Crucial conversations for improved staff performance

The Joint Commission announced in 2009 that rude language and hostile behavior pose serious threats to patient safety and quality of care. The Silence Kills study, conducted by VitalSmarts and the American Association of Critical-Care Nurses, reveals that more than three-fourths of caregivers regularly work with doctors or nurses who are condescending, insulting, or rude. A full third of study participants say the behavior is even worse and includes name calling, yelling, and swearing.

Although these disruptive and disrespectful behaviors can be hurtful, what prompted the Joint Commission to address them is the mounting evidence that these behaviors are also harmful. According to the Silence Kills study, more than 20% of healthcare professionals have seen actual harm come to patients as a result of disrespectful and abusive behavior between physicians, nurses, and staff.

Pervasive disrespect

The study found countless examples of caregivers who delayed action, withheld feedback, or went along with erroneous diagnoses rather than face potential abuse from a colleague. The Joint Commission has taken an important step by requiring more than 15,000 accredited healthcare businesses to create a clear code of conduct demonstrating the unacceptability of disruptive behavior and laying the groundwork for holding caregivers accountable for their behavior. Although this is important, the research shows that there is something far more immediate and powerful individuals and business owners can do to drive change: They need to break the code of silence and get their employees to speak up.

Business owners need to invest in increasing the will and skill of every employee to speak up when they see problems.

Unfortunately, when it comes to confronting bad and abusive behavior, most healthcare workers fall victim to negative peer pressure. The study showed that when doctors or nurses see disrespectful or abusive behavior, there’s a less than 7% chance they or anyone will confront the person who has behaved badly. The obvious reason is that confronting people is difficult. As a result, disruptive behavior has lingered for years awaiting social disapproval, yet receiving none. So if healthcare business owners want to not only secure the well-being of patients, but also increase employee
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(continued)

Real change will occur when we increase skills in conversation.

retention and engagement, the most immediate and effective thing they can do is increase caregivers’ skill and will to step up to crucial conversations immediately and directly when inappropriate behavior emerges.

Not surprisingly, the Silence Kills study found that the small number of professionals who speak up produces far better outcomes for their patients, colleagues, and themselves. They enjoy their jobs more, intend to stay in their positions longer, are far more productive, and see better patient outcomes. So what does it take to get your employees to speak up?

Four conversations with business owners

You can start to eliminate disruptive behavior by breaking the code of silence in four crucial conversations:

1. Administrations must go public about the pervasiveness of concerns. Most facilities attempt to put a good face on disruptive behavior by dismissing it as a problem with “a few bad apples.” The truth is that it happens every day. To influence change, business owners need to begin by acknowledging the frequency of concerns.

2. Caregivers must directly confront disruptive behavior. Business owners need to invest in increasing the will and skill of every employee to speak up when they see problems. The focus needs to be not just on confronting disruptive behavior, but also on speaking up when people see mistakes, incompetence, violations of safety standards, and more.

3. Medical directors and nurse managers must respond appropriately to escalations. The research also shows that the problem isn’t just upward; it’s also sideways and downward. Nurses fail to speak up to their peers when they have concerns. Managers fail to confront direct reports. The silence is deafening—and lower-level employees won’t feel the expectation to address concerns if business owners don’t lead the way.

4. Administration must back up sanctions when they occur. The most common reason people fail to speak up is because they adopt the attitude of “It’s not my job.” The second most common reason is the belief that “Others won’t back me up if I do.” Administration must make it clear that if code-of-conduct violations occur, they’ll back up those who take appropriate action.

5. As the saying goes, “Silence betokens consent.” Real change will occur when we substantially increase skills in conversation, especially the emotionally and politically risky conversations we so consistently avoid. When this vast potential of social pressure is tapped, healthcare facilities will become healthier for patients and caregivers alike.


Are your employees consulting, teaching, or training on behalf of your healthcare business?

Did you know that you can add coverage to your professional liability insurance policy that provides protection for services that employees of your healthcare business provide in a non-medical capacity? The Consulting Services Liability Endorsement is for employees of your healthcare business who use their knowledge as licensed medical professionals to provide non-medical services such as:

- Medical administration
- Training
- Legal consultation
- Speaking at seminars
- Teaching or acting as an expert witness
- Providing expert testimony
- Rendering advice in their area of specialization
- Legal consultation.

Are your employees using their skills and knowledge in settings that don’t involve direct patient care? More and more often, healthcare professionals are participating in educational and consulting activities in addition to—or instead of—direct patient care. However, did you know these activities may not be covered under your current Professional Liability insurance policy?

There’s an easy and affordable way to protect your employees from the consequences of a lawsuit resulting from these services. Add the Consulting Services Liability Endorsement to your professional liability policy for only $25 a year per employee. This coverage is available whether your employees are full-time or part-time, while they’re providing services on behalf of your healthcare business.

If you have any questions regarding how to add the Consulting Services Liability Endorsement to your policy or just want additional information, please contact us at 1-888-288-3534, Monday through Friday, 8 am to 6 pm, EST.
Evaluate the use of ICs in your practice

Business owners are accustomed to providing professional liability insurance protection for employees, but it’s easy to neglect independent contractors (ICs). That neglect can be costly. For example, an Illinois court decision applied the “doctrine of apparent agency” in holding the hospital liable for the negligence of its “employees.” In this case, the “employee” was a physician.

Take steps to protect yourself legally by ensuring you have the IC policies included in the staff headcounts you provide NSO & HPSO.

Hiring the IC
Screen a potential IC as carefully as your employees. That includes verifying education, licensure, and work history. Conduct a background check and check references.

Have a signed agreement with the IC that outlines responsibilities and expectations. Provide ICs with copies of protocols or risk management programs used in your business and document that you did so.

Ask ICs to provide evidence that they have liability insurance. Even if they do, however, you still need to have your own coverage for them for a number of reasons. You could be vulnerable to a “no coverage” situation in a number of ways, including:
• the potential for differences in coverage forms, i.e. “claims made” vs. “occurrence”
• the coverage and limits could vary from one insurance provider to the next
• ICs could allow their policy to lapse or may cancel it mid-term and neglect to notify you.

Forms and more
Take special care in advertising. Be sure your marketing materials don’t use statements such as “our physical therapists” if they are, in fact, ICs. Don’t include ICs in staff meetings, training, and social work functions–keep the relationship separate.

The IRS is particularly interested in whether the person you work with is an employee or an IC. You don’t generally have to withhold or pay taxes on payments to ICs.

Don’t be caught off-guard
Although ICs are an attractive option to save time and money, the bottom line is they represent the same risk to your organization as your employees. Some simple steps will help protect your business.

Cynthia Saver, MS, RN, President, CLS Development, Columbia, Maryland.

My Account
Our website features an online self-service tool that NSO & HPSO customers can use to perform a number of transactions on their policy. You have the ability to make payments, change an address, report an incident or claim, and perform other self-service functions.

In an effort to improve the service we provide to our clients, we’d like to announce that coming soon and when you provide your e-mail address to us, you can enjoy receiving your next billing notice and certificate of insurance via e-mail! Please provide us with your current e-mail address so you can take advantage of this time-saving, convenient service.

All you need to do is call our Customer Service Center at 888-288-3534, and a service associate will be happy to add your e-mail address to your account.

As always, our self-service options are available to allow clients to process transactions at their convenience, at any time, from any location.
Beyond Wikipedia and Google

When you’re researching a topic online, it’s easy to turn to Wikipedia or Google, do a quick search, and find what you need. But have you thought about where the information that’s posted on Wikipedia and Google actually comes from?

When it comes to medical information, you want to make sure the material you use comes from a reliable, trustworthy source. Wikipedia may seem like a virtual version of the encyclopedias that sit on library shelves, but did you realize that anyone can post information to the site? There’s very little accountability on Wikipedia—anyone from the guy down the street who’s never opened a medical textbook in his life to the pharmaceutical sales rep who wants to show his product in a favorable light can add information to Wikipedia or edit what’s already there.

If you do a Google search, how do you know that the sites that come up on the first one or two pages are reliable? They’re just ranked by popularity—how many people have visited the sites. Some of your search results may have even paid to get to the top of the list!

There are some trustworthy places you can go to find up-to-date, accurate information. If you’re looking for medical articles, PubMed (www.ncbi.nlm.nih.gov/pubmed) is the place to start. The PubMed database houses more than 19 million citations for biomedical articles. Just type in a few keywords and you can find the latest published research on any topic.

If you’re looking for comprehensive information on health and safety topics, the Centers for Disease Control and Prevention (www.cdc.gov) provides a wealth of credible, reliable information on diseases and conditions, statistics, emergencies and disasters, and so much more. eMedicine (www.emedicine.com) is a medical reference filled with evidence-based content, updated regularly by more than 8,000 physician or healthcare provider authors and editors.

No matter where you go online for the latest medical information, make sure the sites you visit are reputable and accurate.