Speaking to the Heart of our Patients: Leading an Empathic Communication Educational Initiative

A Department of Nursing and Office of Patient Experience Collaborative

Dana Mullenbach, MSN, RN-BC; Holly Burkhartzmeyer, MAN, RN; Lori Arcand, PhD, MS, RN-BC; and Heather Preston, MS
Objectives

• Discuss background and key drivers for implementing nursing empathic communication education

• Share concepts of empathic communication skills

• Describe implementation of nursing education, sustainment, and evaluation

• Examine key learnings of initiative
Focus on Patient Satisfaction
Patient Expectations

Past

• Clinical outcomes
• Trust in provider was implicit
• Patients adjust to our system
• Healthcare base on geography

Current

• Relationship with care providers, empathic communications
• Trust is earned; Patients more educated/Partner in decision-making
• Patients are consumers, expect options and more flexibility
• Leverage online reviews / Fewer geographical barriers
What Constitutes An Unparalleled Experience?

Healthcare Perspective

- Technical expertise
- Outcomes
- Safety

Patient Perspective

- Access
- Responsiveness
- Interactions
  - Provider communication
  - Nurse/Staff communication
Empathic Communication Education to Enhance the Patient Experience

• Empathy has been increasingly identified as a key driver of satisfaction and quality of care within the staff-patient relationship.

• Focus to provide nursing staff with the skills and strategies to communicate empathy to patients - to connect with our patients in a way that makes them feel heard and understood.
Partnerships

Patient Experience

Department of Nursing
Connecting with Empathy

• Perspective Taking
  Gaining a clear understanding and appreciation of another person’s experience.

• Empathic Communication
  Overtly demonstrating and acknowledging a patient and family’s experience in a way that makes them feel understood.
Empathic Communication Skills

- Empathic Reflective Listening
- Service Recovery
- Legitimization
- Empathic Redirection
Empathic Communication Skills

- Empathic Reflective Listening
- Service Recovery - LEAD
- Legitimization
- Empathic Redirection
Empathic Reflective Listening

- Shows sensitivity to the emotion the patient is experiencing
  - Happy, sad, scared, frustrated, disappointed, confused, overwhelmed
- De-escalates high emotions
- Creates deeper connections
Building your Empathic Response

• Listen carefully

• Capture what the person is saying and/or feeling and share it back to them in your own words
  • Statement form
  • Use patient’s name
  • Use language that focuses on the patient
    • Start with a word other than “I”
      • “It sounds like…”
      • “You feel…”
      • “From your perspective…”
      • “This is really difficult for you.”
Empathic Reflective Listening

“No one seems to care that I will miss this entire season, much less the how this impacts my senior year in football.”
Empathic Communication Skills

- Empathic Reflective Listening
- Service Recovery
- Legitimization
- Empathic Redirection
Case Scenario

Mrs. Arcand is a surgical patient who, during morning rounds, was told she would be dismissing to home today. Before the dismissal paperwork was signed, the resident was called to the operating room. It’s now 11:45 a.m. and Mrs. Arcand puts on her light to talk to you.

She states,

“What time am I going to get out of here today? The doctors said I could leave right away this morning. We have a long drive ahead and I need to leave in the next 30 minutes. I don’t have time to wait for paperwork.”
Service Recovery - LEAD

Listen

Empathize

Apologize

Do Something

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Empathic Communication Skills

- Empathic Reflective Listening
- Service Recovery - LEAD
- Legitimization
- Empathic Redirection
“This is certainly not what you expected when you came to our organization.”

“Anyone in your situation would feel the same way.”

“Of course…”
Empathic Communication Skills

- Empathic Reflective Listening
- Service Recovery - LEAD
- Legitimization
- Empathic Redirection
Let’s meet Ms. Burk

“Ms. Burk, In order to provide safe care, we need to assure we are aware of what medications you are taking and if you have any allergies to medication. I see on your chart you were taking ibuprofen for pain.”
Empathic Redirection

- Be self-aware of your thoughts/feelings
- Engage your empathy
- Orient with sound/name
  - Optional – gentle touch
- Ask permission to jump in
- Reflect/Validate/Summarize what you’ve heard
  - Legitimize if appropriate
- Redirect to mutual goal
Task at Hand

Provide empathic communication education to the Department of Nursing staff employed at Mayo Clinic’s campus in Rochester, Minnesota.
Scope of Initiative

1 Hour Class

Boosts to Promote Sustainment

Multilevel Evaluations
Project management – Implementation of Empathic Communication Class

• Recruitment of facilitators and facilitators completing train-the-trainer program
• Content and sustainment planning
• Built evaluation tools and completed theming of evaluations
• Administrative scheduling, boost administration, and data collection
• Learning management system tracking, sending of boosts and evaluations
• Implemented unit based as opposed to centralized classes
  • Customization vs resource utilization
Class Objectives

• Recognize the impact of empathic communication for patients and staff

• Differentiate between sympathy, empathy, pity, empathic communication, courtesy

• Identify opportunities to utilize empathic communication and empathic redirection in your patient interactions

• Practice empathic communication skills and empathic redirection in patient care delivery
Educational Framework: Learning Domains

**Cognitive Domain:**
Didactic content, Video exemplars, Defining terms

**Psychomotor Domain:**
Case scenario practice utilizing specialty provided learner examples

**Affective Domain:**
Putting yourself in a patient’s shoes, Video learning
Educational Framework

Class content:

• Message from leadership and staff exemplar
• Defining terms and differentiating what is empathic communication
• Video highlighting empathy vs sympathy
• Dismissive language
• Engaging our empathy
• Case scenarios
• Cultural agility
• Reflective listening
• Constructing an empathic response
• Service recovery
• Empathic redirection
• Writing down a phrase to utilize following class
Resistance Management

• “I already know this and communicate this way…”

• “I took a class on therapeutic communication in college…”

• “I would be offended if someone told me how I feel…”

• “I don’t feel comfortable utilizing these skills…”

• “I am nervous that I will name the wrong emotion or make the situation worse…”

• “This could have been an online module…”
Sustainment of Concepts Through Microlearning – Dr. Art Kohn Model

• “If you do not use it, you lose it”

• “Boosters” to reset the forgetting curve - Regularly stimulating the recall of information to increase the retention of learned information over time

• “2-2-2” method: Ask learners a meaningful question about the material that requires them to recall information after 2 days, 2 weeks, and 2 months

• Boosting just three major subtopics from a one hour lecture increases retention of all the material from the lecture

• The type of boost (multiple choice question, fill-in-the-blank question, application question) makes no difference, provided the boost inspires effortful information processing in order to respond

Boosting Methodology to Promote Sustainment

Empathic Communication Class Reminders: Certificate and completion found on pages 2 and 3.

**LEAD**
- Listen
- Empathize
- Apologize
- Do Something

**Empathic Communication: Enhancing the Patient Experience**
- Seeing with the eyes of another
- Listening with the ears of another
- Feeling with the heart of another

**Strategies**
- Focusing on the patient's perspective first
  - “You’re concerned…”
  - Utilizing reflective listening statements to validate what the patient is saying and/or feeling:
    - “You have been waiting a long time.”
    - “Your time hasn’t been valued.”
    - “From your perspective…”

**2 Day**

**2 Week**

**2 Month**

**PX – Empathic Resources – Empathic Communication Tip of the Month**

Direct patient care staff in the Department of Nursing will receive empathic communication training in 2017, including monthly empathic communication concepts through INSITE. These concepts can serve as an introduction to the material for those who have not yet received the class, and reminders for those who have received the content.
Education Evaluation Strategy

**Level 1 Reaction**
- CE Activity Evaluation
  - Within 2 wks. after class
- Planned Action
  - Within 2 wks. after class

**Level 2 Learning**
- Value, Confidence, Utilization, Knowledge, & Barriers
  - Prior to education implementation
- Demonstration of Empathic Communication Skills
  - During class
- Confidence, Utilization, & Knowledge
  - 4 months after class attendance

**Level 3 Behavior**
- Application Exemplars, Promoting Factors, & Barriers
  - 4 months after class attendance

**Level 4 Organizational Impact**
- Patient Experience Data-Communication
  - Baseline pre-education ➔ post education
- Nurse Manager Assessment of Work Unit Communication Skills
  - Prior to education implementation & After education completion
- Nurse Leader Rounding Data-Communication
  - Baseline pre-education ➔ post education

**Education Evaluation Strategy**

**Content** ➔ **Sustainment** ➔ **Evaluation**
## Education Evaluation Methods

<table>
<thead>
<tr>
<th>Method</th>
<th>Level</th>
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<tbody>
<tr>
<td>Electronic survey via the learning management system</td>
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<tr>
<td>Electronic organizational survey tool</td>
<td>L2</td>
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<tr>
<td>Paper survey</td>
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<tr>
<td>Google Form®</td>
<td>L2</td>
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<tr>
<td>Reports of Patient Experience survey data</td>
<td>L4</td>
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<tr>
<td>Reports of Nurse Leader Rounding data</td>
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</table>
Level 1 (Reaction) Evaluation Results

Overall Rating

89% rated class as good or excellent
Level 1 (Reaction) Evaluation-Results

Planned Action

• “Give an example of how you will incorporate what you have learned from this activity into your practice.”

• Themes
  • Utilizing phrasing concepts and being mindful
  • Improved active listening
  • Use on a daily basis in interactions with patients, families, and co-workers.
  • Reflection and validation

“Instead of burning myself out by making their pain my pain, I will instead attempt to help the person feel “heard”. ..There are things I cannot fix, but by allowing the patient to feel heard, listened to, acknowledged; perhaps they can feel the hurt a little less acutely, a burden shared.”
Level 2 (Learning) Evaluation Results

*Items measured pre-education only*

- **Value**
  - High value for communicating with empathy to provide quality care

- **Barriers encountered related to using therapeutic communication in current practice**
  - Time
  - Skill level/confidence
  - Staff stress
  - High emotion patient/family situations
  - Staff attitudes towards being empathetic
Level 2 (Learning) Evaluation Results

**Confidence**

My confidence level related to communicating to patients or other staff that I understand their perspective (empathy) is:

- 0%
- 10%
- 20%
- 30%
- 40%
- 50%
- 60%
- 70%

Responses

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<th>Pre</th>
<th>Post</th>
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<tbody>
<tr>
<td>Very High</td>
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<tr>
<td>High</td>
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<tr>
<td>Neither High...</td>
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<tr>
<td>Low</td>
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<tr>
<td>Very Low</td>
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**Utilization**

I try to imagine myself in my patients' shoes when providing care to them

- Always
- Usually
- About half the time
- Seldom
- Never
- N/A

Responses

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Mrs. Smith, a patient in your area, comes to you and makes the following statement: “I have been waiting for nearly an hour for the team to round so I can go home. I do not understand what is taking so long and want some answers!” After listening to her concern, how would you respond?

A. Mrs. Smith, I am so sorry for your wait. This must be frustrating and you don’t feel your time is valued. Let me go and check to see what is causing the delay.

B. Mrs. Smith, you are frustrated and don’t feel your time is being valued. I am sorry for this wait. Let me go and check to see what is causing the delay. (LEAD format)

C. Mrs. Smith, I will go and check to see what is causing the delay. We are so sorry for this wait and know it is very frustrating.

D. Mrs. Smith, I am so sorry for your wait. I will go and check to see what is causing the delay. How frustrating this must be for you.
Level 2 (Learning) Evaluation Results

Demonstration of Empathic Communication Skills

**Instructor Rating of Overall Learner Knowledge/Skill Attainment in Class Activities**

<table>
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<tr>
<th>Task</th>
<th>Independent</th>
<th>Semi-Independent</th>
<th>Extensive Assistance Required</th>
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<tbody>
<tr>
<td>Differentiate Terms</td>
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<td>Practice Reflective Listening</td>
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<td>Demonstrate Empathic Response</td>
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<td>Identify Elements of Empathic Re-Direction</td>
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Level 3 (Behavior) Evaluation Results

• Provide an example of a situation in which you have used empathic communication techniques

  “Patient was upset due to long wait time, and I responded by validating the patient’s feelings, apologizing, and checking to see what the delay was.”

  “Since this class I have been very self-aware of how I communicate with my patients. I found that I am usually quick to sprout off a reason for why something didn’t happen instead of just listening to my patient. I am now actively practicing communicating in a more empathic way.”
Level 3 (Behavior) Evaluation Results

• Promoting Factors for Behavior Change
  • Writing down phrases
  • Centrally distributed memory boosts after the education
  • Role playing, formal and informal practice with colleagues, case studies, & games at work area level
  • Leadership support

• Barriers to Behavior Change
  • No barriers
  • Not enough time
# Level 4 (Organizational Impact) Evaluation Results

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<td>Concern</td>
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<td>↑</td>
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<td>Kept Informed</td>
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<td>Neutral</td>
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<td>Neutral</td>
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Level 4 (Organizational Impact) Evaluation Results
Nurse Manager Assessment of Work Unit Communication Skills

Staff's Ability to Manage Challenging Pt. Communication Situations

- Pre
- Post

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</tr>
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<td>Fair</td>
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<td>33%</td>
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<tr>
<td>Excellent</td>
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<td>18%</td>
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Level 4 (Organizational Impact) Evaluation Results

Nurse Manager Assessment of Work Unit Communication Skills

What percentage of patient/family grievances that are brought to your attention do you feel may have been avoided if there would have been improved communication between staff and patients?

- Pre: 53%
- Post: 32%
Level 4 (Organizational Impact) Evaluation Results
Nurse Manager Assessment of Work Unit Communication Skills

Challenges related to staff/patient communication which the manager becomes involved in

- Similar pre & post education
  - Time concerns (patient wait times, delays)
  - Staff concerns (staff requesting assistance managing concern)
  - Patient factors (patient’s frustrations/high emotions)

- Post education differences
  - Nurse Manager engagement occurred after staff had attempted to utilize empathic communication skills
  - Greater awareness by Nurse Managers of best practices related to empathic communication
Level 4 (Organizational Impact) Evaluation Results

Nurse Manager Assessment of Work Unit Communication Skills

Strategies found beneficial to sustain and utilize empathic communication in work area post-education

- Role modeling
- Debriefing with staff in situations encountered
- Coaching, practice, and discussion
- Reinforcement of learning to utilize with patients and peers
- Discussions during performance appraisals
- Address in newsletters, fliers in work area.
Level 4 (Organizational Impact) Evaluation Results

Nurse Leader Rounding

Have you been able to easily communicate with your healthcare team?

Increase from baseline* for “yes” responses

* Baseline was January 2017 when rounding fully implemented
Infusion into Nursing Education Curriculum

- Competency
- Website
- Nursing orientation – first week on campus
- Orientation resources on units
- Nurse residency program
- Education for unlicensed care personnel
What went well?

• Valuable content for entire Department of Nursing
• Strong partnership between departments
• Engaged facilitators
• Utilized robust evaluation strategy to drive curriculum changes and sustain change
• Sustainment in some work areas
• Staff application to their practice
• Contribution to increase patient satisfaction scores
• Content continues to grow and infuse to nursing curriculum
• Able to transfer program and key learnings to other sites
What Could Have Enhanced the Project?

- Train leaders prior to staff
- Stronger focus on sustainment at the unit level
- Planning together from the beginning if multisite
- Minimum of 90 minute sessions to promote practical application
- Separate sessions for non-direct patient care staff
- Requirement of minimum number of staff to hold a class
- Add specificity within evaluation questions to enhance assessment of staff skill utilization
A day at work for us is often a life event for our patient

How can we all connect with empathy to let our patients know we are listening, we understand what they are telling us, and their concerns are valid?
MAYO CLINIC QUALITY
PATIENT EXPERIENCE

CONNECTING WITH EMPATHY

“Above all else, empathy is essential to fulfilling our primary Mayo Clinic Value – the needs of the patient come first.”

—Anonymous
Questions & Discussion
References


Contact Information

Lori Arcand, PhD, MS, RN-BC, Nursing Education Specialist, Department of Nursing: arcand.lori@mayo.edu

Holly Burkhartzmeyer, MAN, RN, Nursing Education Specialist, Department of Nursing: burkhartzmeyer.holly@mayo.edu

Dana Mullenbach, MSN, RN-BC, Nursing Education Specialist, Department of Nursing: mullenbach.dana@mayo.edu

Heather Preston, MS, Senior Advisor, Patient Experience Training, Education, and Coaching: preston.heather@mayo.edu