



HeartBeat

ON THE QUALITY PATIENT EXPERIENCE™

Insights, tips, tools and resources to help you achieve the unparalleled patient, family and employee experience



**RESHAPING
THE CULTURE
OF CARE**



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Soapbox: Listening to the Heart

By Jill Golde, Partner & SVP, Market Development at Language of Caring

Consider this powerful excerpt from a Blog called “The Unheard Heart: A Metaphor for Medicine in the Digital Age” by Clifton Meador, MD; Vanderbilt School of Medicine.

“A few months ago, a young cardiologist told me that he rarely listens to hearts anymore... He gets all the information he needs from echocardiograms, EKGs, MRIs, and catheterizations... He told me that these devices tell him vastly more than listening to out-of-date sounds via a long rubber tube attached to his ear... There was even an element of disdain. He said, ‘There is absolutely nothing that listening to hearts can tell me that I don’t already know from technology. I have no need to listen. So I don’t do it much anymore.’



I called my longtime friend and colleague, also a cardiologist. I knew him to be one of the best heart listeners. I asked him if he still listens to hearts. He answered, ‘Of course I do. I could not practice medicine if I didn’t... How could anyone not want to hear those murmurs, sometimes ever so soft, like whispers? Murmurs from the heart, even very faint ones, are trying to tell us significant things. Some sounds are very localized, even hidden or obscured by layers of air. And then there is the rhythm and the beat and the cadence that you cannot hear on the paper strip of the EKG. Also, careful listening is the only way to appreciate the rubs of friction if there are any. The devices are important, but the heart has its own spoken and unspoken language if you know how to listen.... Something real important happens between me and the patient when I listen.’

How many of us no longer listen to hearts? How many hearts go unheard each day? And the really big question: What becomes of the unheard heart?”

Dr. Meador talks about the missed information and missed opportunities that come when we allow a heart to go unheard. He calls for us to go beyond the use of medical devices and tune in with our eyes and ears to the intricacies of the heart as we care for patients.

Clues That Help Us HEAR the Heart

Beyond the stethoscope, how can we be sure to hear our patients’ hearts? We can start by asking very basic open-ended questions that encourage the patient to raise their issues, like “Tell me what’s on your mind today” and, “What else?” Then, importantly, we need to listen without interrupting.

But we can do more to encourage expressions of the heart. The article summarized below draws on many studies to describe concrete clues that reveal that the heart is trying to tell us something important to explore.



“Sometimes,
the technology
we use to listen
dampens instead
of amplifying
heart sounds.”

Lang, F., Floyd, M. & Beine, K (2000) Clues to patients’ explanations and concerns about their illnesses: A call for active listening. *Archives of Family Medicine*, 9(3):222-227.

Direct statement(s) by the patient of explanations, emotions, expectations, and impact of the illness (Balint, 1964)

Expression of feelings about the illness (without the patient naming a specific illness)

- Direct, projected, or denied expression of feelings or concerns
- Symptoms described with vivid intensity
- Nonverbal expression of concern, e.g., maternal grimace (Butler, 1995)

Attempts to explain or understand symptoms (without the patient naming a specific illness)

- Statements revealing effort to explain or understand symptoms
- Description of unnamed disease
- “Loaded questions” or statements (implies effort to understand)

Speech clues

- Repetition of statement or idea about the illness (Brown, Weston & Stewart, 1989)
- Speech censorship and prolonged reflective pauses (Neighbour, 1987)

Sharing a personal story

Behavior clues indicative of unidentified concerns, dissatisfaction, or unmet needs

- “Routine visit” without specific expressed concern or expectation (Barsky, 1981)
- Presence of other people during the visit
- Patient interrupts physician (Realini et al., 1995)
- “By the way . . .” statements at the close of the visit (White, Levinson & Roter, 1994)
- Reluctance to accept recommendations
- Seeking a second opinion or an early return appointment
- Expression of dissatisfaction with prior care (Barsky, 1981)

All of these are alerts for us. When we hear these, we would be wise to lean forward and gently probe. For instance:

- “You sound concerned?”
- “I’m not sure we’re getting at what is concerning you?”
- “I’m wondering if there is still something unsettling in your mind about this?”
- “I want to be sure you’ve shared with me everything that’s concerning you, so we can establish the best agenda for today?”
- “You look sort of skeptical. Please tell me what you’re thinking.”

For Dr. Meador, listening to the patient’s heart physically and spiritually is key to quality care and also to a strong connection and relationship between us and our patients. Sometimes, the technology we use to listen dampens instead of amplifying heart sounds.



- “To listen is to lean in softly with a willingness to be changed by what we hear.”

-- Mark Nepo

- “To have an open heart is to be fully awakened and truly alive.”

-- Vito Santana



Please Share your HEART-HEAD-HEART™ Story!

The HEART-HEAD-HEART communication model is catching on like wildfire throughout healthcare. We want to circulate a rich collection of stories of HEART-HEAD-HEART use with patients, families, coworkers, AND with people outside of work (kids, shopkeepers, etc.). If you have one, please share it with us, and we'll share it with others (crediting you of course, if you'd like). Be sure to describe 1) the situation, 2) they said, you said, their response, 3) the result/impact and 4) your feelings about it afterward. Share your story in whatever way is most convenient for you: in writing (a screen shot of text or word document), an audio or video file.

Please send to Wendy Leebov at wleebov@languageofcaring.com.



Read this moving letter to hospital staff, published in the *New York Times* from a man whose 34-year old wife died of an asthma attack.



Next Generation Patient Experience (NGPX)--The Event for Patient Experience Innovators
Phoenix, Arizona November 29 – December 1, 2016

Please join us! Language of Caring’s Wendy Leebov, Partner & Founder; Dorothy Sisneros, Partner & SVP, Client Services; and Jill Golde, Partner & SVP, Market Development will present a session called “*The Words We Use To Transform The Patient Experience*” on Tuesday, November 29 at 12pm MT. And, please visit our exhibit where you will access great resources and learn about our patient experience solutions. You can sign up for the conference by [clicking here](#). If you want to meet with Wendy, Dorothy, or Jill in person, please reach out to them by email:

Wendy Leebov – wleebov@languageofcaring.com

Dorothy Sisneros – dsisneros@languageofcaring.com

Jill Golde – jgolde@languageofcaring.com

We hope to see you there.



Constant interruptions increase stress and decrease efficiency. Create boundaries to stay more focused when you work, and preserve times you can relax.

1. Limit your ‘open door’ to certain hours. This minimizes interruptions, forces interactions to be more focused, and encourages self-dependence among employees.
2. Create a ‘do not disturb’ sign or symbol to let coworkers know times you are not to be interrupted.
3. Grant focused blocks of time to individual team members, rather than trying to accommodate everyone all the time.

For more details [click here](#).



LANGUAGE OF CARING WEBINAR SERIES PRESENTS A **COMPLIMENTARY WEBINAR**

WEDNESDAY,
December 7,
2016
1-2 PM
(EST)

How to Align Recognition Practices with Your Pursuit of the Great Patient Experience

It is human nature to want recognition for your strengths, accomplishments, hard work and contributions. Our employee survey results tell us that, while most of us recognize our teams for their efforts and results, our employees crave even more appreciation. In this webinar, we identify concrete ways to ensure that your recognition practices and programs align with, support and advance your organization’s values and the exceptional patient, family and employee experience.

Highlights:

- The elements of an appreciative culture
- Common myths and facts about employee recognition
- Tactics that spark commitment, engagement, and peak performance of individuals and teams
- Holiday Time: How your organization can promote meaningful gift-giving
- Our all-time favorite approaches

**SIGN UP FOR THE
COMPLIMENTARY WEBINAR
[HERE](#)**

WHO SHOULD ATTEND?

- *Patient experience champions, managers, supervisors, executives, physician leaders, practice managers, HR and employee engagement professionals, training and OD professionals.*

WEBINAR FACULTY



Wendy Leebov, Jill Golde, and Dorothy Sisneros, Partners at Language of Caring, are passionate advocates for creating healing environments for patients, families, and the entire healthcare team. They’ve served as healthcare leaders, organization development professionals, instructional designers, strategists, and coaches. Together, they provide high-impact programs and consulting services, supporting healthcare organizations with culture change strategies, training and tools for enhancing the patient, family and employee experience.



Achieve Communication Excellence with Our Patient Experience Solutions

- Web-based training programs that **hardwire** best practice communication skills
- **Proven** CAHPS and patient experience breakthroughs
- Engages and fulfills **Staff** and **Physicians**

TO LEARN MORE

Attend a Live Webinar Overview on Nov 15 or Nov 29 or **Contact Us**

Join the 200+ organizations who are transforming their cultures with the Language of Caring



American Red Cross



Contact Us!



314 300 7701



Jill Golde, MS, Dorothy Sisneros, MS, MBA and Wendy Leebov, EdD—partners at Language of Caring.

Spread the Resources

- Forward this month's Heartbeat email to others.
- Share and tweet the following link ezine:
Listening to the Heart

<http://languageofcaring.com/wp-content/uploads/2016/11/listening-to-the-heart.pdf>

Join our LinkedIn Group **“Quality Patient Experience and HCAHPS Improvement”** and add to the rich discussions.

PLEASE FOLLOW US!



Language of Caring

Achieving an unparalleled patient experience and a culture of caring through exceptional communication.