



JOAN GARBO CONSULTING

PREMIER CHANGE AGENT

COMMUNICATING YOUR PRACTICE

Not too long ago, my doctor referred me to a specialist for an exam. When I called to make the appointment, the receptionist answered the phone in a “ho hum” tone of voice, asking me if I could hold for a moment. Before I could say “yes” or “no”, I was listening to a local radio DJ give me condolences because it was Monday morning and the weekend was five days away. That should have been my first clue, but I waited patiently (excuse the pun) for the receptionist to return to my call. When she did, I told her I needed to make an appointment and that I was a new patient. She sighed heavily and then told me to hold again. When she came back to the phone, she proceeded in a flat tone of voice to get my basic information. After making the appointment, I asked her for directions to the office as I was unfamiliar with that part of town. Her response was “oh geez, you’ll have to hold” and again I was listening to a local radio station advertising discount furniture. I waited and did get the directions, but an hour later I found I was still thinking about the incident, and wondering why I was going to that doctor. My doctor had told me he was very good, but I figured that I live in Houston, a medical Mecca of the world. Surely there must be another good doctor in town that he could refer me to. And he did.



Not surprisingly, when I called the office to cancel the appointment I had just made, the receptionist just said “fine” and hung up, confirming my belief that I had done the right thing.

In an ideal world, this scenario would be an exception, and unfortunately, we do not live in an ideal world. Consequently, every day practices and businesses from coast to coast open their doors for business and unwittingly hang a sign out front that says “Sales Prevention Department” despite their conscious intentions to succeed. The problem lies in the fact that we tend to get so caught up in what we are doing and how we feel that we forget to attend to the consequences of those actions and attitudes. Everything we do and say, even what we don’t do or say, is a communication to the rest of the world.

I define effective communication as a message that is transmitted and, when received, produces a result with

the listener that is consistent with the intention of the speaker. Therefore, if you want to make sure that your communications are effective, you must attend to how the listener perceives communication. The impact or perception of the message is based on the components of the message: the words used, the tone and inflection of the speaker, and the visual aspects of the message (including body language, facial expressions, general appearance, etc.) These three components are NOT equally weighted and are distributed thusly:

Impact of Communication

7% = Words

38% = Intonation/inflection

55% = Visual/physiology

So what you say is no where near as important as how you sound and how you look when you speak. All of us have experienced the situation where we said the right words, but the “wrong” thing happened. When what you say doesn’t match up with how you sound or look, people will perceive you as insincere or inauthentic. For example, if I were to say “that’s terrific” while I had my hands on my hips, a scowl on my face and a nasty tone in my voice, you would think I was being sarcastic or upset.

When speaking on the phone, your tone of voice and inflectional patterns are even more important since the listener loses the visual clues of the message.

The visual aspect of communication includes how the office looks. This is obvious when you consider you would never wear a dirty uniform with blood spots on it! But you must also look from a more refined viewpoint: for example, a messy receptionist’s desk with coffee cups

and a clutter of charts and papers conveys a message of disorganization and lack of attention to details; dead plants and flowers in the reception area definitely send out the wrong message.

Frequently I give my clients the following assignment: doctor and staff all take a pad and pen and, starting from the parking lot, walk into and through the office looking at everything as if they were a new patient.

As they go through the exercise, they take independent notes of what they see. (Are there spots or stains in the

carpet? Are the magazines dog-eared?

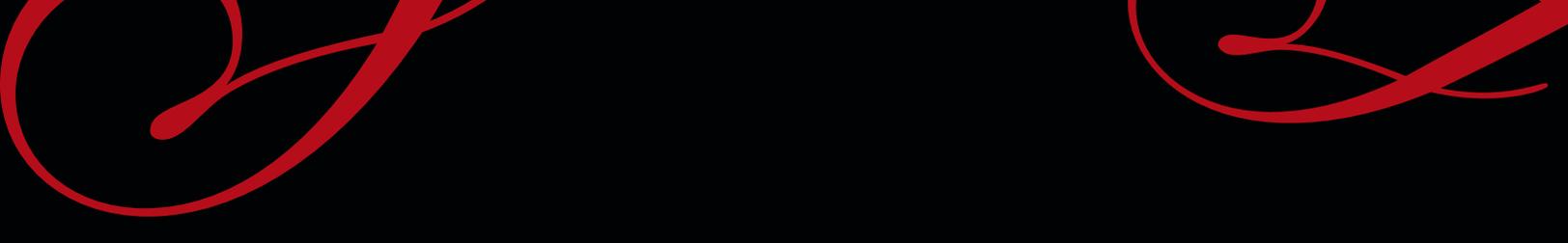
Is the bulletin board current? Are there any burned out lights? Are the ventilation ducts dusty?) Then they make up a master list of things that need to be done so that the physical appearance of the practice reflects a commitment to excellence.

The “attitudinal space” of the practice is one of the more significant factors patients use when distinguishing one practice from another. Market research

studies show that when patients select a practice to use, the cost of treatment for the majority of people is less important than the way they feel about their relationship with the doctor and staff. Consequently, a highly skilled doctor and staff may be counted on to produce superior technical results and at a reasonable fee and still be losing market share because of poor communication skills, attitude and mood in the practice.

Walt Disney attributed his reputation of excellence in customer service to his philosophy that if you take care of the employees, they will take care of the customers. In other words, if you want to have loyal patients you must first create loyalty among the staff. The

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first step in this ongoing process is for the doctor to have a clearly defined vision and mission for the practice, and to empower the staff to act on it. With vision comes inspiration; with inspiration come motivation, satisfaction, and resourcefulness. Without it, people tend to seek fulfillment from sources that, at best, can provide only momentary gratification. Without a vision, people start working for a paycheck and benefits that are never enough; and their focus shifts to a “what’s in it for me?” mode of thinking.

The second step is to focus on the relationships within the practice: doctor to staff, and staff to staff. Since relationships are a reflection of the level and quality of communication among the parties, it is critical to take steps to insure the highest quality of communication within the practice.

There are three basic areas of communication to focus on:

1. Communicating upsets and complaints. Most people do not know how to effectively talk about things that bother them. When upsets are not communicated, the buried feelings resurface at inappropriate times, or in covert ways, or the person resorts to gossip in order to retaliate for the upset.

2. Making requests. If you don’t clearly ask for what you want, you have little chance of getting it. It’s important to state specifically what you want, from whom and by when. Then make sure the person to whom you are making the request understands and agrees to the conditions that need to be met. Negotiating the conditions for mutual satisfaction is essential.

3. Giving and accepting acknowledgments. We all want to be acknowledged, but we tend to shrug off compliments, questioning whether we deserve them or what

the motivation is behind the compliment. Most conversations in offices are centered around what went wrong or what needs to happen. There is insufficient discussion about what was accomplished and praise for it.

Finally, it is absolutely essential that the doctor manages his/her mood at work. There’s an old adage that says “how goes the leader, so go the followers.” If the doctor isn’t excited about being at work, who else should or even can be? I believe that as soon as either doctor or staff walk in the front door “it’s show time!” It’s particularly difficult for staff to be enthused about work when the doctor isn’t. There are numerous approaches you can take to learn to manage your personal attitude. Since this entails a whole other article, suffice it to say here that you must become a student of life for life: turn your car into a traveling university with audio tapes that are inspirational, motivational and informational; attend to your personal growth with books and seminars. The key to producing an atmosphere that ensures the highest quality performance with staff and the perception of excellence in service by the patients, is the team’s commitment to growth and ongoing training.

Joan Garbo is a trainer and consultant specializing in effective communication skills, team building, and client relations. The results of her work are evidenced in increased client referrals, reduced stress, higher profits, and an increased sense of satisfaction and fun at work.

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