvered onto elevators, around tight comers, and through narrow doorways. Even when the greatest care is taken, they can get scratched and damaged.

I went out for a few beers afterwards with the other drivers. The very next day, I made changes in a number of store policies as a result of my experience. What do think my "front-line sabbatical" did for my credibility in the store and the sense of trust I shared with my staff?

By the way, I was tipped one dollar. I posted it and framed it. The inscription I wrote on the bill read, "On the occasion of delivering a Zenith stereo with Tom Parish, driver, truck number 1B, Brian Lee, Swamper."

When you take a "front-line sabbatical," what kind of feedback do you think you'll get from your peers? I'll bet they will appreciate your effort.

This kind of effort not only adds credibility; it also builds trust. The message you'll be sending is, "What you do is important." I've heard many, many managers tell me what a valuable wake-up call this experience proved to be.

Brian Lee CSP – **Keep Your Nurses & Healthcare Professionals for Life**™

Recognition and Feedback

"What gets recognized and rewarded gets repeated."
– *Michael LeBoeuf*

Would you take the next minute or so to imagine the last time you received positive recognition from your boss (or peers)? Specifically, I want you to think about what you did to receive the acknowledgment.

How were you recognized and how did it make you feel? Did you notice how awkward you felt about being acknowledged? Why do you think that is? It's because we don't get it very often. Most of us have little or no experience being acknowledged for efforts. When it does happen, we often don't know how to react, because it happens so rarely.

 A doctor attending one of my seminars told me, "Recognition is like spraying perfume. You can't give it out without getting some back." When you give recognition, you can't help but feel a little bit better because you get out of your own way. For another human being, it's the highest form of a relationship.

There was a cartoonist by the name of Webster who would send telegrams to relatives and friends or business associates that said, "Congratulations." It didn't say why or how, nor did

it explain anything or go into detail. There was just one word: "Congratulations." People wrote and phoned him back to ask, "How did you find out?" Well, Webster didn't know anything. He just knew that every day, most people do things above and beyond the call of duty for which they never get acknowledged or recognized.

Michael Leboeuf said, "Things that get recognized and rewarded get repeated." Recognize good behavior and it will get repeated. Recognize bad behavior and it will get repeated. Can anyone with children relate to that? If you don't recognize behavior, don't expect much.

Ken Blanchard, the author of One-Minute Manager, said, "Catch people in the act of doing things approximately right as often as possible." Don't wait until they do it perfectly or the exact same way that you do it, because you may have to wait a very long time.

Let's take a look at this list of reasons why recognition so important.

- It makes you feel valued.
- It motivates by setting an example. Employees think: if I get that after I do that, then I'm going to do that.
- It reinforces the behaviors you want to promote and encourage.
- It has a domino effect; it's contagious.
- It lowers anxiety, especially for the new employees who need to be validated for doing the right thing.
- It's oxygen for the soul. It shows that you are noticed.
- It contributes to the self-esteem of the receiver.
- It feels good when you do it.
- It contributes to loyalty and enhances team-building. If you want to build a team, acknowledge people for their team contributions.

- It gives the receiver the feeling that they belong to part of the "inner circle."

- It increases productivity.

- It shows respect, and helps employees gain respect from their peers.

- It inspires loyalty.

- It makes it easier to handle constructive criticism.

- It encourages learning.

- It enhances job satisfaction.

- It can make your day!

How can you reward people when you can't give them a raise? What are the things you can do that are important but don't really cost a lot, if anything at all?

Here are some cool ways we can reward people without spending heaps of cash:

- Say "thank you."

- Offer public recognition in front of others.

- Throw a party and supply food. Armies march better when they're fed, you know.

- Provide schedule choice and offer flextime. Give your people work options whenever you can – why not?

- How about offering a day off with pay?

- Provide a special parking space to top performers.

- Dole out handwritten thank-you notes.

- How about an employee of the month program for your department or the entire organization?

- Have annual service awards where you recognize people for something other than longevity (I think this point is very important).

- Put their name in the local newspaper for excellent service.

- Present them with a special certificate. When I was a member of the Alberta Legislature, which is similar to a U.S. State Senator, the name of my constituency was "Calgary Buffalo." I used to present people with a certificate called "The Loyal Order of the Calgary Buffalo Chip." I was Chief Buffalo Chip Lee. Do you know what a buffalo chip is? Let's just say it's a hardened form of buffalo manure. We'd put it in a nice frame and affix a gold seal and people loved getting it. Any kind of certificate goes a long way.

Here's another great example of the price of a simple, yet effective recognition program.

The great management guru, Tom Peters, did a program for the Oregon Forest Service, where he told a story about the "GREU" award. ('Greu' is the last name of the guy who thought up this award idea.) It seems they hold a monthly meeting where anyone can get up and present the GREU Award certificate to another employee for service above and beyond. The catch is, you only get one certificate a year to give out – so if you receive one, it is a great honor.

- Send out a press release whenever a staff member earns a designation or receives recognition through their professional association. When I became a Certified Speaking Professional, the granting organization published an article about the license in the local newspaper, Imagine. Being a former politician, it was the first time anyone had anything good to say about me in the local newspaper.

- Take them out for lunch, your treat!

- Send them to a course or workshop.

- Bring them a coffee or muffin.

- Ask them to tell the story about an accomplishment of theirs in front of others, then praise them for it.

- Give them an even more challenging assignment. How would that motivate? Because it's a very effective way to say: I value you. It also sets a positive expectation for the future.

- Create a "Hall of Fame" for excellence in on-the-job performance and appoint them to it.

- Present them with a recognition or service pin for going above and beyond in the course of serving a customer.

- The ultimate recognition may be to promote them to a new position.

On a related note, let's take this opportunity to review motivation psychologist B.F. Skinner's four factors of recognition success:

1. Recognition **should be specific**. For example, the way you handled that difficult customer was marvelous. Way to go!

2. Recognition, to be effective, **should be immediate**. Back in school, my classmates and I hated it when teachers took a long time to mark our papers or post our grades.

3. Recognition **should be geared to the individual**. Years ago, I had one employee for whom just showing up to work on time was a big deal, so I met him on his terms and offered positive feedback for even the smallest signs of progress. (Incidentally, I had another employee who could fix a photocopier with nothing but a coat hanger and a toothbrush, but that's another story entirely.)

4. Recognition **should be spontaneous**. We all love spontaneous recognition, don't we?

Recognition should be specific, immediate, geared to the individual, and spontaneous.

I recall one occasion when, as an aspiring furniture executive, I organized the store's first "midnight madness" sale. I spent months planning it.

About a week before the sale, the storeowner and I went to a tailor together and I bought 5 suits, jackets, etc., but later, I got so busy with the sale that I had no time to pick up my new suits. I virtually lived in the store for 48 hours during the sale. It was an incredible event. It was the first time we ever sold a quarter million dollars worth of merchandise in one day.

The following Monday, the president of the company walked into my office with all my suits, and said, "You did a good job. Here are your suits. They're all paid for."

Unfortunately, whenever we were at social functions and I was wearing one of those suits, he'd tell anyone who would listen, "See that suit? I paid for it." So my challenge to you is to upgrade your recognition program and breathe some life into it with your enthusiastic leadership.

If you're looking for more ways to reward employees, there is a book that is an excellent source of recognition ideas called 1001 Ways to Reward Employees, by Bob Nelson.

If we are going to recognize people for exceptional service above and beyond the call of duty, should we do it with trinkets and things they don't want and will never use, such as baseball caps they won't wear or t-shirts they don't like? Or should we recognize them in ways that have meaning and significance and are important to them?

One of my seminar graduates told me a story about how when she started a new job in a hospital's public relations department, her manager had asked her to write out a list of cool "little things" that she liked. As it turned out, one of the "little things" she really liked was jellybeans.

A few months later, she stayed at work until very late at night to complete a project on an impossible deadline. The next morning, she discovered a bag of jellybeans on her desk with a

little thank-you note attached, acknowledging her exceptional work.

The idea that I want to plant in you is, when you celebrate and acknowledge your employees, celebrate and acknowledge them with things that are important to them. If they bowl, get them bowling ball polish, or shoe odor eaters, or a lane pass.

Give them something that is important to them to let them know you value and appreciate them, something they can enjoy that tells them you are thinking about them. We need to acknowledge people in ways that are meaningful and important to them, not in ways that are meaningful to us.

Here's a simple idea that really works. Have a stack of small cards printed up with the inscription, "Caught in the Spirit of Excellence." When an employee wants to acknowledge a co-worker or subordinate who they witness going above and beyond the call of duty or embodying the spirit of excellence, have them hand out the card. Then, you can work out a reward system for treats the cards can be exchanged for, including coffees, ice cream, paid time off, or other privileges.

To wrap up this discussion we've just had about recognition, I want you to focus on getting rid of the old-school, outdated, top-down style of management and the often-belittling attitude towards employees that it can entail. This style of management was best depicted in a cartoon that showed an employee groveling in front of his boss with the caption, "Sir, I would just like to say thanks for not permanently damaging any vital organs when you kicked me around in front of the other employees yesterday. Is there anything I can ever do to repay you?"

I'm providing you with a little tool I think you'll find pretty cool. It's called "My LIST." which stands for 'List of an Individual's Special Things.' Hand this out to your employees, have them fill it out and return it to you, and you'll be able to gather an instant resource reference for developing meaningful, cost-effective employee rewards.

My "LIST"

(List of an Individual's Special Things)

Date: _____ To: _____

From: _____

To help me get to know you better, please write out a list of your favorite things, so I can know what makes you "tick"! Thank you!

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

To sum up, let's review my "DO IT" action recommendations, which I encourage you to put to work right away.

1. Catch your employees in the act of doing things right – or at least approximately right – as often as possible. Be sure to model the behaviors that you want to see in others.

2. Constantly utilize and practice your favorite "little signs of respect" to reward and acknowledge your employees' contributions.

3. Upgrade, enhance, and inject more enthusiasm into your current employee recognition program.

4. If you do not have an employee recognition and rewards program, appoint a team of front-line staff to develop one. Give them a budget and challenge them to run it for the first year.

5. A good way to maintain a high level of interest in employee recognition process is to rotate membership in your recognition and rewards team by appointing new recipients (such as the employees of the month or year).

6. Seek nominations for staff recognition from customers, peers and managers. How about giving some sort of acknowledgement to a co-worker who nominates their peer as an incentive for others to do likewise?

7. When you do acknowledge your staff, be sure to utilize Skinner's four factors of motivation success to make the most of the opportunity. Remember, recognition should be specific, immediate, geared to the individual and spontaneous

8. Distribute a copy of "My LIST." form to every direct report. Collect the completed forms – and make use of them!

| Brian Lee CSP – **Keep Your Nurses & Healthcare Professionals for Life™**

Empowerment

*"Until your Front Line owns your customer service problems,
you'll never solve your customer service problems."*

— Brian Lee CSP

I was touring St. Mary Medical Center two years after we had begun a Service Excellence Initiative at the facility. Among many other initiatives, we helped to establish a "Y.E.S. Fund"— Y.E.S. stands for "Yes to Excellent Service." In other units or hospitals, this fund has different names, such as "the Guardian Angel Fund" or the "S.O.S. Fund." Every employee is empowered to spend up to $250 from this fund to solve or prevent a complaint or to show human compassion in an interaction with a customer.

While I was taking the tour, I noticed a picture of a woman, Gertrude, hanging on the wall in the Step Down Unit. I asked the nurse manager, "What's this all about?" She explained that Gertrude had been a patient at St. Mary for over a year, and within the past six months, even though she had family, nobody had come to visit her. When Gertrude's birthday came around, the staff decided on their own to throw a party for her. They bought her a blouse and a birthday cake, and surprised her in the activity room with a teddy bear they named "Fuzzy." A few days later, Gertrude wrote the nurses a note to say thank

you, adding that "it was the best birthday party" she had ever had in her life. How do you think those nurses felt? What a wonderful example of empowered employees taking full advantage of the resources available to them.

Ralph Waldo Emerson said, "Be an opener of doors, for such as come after thee, and do not try to make the universe a blind alley."

In other words, your role as a leader is to grow your people, to encourage them, and "open that door" for them. Now, the building-block principle I would like to recommend is as follows: to "make yourself obsolete by empowering people to replace you."

Many years ago, as I have mentioned, I was active in politics, first as a campaign organizer, then as a candidate for public office myself. I recall that we'd start off on day one with nobody. Then, by election night, we might have had 500 or 600 people volunteering. My goal was always to be so well organized that by election day, there was nothing left for me to do except visit polling stations and pray. I remember being told on one election day to "get out of here, there is nothing here for you to do." My objective was to make myself obsolete so I had the freedom of time to prepare my two speeches for election night – one for winning, one for losing. The sad part about this story was that at the end of election day, when our organization was functioning at its absolute peak, we would shut everything down until the next election.

The cool thing for you is that when your team is empowered and organized, you don't have to shut your organization down – you'll just keep getting better, and better, and better, and better!

It seems to me that what we should do is delegate the things we don't personally need to do to people who are better able to do them, so we can focus on the things we really need to do, such as providing inspiring and empowering leadership.

Zig Ziglar, the Texas motivator and speaker, once said, "The fastest way to get what you want is to help others get what they want." That is exactly what I mean about being a cheerleader for your staff members. Now, some of your employees are happy where they are, and actually like doing what they're doing. Thank goodness for that, and good luck to them, because we're all looking for that place where we can be happy and satisfied and enjoy what we do. But if you want your employees to be a champion for what it is that you want to do, then you must first be a champion for what they want to be.

What I have noticed is, every once in a while, you are going to be lucky enough to recruit a superstar. They are going to progress up the ranks very quickly, and your role is to keep encouraging, coaching, and mentoring them to open that door of opportunity as wide as you possibly can. (The wider you open the door of opportunity for your superstars, the less likely they are going to be to want to leave someone who is as supportive as you.)

Become a champion. Be an encourager, a cheerleader. My question for you is, do your employees see you that way, or do they see you as an old-style "boss?" Do they see you as someone who doesn't really care? Perceived indifference on your part can totally undermine any potential for employee loyalty.

Let's take a look now at the keys to employee empowerment.

1. Help facilitate your employees' personal and professional goals. Do whatever you can to encourage your people to set goals and reach for their potential.

2. Replace rules with judgment. I believe this is the key because what we are doing is giving people "the gift of adulthood."

This principle was best illustrated to me when I was speaking to a group of credit union managers in Michigan. I was

training them on the subject of empowerment and asked the audience, "Do you do the same thing at your credit union as they do at my bank?" They said, "What's that?" I continued, "Even though I have been a customer for five years, and the teller serving me has worked there for ten years, if I want to cash a large check, the teller has to go to the accountant to get approval." And they said, "Of course we do." I said "Why?" They said, "Control." Where's the control? Have you observed a teller take a check to an accountant? They go over to give them the check then what does the accountant do? They sign it. In most cases they don't even look at it or you.

My twin brother Bruce was an accountant at a bank and I always kept my bank account at the branch where he worked. I also noticed that my bank balance fluctuated up and down depending on what time of the month it was and how broke Bruce was. Coincidence?

Anyway, I asked Bruce "What did you do when you were presented with checks for approval?" He said, "I looked at the customer to see if they were a crook." I said, "Did you ever see a crook?" He said, "I never saw a crook."

Let's imagine that you and I are working together in the same bank, that I am your manager. I'm now going to empower you. Presto: you're now empowered. You can now cash any check that you want without coming to me for pre-approval. However, in order for this empowerment to be effective and work, there must be three T's in place. What do you think those three T's are?

The first T is trust. The question is: do you wait for someone to prove themselves to be trustworthy, or do you begin by trusting them? Now explain this to me, why would an employer give someone keys to the place plus security access, yet not trust them? Help me out with that one. Why would you allow untrustworthy people to keep working for you?

What's the second T? Take a guess. It's training. What does the bank teller need to know about how to approve a check? Everything the accountant knows? Rule #1 of empowerment is that you do not empower someone who knows less than you do. You empower someone that knows more than you do. So make sure that they're trained and knowledgeable.

The third T is the most interesting one, and the toughest one – it's Transition. Do you think there are people who don't want to be empowered? Are there people who are not ready to be empowered? Are there people working for you, including yourself, who have had no experience with this thing called empowerment? The fact is, few business, government, healthcare, or non-profit organizations have had much success in this brand new field of human resource development.

Yes, there are people out there whose only desire is to start work promptly at 9, leave as soon as the clock strikes 5, do their job adequately, and collect a regular paycheck. So what do you do with them? We coach them to make the transition to empowerment.

There was an article in Harvard Business Review a few years ago that addressed this very subject. Whenever an employee has a problem, the author opined, it's as if they have a "monkey on their back." When you take on your employees' problems rather than empowering them to solve them on their own, you effectively transfer their monkey to your back. Instead of being an inspiring, empowering leader, you become a zookeeper. No wonder nobody wants to go into management for fifty cents an hour more than staff pay!

So what could you say to your staff when they come to you with their problems? How about: "What would you do?" And they say, "Well, I don't know." This is the time that I want you to repeat the eight magic words of employee empowerment. Here they are: "If you did know, what would it be?"

Fifty percent of the time you'll get an answer that contains a positive practical solution. It's incredible; it's like magic. The key here is to ask sincerely and do it with a straight face. Half the time you won't get an answer at all, so simply repeat the magic question a second time.

Sometimes at that point, the employee will still persist in saying, "Well, I don't know." But half the time you will get an answer. By now, you're up to a 75% success rate. For those who still haven't given you a potential solution, look them in the eye and say: "Well, give me your best guess." "Well, I can't guess." Keep up the friendly encouragement: "Oh, come on, you can guess!" They may tell you: "Look, that's what you're getting the big bucks for!"

Let me ask you a question: if someone, after three attempts to solicit any kind of idea, is not even willing to guess, what are they telling you about their attitude? It's not very positive, that's for sure. It may not be fixable, but hang in there – because now I have another question for you. Do people generally know what they should do in a situation when they come to you for approval, yes or no? Usually, the answer is yes. So why are they coming to you for approval?

Here are four key reasons why staff may ask you to make a decision to help solve their problems.

1. Because you never delegated to them the authority to decide on their own.

2. To show you that they are doing it.

3. Because they do not want to be held accountable, and now that you are the decision-maker, so you can have the monkey on your back.

4. Because you have not taken them aside and said to them: "You don't need to see me because that is the way we have always done it, or because that is the culture, or because that is procedure, or because that is our policy,

or and because that is the way it was done when you got promoted."

Now after all this, the second time they come to see you and tell you they've got a problem, you should say, "What do you think we should do?" Then the employee will say, "I don't know," and you'll say, "Well, if you did know, what would it be?" And they say, "We're not going to do this again, are we?" And you are going to say, "You bet we are."

And after two or three more rounds of this, what are they going to figure out? That you trust them, that you believe in them, and that you support them, because in reality, they probably know more about the problem than you do.

They're going to need a little confidence to know that you are sincere about this and that you're not just saying it because you have just taken Brian Lee's seminar and you want to test out a new technique on them. So when should – and when shouldn't – you take the leap to empower your employees?

Here are a few of the most common barriers to employee empowerment.

- "Sacred cows," i.e., something your organization still does just because that is the way it has always been done.

- Structural problems in the organization's culture.

- F.E.A.R. (False Evidence Appearing Real)

- Your staff's natural tendency to want to remain in their comfort zone.

- Inherent resistance to change.

- Lack of training about the concept of empowerment.

- Self-limiting beliefs, on the part of both employees and supervisors.

- Policy that is not clearly understood, or has no current relevance or reason to exist.

So how can you tell when it's time to start dedicating more effort to empowering your employees? Here are a few signs that your organization could benefit from a culture of employee empowerment.

1. It is time to empower when your customers are annoyed by bad service.

2. It is time to empower when your employees are annoyed by dumb situations.

3. It is time to empower when you are consistently rubber-stamping decisions and your people are wearing out the carpet coming back to you again and again while you keep giving the same approval again, and again, and again.

4. It's time to empower when you conduct a process study and identify opportunities to improve efficiency and productivity.

5. It's time to empower when you want to speed up the service cycle.

6. It's time to empower when there is inconsistency in service.

7. It's time to empower when there is a benchmark failure, when productivity is not comparable to similar departments or organizations, or just is not what it should be.

8. It's time to empower when you are downsizing and getting leaner. In fact, this is the perfect time.

9. It's time to empower when whatever you are spending your time doing is often not the best use of your time or talent.

10. It's almost an ideal time to empower when you've deliberately changed someone's job description.

11. It's time to empower when you are promoting.

12. And finally, it's time to empower when in doubt. Even when you're not absolutely certain it's the right move, take a chance. What do you have to lose? How did you become successful at what you do? Through experience? How do you get experience? Simple – you make mistakes and you learn from them. How did you get so wise? How did you get so omnipotent and knowledgeable? My guess is, by making the odd mistake along the way, just like I did.

During the transition to a culture of empowerment, we have to offer a substantial base of support to our staff who are being asked to step up their responsibilities and degree of autonomy.

My recommendation here is to turbo-charge your empowerment strategy by implementing a Service Recovery Policy. This is a policy that is communicated in a crystal-clear manner to staff, that they have the discretion in instances where there has been a service failure to "recover" in the eyes of the customer – to fix the mistake and to solve the problem immediately. If for some reason the employee is unable to take action, but rather, they have learned about it after the fact, they can make it right and make a decision on the spot to redress the situation without having to obtain prior approval or permission from management.

Implementing a Service Recovery Policy is achieved with the staff and management applying their "Service Recovery Skills." To simplify this problem, I developed the concept of "the complaint golden rule": it is "Mess Up, 'Fess Up and Dress Up."

Does everyone make mistakes? Of course we do. Is there ever going to be a time when we don't make mistakes? Nope!

So when there is a service failure, here are a few steps to follow when you or someone else "messes up."

Remember, we're human beings. We're flawed. We all mess up and make mistakes. It's how we handle them that really matters.

1. Take personal ownership for your customer's problem, concern, complaint, or request, even if it should be someone else's responsibility. That does not mean you have to actually do the work yourself, but it does mean that you should stay with the customer until you're satisfied they are going to be looked after. The way I like to describe this is, "Whoever hears the complaint becomes the customer's saint."

2. 'Fess up. It's okay to admit that you made a mistake.

3. Sincerely apologize for the inconvenience.

4. Make sure you don't blame anyone else. Don't point the finger at someone else in your organization. First of all, if you make the pointing motion correctly with one extended finger directed at someone else, you may notice that there are also three fingers pointing right back at you! Secondly, does the customer care who's to blame? Nope. All they care about is getting it fixed as soon as possible.

5. Dress Up. In other words, if an apology or sincere acknowledgement is not enough (and most times it will be), then use your own good judgment and knowledge you've gained through prior discussions with your supervisor to make amends for the inconvenience as quickly as possible.

Mess Up, Fess Up, Dress Up. With a few exceptions, this approach works. Now, if you're a heart surgeon, for example, there might be the odd legal complication as a result of "'fessing up." You may want to check with Risk Management first.

When you mess up and 'fess up, dress up by doing something just a little bit more than the customer expects.

Sometimes the "dress up" process might be just a phone call to ask if everything is okay, or a handwritten note of apology.

All of us can think of something extra, something a bit creative that conveys sincere concern and contrition.

But before this can happen, it's important that you consult with your fellow managers to agree upon the parameters of your organization's own Service Recovery Policy and to make sure everyone knows about it and uses it.

Practical examples of applying a Service Recovery Policy include:

In a restaurant, managers can empower staff to write off an entire meal or give the guest a free dessert or liquor.

In a retail store, managers can empower staff to do alterations at no charge or by personally delivering the product right to the home, discounting the cost or in more serious situations, giving it to the customer at no charge.

Here's a letter I received from a past seminar participant whose company was able to implement the Service Recovery Policy concept successfully.

To: Brian Lee

From: John D. Mandelker, President

I thought you might want to know how we are progressing as a follow-up to your customer satisfaction training sessions here several months ago.

After your seminar, Streetside Records used and expanded your "License to Please" concepts. We wrote and implemented several customer service courses for our sales staff and managers using the ideas you taught us.

As you can see from one of the customer letters enclosed, we have been able to establish this "License to Please culture" in just a few weeks in Cincinnati.

Your seminar was a catalyst in getting upper management to move and convincing store management of our serious intent.

Though you may not remember it, at one point you asked a store manager if she would give away a CD to "dress up" a problem. After, she said she would. You asked me to stand up and state my response.

It may have been a little hackneyed but to the managers, it was an epiphany. Yes, we have given away several CDs in the last year (18 to be exact), but December sales were up 22.9% on a same-store basis. Thanks.

In an office, empower staff to provide a bonus level of service or send flowers or a more serious or lighthearted gift, as the situation dictates.

In a hospital or in another healthcare facility, we encourage management to empower staff to use their own discretion to spend up to $250 to solve a complaint, prevent a complaint, or to show human compassion. Now in reality, they don't need to use their own cash, because management usually sets up a voucher system with gift shops, florists, restaurants, and taxi companies, or wherever it is necessary. Occasionally, an employee might have to go out-of-pocket, but they know they can obtain reimbursement the same day or the next day.

Believe it or not, the most significant problem related to implementing a Service Recovery policy is not staff abusing their authority; the real challenge is getting them to use it rather than be worried about making a mistake.

The average expenditure, by the way, is somewhere between 5 and 20 dollars.

The impact is huge, however, in two ways. It is electrifying for front-line employees to know that they are trusted enough to be able to use their own good judgment.

It is also powerful for customers, because these are times when their loyalty to you is at risk.

Are you getting excited yet? You should be. This is an exciting concept.

Now that we've spent a fair amount of time studying this thing called empowerment, I'd like you to give some thought to how you can immediately apply it to your responsibilities.

What power can you give away? What authority can you delegate, what you do not need to take care personally, what can you assign to a subordinate? Or if you can't think of anything, what power do you need to get from your manager, so you can be more effective?

Now, I know there are some managers who will worry that if they give away all of their authority they will no longer be needed.

By the way, have you ever heard of or shopped at a department store called Nordstrom?

Nordstrom is an incredibly successful department store that is famous for it's exceptional customer satisfaction. It's especially well known for the quality of its people and the extent to which they are empowered. Well, I "liberated" a copy of their employee handbook, which is their secret to how they empower their employees to provide such great service. It's pretty cool because they managed to condense what was formerly a 22-page document into one concise paragraph. Are you ready to hear it? Here we go:

> *Welcome to Nordstrom; we are glad to have you with our company. Our number-one goal is to provide outstanding customer service. Set both your personal and professional goals high; we have great confidence in your ability to achieve them. Nordstrom rules: Rule number one: Use your good judgment in all situations. There will be no additional rules.*

Nordstrom believes that the worst that could happen would be to have an employee make a mistake in favor of a customer, in which case, they still win by earning additional customer loyalty. They realize that occasionally, they will get ripped off,

but that is the small price they pay for enjoying all the benefits that go with having a world-class reputation for customer satisfaction.

In order to make the transition to an empowering Nordstrom-like culture, there needs to be a transfer of power to the front line. This is reflected in Nordstrom's inverted organizational chart, which shows management at the bottom supporting the front-line customer service staff, positioned at the very top.

Let's take a look at a good example of employee empowerment in action. Why not allow staff to create their own schedules? The critical ingredient here is to set solid ground rules, especially for holiday schedules.

This kind of system might work something like this: the manager or supervisor pulls the staff aside and says, "I need the six of you to decide who works Christmas and New Year's; all I ask is that you work one or the other."

Here's another example of how you can transfer power: have everyone in the department rotate to take turns chairing staff meetings.

In this chapter, you have learned the absolute best use of your time is to take the time thoughtfully and systematically to delegate as much authority as you possibly can to your front line.

To sum up, I have a few action recommendations for you, and I encourage you to take them back to work with you and try them out right away.

1. Your goal is to "make yourself obsolete by empowering your people to replace you," so you can devote your time and attention to leadership, communication, and coaching.

2. Become a champion for your employees' goals and dreams, and they will respond to your support with loyalty.

3. Wherever and whenever you can, remove unnecessary barriers by replacing rules with judgment and applying the 3 Ts of employee empowerment: Trust, Training, and Transition support.

4. Do whatever it takes to identify and eliminate the major barriers to employee empowerment, which include:

   - Attitude
   - Policy
   - Sacred cows
   - Culture
   - F.E.A.R. - False Evidence Appearing Real
   - Comfort zone issues
   - Resistance to change
   - Lack of training
   - Self-limiting beliefs

5. Look for these indicators to determine when it is time for you to take action and delegate greater authority:

   - Your customer is annoyed
   - Your employees are annoyed
   - Rubber-stamping is rampant
   - The results of a process study indicate that it's time for a change
   - You want to speed up the service cycle
   - Inconsistency in quality is a problem
   - Benchmark failure has occurred
   - Downsizing is imminent
   - You find yourself bogged down with activities that are not the best use of your time or talent

- Job descriptions are changing

- Promotions are on the horizon

- Or, remember this simple rule of thumb. When in doubt, empower!

6. If you don't have one in place, then make sure your organization has a Service Recovery Policy in place so you can encourage your people to use the complaint golden rule: Mess up, 'Fess up, and Dress up.

7. Your immediate homework, if you have not done so already, is to change your current policies and procedures specifically to give front-line personnel greater authority to serve and satisfy customers in a more timely manner.

E =
Education and
Engagement

"Without information, people cannot take responsibility… with information, people cannot help but take responsibility."

– Jan Carlzon

Keep
Your **NURSES**
& Healthcare Professionals **for Life**™

Insider Information

"I have received memos so swollen with managerial babble that they struck me as the literary equivalent of assault with a deadly weapon."

– Peter Baida

People can't care about what they don't know about. Most employees would like to be treated as an insider. Wouldn't you?

If something is amiss and management responds to the crisis by attempting to shield employees from crucial information, or tries to wait until they have more information before sharing it, chances are that the water-cooler gossip will spread like a fire in a dry forest, devastating workplace morale and everything else in its path.

What's important for people to know? If you advised your staff on a daily basis about patient satisfaction, the operational budget, and other key issues, things like gossip, speculation, and conventional wisdom would likely decrease dramatically.

So how do you go about making your employees feel like insiders? There are both formal and informal steps you can take.

Formal approaches include:

- Timely performance reviews that are updated quarterly. Conduct an annual performance review that is documented, but every three months, let your employees know how they are doing in sit-down assessment sessions.

- Implement formal performance measurement procedures. Let people know what their productivity numbers are in quantifiable terms. In other words, keep track of each employee's daily, weekly, monthly sales results or production outcomes and convey this information as frequently as possible.

- Keep track of employees' customer service scores. How does each employee stack up when it comes to customer satisfaction? What kind of feedback are you hearing from their customers?

Informal approaches for making employees feel like insiders include:

- Make face-time with employees a top priority. This includes one-on-one meetings, updates, tête-à-têtes, etc. Maintaining quality contact with each individual employee is key.

- Get in the active-listening habit. You honor people when you listen to them. Sometimes that simply means asking them how they are, and then shutting up as they ramble and free-associate and eventually get around to the point. Just let your employees get comfortable talking to you.

- Managing by Walking Around (MBWA). This is a great technique to help you get in the habit of offering vital, real-time data to your staff, and being present to identify and address their concerns.

Coach and Champion

"To prevent your people's mood from turning blue,
give them a chance to let you know what they do."

– Brian Lee CSP

If you want people to care about what you want to do, you must first show them you care about what they want to be.

The most valuable service you can provide your people is to be their coach and champion to help them aspire to reach their potential.

Coaching is such an important skill. Do you value and appreciate the key elements of effective coaching? In October 2001, I decided to take singing lessons. While I can speak to several thousand people with relative ease, singing in front of a few people has always been a personal stretch.

In preparing to speak at my church, I decided I wanted to sing George Benson's "The Greatest Love of All" as part of my presentation. Since my normal rendition of the National Anthem usually evokes spontaneous laughter from seatmates, I decided it was time to improve my singing abilities.

At my first lesson, I noticed the music studio was lined with six and eight-year-olds. I felt like Adam Sandler in Billy Madison!

It took two months alone just to figure out what key I should sing in. My coach, Karen, would sing a line, then we'd sing it together, and then I would sing it by myself. If I sang it right, she'd praise me. If I didn't, we would repeat the process. Now you have to appreciate that Karen was dealing with one of the most fragile things in the world … a male ego. She successfully coached me by never making me feel bad or wrong.

Become your people's coach and champion; show them that you care about them and what they want to be. They will return that caring with loyalty.

Mentorship

"Not to transmit an experience is to betray it."

– Elie Wiesel

"Those who don't know what they're doing
are getting rid of those who do."

– Anonymous

In my line of work, there is no college or university to attend to become a professional speaker, so our professional association created a mentorship program. I enjoy being a mentor so much; I'm currently facilitating four aspiring speakers to move their career along. They receive free advice from me about every conceivable aspect of speaking. I also invite them along to speaking engagements with me.

Several years ago, I was a mentor to a young man in Florida. For two years, he spent a week traveling with me as my protégé. Then, several years ago, I went to a professional speaker's convention and discovered that he is now commanding speaking fees that far outpace mine.

One of the things I enjoy most about being a mentor is that by giving others advice about what they should do, it reminds me that I should be practicing what I preach.

A study that was summarized in the book Love 'Em or Lose 'Em by Beverly Kaye and Sharon Jordan-Evans reported that staff turnover was 35 percent in workplaces with no mentoring programs in place, but only 16 percent where mentoring is offered.

The modern meaning of the word "mentor" originated with Homer's Odyssey, the ancient Greek epic poem that details Odysseus' ten-year attempt to return home to the island of Ithaca after serving in the Trojan War. The Greek hero was given the Roman name 'Ulysses,' and his most trusted friend and advisor was a man named Mentor. When the adventurer set out on his famously meandering journey, he left the responsibilities of managing his household and the care of his son, Telemachus, to Mentor, so he could teach, guide, counsel, and oversee the young man in Odysseus' absence. It's from this relationship that the current concept of mentorship takes its inspiration.

Mentors in the workplace can boost the performance and career prospects of entry-level workers, but few employees receive on-the-job coaching. A U.S. survey by Chivas Regal reported that out of 1,000 adult respondents, only 17 percent said they had a mentor. But among those who described themselves as getting ahead, a full 76 percent said they had benefited from an older, more experienced colleague who took a special interest in their professional success. The survey also found that 55 percent of workers felt that senior managers showed little interest in helping younger workers get ahead.

According to Dr. Jan Northup Kratochwill, "A mentor is someone who offers you the wisdom of their years, helps you through the tough times, gives you a pat on the back and helps you target your skills for advancement."

Decades of research have substantiated that mentoring offers a broad array of benefits to employees. Here are just a few of the positive outcomes that have been cited in the management literature. Having a mentor can help employees:

- Define realistic career goals
- Build confidence with encouragement to grow
- Grow their knowledge base through personalized training
- Spend less time in unsuitable jobs
- Increase organizational awareness
- Enhance opportunities for advancement
- Hone leadership abilities

But mentoring relationships don't just advance the career prospects of entry-level and mid-career employees; they can also be beneficial to the experienced professional who plays the role of counselor and advisor. The benefits of acting as a mentor include:

- Enhancing their own career and professional development
- Higher visibility and prestige
- Being reminded of what they should be doing
- The personal satisfaction of giving back to the organization
- Creating a legacy of personal and professional knowledge

The organization that develops and implements a mentoring program benefits, as well. The advantages of mentorship that can accrue at the organizational level include:

- Growing a "seasoned" work force
- Increasing productivity
- Enhancing access to cost-effective training
- Improving the effectiveness of organizational communication
- Motivating employees
- Getting a better handle on strategic planning and succession planning
- Improving employees' sense of loyalty and stability
- Offering career guidance
- Integrating new employees into the workplace more effectively

Are you ready to devise a mentoring program for your organization? Here's how to get started.

The mentoring process starts with an initial meeting where the objective is for the mentor and protégé to discuss what both parties will bring to the partnership and determine how best to proceed.

The second step is building a relationship to strengthen the mentoring partnership by developing strong communication skills and learning more about each other's backgrounds and styles.

Step three is strategic planning and commitment. This involves helping the protégé with career planning and goal setting.

The next step in the mentoring relationship is ongoing implementation, in which both parties set about the process of helping the protégé achieve his or her goals.

Ideally, the mentorship will continue indefinitely. However, if you prefer to have a finite end-date in your organization's

mentoring program, plan to conclude the partnership with an evaluation to determine how successfully the protégé was able to utilize the information and skills gained through the mentoring process.

The mentor's role is to teach, guide, counsel, and challenge. Being an effective mentor means asking the right questions, being a good listener, and encouraging feedback.

There are three types of professional mentoring. Depending on your organizational culture and the goals for your mentoring program, you can choose one or create a hybrid approach that combines elements of each.

- **Supervisory Mentoring**: This is strictly a working relationship in which mentoring is normal function of the supervisor's duties.

- **Informal Mentoring**: My mentor, Roy Wilson, never explicitly said to me, "I'm going to be your mentor." But he was. This type of mentoring relationship is an unofficial pairing of two individuals who are drawn together based on affinity and trust.

- **Facilitated Mentoring**: This is a formal process where a facilitator or coordinator is appointed. It has been shown to be the most effective approach to mentoring. It requires commitment from all levels of the organization, as well as from mentors, protégés, and supervisors.

Brian Lee CSP – **Keep Your Nurses & Healthcare Professionals for Life™**

Training and Tools

"The only thing worse than training your employees and losing them, is not training them and keeping them."

– Zig Ziglar

"When your people are learning, they're not leaving."

– Brian Lee CSP

In the past few years, we have dedicated our training team to deliver the Service Excellence Initiative. We achieved a breakthrough from 1995 - 1996 at St. Mary Medical Center in Long Beach, California. Rather than teach Service Excellence ourselves and train the managers to do the training, we train their front line staff to do the training.

We named these front line crusaders "Service Excellence Advisors."

We recruited one Service Excellence Advisor (SEA) for every 15 to 20 employees. We didn't focus on just nurses. We included housekeepers, lab technicians…everybody, yes, including doctors.

To be eligible to be an "SEA", we recruited the "Best of the Best" front line stars, who are talented employees with a

terrific attitude and who had already demonstrated their customer commitment.

"SEAs" are appointed for a one-year term, serving in this role in addition to their regular job function.

We put them through a two-day "Train the Trainer" course and in the first half-day, we teach them a customer service workshop called "Service Excellence."

For the next day and a half, we teach them how to teach it.

We call the final night's graduation ceremony, "Saturday Night Live." It provides graduates with an immediate opportunity to reinforce and demonstrate their newly acquired presentation skills. Each team of 4 performs a creative skit in front of their managers and family.

I want you to imagine speaking in front of a crowd of over 200 people when you've never spoken in front of an audience before.

The results are always exceptional – it really unleashed front line enthusiasm and has a powerful impact on the organization in terms of improving patient and employee satisfaction.

I remember when we first began at St. Mary Medical Center. The culture was ugly. Imagine them teaching a workshop on customer service. And imagine having those same Service Excellence Advisors going out into the community to speak to high schools and peers about nursing!

Since then, over 1500 staff all over North America have taken this program and have gone on to train others in their medical community.

The six roles of a Service Excellence Advisor are:

1. Teaching the Service Excellence workshops to peers
2. Facilitating staff implementation meetings

3. Conducting new hire orientation training

4. Providing a communication link with management to the front line

5. Peer recruitment

6. Serving as a role peer model

To get started, recruit the best of your best front line staff. They will inspire their peers. There isn't a more powerful recruitment program than peers recruiting peers because they believe in where they work and what they're doing.
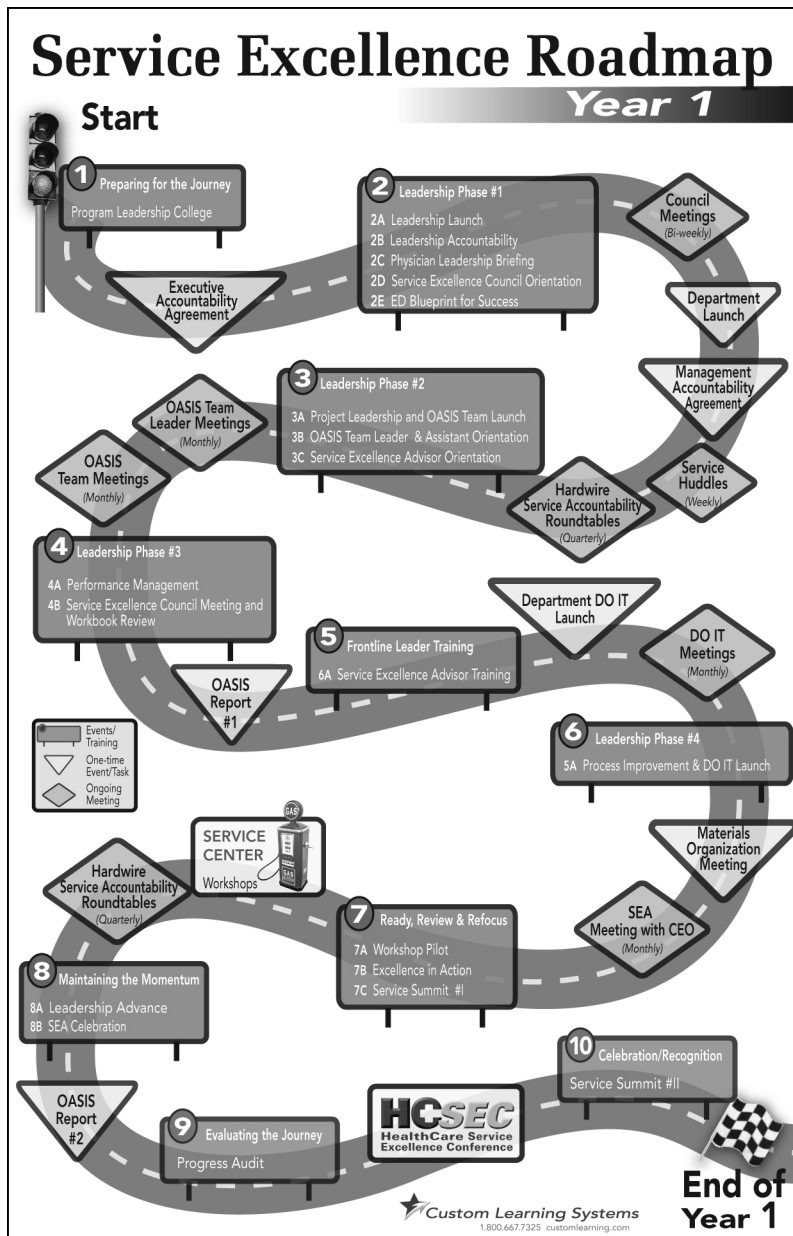
Introducing…

> "Become the change you want to see in the world."
>
> – *Gandhi*

Critical Selection Criteria

- Front Line / Non-Management
- Terrific Attitude
- Demonstrated Commitment to Customer Satisfaction

The Employer of Choice –
Service Excellence Initiative™ Year 1

Service Excellence Roadmap
Year 1

Start

1 Preparing for the Journey
Program Leadership College

Executive Accountability Agreement

2 Leadership Phase #1
2A Leadership Launch
2B Leadership Accountability
2C Physician Leadership Briefing
2D Service Excellence Council Orientation
2E ED Blueprint for Success

Council Meetings *(Bi-weekly)*

Department Launch

Management Accountability Agreement

3 Leadership Phase #2
3A Project Leadership and OASIS Team Launch
3B OASIS Team Leader & Assistant Orientation
3C Service Excellence Advisor Orientation

OASIS Team Leader Meetings *(Monthly)*

OASIS Team Meetings *(Monthly)*

Service Huddles *(Weekly)*

Hardwire Service Accountability Roundtables *(Quarterly)*

4 Leadership Phase #3
4A Performance Management
4B Service Excellence Council Meeting and Workbook Review

OASIS Report #1

Department DO IT Launch

DO IT Meetings *(Monthly)*

5 Frontline Leader Training
6A Service Excellence Advisor Training

Events/ Training
One-time Event/Task
Ongoing Meeting

6 Leadership Phase #4
5A Process Improvement & DO IT Launch

Materials Organization Meeting

SERVICE CENTER Workshops

Hardwire Service Accountability Roundtables *(Quarterly)*

7 Ready, Review & Refocus
7A Workshop Pilot
7B Excellence in Action
7C Service Summit #I

SEA Meeting with CEO *(Monthly)*

8 Maintaining the Momentum
8A Leadership Advance
8B SEA Celebration

10 Celebration/Recognition
Service Summit #II

OASIS Report #2

9 Evaluating the Journey
Progress Audit

HCSEC HealthCare Service Excellence Conference

Custom Learning Systems
1.800.667.7325 customlearning.com

End of Year 1

Leadership

Fifty percent of work force satisfaction comes from employees relating with their boss.

Let's begin this chapter by considering the differences between "management" and "leadership."

Management is "maintaining and administering the past." Most managers have a "maintenance" role. It's our job to maintain a budget, maintain an inventory, and maintain our customers and staff.

Leadership, however, is "creating the future with and through other people." As leaders, it's our job to create a vision for the organization's future and to create a positive work environment or culture.

Leaders ask, "Am I doing the right things?"

Managers ask, "Am I doing things right?"

Albert Schweitzer said, "Example is leadership." This is why the **"Semi-Annual Service Excellence Leadership Empowerment Satisfaction Survey"** that I introduced to you in Chapter 14 *(p 86 & 87)* is so important.

Our staff meetings at Custom Learning Systems have always been on Monday afternoons. However, if I am going to be out of town, we will hold the staff meeting the following week. On one occasion, I was away for three months at a stretch. For those three months there were no staff meetings. What happened to employee morale during that time? Well, it tanked. After my return, when we got together for the first meeting, there was a lot of griping to deal with. I made a promise that we would never again wait so long to have a meeting. Today, our meetings are participatory, fun, sometimes intensive, but everybody is part of the process.

As a wise man once said, "That which is painful, instructs." Sometimes feedback can be painful, but that is how we grow. That's the price of leadership.

While I could write volumes on the subject of leadership, one of the most practical and powerful ways to demonstrate leadership is via an intensive, interactive weekly staff meeting. How else can you get feedback, communicate, or build teamwork?

On the following pages, I am going to provide you with two very useful leadership tools.

The first is a model staff meeting agenda. As always, the key is to adapt, not adopt other people's good ideas, so feel free to modify it as you feel appropriate.

The second document is a meeting evaluation form that will help you to refine and continually improve the quality of your meetings.

In closing, I recommend you institute regular participatory staff meetings to ensure effective two-way communication with your staff, and use the Semi-Annual Leadership Empowerment Satisfaction Survey to assess and refine your own effectiveness as a leader.

A Model Staff/ Team Meeting - Agenda

Day: _____   Date: _____

Begin Time: ____ End Time: ____ Location: _____

Personal Action	Item
	1. Call to order
	2. Good News *Each team member shares a positive personal or professional achievement or event since the last meeting.*
	3. Appoint Meeting Recorder
	4. Discuss business from previous meeting's minutes *Ensure that previous team decisions were followed up* on effectively.
	5. Administration Report *Team leader briefs attendees on key activities and decisions since last Meeting.*
	6. Personal Progress Reports *Each team member has the opportunity to brief colleagues on activities, ideas, and areas of concern.*
	7. New Business: 1. _____ 2. _____ 3 _____
	8. Meeting Summary *Meeting chair summarizes key decisions made and action steps.*
	9. Calendar Announcements *Review upcoming meetings, events, deadlines, and other key dates.*
	10. Meeting Evaluation *Everyone completes meeting evaluation form.*
	11. Schedule Next Staff Meeting Date:_____ Location: _____ Time From: _____ To: _____
	12. Final Thoughts *Each team member shares his or her best idea gained from the meeting, or any comment, suggestion or criticism (along with a positive solution).*
	13. Adjourn!

Meeting Evaluation Form

You've just heard from us, now we'd love to hear from you.

Evaluation is a key part of our goal of continuously striving to improve customer service quality and employee satisfaction. Please print clearly so we can get the most out of your response. Thanks so much for your help!

Facilitator/Chair Name: _____   Date: _____

My Name: _____

Department: _____   Position: _____

1. What I liked best about this meeting was:

    _____

    _____

2. Recommendation on how the meeting could be improved:

    _____

    _____

3. Constructive feedback for the facilitator:

    _____

    _____

4. I rate the value of my participation in this meeting as:
    (Excellent)   5   4   3   2   1   *(Poor)*

5. I rate the overall value of this meeting as:
    (Excellent)   5   4   3   2   1   *(Poor)*

6. The one area I am going to work most on between this and the next meeting is:

    _____

    _____

P.S.   Additional feedback:

    _____

    _____

    _____

Empathy

"The majority of human beings are more
alike than we are unlike."

– *Maya Angelou*

Early on in my career, I was asked to speak at a roast for my colleague, a member of the city council. We shared an office.

As was so often the case in those days, I was in a rush. So, the day of the roast I bought a joke book at a bookstore, then went to the hotel early, thinking that I would prepare at the last minute. No problem!

Well, the hotel's bar had just opened, thank goodness. It was a hot day in May and I immediately consumed three gin and tonics. I was thirsty – and I could definitely stand to relax a bit. Pretty soon, guests were arriving and I was having a great time. It was happy hour. During the next hour and a half I had a great time greeting friends old and new while consuming another half-dozen cocktails or so. By that time, I was definitely feeling pretty relaxed!

It was now time for the roast to begin, and the M.C. had arranged for the roasters to be seated at sub-head tables in groups of four. There were two bottles of wine at each sub-head table: one red, one white. I shrewdly noticed the other

three roasters were drinking the white, so being the thrifty kind of guy that I am, I drank the red. All of it. I proceeded to finish preparing my notes.

Would you like to know who was there? A veritable Who's Who of Calgary. The mayor, the city council, members of the legislature, the press, fundraisers – everyone who was anyone was there.

The first two speakers were brilliant. The third speaker was the former mayor, Rod Sykes, and he was great.

It was now my turn to speak. I couldn't even read my notes. The first thing I did was tell the same joke the previous speaker had just told. Except he remembered the punch line and I'll be damned if I could. Someone in the audience yelled, "Get a hook."

Everyone laughed and I thought that they were laughing with me. In truth, they were laughing at me.

The chairman tapped me on the shoulder and said, "Brian, I think you are done."

I have a question for you. Have you ever woken up the morning after, not only experiencing the worst hangover of your life, but also with the realization that your career may have just evaporated the night before?

I did everything I could do to avoid going down to city hall that day, hoping that nobody was talking about it. Not a chance – everybody was talking about it. I would try to change the subject and they would change it right back.

I am telling you this story because this is the opening story I share when I teach our new customer service trainers how to train others. So why would I share this story at the beginning of a two-day course that is probably one of the most intense and high-stakes educational experiences in which the participants have ever engaged?

I tell this story to show them that I am human and that I make mistakes. And what happened when I made this colossal blunder? I messed up, I lived to tell the tale, and I survived. Is it possible they too are about to make mistakes? Probably so. Will they survive it? They have to.

When your employees make mistakes in the process of getting comfortable with the new-found empowerment, or when they just slip up and do something not-so-smart, empathize through self-disclosure.

It's inevitable that your employees are going to make mistakes, and when they do, you can make them feel better and help them learn from the experience by recounting a situation in which you yourself messed up. What does that achieve? Well, a few different things.

- It shows that you are human.
- It shows that they can identify with you, which is important.
- It relies on the fact that humor is a release valve.
- It shows that you survived; so will they.
- It shows them how to learn from their mistakes.

Are they now going to be open to advice from you? Would they necessarily be open to your advice if you didn't do this? Maybe not.

If the situation is a function of performance, then it's important to focus on training.

If they made a mistake because they didn't know any better, you have got to make sure they have the skills they need to meet your performance expectations.

If the situation is a function of poor work habits, focus on discipline. If it happens again, it may be time to take a long, hard look at your approach to management. If you do not give

feedback when your employees engage in negative behavior, you are sanctioning incompetence.

Here's a useful technique you can use to apply what you've learned. It's called "One Mistake I'll Never Make Again." I'll apply it to the embarrassing personal anecdote I related at the beginning of this chapter to show you how it's done.

What was the mistake? I got drunk before I spoke.

Why did it happen? I didn't know any better. I thought you were supposed to have a drink before you spoke. Didn't you? That's what everybody told me.

What did I do to fix or minimize the damage? Nothing. There was absolutely nothing I could do there. Nothing was salvageable, I'm afraid.

What did I do to ensure it will never happen again? I don't drink before I speak.

How can I avoid future mistakes? That disaster caused me to get serious about speaking, because I love speaking. I had been humiliated and failed utterly at something that was enormously important to me. From that moment on, I decided to treat every future speaking opportunity as if it was my first – or my last. I resolved that every time I spoke I was going to improve by 1%. It ended up being a painful but marvelous learning opportunity, but it took me a long time to acknowledge it.

It has been observed that, "The new leader is clearly distinguished from the old-style boss. A boss creates fear; a leader creates confidence. A boss fixes blame; a leader corrects mistakes."

I think that you are going to find self-disclosure to be a very useful way to help correct mistakes.

In this chapter you have learned that, when staff members make mistakes, both they and you can learn invaluable lessons to grow and mature and continually improve as a result.

In closing, let me summarize and offer a few action recommendations.

1. Instead of being critical of your employee or ignoring the problem, empathize with them. Let them know you understand the difficulties they are encountering and their frustration.

2. Using the self-disclosure leadership technique, share with your employee a similar situation that demonstrates you really do understand how they might feel.

3. If they messed up because they were not trained properly, or didn't know any better, then make sure that you address that training gap immediately.

4. On the other hand, if the mistake was the result of poor work habits, then you need to take the appropriate disciplinary steps.

5. Above all, be sure to coach them by guiding them through the "One Mistake I'll Never Make Again" model, ideally offering a mistake you made in your life as an example.

One Mistake I'll Never Make Again

1. What the mistake was: *(describe actual event)*

   _____

   _____

   _____

   _____

   _____

   _____

2. Why it happened: *(I forgot, I didn't understand the proper procedure, etc.)*

_____

_____

_____

_____

3. What I did to fix it or minimize the damage: *(what's salvageable, what's the opportunity)*

_____

_____

_____

_____

4. What I did so it would never happen again: *(set up file, pursued training, changed the system, etc.)*

_____

_____

_____

_____

5. What other mistakes-in-waiting can I fix, or what opportunities can I uncover because of this lesson?

_____

_____

_____

_____

Having Fun

*"You can learn more about a person in one hour
of play than a lifetime of conversation."*

– Plato

The city was Buffalo, New York. My clients were 300 nursing professionals employed by the Visiting Nurses of America.

One of the nursing teams was a totally dysfunctional group who could barely stand working together.

At the start of this 12-week Service Excellence training program, we announced that as part of their team-building goals, the members of each team were to have fun together at least once.

They chose laser tag. Have you ever played laser tag? I know of no other game that instantly causes adults to revert to childhood. The joy of hunting an opponent down – and doing it as a team. The triumph of victory, the agony of defeat.

The impact on the team was immediate and dramatic. They really bonded! Besides improving team morale and employee relations, does anyone have any doubt about the positive impact this change had on their customer service quality and overall productivity?

In another example of the importance of team building, the early-shift staff of one hospital's housekeeping department surprised the late shift with a potluck dinner. The late shift responded in turn with their own surprise meal for their new buddies. At our Service Excellence graduation "brag fair," a member of the early shift proudly said, "We used to be co-workers, now we're friends!"

Constructive socializing creates an emotional bond that keeps people together. To make the most of this, schedule some playtime for your staff. Friday night beer busts, potluck parties, a night out on the town, bowling – anything that will get people laughing and playing together. After all, as they say, a team that plays together, stays together.

Recommendation: Schedule quarterly social opportunities to break down barriers and give your staff permission to have fun.

> "Loyalty at work hasn't come to an end…
> It's been replaced with loyalty to one's friends."
>
> – *Brian Lee* CSP

P =
Physician
Acceptance

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Your **NURSES**
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What Nurses Would Change

"Healthcare's dirty little secret is the pathetic way doctors treat nurses."

— Anonymous

When it comes to the issues of nurse retention and employee morale, are your physicians part of the solution – or are they part of the problem?

To put this issue in perspective, I want to share with you some of the typical comments originating from the focus groups of nursing professionals that we convened when conducting research prior to the launch of our Physician Service Excellence training process in hospitals.

- "I can't count the number of times I've cried. And if you do cry, they'll take advantage."
- "In my wildest dreams, I could not imagine asking a doctor to help me."
- "New nurse grads need to be taught they don't need to begin every conversation with, 'I'm sorry.'"
- "We have to spend way too much time teaching new staff not to take the doctors' rude behavior personally."

- "Doctors seem to think they're God and that everybody else is a nobody. There's no respect."

- "They lack social graces. They treat us like pieces of furniture. We're not in their social stratum."

- "Our poor orderlies get beat up emotionally."

- "We often feel devalued. They'll put their chart right on top of the one I'm already working on."

- "When a new doctor is pleasant, we give 'em six months before things start to go sour!"

- "We're the patient advocate. They don't see us that way."

- "It's like we're invisible. I can spend a great deal of time helping a doctor and get zero acknowledgement."

- "Peer review is not effective. It just doesn't work."

This is typical feedback from nurses about doctors and it's a subject that I feel very strongly about.

I should clarify that not all doctors are guilty of these behaviors, but too many are.

Rather than encouraging nurses to be assertive and respond to unnecessary rudeness by saying "that behavior is unacceptable," the nursing profession traditionally teaches them not take it personally. But after years of consistent discourtesy and indifference to you as a human being, how can you not begin to take it personally?

Unless your Chief of Staff happens to be an uncommonly empathic medical visionary, peer review just doesn't work, because doctors will not hold each other accountable. It's bad for referrals.

I have to admit how profoundly disappointed I am every time I have to address this subject. Like everyone else, I believed doctors were special people who were committed to making a

difference… that is, until I learned how poorly many of them treat their staff.

One 2009 survey of nurses found that 98% had witnessed disruptive behavior stemming from doctor-nurse communication breakdowns in the past year. Furthermore, over half of those surveyed indicated that tension between doctors and nurses had negatively impacted patient care in their facility.

Yes, there are exceptions. And there are some nurses with good self-esteem who refuse to be walked over. However, there are way too many horror stories out there than we'd like to admit.

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Successfully Involving Physicians

It's critical to involve physicians in your staff retention process because they need to be part of the solution.

Patients see physicians and nurses as part of the same team. The irony is that the doctors who are the angriest about the quality of nursing not being what it used to be are the ones who are driving good nurses away.

Throughout the past decade, we have been working with hospitals to successfully involve physicians in the process of improving service excellence, employee morale, and retention.

Based on that experience, I've devised a set of recommendations to successfully involve doctors in your organization's nurse retention efforts.

1. **Involve Your Chief of Staff.** From the very beginning of your nurse retention initiative, solicit buy-in and support from your chief of staff. Sit down and discuss the problem, and ask him or her for a commitment.

2. **Conduct a Nurse Focus Group**. Enlist the services of an outside firm to conduct a focus group of nursing professionals and other primary support staff at your

facility. Have the facilitator pose these and other similar questions to attendees:

- What do you like best about working with the physicians here? (The answers to this one likely won't take very long to record.)

- If you could change three things about your working relationship with doctors, with the goal of improving communication, patient satisfaction and employee morale, and nurse retention, what would they be?

- What do you need to do to personally improve this situation?

3. **Share the Results with Your Organization's Doctors**. I had an opportunity to do this when I was working with a southern California hospital several years ago. I announced the results of the nurse focus group in a meeting room where about 300 doctors were in attendance. You could have heard a pin drop as I reviewed the results. Based on the looks of shock plastered on many of their faces, I suspect few had any idea that they and their colleagues were perceived so negatively.

4. **Adopt Updated Policies**. These guidelines should be designed to address physician/nurse issues that relate to courtesy, communication, chart clarity, peer communication, telephone courtesy, on-call colleagues, nurse-patient co-advocacy, and more. However, if you want your doctors to own this policy, they need to become involved in the process of authoring it. There must be standards of mutual self-respect. Invite doctors to sign off on the final document. This could become a pre-requisite factor for renewing a doctor's hospital admitting privileges. For a sample policy, see the end of this chapter.

5. **Professional Misconduct?** Make sure your organization's incident report form has a category for "professional misconduct."

6. **Peer Review Reform**. If necessary, reform your organization's physician peer-review process to reflect the updated behavior and communication guidelines, with the consent and involvement of your medical leadership.

7. **Offer Nurse Assertiveness Communication Training**. Train your nursing professionals in methods to respond to rude, discourteous, or otherwise unacceptable physician behavior.

8. **Provide Joint Physician/Nurse Communication Training**. Sometimes, toxic nurse/physician relationships can stem from negative communication patterns that have set in and become an engrained part of the organizational culture. By providing personnel with new, mutually beneficial communication techniques, you may be able to eliminate much of the accumulated tension and disrespect.

In the remaining pages of this chapter, I have supplied a flowchart that reflects this process.

Implementation Flowchart

Physicians' Service Excellence Initiative Task Force Membership

- CEO/Executive Sponsor
- CMO/Chief of Staff
- 1-3 Doctors

- SEC Chair
- Head of Physician Satisfaction OASIS Team

- Physician Super Coach
- Medical Staff Liaison

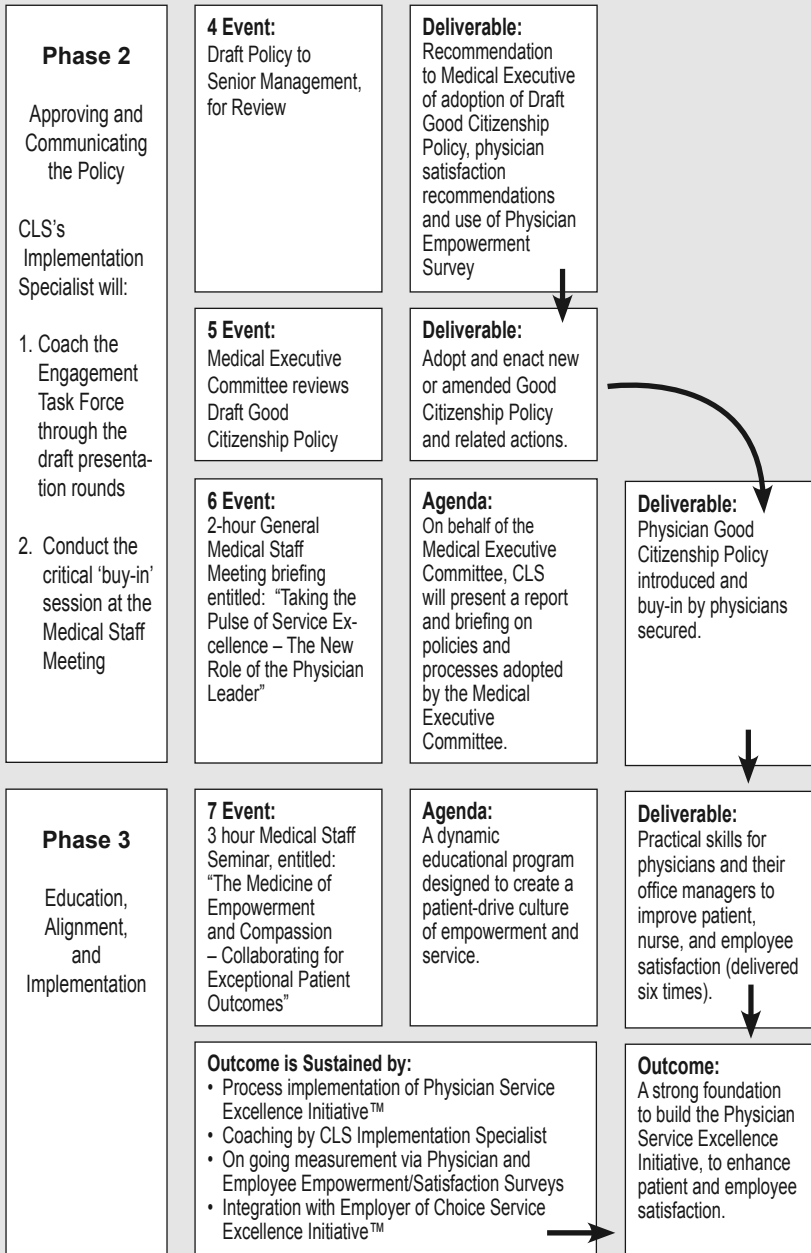|			
Phase 1 Developing a Good Citizenship Policy CLS's Implementation Specialist will: 1. Provide background and sample information to Guiding Coalition 2. Conduct Focus Groups to gain insights on how to improve relationships 3. Debrief and coach Task Force on policy development	**1 Event:** Two hour Nurse Focus Group, conducted by CLS Implementation Specialist and attended by 8-10 representative nurses.	**Agenda:** Attended by 8-10 representative Nurses, to gain insights to assist with improving Physician-Nurse relationships, to enhance patient satisfaction.	**Deliverable:** What's working, what's not related to relationships, service?
	2 Event: MD's Focus Group conducted by CLS implementation specialist and attended by 6-9 physicians.	**Agenda:** Conduct an assessment to determine: 1. Physician dissatisfiers in the way they are served by the hospital 2. Their perception of Physician/Nurse relationships.	**Deliverable:** Recommendations to improve Physician satisfaction and retention.
	3 Event: Task Force Policy Development Meetings	**Deliverable:** 1. Draft Good Citizenship Policy 2. Make recom-mendations on Physician issues 3. Make recommendations on Physician Empowerment Survey	

(continued)

Implementation Flowchart (continued)

Phase 2

Approving and Communicating the Policy

CLS's Implementation Specialist will:

1. Coach the Engagement Task Force through the draft presentation rounds

2. Conduct the critical 'buy-in' session at the Medical Staff Meeting

4 Event:
Draft Policy to Senior Management, for Review

Deliverable:
Recommendation to Medical Executive of adoption of Draft Good Citizenship Policy, physician satisfaction recommendations and use of Physician Empowerment Survey

5 Event:
Medical Executive Committee reviews Draft Good Citizenship Policy

Deliverable:
Adopt and enact new or amended Good Citizenship Policy and related actions.

6 Event:
2-hour General Medical Staff Meeting briefing entitled: "Taking the Pulse of Service Excellence – The New Role of the Physician Leader"

Agenda:
On behalf of the Medical Executive Committee, CLS will present a report and briefing on policies and processes adopted by the Medical Executive Committee.

Deliverable:
Physician Good Citizenship Policy introduced and buy-in by physicians secured.

Phase 3

Education, Alignment, and Implementation

7 Event:
3 hour Medical Staff Seminar, entitled: "The Medicine of Empowerment and Compassion – Collaborating for Exceptional Patient Outcomes"

Agenda:
A dynamic educational program designed to create a patient-drive culture of empowerment and service.

Deliverable:
Practical skills for physicians and their office managers to improve patient, nurse, and employee satisfaction (delivered six times).

Outcome is Sustained by:
• Process implementation of Physician Service Excellence Initiative™
• Coaching by CLS Implementation Specialist
• On going measurement via Physician and Employee Empowerment/Satisfaction Surveys
• Integration with Employer of Choice Service Excellence Initiative™

Outcome:
A strong foundation to build the Physician Service Excellence Initiative, to enhance patient and employee satisfaction.

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Physician Service
Empowerment Policy™

Attributes of a Successful Professional
Physician/Hospital Staff Relationship

Physician Name

A. Creating a Culture of World Class Customer Satisfaction

To assist our physicians and staff in creating a truly patient-driven culture of world-class customer satisfaction, medical staff leadership has developed the following set of attributes to define and characterize effective working relationships between physicians and other personnel.

B. We Need Your Help

We ask all physicians and hospital staff to help make these attributes a part of our organization's culture and everyday operating procedures. Please review the Service Excellence policy statement and indicate your agreement with your signature on the last page.

C. The Service Excellence Initiative

To facilitate these objectives, we are undertaking a series of ongoing professional development initiatives that will further these goals, as part of our organization-wide efforts to achieve service excellence.

D. Physicians, Hospital Staff and Other Practitioners Exercising Clinical Privileges at the Hospital Will Agree to:

1. Act with courtesy and respect.

1.1 Begin every contact with a courteous greeting including calling staff by name.

1.2 Speak directly to one another, establishing eye contact and using a positive tone of voice and body language.

1.3 At all times, show colleagues and personnel respect and courtesy, avoiding:
- Yelling or use of profane or vulgar language
- Intimidating or degrading comments
- Racial, ethnic, religious, or sexual references
- Making any negative personal references in front of patients or anyone else
- Expecting staff to get you coffee, meal orders, or take your personal calls

1.4 Treat auxiliary and support staff with the same standards enumerated here with respect to nurses.

2. Patient and Family Communication.

2.1 Anticipate patient and family questions about treatment, especially potential adverse reaction to prescriptions. Nursing staff will make every effort to coordinate physician meeting time with the family to maximize efficiency.

2.2 Whenever possible, the attending/primary physician should talk directly to family members and answer their questions.

2.3 Give the patient undivided attention, and make every effort to ensure they really understand what they're being told, e.g., sit on a chair and make eye-to-eye contact with the patient.

2.4 Never share concerns about nursing quality or the hospital with the patient or patient's family (hearing these kinds of insinuations hurts, rather than helps, the patient). The airing of frustrations and constructive problem-solving should be done in private.

2.5 Refrain from any negative reference whatsoever in front of the patient and patient's family about staff, colleagues, and the hospital.

2.6 Do encourage patients to share their concerns with you, the nurse, or hospital management.

2.7 Because the treatment for most critical care patients involves multiple physicians, the primary attending doctor should make an effort to coordinate communication with the patient and the patient's family.

3. Physicians' Orders

3.1 Make every effort to brief nursing staff on the condition of the patient by:
- Inviting them into the room during patient assessment, and/or
- Speaking to them directly about the plan of care prior to departure, and
- answering any questions they may have about treatment.

3.2 Ensure the nurse is fully conversant with the patient plan of care, including all relevant remarks that have been made directly to the patient.

3.3 Whenever possible, issue standing orders or clinical pathways for the use of OTC drugs such as Tylenol, Maalox, etc.

3.4 It is a physician's responsibility to explain the risks, benefits, and alternative treatments in order to obtain an informed consent. A nurse may only be asked to obtain the signature.

3.5 Give orders that can be clearly understood.

3.6 Provide, as appropriate, a written diagnosis for all outpatient orders/treatment.

4. Chart Clarity

4.1 Use legible handwriting or print neatly, and review all written orders directly with the nurse.

4.2 Strongly consider printing your name and hospital contact information next to your signature, or print your name, if real-time contact with the nurse is not possible.

5. **Peer Communication**

   5.1 Take responsibility for designating a "captain" to avoid confusion in patient care situations where multiple physicians are involved.

   5.2 Ensure the admitting or attending doctor takes responsibility for contacting and communicating with consulting physicians.

   5.3 Avoid criticizing other physicians in front of staff or patients and family members.

   5.4 Take responsibility for reading each other's progress notes and orders.

   5.6 Take responsibility for holding each other accountable for respectful professional conduct.

6. **Telephone and Communication Courtesy**

   6.1 Return calls in a timely manner.

   6.2 Begin the call with a friendly greeting and conclude it with a polite good-bye.

   6.3 Refrain from use of instructions like, "I don't want to be called anymore" or "Don't call me, especially with ABNORMALS, or about patient pain."

7. **Office Liaison**

   7.1 Avoid voicemail systems that do not facilitate timely and direct human access to hospital personnel. There needs to be a mechanism in place to recognize and respond to an urgent call.

   7.2 Ensure that office staff members will make every effort to locate you upon request.

   7.3 Ensure that telephone exchange personnel respond in a timely and helpful manner.

8. On-Call Colleagues

8.1 Take responsibility to ensure that on-call colleagues are fully briefed on patient's condition, especially on weekends and holidays.

9. Discharge Planning

9.1 Make every effort to provide clear advance directives, nutritional instructions, and discharge orders.

10. Teacher/Mentor Role

10.1 Set appropriate service expectations for medical personnel and support staff at varying levels of licensure, training, and professional experience,

10.2 Respect staff's ability to prioritize conflicting patient/physician requests.

10.3 Be understanding of the unique challenges faced by night-shift personnel.

11. Nurses' Patient Co-Advocacy

11.1 Fully appreciate and respect the nurse's role as patient co-advocate.

11.2 Respect the nurse's need to speak up for herself/himself when confronted with disruptive behavior.

11.3 Give your nurse colleagues the benefit of the doubt whenever possible.

11.4 In no way attempt to discourage nurses from providing up-to-date information about each patient's medical condition.

11.5 When you are present and where it is appropriate, assist the nurse with difficult patient treatments.

11.6 Remember that while staff members are making an effort to adapt to your personal practice style, they are also navigating working relationships with a number of other physicians, as well, so patience is required.

12. Compliance

12.1 Recognize and cooperate with the nurse's professionally mandated role in adhering to regulatory and medical staff compliance directives.

13. Recognition

13.1 Show appreciation for service provided above and beyond the call of duty.

13.2 Seek opportunities to create and enhance quality professional relationships through personal rapport and social exchanges.

14. Culture

14.1 Recognize and facilitate the hospital's desire to create a patient-driven, physician-supportive, employee-friendly culture that acknowledges everyone's legitimate needs and rights.

15. Principles of Partnership

15.1 Be aware of and adhere to the medical staff's peer-review policy and expectations.

Reciprocal Note:

It is understood that these standards are applicable equally to all hospital personnel.

Acceptance:

I accept and agree to adhere to the policy and standards set out in this document.

_____

Signature   *Date*

_____

Please print your name

Semi-Annual Physician Empowerment
Satisfaction Survey™

Confidential

_____

Physician Name

_____

Date

To assist your leadership team in its mission of creating a "customer-driven culture through people empowerment," we sincerely appreciate your completion of this confidential survey and forwarding it to your Department Director within 48 hours.

PLEASE DO NOT IDENTIFY YOURSELF IN ANY WAY.

5 – Always   4 – Usually   3 – Sometimes
2 – On Occasion   1 – Never   NA – Not applicable

The physician I work with:

1. **Courtesy / Respect**   **5 4 3 2 1   NA**
   Greets me in a professional and
   courteous manner and at all times
   and uses my name.

2. **Patient / Family Communication**   **5 4 3 2 1   NA**
   Is responsive to patient / family
   information and empathy
   needs and effectively answers
   their questions as to treatment,
   especially potential adverse
   reactions.

3. **Physician Orders**   **5 4 3 2 1   NA**
   Seeks input from and updates
   me effectively about the patient's
   condition and plan of care and
   provides clear physician orders
   and answers my questions clearly
   prior to departure.

4. **Chart Clarity**   **5 4 3 2 1   NA**
   Consistently writes legibly on
   patient's charts and insures
   complete and accurate
   documentation.

5. **Peer Communication**   **5 4 3 2 1   NA**
   Communicates effectively with
   peers and is helpful in clarifying
   who is "Captain of the Ship"
   where multiple physicians are
   involved

6. **Telephone Courtesy**
    Responds to my phone calls in
    a timely manner and exhibits
    polite telephone courtesy.

    5 4 3 2 1 NA

7. **Office Liaison**
    Insures their office staff
    or answering service are
    conveniently accessible by
    phone and helpful with our
    requests for assistance

    5 4 3 2 1 NA

8. **On-Call Colleagues**
    Takes responsibility that on call
    colleagues are adequately briefed
    on patient condition, especially
    on weekends and holidays.

    5 4 3 2 1 NA

9. **Discharge Planning**
    Plans ahead and gives clear
    discharge directions.

    5 4 3 2 1 NA

10. **Teacher / Mentor**
    Demonstrates his/her awareness
    of the varying levels of licensure,
    certification, and/or experience,
    and makes an effort to teach and
    mentor to me.

    5 4 3 2 1 NA

11. **Nurse Patient Co-Advocacy**
    Accepts the nurse's role as
    patient co-advocate and respects
    staff's right to speak up when
    confronted with disruptive
    behavior.

    5 4 3 2 1 NA

12. **Compliance**
    Recognizes and cooperates with
    nurses' professional mandated

    5 4 3 2 1 NA

role in adhering to regulatory
and medical staff compliance
directives.   **5 4 3 2 1   NA**

13. Recognition
Shows appreciation for service
provided above and beyond the
call of duty.   **5 4 3 2 1   NA**

14. OVERALL
I rate my satisfaction with the
quality of this professional
relationship as:

PS   I look forward to working   **5 4 3 2 1   NA**
with him/her.

Please insert into Confidential Envelope and return to the
Department Director within 48 hours.

DO IT
Action Plan

Now that you've finished the book, it's time to DO IT.

DO IT is an acronym I use in all of our training programs; it stands for ***Daily Ongoing Improvement Tactics***.

This DO IT Action plan will assist you in tracking your progress and help your team achieve their goals.

If you require any further clarification or guidance as you embark upon the implementation phase of your nurse retention initiative, I would be glad to answer your questions. I can be reached by phone at **1-800-667-7325** or via email at **info@customlearning.com**

First, determine which goals you:

- Must Do
- Should Do
- Might Do

Prioritize the "Must Do" goals and rate each of them on a scale of 1-10, with 10 being high and one being low. Then, you need to set specific time frames for each goal.

Once you've identified a few key goals to focus on first, it's time to initiate team action with a meeting. Below is a sample agenda you can use to make sure you get the most out of your gathering.

DO IT *(Act With Urgency)* **Meeting**

_____/_____

Date   *Start / End Time*

_____

Location

1. Each delegate - shares their recommended implementation strategy in terms of:
   - "Big Picture" process goals
   - Utilization of the Just "DO IT" Process

2. Discuss and develop a group consensus on
   - Big picture - goals
   - Process for gaining a buy in from:
     – Key senior decision makers
     – The entire leadership team.

3. Nurse Retention Team
   - Does your current team meet the needs of your strategy?
   - If not, should it be reorganized? How and when should that happen?

4. What are the immediate "next steps" and who will do what?

5. Other business
   a) _____
   b) _____
   c) _____

6. Next meeting:
   Date: _____ Start / End: _____
   Location: _____
   Topics: _____

7. Final thoughts
   Each team member shares his or her best idea gained from the meeting, or any comment, suggestion, or criticism (along with a positive solution).

8. Adjourn

The Empowered Leader Just DO IT Action Plan

IMPLEMENTATION STRATEGY

1. Debrief Immediately. Within the next 48 hours, hold a DO IT *(Act With Urgency)* meeting utilizing the agenda provided.

2. Commit to a Timeline. Make a commitment, keep your commitment by setting a timeline for these goals.

3. Strategize a Buy-In. Develop a consensus "sales strategy" to gain engagement and investment from your key decision-makers.

4. Executive Briefing. Convene a meeting with the facility's management team in which you:
   - Share the results of this seminar and your research
   - Propose your solutions and strategies, with a timeline
   - Answer questions
   - Ask for a commitment

5. Nurse Retention Council. Put together a group of individuals to spearhead your organizations retention initiative.
   - Appoint members (or repurpose an existing team) to your Nurse Retention Council.
   - The membership should be representative of your entire organization.
   - The membership should be comprised half of managers, and half of front-line staff.
   - A CNE should have a chief leadership role.
   - Have the group develop and implement a clearly written charter council, including details such as: mandate, mission, time frame, budget, and authority to plan, communicate, and implement.

6. Make Nurse Retention Priority Number-One in Your Organization and Appoint a Chief Retention Officer.

7. Designate Every Nurse Leader as a "Nurse Retention Officer" and Offer Recognition and Incentives for Retention and Recruitment Successes.

8. Appoint a Nurse Retention Project Team.

9	Ask everyone on your staff a few questions.
	1. If you were going to leave, what would be your number-one pet peeve?
	2. Do you reserve the right to change your mind?
	3. What would cause you to change your mind?
10	Keep a Daily Excellence Diary. Maintain a daily excellence diary for 21 days recording ideas, skills, improvements, or systems that you either learn about or actually implement each day.

K = THE KEY IS CULTURE

11	Conduct an Assessment of your Current Culture and Share the Results with Everyone. Utilize input from personnel to identify the characteristics and behaviors that define your actual culture, as well as to brainstorm your preferred culture.
12	Hold Members of Management Accountable for Creating an Empowering Departmental Culture. Ask for quarterly progress reports.

E = EMPOWERMENT IS THE WAY

13	Implement a "Service Recovery Policy" that Allows Workers a Way to Correct Errors. Remember the complaint "golden rule": mess up, 'fess up, dress up!
14	Weed Out Unproductive Workers. Make it a priority to legally and effectively identify and remove chronically unproductive staff.
15	Implement a Dynamic, Grass-Roots Employee Recognition and Appreciation Process. Use the "My L.I.S.T." tool to get a handle on the little things that make your employees tick.
16	Make Everyone an Insider by Providing Staff with Honest, Accurate, Real-Time Information About the Organization.
17	Show Empathy and Develop Rapport by M.B.W.A. (Management By Walking Around). Try to dedicate at least 15% of your time to this practice.
18	Take a Front-Line Sabbatical. Walk a mile in your staff's shoes by serving in a front-line position for one day every three months.
19	Invest One Hour of Active Listening with Every Direct Report.
20	Schedule Quality, Interactive Weekly Staff Meetings.
21	Organize a Fun Staff Social at Least Once Every Quarter.

E = EDUCATION & ENGAGEMENT
22 Give Your Staff Members a Cause that Captivates the Imagination and Stirs the Soul. Exhort your staff to "Focus on Patient Care" by consulting with everyone to adopt a department-based patient satisfaction measurement goal.
23 Make the Front Line Accountable for Teaching Customer Satisfaction. Recruit the "best of the best" from among your front-line staff and train them to teach customer satisfaction to their colleagues and serve as peer role models for a one-year term.
24 Create a Mentoring Program.
25 Enact an Annual Education Plan. Develop an annual departmental/ unit continuing education plan.
26 Regularly Conduct the Leadership Empowerment Satisfaction Survey. The "Leadership Empowerment Satisfaction Survey" should be conducted two times each year.

P = PHYSICIAN ACCEPTANCE
27 Involve Your Chief of Staff in Your Nurse Retention Initiative and Related Patient Satisfaction Processes.
28 Conduct a Nurse Focus Group and Share the Results with Your Physician Staff.
29 Adopt a Physician Empowerment Policy.
30 Conduct a (Voluntary) Semi-Annual Physician Empowerment Survey.
31 Offer Nurse Assertiveness Communication Training.
32 Provide Joint Physician/Nurse Communication Training.

ACCOUNTABILITY
33 Undertake a Cost Analysis of Retention vs. Turnover Scenarios. This will help you calculate the true cost of recruitment and staff replacement activities.
34 Implement a Performance Review Incentive. Adopt a management bonus program designed to incentivize leadership based on nurse retention rates.
35 Conduct Exit Interviews With Every Departing Nurse. Utilize the information you collect for your organization's continuous improvement efforts.

Make a
Commitment

"If your ship doesn't come in, swim out to it."

— Jonathan Winters

One final question. Do you believe the goals set forth in this book are achievable?

They are; I assure you. But changing your hospital's organizational culture and modifying deeply rooted personnel behaviors must be a concerted effort that includes every member of your team, from the front line to the boardroom.

Is the status quo working for you? Will it ensure a dedicated and qualified staff next year or in the year 2020? If you're unsure, don't stick this book in a drawer. Use it as a blueprint for lasting organizational change. Considering the fact that most experts say that the total costs of recruiting and training a replacement staff member often equal or exceed 150% of the original staff member's annual salary, the hit your bottom line will take from those four nurses who chose to pursue another career path is likely to be close to $500,000.

If you can create an environment that encourages people to stay, how much money will you save? More importantly, how much will your people contribute if they feel valued and

appreciated and know that you respect them as individuals?

You have a choice. If you're not willing to change your organizational culture to induce skilled workers to stay, your hospital will continue to speed down the slippery slope of costly turnover and staffing shortfalls. Is this approach working for you? Is it attracting high-quality workers to the nursing profession?

These actions begin with you. Right here, right now – make a commitment to cultivating organizational change. Commit to doing 1,000 things just one percent better. Commit to making staff retention an organization-wide goal.

You can kick off the process by asking your staff these three little questions.

1. "If you were going to leave, what would be your number-one pet peeve?" (And if they reply, "I'm not leaving," just keep asking.)

2. "Do you reserve the right to change your mind?"

3. "What would cause you to change your mind?"

I agree with the sage who once said, "Life changes not when we begin to act, but when we commit to act."

I'll leave you with this final thought about the importance of commitment.

Commitment is what transforms a promise into reality.
It is in the words that speak boldly of your intentions,
And the actions which speak louder than words.
It is making the time when there is none.
Coming through time after time, year after year after year.
Commitment is the stuff that character is made of;
The power to change the face of things.
It is the daily triumph of integrity
Over skepticism.

Make a commitment – keep your commitment!

Addenda

Keep
Your **NURSES**
& Healthcare Professionals **for Life**™

Addenda A

Nurse Magnet Program

"When your life is filled with the desire to see the holiness in everyday life, something magical happens: ordinary life becomes extraordinary and the very process of life begins to nourish your soul."

— *Rabbi Harold Kushner*

The Nurse Magnet Program

By implementing a change in your hospital culture to improve nurse retention, you can qualify as a "Center of Nursing Excellence" through Custom Learning Systems Group Ltd.

The Magnet Recognition Program is another form of recognition but by your peers. The Magnet Recognition Program was created by the American Nurses Credentialing Center (ANCC) and is based on research completed by the American Academy of Nursing (ANCC, 2008). The applicant facility provides documentation and evidence that supports and verifies that they are implementing the Standards of American Nursing Association's Scope and Standards for Nurse Administrators, throughout the nursing service (ANA, 1996, Pub #NS-35).

Eligibility Requirements

To be eligible to apply, a healthcare organization must meet the following requirements:

The applicant nursing service system exists within a healthcare organization.

The healthcare organization nursing service includes one or more nursing settings with a single governing authority and one individual serving as the Chief Nursing Officer (CNO). The CNO is responsible for maintaining the standards of nursing in all areas where nurses practice. Organizations must have the Nursing Administration: Scope and Standards for Nurse Administrators (ANA, 1996).

Applicants for Magnet recognition are required to collect nurse-sensitive quality indicators, and benchmark that data at the highest level possible (National, state, specialty organization) to support research and quality improvements. Organizations must submit their own data (patient, nurse satisfaction, nurse sensitive indicators) to national data bases that compares organizations data against cohort groups.

Application and Documentation:

Organizations and systems can apply online, which will establish your status and collect appropriate information for your appraisal. After the application fee is processed, the CNO's resume as well as an organizational chart showing the CNO and nursing relationships of the facility is required. It is also mandatory to submit a copy of a national bench marked survey tool, used to assess nursing satisfaction.

Magnet Program Information

It is recommended to purchase the Magnet Recognition Program® Manual - Recognizing Nursing Excellence, to fully comprehend the application and appraisal process.

Contact:
American Nurses Credentialing Center
8515 Georgia Ave, Ste 400, Silver Spring, MD 20910-3492
www.nursecredentialing.org 1.800.284.2378
ANCC@ana.org   Magnet@ana.org

References: American Nursing Credentialing Center (ANCC), (2008). The Magnet Recognition Program® and ANCC Magnet Recognition®. Retrieved from www.ancc. nursecredentialing.org/PromotionalMaterials/products/MAGBRO07V2.pdf

Addenda B
Book at a Glance

The Big Picture

■   The nursing field is unstable with many questioning their interest of remaining in the field.

Healthcare Trends

■   We have to reestablish the agenda back centered on people issues.

The Facts and Issues in Nursing Today

■   We need to reduce our costs and improve our outcomes simultaneously.

Why are Nurses Leaving?

■   Healthcare is perceived as a lousy environment.

■   Appoint a Nurse Retention Officer and ask everyone

   1 If you were going to leave, what would be your number one peeve? And if they reply, "I'm not leaving." Ask it again and keep asking until they give you an answer.

   2 Do you reserve the right to change your mind?

   3 What would cause you to change your mind?

■   Get good at hiring right the first time.

Excellence is the Answer

- The cost of turnover is $95,000 per employee.
- There is a direct relationship between nurse retention and patient satisfaction.
- A one percent change in morale equals a two percent change in customer satisfaction.

The Key is Culture

- Change your culture or be doomed to repeat the past.
- Conduct an assessment of your current culture and share it with everyone.
- Utilize everyone to help you define your exact culture and brainstorm your new culture.
- Hold your management accountable to empower you to create a new culture.
- Write a vision statement for your new culture.

Empowerment is the Way

- Trust your people, give them responsibility, grant them the authority and hold them accountable.
- Employee morale has nothing to do with how hard people work.
- Value your people as your greatest asset.

Respect

- Common courtesy shouldn't be so uncommon that it is mistaken for genius.

Communication

- MBWA: Management By Wandering Around.
  Spend 15 percent of your time to stop and say hello to every individual (without an agenda on your part).
- Listen to your people.

Alignment and Trust

- The four pillars of trust are acceptance, reliability, openness, and congruence.
- Keep your agreements because people will remember them.

Recognition and Feedback

- Give people feedback on the things they do well and the things they don't do well.
- Recognition is only appreciated if it's a) timely, b) spontaneous, c) specific, and d) geared to that individual.

Empowerment

- Until your front line owns your customer service problems, you'll never solve your customer service problems.
- Empower your staff with the Complaint Golden Rule and establish a service recovery fund.

Education and Engagement

- When your people are learning, they're not leaving.
- Insider Information
- People want to be treated as an insider.

Coach and Champion

- If you want people to care about what they're doing, you first have to show them that you care about what they want to be.

Mentorship

- Telling people what they should be doing reminds you that you should practice what you teach.

- A mentor's role is to teach, guide, counsel and challenge.

Training and Tools

- People need the tools to do the job.
- Implement empowerment training.
- Ask the best of your front line staff to become trainers.
- The most powerful recruitment program is peers recruiting peers, because they believe in what they're doing.

Leadership

- Have quality, two-way staff meetings.
- Use the Semi-Annual Leadership Empowerment Satisfaction Survey to assess your own effectiveness as a leader.

Empathy

- The most useful thing you can do is empathize through self-disclosure.

Having Fun

- Schedule playtime for your staff.
- A team that plays together and hugs together, stays together.

Physician Acceptance

- Involve physicians in staff retention.
- Get an outsider to conduct a nurse focus group and share the results with your physicians.

Addenda C

Recommended Reading/Sites

Staff Retention

1. *Love 'Em or Lose 'Em: Getting Good People to Stay* - Beverly L. Kaye, Sharon Jordan-Evans

2. *Keeping Good Business People: Strategies for Solving the #1 Problem Facing Businesses Today* - Roger E. Herman

3. *Overturn Turnover: Why Some Employees Leave, Why Some Employees Stay & Ways to Keep the Ones You Want to Stay* - Paul R. Ahr, Thomas B. Ahr

4. *Competing for Talent: Key Recruitment and Retention Strategies for Becoming an Employer of Choice* - Nancy S. Ahlrichs

5. *Keeping the People Who Keep You in Business: 24 Ways to Hang on to Your Most Valuable Talent* - F. Leigh Branham

6. *The Teenage Worker* - Fred Martels, Kathy Pennell

7. *Creating Commitment: How to Attract and Retail Talented Employees by Building Relationships That Last* - Michael O'Malley

8. *Keeping Your Valuable Employees: Retention Strategies for Your Organization's Most Important Resource* - Suzanne Dibble

9. *Recruit & Retain The Best* - Ray Schreyer, John Lewis, Jr. McCarter

10. Harvard Business Review on *Finding & Keeping the Best People*

11. *Managing with Carrots: Using Recognition to Attract and Retain the Best People* - Chester Elton & Adrian Robert Gostick

12. *1,001 Ways to Reward Employees* - Bob Nelson

Nurse Retention

13. *The Nursing Shortage* - Nursing World (Jan. 31, 2001) - Brenda Nevidjon, and Jeanette Ives Erikson,

Change Management

14. *Leading Change* - John Kotter - Harvard Press

Recommended Websites Discussing The Nursing Shortage

American Nurses' Association	www.nursingworld.org
Nurses for a Healthier Tomorrow	www.nursesource.org/
Nursing Economics	www.ajj.com
National League of Nursing	www.nln.org
Bureau of Labor Statistics	www.bls.gov
American Hospital Association	www.aha.org
American Organization of Nurse Executives	www.aone.org
American Association of Colleges of Nursing	www.aacn.nche.edu
Allnurses.com	www.allnurses.com
Nurse.com	www.nurse.com

Other Websites:

Specific State Nurses' Association

Nursing Specialty Organizations

Source:

The Nursing Shortage - Nursing World (Jan. 31, 2001) - Brenda Nevidjon and Jeanette Ives Erikson

6 Powerful Reasons to Put Brian Lee to Work for You:

✔ **1. Brian Lee is a World-Class Author:** In addition to his busy speaking calendar, Brian brings the credibility of having authored five books including:
- **Keep Your Nurses and Healthcare Professionals for Life**
  How to Inspire, Retain, Motivate and Empower, Patient-Focused Nurses and Everybody Else
- **Satisfaction Guaranteed**™
  How to Satisfy Every Customer Every Time
- **One Minute Name Memory**
  How to Remember Every Name – Every Time – Forever!

Brian also has produced two dozen popular audio and video albums, as well as numerous articles.

✔ **2. Brian Lee Gets Immediate Results:** With a track record of personally speaking to over 750,000 people in the past 23 years as a professional speaker, Brian consistently earns an astonishing audience rating of 4.8 (out of a possible 5). Each year, Brian receives hundreds of letters testifying to the long-term impact and influence he has in the work place and with people's careers.

✔ **3. Brian Lee's Remarkable Customizing Skills are his Trademark:** Every speaking engagement is created from scratch for each new audience. The quote from Don Wood's letter (right) is typical of the feedback received from literally hundreds of meeting planners who consistently rave about Brian's unique 37 step process of custom tailoring and personalizing each and every presentation, right down to the detail of remembering the names of everyone in his audience.

✔ **4. Brian Lee Educates, Empowers, Entertains and Recommends:** Brian is not just a motivational speaker. He is a leading edge, high content educator who enhances his crystal clear delivery skills with a unique combination of sincerity, relevant humour and passion, with step-by-step recommendations for implementation. Put Brian on the platform for you, then get ready to see your people take action.

✔ **5. Brian Lee is a CSP – Certified Speaking Professional** Certified Speaking Professional (CSP) is an earned designation conferred by the National Speakers Association to recognize demonstrated commitment to the speaking profession through proven speaking experience. In 1993, Brian Lee received this prestigious certification. Fewer than 20 speakers in Canada and 500 people in the world have passed the rigorous criteria to attain this coveted designation.

✔ **6. Brian Lee IS Healthcare's "Mr. Enthusiasm"** Brian Lee focuses on the joy that is gained from a job well done. The nickname "Mr. Enthusiasm" wasn't created by a public relations firm, but rather "leapt" from the pages of tens of thousands of audience evaluation forms from Brian's diary of over 2,500 speaking engagements during the past 23 years.

"Your presentation, met our objectives and goals in educating and informing our attendees. Their comments such as "break through recommendations" and "totally gets what service means and how to move our employees to great" demonstrate the value received from your message. This is exactly what we were looking for and as a result now have many hospitals moving forward with HCAHPS data collection and reporting, as well as critically reviewing their own customer service situation."
– Don Wood, MD, Director, Utah Office of Primary Care and Rural Health

Brian Lee CSP

Keynotes/Seminars

- Anything You Can do, You Can do Better
- Advanced Presentations Skills for the Effective Healthcare Leader
- Breakthrough Strategies to Become the Employer & Provider of Choice
- Change Your Culture or be Doomed to Repeat The Past
- Communications, Trust and Collaboration
- Creating a High Performance Teamwork with People You Don't Know or Like
- Creating a Service Culture is NOT a Spectator Sport
- Enthusiasm is the Difference
- The HCAHPS Hospital of Choice
- Innovative Board Strategies to Become the Competitive Provider of Choice
- Inspiring Lifetime Loyalty
- Just DO IT!
- Keep Your Co-Workers for Life
- Keep Your Healthcare Professional Team for Life
- Keep Your Nurses & Healthcare Professionals for Life
- Keep Your Patients for Life in a Declining and Very Competitive Market
- Keep Your Physicians for Life
- Keep Your Volunteers for Life
- Managing Moments of Truth:
- Strategic Blueprint for Staff Retention Strategies for the CEO, CNE, and Senior Administrator
- Successful Strategic Leadership Retreats
- The 7 Attributes of Effective Hospital Board Meetings
- The CEO Service Excellence Initiative
- The Dynamics of Hospital Boards
- The Genius of Nurse Empowerment
- The New Role of the Healthcare Leader
- The Nurse Leadership Retention Academy
- The Physician/Nurse Communication Effectiveness Seminar
- The Physician Office Team Service Excellence Seminar
- The Physician's Practice Service Excellence Seminar
- The Physician Satisfaction/Nurse Retention Initiative
- The Physician Service Excellence Empowerment Seminar
- The Service Empowerment Leadership Course
- The Service Measurement Transformation System
- The Spirit & Soul of the Service Professional
- Thriving on Change
- Thriving on Multiple Priorities
- Transform Your Workplace Through World Class Patient Satisfaction
- Vision, Values, and Inspired Leadership
- Vision, Values, and Positioning
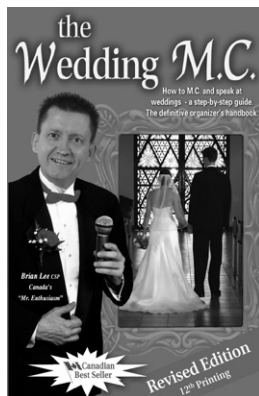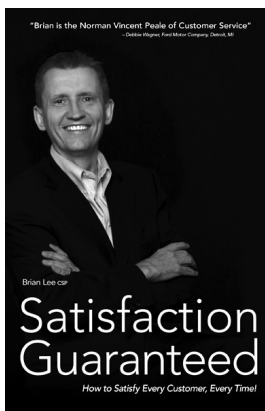- Win-Win Assertiveness

Book Library
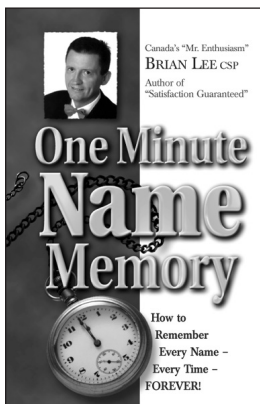
One Minute Name Memory
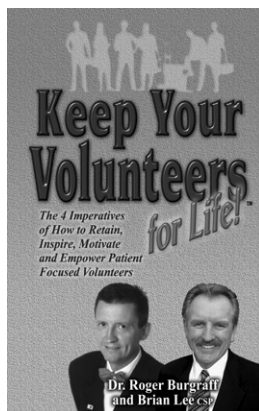*How to Remember Every Name,*
Every Time, Forever

The Wedding M.C.
How to M.C. and Speak at Weddings.
A step-by-step guide.

Satisfaction Guaranteed
How to Satisfy Every Customer,
Every Time!

Keep Your Volunteers for Life
How to Inspire, Retain, Motivate
& Empower Patient-Focused
Volunteers.

*"The only thing worse than
training your employees
and losing them,
is not training them
and keeping them."*

Zig Ziglar

*"Give me a lever long enough . . .
and single-handed,
I can move the world."*

Archimedes

*"An employee is not a liability
to be controlled and contained . . .
but an asset to be
empowered and trained."*

Brian Lee CSP

To purchase additional copies of this book,
or other books by Brian Lee
please contact us at **info@customlearning.com**

www.KeepYourNursesForLife.com

Other Websites

www.CustomLearning.com

www.CLScontinuingCare.com

www.HealthcareServiceExcellence.com

www.HealthcareSpeakersBureau.com

www.BrianLeeCSP.com