

PATIENT SERVICES REPRESENTATIVE

Workbook



NAHAM Accredited Program in Patient Access by the National Association Healthcare Access Management (NAHAM)

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Moments of Truth

How would you define your job?
How would you define your job from a patient's point of view?
List 5 Moments of Truth that you frequently experience with patients:
1)
2)
3)
4)
5)
Choose two Moments of Truth from the list above and answer the following questions about each. What are the patient's expectations? How do you respond to them?
Moment #
Patient expectations:
Your response:

Moment #	
Patient expectations:	
Your response:	

How can you rephrase the following statements so that they express respect, caring, and/or competence?

	EXAMPLE		
Instead of: "What do you want?"	Say: "May I help you?"		
Instead of: "No"	Say: "I realize you need the test results today, but Dr. Lopez has to give you that information. I'll page her and get back to you within the next hour."		

How would you say this?

1)	Instead of: "You're wrong."
	Say:
2)	Instead of: "I don't know."
	Say:
3)	Instead of: "I can't."
	Say:
4)	Instead of: "I'm just a nurse's aide."
	Say:
5)	Instead of: "What is this regarding?"
	Say:
6)	Instead of: "We really messed up."
	Say:

7)	Instead of: "I'll get back to you."
	Say:
8)	Instead of: "If you want an appointment today, you'll have to be here at 1:00."
	Say:
9)	Instead of: "I'll see what I can do."
	Say:
10)	Instead of: "It's crazy here today."
	Say:
	·

Responding to Complaints

Decide which responses are appropriate and which aren't for handling complaints.

Put an "X" in the correct column on the right:	Appropriate	Not Appropriate
Tell the person to calm down.		
Listen without interrupting.		
Don't take the anger personally.		
Defend the organization or yourself.		
Scream back.		
Try to steer the person to a more private area.		
Empathize with the person.		
Point out how foolishly the person is behaving.		
Agree to take care of the problem.		
Support the person without necessarily agreeing.		
Try to stay calm.		
Keep an open mind about who's wrong.		
Ask questions to get more information.		
Apologize, even if it's not your fault.		
Don't take any responsibility on yourself.		
If you can't handle the situation, find someone who can.		

Do you meet patients' expectations?

Complete this worksheet AFTER viewing the video.

Describe your job as you perceive it:			
How would you describe your interactions with patients?			
Put an "X" in the correct column on the right:	Needs Improvement	Adequate	Good
I greet them pleasantly.			
I use their name when possible.			
I look them in the eye when I speak.			
I respect their need for privacy.			
I try to be understanding and caring.			
I try to make them physically comfortable.			
I listen to them without interrupting.			
I try to uncover problems or concerns.			
I answer all questions as clearly and thoroughly as possible.			
I respond to their complaints or problems.			
(Needs improvement = 1 pt., Adequate = 2 pts., Good = 3 pts.)	•		•
TOTAL POINTS			

Do you really meet patients' expectations?

Complete this worksheet AFTER viewing the video.

Describe your job as you perceive it:		Describe your job as you perceive it:				
Iow would you describe your interactions with patients?						
Put an "X" in the correct column on the right:	Needs Improvement	Adequate	Good			
I greet them pleasantly.						
I use their name when possible.						
I look them in the eye when I speak.						
I respect their need for privacy.						
I try to be understanding and caring.						
I try to make them physically comfortable.						
I listen to them without interrupting.						
I try to uncover problems or concerns.						
I answer all questions as clearly and thoroughly as possible.						
I respond to their complaints or problems.						
(Needs improvement = 1 pt., Adequate = 2 pts., Good = 3 pts.)			<u> </u>			

WORKSHEET 1 (Exercise A)

1) THE LOST WOMAN AND CHILD

When communication fails, it is rarely the fault of one person or a single element of the communication process. The following exercise provides an opportunity to analyze the communication failures illustrated in the video, to better understand where and how the communication process broke down. In each case, indicate which elements in the communication process you believed failed and the reason the failure occurred.

What elements of the husband's new room?	cess failed to caus	e the woman to ha	ve so much difficu	ılty finding her
Sender				
F				
Environment				
Language				
_				
Receiver				
Feedback				

2)	ARGUING CO-WORKERS How and why did the frustration and anger producing miscommunication occur?				
	Sender				
	Environment				
	Language				
	Receiver				
	Feedback				
	reduck				
3)	HEART PATIENT'S VISITOR What elements in the communication process failed and caused him to go to the wrong room and mistakenly believe his friend had died?				
	Sender				
	Environment				

Language	
_	
Receiver	
Feedback	
	LING PATIENT
	nilure in communication frustrated this woman to such a level that she spilled the pitcher of
water on the flo	001?
Sender	
bender	
Environment_	
-	
-	
_	
Language	
Receiver	
Feedback	

WORKSHEET 2 (Exercise B)

Your Communication I.Q.

The more we understand the process of communication, the better the odds that our efforts to communicate will succeed. The following exercise is designed to help you determine your communication I.Q. Give yourself ten points for every correct answer.

1)	In any written or verbal communication, our understanding of our <i>receiver</i> , and choosing our words accordingly, can greatly improve our chances for being understood.					
	True □	False □				
2)	An <i>environment</i> with a to concentrate.	distractions actually helps communication because it forces the sender and the receiver				
	True □	False □				
3)	One of the reasons peo	ople miscommunicate is because we tend to think slower than we talk.				
	True 🖵	False □				
4)	An explosion in the us our chances for misco	se of computers and other new technology in the healthcare industry has greatly reduced emmunication.				
	True □	False □				
5)		therently imprecise, we cannot assume that the words we use in a communication will ag for the <i>receiver</i> as they do for us.				
	True □	False □				
6)	In any verbal commun	nication, the role of the <i>receiver</i> is simply to focus on hearing what the <i>sender</i> is saying.				
	True 🖵	False □				
7)	The Sender bears total	l responsibility for the success or failure of a communication.				
	True □	False □				
8)	When engaging in feed as they have been said	dback, the receiver should never paraphrase the sender's words, but repeat them exactly l.				
	True 🗖	False □				
9)	Listening is not intuit	ive, but a learned skill. Mastering this skill requires effort and concentration.				
	True □	False □				
10)	For successful commu	unication, you must succeed in at least four of the five steps outlined in the video.				
	True 🗖	False □				

WORKSHEET 3 (Exercise D)

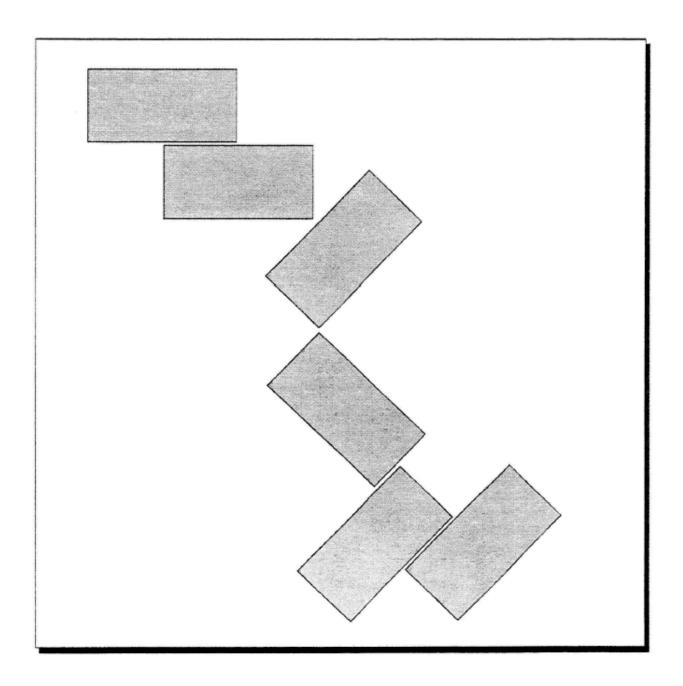
Listening Skills - Self Evaluation

"We were given two ears but only one mouth. This is because God knew that listening was twice as hard as talking."

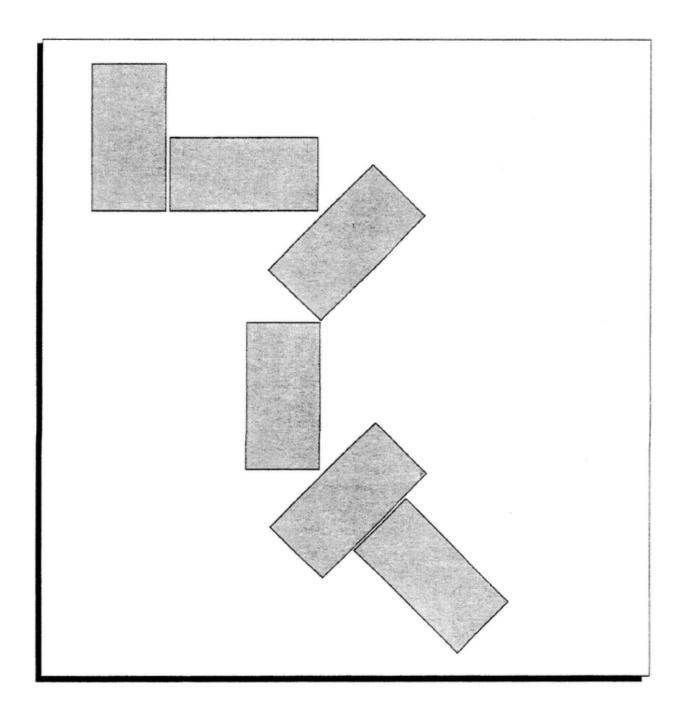
The following four minute exercise is designed to help you evaluate your ability as a listener. No one will see your answers but you, so be honest with yourself. The first step to building effective listening skills is to be aware of where your weaknesses are, so you know what to work on. Check the square that best describes your answer, (1) Always, (2) Most of the time, (3) Sometimes, (4) Occasionally, (5) Never.

As a listener	Always		Neve		r	
	1	2	3	4	5	
1) I look directly at people when they are speaking, and maintain comfortable eye contact.						
2) I can place myself in the speaker's position and understand his/her feelings.						
3) I understand what people mean, not simply hear what they say.						
4) I am aware of a speaker's inflections and body language and usually understand what they are telling me about the speaker's feelings						
5) I try to listen with an open mind, free of biases.						
6) I don't interrupt, correct, or complete sentences when others are speaking.						
7) I respond to the speaker non-verbally by nodding or with facial expressions that demonstrate I am listening						
8) I control any habits or mannerisms that might distract the speaker or others listening.						
9) I listen and show respect to the speaker even when I'm not interested in the subject.						
10) I continue to listen and show respect to a speaker even when I feel I may know more about the subject.						
11) I concentrate on the speaker's ideas and concepts, rather than try to memorize specific facts and figures.						
12) I ask questions or rephrase the speaker's comments, to ensure that I understand what has been said.						
13) I listen to the speaker with disciplined concentration, not letting my thoughts wander						
14) I think about the subject under discussion before responding.						
15) I wait for the speaker to complete the presentation before forming my opinion on what has been said						
16) I judge what has been said based on its merits rather than on how I may feel about the speaker.						
17) I am able to ignore the thoughts and comments of others, and form my own opinions about what the speaker is saying.						
18) I ask relevant questions for clarification on points that are technical or that I do not understand.						
19) I take notes when notes are appropriate.						
20) I am able to re-sort the order and importance of information when a speaker's presentation is not correctly or effectively presented.						

WORKSHEET 4 (Pattern A)



WORKSHEET 4 (Pattern B)



ACTIVITY

Determining Primary, Secondary, and Tertiary Coverage

Directions: Assume that all of the adults in the following questions have active coverage. For each scenario, indicate which party would be primary, secondary, tertiary and so on, by writing 1, 2, 3, or 4 in the blank space next to the person. If the person is not responsible for the dependent(s) at all, write N/A.

1)	A remarried mother has custody of her children six months of the year. Her coverage was effective 6/1/1999 and her date of birth is 19/15/CCYY-35. The natural father's coverage was effective 5/1/2000, and his date of birth is 8/10/CCYY-41. The mother's husband's coverage was effected 5/1/1998, and his date of birth is 9/1/CCYY-32. The father's wife's coverage was effective 6/15/1999, and her date of birth is 7/4/CCYY-44
	Mother Stepfather Stepmother
2)	A remarried mother has custody of her children. However by court decree, the father has financial responsibility for their health care costs. The mothers DOD is $4/1/CCYY-34$, and her coverage was effective $2/15/2000$, and his date of birth is $8/10/CC/YY-37$, and his coverage was effective $3/1/1997$, the stepfather's DOB is $12/15/CCYY-37$ and his coverage was effective $3/1/1996$, the stepmothers DOB is $8/17/CCYY-35$ and her coverage was effective $6/1/1999$
	Mother Stepfather Stepmother
3)	Two natural parents are married. The mother's DOB is $7/1/CCYY-28$. The father's DOB is $7/1/CCYY-29$. The mother's effective date of coverage is $6/1/1998$. The fathers effective date of coverage is $6/1/1999$
	Mother Stepfather Stepmother
4)	Two natural parents are married. The mother's DOB is $7/1/CCYY-28$. The father's DOB is $7/1/CCYY-29$. The mother's effective date of coverage is $6/1/1998$. The father's effective date of coverage is $6/1/1999$. The mother's plan does not have a COB provision.
	Mother Stepfather Stepmother
5)	Two natural parents are divorced and neither has remarried. By court decree, the grandparents have legal custody of the children. Also by court decree, the father has financial responsibility for the children's medical care. The mothers DOB is 4/1/CCYY-34, and her coverage was effective 2/15/2000. The father's DOB is 4/15/CCYY-37, and his coverage was effective 3/1/1997. The grandmother's DOB is 12/15/CCYY-60, and her coverage was effective 3/15/1986. The grandfathers DOB is 8/17/CCYY-65, and his coverage was effective 6/1/1989.
	Mother Stepfather Stepmother

EXERCISE 3-1

Directions: Calculate the amount of deductible that will be taken and answer the following questions.

The Apple family is covered under the Winter Insurance Company/White Corporation contract. Their previous deductible payments are as follows:

	Annie	Adam	April	August	Ashley
Carryover paid	0.00	5.00	10.00	55.00	0.00
Deductible paid	10.00	0.00	5.00	5.00	0.00

1) What is the individual deductible limit on this contract?	
2) What is the family deductible limit on this contract?	
3) Is the family limit aggregate or non-aggregate?	
4) How much has been paid toward the family deductible?	
5) Annie incurs allowed charges of \$35. How much will be applied to the deductible?	
6) How much has Annie now met on her deductible?	
7) How much has now been paid toward the family deductible?	
8) August incurs allowed charges of \$55. How much will be applied to the deductible?	
9) How much has August now met on his deductible?	
10) How much has now been paid toward the family deductible?	
11) April incurs allowed charges of \$55. How much will be applied to the deductible?	
12) How much has April now met on her deductible?	
13) How much has now been paid toward the family deductible?	
14) Adam incurs allowed charges of \$60. How much will be applied to the deductible?	
15) How much has Adam now met on his deductible?	
16) How much has now been paid toward the family deductible?	
17) Annie incurs allowed charges of \$35. How much will be applied to the deductible ?	
18) How much has Annie now met on her deductible?	
19) How much has now been paid toward the family deductible?	

EXERCISE 3-2

Directions: Calculate the amount of deductible that will be taken and answer the following questions.

The Bear family is covered under the Rover Insurers, Inc./Red Corporation contract. Their previous deductible payments are as follows:

	Brad	Bonnie	Barbara	Brian
Carryover paid	0.00	5.00	10.00	55.00
Deductible paid	10.00	0.00	5.00	5.00

1) What is the individual deductible limit on this contract?	
2) What is the family deductible limit on this contract?	
3) Is the family limit aggregate or non-aggregate?	
4) How many people are needed to meet the family deductible for this year?	
5) Bonnie incurs allowed charges of \$55. How much will be applied to the deductible?	
6) How much has Bonnie now met on her deductible?	
7) How many people are now needed to meet the family deductible?	
8) Brian incurs allowed charges of \$85. How much will be applied-d to the deductible?	
9) How much has Brian now met on his deductible?	
10) How many people are now needed to meet the family deductible?	
11) Barbra incurs allowed charges of \$105. How much will be applied to the deductible?	
12) How much has Barbara now met on her deductible?	
13) How many people are now needed to meet the family deductible?	
14) Brad incurs allowed charges of \$60. How much will be applied to the deductible?	
15) How much has Brad now met on his deductible?	
16) How many people are now needed to meet the family deductible?	
17) Bonnie incurs allowed charges of \$35. How much will be applied to the deductible?	
18) How much has Bonnie now met on her deductible?	
19) How many people are now needed to meet the family deductible?	
20) Brian incurs allowed charges of \$35. How much will be applied to the deductible?	
21) How much has Brian now met on his deductible?	
22) How many people are now needed to meet the family deductible?	
23) Barbra incurs allowed charges of \$55. How much will be applied to the deductible?	

24) How much has Barbra now met on her deductible?	
25) How many people are now needed to meet the family deductible?	
26) Brad incurs allowed charges of \$60. How much will be applied to the deductible?	
27) How much has Brad now met on his deductible?	
28) How many people are now needed to meet the family deductible?	
29) Bonnie incurs allowed charges of \$35. How much will be applied to the deductible?	
30) How much has Bonnie now met on her deductible?	
31) How many people are now needed to meet the family deductible?	

EXERCISE 3-3

Directions: Calculate the amount of deductible that will be taken and answer the following questions.

The Carpenter family is covered under the Ball Insurance Carriers/Blue Corporation contract. Their previous deductible payments are as follows:

	Carry	Connie	Cathy	Chris
Carryover paid	0.00	5.00	10.00	55.00
Deductible paid	10.00	0.00	5.00	5.00

What is the individual deductible limit on this contract?	
2) What is the family deductible limit on this contract?	
3) Is the family limit aggregate or non-aggregate?	
4) How many people are needed to meet the family deductible?	
5) Connie incurs allowed charges of \$35. How much will be applied to the deductible?	
6) How much has Connie now met on her deductible?	
7) How many people are now needed to meet the family deductible?	
8) Carry incurs allowed charges of \$55. How much will be applied to the deductible?	
9) How much has Carry now met on her deductible?	
10) How many people are now needed to meet the family deductible?	
11) Chris incurs allowed charges of \$60. How much will be applied to the deductible?	
12) How much has Chris now met on his deductible?	
13) How many people are now needed to meet the family deductible?	
14) Chris incurs allowed charges of \$35. How much will be applied to the deductible?	
15) How much has Chris now met on his deductible?	
16) How many people are now needed to meet the family deductible?	
17) Connie incurs allowed charges of \$95. How much will be applied to the deductible?	
18) How much has Connie now met on her deductible?	
19) How many people are now needed to meet the family deductible?	
20) Carry incurs allowed charges of \$45. How much will be applied to the deductible?	
21) How much has Carry now met on her deductible?	
22) How many people are now needed to meet the family deductible?	
23) Cathy incurs allowed charges of \$105. How much will be applied to the deductible?	

24) How much has Cathy now met on her deductible?	
25) How many people are now needed to meet the family deductible?	
26) Carry incurs allowed charges of \$85. How much will be applied to the deductible?	
27) How much has Carry now met on her deductible?	
28) How many people are now needed to meet the family deductible?	
29) Chris incurs allowed charges of \$85. How much will be applied to the deductible?	
30) How much has Chris now met on his deductible?	
31) How many people are now needed to meet the family deductible?	
32) Cathy incurs allowed charges of \$90. How much will be applied to the deductible?	
33) How much has Cathy now met on her deductible?	

BALL INSURANCE CARRIERS

(800) 555-5432

3895 Bubble Blvd. Ste. 283, Boxwood, CO 85926

(970) 555-5432

INSURANCE CONTACT: Betty Bell

PHONE NUMBER: (970) 555-9876

Policy: Blue Corporation, 9817 Bobcat Blvd., Bastion, CO 81319

Insurance Group # and Suffix: 98135/BLUE

Basic/Major Medical Plan

Effective 09/1/93

ELIGIBILITY EMPLOYEE: Must work a minimum of 30 hours per week. Is eligible for coverage the first of the month following three consecutive months of continuous employment.

DEPENDENTS: Are eligible for coverage from birth to age 19 or to age 23 if a full-time student or handicapped prior to age 19/23 (proof of disability must be furnished within 31 days after dependent reaches limiting age). Not eligible as a dependent if eligible as an employee. Unmarried natural children, legally adopted and foster children are included (includes legal guardianship). If both parents are covered by the plan, children may be covered by one employee only.

EFFECTIVE DATE EMPLOYEE: If written application is made prior to eligibility date, coverage becomes effective the first of the month following three months of continuous employment.

DEPENDENTS: The date acquired by the covered employee becomes the effective date if written application is made within 31 days of eligibility date. If confined in a hospital on date of eligibility, coverage will not start until the first of the month following the date the confinement ends. Newborns are automatically covered for the first 30 days following birth. Coverage will be terminated after 30 days unless written application for coverage is submitted by the employee within 31 days of birth.

TERMINATION OF COVERAGE EMPLOYEE: Coverage terminates the last day of the month following termination of employment, or when the employee ceases to qualify as an eligible employee, or following request for termination of coverage.

DEPENDENTS: Coverage terminates the date the employee's coverage terminates or the last day of the month during which the dependent no longer qualifies as an eligible dependent.

BASIC BENEFITS

PREADMISSION TESTING - Outpatient diagnostic tests performed prior to inpatient admissions; paid at 100% of UCR.

SUPPLEMENTAL ACCIDENT EXPENSE - 100% of the first \$300 for services incurred within 90 days of accident.

INPATIENT HOSPITAL EXPENSE

DEDUCTIBLE: \$50.

ROOM AND BOARD: 100% Up to semi-private room charge. ICU up to \$600 per day.

MISCELLANEOUS FEES: 100% Unlimited.

MAXIMUM PERIOD: Ten days per period of disability.

SURGERY

CONVERSION FACTOR: \$8.50.

CALENDAR YEAR MAXIMUM: \$1,600 per person.

REMARKS: Voluntary sterilizations covered.

ASSISTANT SURGERY

CONVERSION FACTOR: \$8.50.

CALENDAR YEAR MAXIMUM ALLOWANCE: \$320 per person. Maximum of 20% of surgeon's allowance or billed charge, whichever is less.

REMARKS: Voluntary sterilizations covered for women only.

IN-HOSPITAL PHYSICIANS

DAILY MAXIMUM: \$21 for the first day; \$8 per day thereafter.

MAXIMUM PERIOD: Ten days per period of disability.

REMARKS: Only one doctor can be paid per day.

ANESTHESIA

CONVERSION FACTOR: \$7.50.

CALENDAR YEAR MAXIMUM: \$300 per person.

REMARKS: Voluntary sterilizations covered.

OUTPATIENT PHYSICIANS VISITS

CONVERSION FACTOR: \$7.50.

CALENDAR YEAR MAXIMUM: \$300 per person.

REMARKS: Chiropractors, M.D.s, D.O.s and acupuncturists allowed.

X-RAY AND LABORATORY

CONVERSION FACTOR: \$7.

CALENDAR YEAR MAXIMUM: \$200 per person.

REMARKS: Professional component charges covered at 40% of UCR allowance for procedure. Routine pro-

cedures are not covered.

MAJOR MEDICAL EXPENSES

INDIVIDUAL CALENDAR YEAR DEDUCTIBLE: \$125; three month carryover provision.

FAMILY MAXIMUM DEDUCTIBLE: Two family members must satisfy their individual calendar year deductible in order to satisfy the family deductible.

STANDARD COINSURANCE: 80%.

COINSURANCE LIMIT: \$400 out-of-pocket per individual; \$800 out-of-pocket per family (not to include de-

ductible); aggregate.

APPLICATION OF COINSURANCE LIMIT: Coinsurance limit applies in the calendar year in which the limit is met and the following calendar year.

OUTPATIENT MENTAL/NERVOUS EXPENSE: 50% coinsurance while not a hospital inpatient.

LIFETIME MAXIMUM: \$1,000,000 per person.

ROOM LIMIT: Semi-private room rate.
HOSPITAL DEDUCTIBLE: Not covered.

HOME HEALTH CARE: 120 visits per calendar year. Prior hospital confinement required.

PREEXISTING LIMITATION: If treatment received within six months prior to effective date, \$2,000 maximum

payment until patient has been covered continuously under the plan for 12 months.

ANESTHESIA: Calculated using actual time.

MEDICARE

TYPE: Coordination of Benefits.

REMARKS: Assume all Medicare benefits whether or not individual actually enrolled. Subject to all other plan provisions.

EXCLUSIONS

- Expenses resulting from self-inflicted injuries.
- 2. Work-related injuries or illnesses.
- 3. Services for which there is no charge in the absence of insurance.
- Charges or services in excess of UCR or not medically necessary.
- 5. Charges for completion of claim forms and failure to keep appointments.
- 6. Routine or preventative or experimental services.
- Eye refractions; contacts or glasses; orthotics (eye exercises); radial keratotomy or other procedures for surgical correction of refractive errors.
- 8. Custodial care.
- 9. Cosmetic surgery unless for repair of an injury or surgery incurred while covered or result of mastectomy.
- 10. Dental care of teeth, gums or alveolar process (TMJ) except: a) reduction of fractures of the jaw or facial bones; b) surgical correction of harelip, cleft palate or prognathism; c) removal of salivary duct stones; d) removal of bony cysts of jaw, torus palatinus, leukoplakia, or malignant tissues.
- 11. Reversal of voluntary sterilization.
- 12. Diagnosis or treatment of infertility including artificial insemination, in vitro fertilization, etc.
- Contraceptive materials or devices.
- 14. Non-therapeutic abortions except where the life of the mother is endangered.

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- 15. Expenses for obesity, weight reduction, or diet control unless at least 100 lbs. overweight.
- 16. Vitamins, food supplements and/or protein supplements.
- 17. Sex-altering treatments or surgeries or related studies.
- Orthopedic shoes or other devices for support or treatment of feet except as medically necessary following foot surgery.
- 19. Bio-feedback related services or treatment.
- 20. Experimental transplants.
- 21. EDTA Chelation therapy.

COMPREHENSIVE DENTAL BENEFITS

DEDUCTIBLE: \$50.

FAMILY DEDUCTIBLE LIMIT: \$150; nonaggregate. COINSURANCE: 80%. **MAXIMUM:** No lifetime maximum. \$1,000 per calendar year maximum.

SPACE MAINTAINER ELIGIBILITY: Employees and dependents.

FLUORIDE ELIGIBILITY: Dependents up to age 18 only.

ORTHODONTIA: No coverage.

CLAIM COST CONTROL: Predetermination of benefits and alternate course of treatment based on customarily employed methods.

PROSTHETIC REPLACEMENTS: Five-year replacement rule applies to replacements of any previously installed prosthetics.

ORDERED AND UNDELIVERED: Excludes expenses for any devices installed or delivered after 30 days following termination of insurance.

ORAL SURGERY: Covered at regular coinsurance rate, subject to calendar year maximum.

EXTENSION OF BENEFITS: 12 months.

MISSING AND UNREPLACED: Applies.

ROVER INSURERS INC. 5931 ROLLING ROAD **RONSON, CO 81369** (970) 555-1369

INSURANCE	CONTACT: _	Ravyn Rai	nger	PHONE NUMBER: _	(970) 555-0863
POLICY:	RED CORPO	PRATION, 1	1234 Nockout Roa	d, Newton, NM 88012	EFFECTIVE 01/01/01
INSURANCE	GROUP # AN	D SUFFIX:	41935/RED		

ELIGIBILITY EMPLOYEES must work a minimum of 30 hours per week. They are eligible for coverage the first of the month following one consecutive month of continuous employment, DEPENDENTS are eligible for coverage from birth to age 19, or to age 25 if a full-time student or handicapped prior to age 19/25. Is not eligible as a dependent if eligible as an employee. Unmarried natural children, legally adopted children, foster children, and legal guardianship children are included. If both parents are covered by the plan, children may be covered by one parent only.

EFFECTIVE DATE - EMPLOYEE becomes effective, if written application is made prior to eligibility date, on the first of the month following 30 days of continuous employment. If employee is absent from work due to disability on the date of eligibility, coverage will not start until the first of the month following the date of return

DEPENDENTS become effective on the date the covered employee becomes effective, if written application is made within 31 days of eligibility date. If confined in a hospital on the date of eligibility, coverage will not start until the first of the month following the date the confinement ends. Newborns are automatically covered for the first 14 days following birth. Coverage terminates after 14 days unless written application for coverage is submitted by the employee within 31 days of birth.

TERMINATION OF COVERAGE - EMPLOYEE'S coverage terminates the last day of the month following termination of employment or when the employee ceases to qualify as an eligible employee, or following request for termination of coverage. DEPENDENTS' coverage terminates the date the employee's coverage terminates, or the last day of the month during which the dependent no longer qualifies as an eligible dependent.

EXTENSION OF BENEFITS - If covered under the plan when disabled, may continue coverage in accordance with COBRA. No other extension available.

COMPREHENSIVE MEDICAL BENEFITS

PREADMISSION TESTING - Outpatient diagnostic tests performed prior to inpatient admissions are paid at 100% whether through a network provider or not.

PRECERTIFICATION - Voluntary, nonemergency inpatient admissions must be approved at least five days prior to admission. Emergency admissions must be precertified within 48 hrs. of admission. Benefits are reduced to 50% if not performed as required.

SECOND SURGICAL OPINION - The SSO is paid at 100% of UCR. It is required for the following: bunionectomy, cataract extraction, chemonucleolysis, cholecystectomy, coronary bypass, hemorrhoidectomy, hysterectomy, inguinal herniorrhaphy, laparotomy, laminectomy, mastectomy, meniscectomy, oophorectomy, prostatectomy, salpingectomy, submucous resection, total joint replacement (hip or knee), tenotomy, varicose veins (all procedures). IF SSO NOT PERFORMED, ALL RELATED EXPENSES PAYABLE AT 50%.

SUPPLEMENTAL ACCIDENT EXPENSE - 100% is paid on the first \$500 for services incurred within 90 days of the date of accident. Subject to \$20 copayment. After \$500, payments are subject to calendar year deductible. Provider does not have to be a network member to receive 100% benefit. Common accident provision applies.

OUTPATIENT FACILITY CHARGES PAYABLE AT 100% - Network outpatient facility expenses for following procedures paid 100%. Does not include professional charges: arthroscopy, breast biopsy, cataract removal, bronchoscopy, deviated nasal septum, pilonidal cyst, myringotomy w/tubes, esophagoscopy, colonoscopy, herniorrhaphy (umbilical, to five years old), skin and subsequent lesions, benign and malignant (2cms+).

INDIVIDUAL CALENDAR YEAR DEDUCTIBLE - \$150; three month carryover provision. All plan services subject to deductible unless otherwise indicated.

FAMILY MAXIMUM DEDUCTIBLE - \$300, nonaggregate. Two family members must meet individual deductible limit.

STANDARD COINSURANCE - 80% for Network providers; 60% for Non-network providers.

COINSURANCE LIMIT - \$1,250 out-of-pocket per individual; \$2,500 out-of-pocket per family. Two individuals must meet their individual out-of-pocket limit to satisfy the family limit. Limits not to include deductible, surgery expenses reduced because SSO not performed, or hospital benefits reduced because precertification not performed. 100% of allowed amount paid thereafter for network providers; 80% for non-network providers.

LIFETIME MAXIMUM - \$1,000,000 per person.

PREEXISTING LIMITATION - If treatment is received within 90 days prior to effective date, no coverage on that condition for six months from the effective date (continuously covered for six consecutive months) unless treatment free for three consecutive months which ends after the effective date of coverage.

INPATIENT HOSPITAL EXPENSE IF NO PRECERTIFICATION, ADMISSION PAID AT 50%

DEDUCTIBLE - \$200, waived for network facilities, applies to non-network. Inpatient hospital expenses not subject to regular Major Medical deductible.

ROOM AND BOARD - Network providers: 80% of semi-private/ICU; Non-network providers: 60% of semi-private/ICU.

MISCELLANEOUS FEES - Network: 80%; Non-network: 60%.

EXCLUSIONS - Well baby care. Automatic coverage for first seven days if baby is ill. Otherwise, no coverage.

MENTAL/NERVOUS/PSYCHONEUROTIC - Includes substance abuse and alcoholism.

OUTPATIENT MENTAL AND NERVOUS TREATMENT

PAYABLE - \$60 per visit for first 5 visits; \$30 per visit for next 21 visits.

COINSURANCE - 80% for first five visits (maximum payable: \$60 per visit), 50% per visit for next 21 visits (maximum payable: \$30 per visit).

CALENDAR YEAR MAXIMUM - 26 visits.

INPATIENT MENTAL AND NERVOUS TREATMENT

PHYSICIAN SERVICES - 70% applies to network and non-network providers.

HOSPITAL SERVICES - 70% network and non-network providers.

MAMMOGRAMS

COINSURANCE - 80% Network providers; 60% Non-network providers.

REQUIREMENTS - Baseline mammogram for women age 35-39; for ages 40-49, one allowed every two years; for ages 50+, one allowed every year.

X-RAY AND LABORATORY - PROFESSIONAL COMPONENTS - Professional charges paid at 25% of UCR.

DURABLE MEDICAL EQUIPMENT

COINSURANCE - 50%.

REQUIREMENTS - Prescribed by M.D.; must not be primarily necessary for exercise, environmental control, convenience, comfort or hygiene. Must be an article only useful for the prescribed patient. Covered up to purchase price only.

ANESTHESIA: Use actual time.

MEDICARE

TYPE - Maintenance of benefits.

REMARKS - Assume all Medicare benefits whether or not individual actually enrolled. Subject to all other plan provisions.

EXCLUSIONS

- 1. Expenses resulting from self-inflicted injuries.
- 2. Work-related injuries or illnesses.
- 3. Services for which there is no charge in the absence of insurance.
- 4. Charges or services in excess of UCR or not medically necessary.
- Preexisting conditions.
- 6. Charges for completion of claim forms and failure to keep appointments.
- 7. Routine or preventative or experimental services.
- 8. Eye refractions; contacts or glasses; orthotics (eye exercises); radial keratotomy or other procedures for surgical correction of refractive errors.
- 9. Custodial care.
- 10. Cosmetic surgery unless for repair of an injury or surgery incurred while covered or result of mastectomy.
- 11. Biofeedback related services or treatment.
- 12. Dental care of teeth, gums or alveolar process (TMJ) except: a) reduction of fractures of the jaw or facial bones; b) surgical correction of harelip, cleft palate or prognathism; c) removal of salivary duct stones; d) removal of bony cysts of jaw, torus palatinus, leukoplakia, or malignant tissues.
- 13. Reversal of voluntary sterilization.
- 14. Diagnosis or treatment of infertility including artificial insemination, in vitro fertilization, etc.
- Contraceptive materials or devices.
- 16. Pregnancy; pregnancy-related expenses of dependent children for the delivery including Caesarian section. Related illnesses may be covered such as pre-eclampsia, vaginal bleeding, etc.
- 17. Non-therapeutic abortions except where the life of the mother is endangered.
- 18. Vitamins.

WINTER INSURANCE CO, 9763 WESTERN WAY, WHITTIER, CO 82963, (970) 555-2963

POLICY: WHITE CORPORATION, 1234 Whitaker Lane, Colter, CO 81222

EFFECTIVE DATE: 06/01/02

INSURANCE GROUP # and SUFFIX: 54321/WHI

INSURANCE CONTACT: Wilma Williams

PHONE NUMBER: (970) 555-1234

ELIGIBILITY EMPLOYEE: Must work a minimum of 35 hours per week. Is eligible for coverage the first of the month following 60 consecutive days of continuous employment.

DEPENDENTS: Are eligible for coverage from birth to age 19, or to age 24 if a full-time student or handicapped prior to age 19/24 (proof of disability must be furnished within 31 days after dependent reaches limiting age). Dependent is not eligible as a dependent if eligible as an employee. Unmarried natural children, legally adopted and foster children are included (also includes legal guardianship). If both parents are covered by the plan, children may be covered by one employee only.

EFFECTIVE DATE EMPLOYEE: If written application is made prior to the eligibility date, coverage becomes effective the first of the month following 60 days of employment.

DEPENDENTS: The date acquired by the covered employee becomes the effective date if written application is made within 31 days of the eligibility date. Newborns are automatically covered for the first seven days following birth; well-baby charges excluded. Coverage will terminate after seven days unless written application for coverage is submitted by the employee within 31 days of birth.

TERMINATION OF COVERAGE EMPLOYEE: Coverage terminates the last day of the month following termination of employment or when the employee ceases to qualify as an eligible employee, or following request for termination of coverage.

DEPENDENTS: Coverage terminates the date the employee's coverage terminates, or the last day of the month during which the dependent no longer qualifies as an eligible dependent.

EXTENSION OF BENEFITS - If covered under the plan when disabled, employee may continue coverage for 12 months following the date of termination or until no longer disabled, whichever is less.

COMPREHENSIVE MEDICAL BENEFITS

SUPPLEMENTAL ACCIDENT EXPENSE - 100% of first \$300 for services incurred within 120 days of date of accident. Not subject to deductible.

PLAN BENEFITS INDIVIDUAL CALENDAR YEAR DEDUCTIBLE: \$100; three month carry-over provision. FAMILY MAXIMUM DEDUCTIBLE: \$200, aggregate.

STANDARD COINSURANCE: 90% except 100% of hospital room and board expenses for 365 days per lifetime. COINSURANCE LIMIT: \$750 out-of-pocket per individual; \$1,500 out-of-pocket per family. Two separate members must satisfy the individual limit, not to include deductible. Applies only in the calendar year in which the limit is met.

LIFETIME MAXIMUM: \$300,000 per person.

PREEXISTING LIMITATION: On 6/1/02 no restriction. After 6/1/02, if treatment received within 90 days prior to effective date, no coverage for that condition for 12 months from the effective date (continuously covered for 12 months) unless treatment free for three consecutive months ending after the effective date of coverage.

X-RAY AND LABORATORY REMARKS: Professional component charges covered at 40% of UCR allowance for procedure. Routine procedures are not covered.

INPATIENT HOSPITAL EXPENSE Room and board payable at 100% of semi-private room rate. Miscellaneous expenses covered at 90%. Nonmedically necessary, well baby care and cosmetic services excluded. Personal comfort items not covered.

MENTAL/NERVOUS/PSYCHONEUROTIC INCLUDES SUBSTANCE ABUSE AND ALCOHOLISM.

OUTPATIENT MENTAL/NERVOUS TREATMENT

COINSURANCE: 50% while not hospital confined.

CALENDAR YEAR MAXIMUM: None.

INPATIENT MENTAL/NERVOUS TREATMENT

PHYSICIAN SERVICES: Covered at 90%.

HOSPITAL SERVICES: Covered at 90%.

ALLOWED PROVIDERS: Psychiatrists and clinical psychologists. Marriage and Family Child Counselor and Licensed Clinical Social Worker allowed with referral from M.D.

EXTENDED CARE FACILITY LIFETIME MAXIMUM: 60 days.

HOSPITAL SERVICES: 80% of billed room and board charge.

REQUIREMENTS: Stay must begin within 14 days of acute hospital stay of at least three days. Extended care must be due to same disability that caused hospitalization and continued hospital care would otherwise be required.

DURABLE MEDICAL EQUIPMENT COINSURANCE: Covered at 90%.

REQUIREMENTS: Must be prescribed by M.D. Must not be primarily necessary for exercise, environmental control, convenience, comfort, or hygiene. Must only be useful for the prescribed patient. Covered up to purchase price only.

ANESTHESIA Computed using block time.

REMARKS Covered expenses include charges for the initial set of contact lenses which are necessary due to cataract surgery. Handicapped children are limited to a \$15,000 lifetime maximum after attainment of age 19. Coordination of Benefits according to National Association of Insurance Carriers (NAIC) guidelines. Subject to Third Party Liability and subrogation.

MEDICARE INTEGRATION TYPE: Nonduplication of benefits applies.

REMARKS: Assume all Medicare benefits whether or not individual actually enrolled.

EXCLUSIONS

- 1. Expenses resulting from self-inflicted injuries, work related injuries, or illnesses.
- Charges or services: in excess of UCR, not medically necessary, for completion of claim forms, for failure to keep appointments; for routine, preventative or experimental services.
- 3. Eye refractions; contacts or glasses; orthotics (eye exercises); radial keratotomy or other procedures for surgical correction of refractive errors.
- Custodial care and/or convalescent facility coverage.
- 5. Cosmetic surgery unless for repair of an injury or surgery incurred while covered or result of mastectomy.
- 6. Diagnosis or treatment of infertility including artificial insemination, in vitro fertilization, etc., contraceptive materials or devices, non-therapeutic abortions except where the life of the mother is endangered, reversal of voluntary sterilization.
- 7. Pregnancy-related expenses for dependent children.
- 8. Expenses for obesity, weight reduction, or diet control unless at least 100 lbs. overweight.
- 9. Vitamins, food supplements, and/or protein supplements.
- 10. Sex altering treatments or surgeries or related studies.
- 11. Orthopedic shoes or other devices for support or treatment of feet except as medically necessary following foot surgery.
- 12. Bio-feedback related services or treatment, EDTA chelation therapy.

COMPREHENSIVE DENTAL BENEFITS

INTEGRATED: Deductible provisions, lifetime maximum and coinsurance limit combined with comprehensive

Major Medical.

CALENDAR YEAR DEDUCTIBLE: \$100. **DEDUCTIBLE CARRYOVER:** No carryover. FAMILY DEDUCTIBLE LIMIT: \$200, aggregate.

COINSURANCE: 90%.

COINSURANCE LIMIT: \$500 (Patient responsibility, not to include disallowed amounts or the deductible.) APPLICATION OF COINSURANCE LIMIT: Applies only in the calendar year in which the limit is met.

FAMILY COINSURANCE LIMIT: \$1,000.

MAXIMUM: \$300,000 lifetime.

MAXIMUM PER CALENDAR YEAR: \$1,500. ORTHODONTIA ELIGIBILITY: Dependents only. SPACE MAINTAINER ELIGIBILITY: Dependents only. FLUORIDE ELIGIBILITY: Employees and dependents.

ORTHODONTIC: 90% coinsurance.

ORTHODONTIC MAXIMUM: \$800 lifetime; not subject to the \$1,500 calendar year maximum.

CLAIM COST CONTROL OPTIONS: Predetermination of benefits required on claims over \$500; alternate course

of treatment based on customarily employed method. Benefits cut to 50% if no predetermination done.

PROSTHETIC REPLACEMENTS: Five-year rule applies to replacement of any previously installed prosthetics. ORDERED AND UNDELIVERED: Excludes expenses for any devices installed or delivered after 30 days following termination date of insurance.

MISSING AND UNREPLACED EXCLUSION: Applies.

REMARKS: Orthodontic benefits are payable as incurred, rather than amortized over the period of time during which work is performed.

CRITICAL ELEMENTS OF CUSTOMER SERVICE

COURSE OVERVIEW

While many companies promise to deliver an incredible customer experience, some are better at delivering than others. This course is designed around six critical elements of customer service that, when the company lives them, bring customers back to experience service that outdoes the competition.

Learning Objectives

At the end of this course, you will be able to:

- Demonstrate a customer service approach
- Understand how your own behavior affects the behavior of others
- · Demonstrate confidence and skill as a problem solver
- Apply techniques to deal with difficult customers
- Make a choice to provide customer service:

Personal Objectives	

WHAT IS CUSTOMER SERVICE?

Customer service is the way you treat the people who support your company. These can be paying customers (external customers) or staff members (internal customers). The customer's perception of that service is what brings them back to you for repeated service. Great service is what they cite when they send referrals to you.

People who provide good customer service (regardless of the nature of their business) earn psychological benefits in addition to any rewards offered by their company. If you are unhappy in your job, take an objective look at the kind of service you are giving. In almost every case, your job satisfaction mirrors the satisfaction people feel when doing business with you. Giving poor service is a way of beating up on yourself.

The Critical Elements of Customer Service

We're going to cover a lot of material in this course, but it is really focused on six critical elements of customer service. Each of these will be discussed through the course.

 A customer service focus Defined within your organization
3) Given life by the members of the organization
4) Be a problem solver
5) Measure it6) Reinforce it
o) Itemsee it
THE FIRST CRITICAL ELEMENT - A CUSTOMER
SERVICE FOCUS
The first critical element of customer service is a customer service focus. There are some important concepts that we need to understand about customer service before we can do a really good job of providing it.
Service is a philosophy — not a department, a program or a policy.
Service means meeting, not necessarily exceeding, customer expectations.

The six critical elements of customer service are:

Service is not always natural, automatic, or coincidental.

WHO ARE YOUR CUSTOMERS?

Who are our customers? For many of us, customers are easy to identify. They buy something from us, or we serve them in some way. People will sometimes say, "I don't work directly with customers." Before you accept this idea, try taking a closer look at who our customers are.

In most organizations and agencies, customers take two forms: internal and external.

Internal customers are the people, departments, or agencies served by what we do. The only person who might have no internal customers is the individual who works completely alone. For the rest of us, internal customers are a fact of life. Do you meet with external customers, or somehow meet the needs of internal customers, like your co-workers?

As individuals, we all have at least one internal customer: our boss. We may also have internal customers in the form of people we supervise. They rely on us to meet their needs and they form opinions about how well we meet those needs.

External customers are the people, departments, or tenants who are the end users of our organization's products or services. This is a much more traditional use of the term "customer."

Do you have **VIP** (very important person) customers, people who rate extra special service? You may think that certain customers who spend a lot of money at your business are VIPs.

In reality, all the people we work with are our customers and deserve VIP treatment. When we treat all of our customers like VIPs, we start to become known as an organization that offers exceptional service to everyone.

What do people want? At the simplest level, our customers have some basic needs.

- They want to be understood.
- They want to feel welcome.
- They want to feel important.
- They want to feel comfortable.

MEETING EXPECTATIONS

Every individual's needs are important. Each customer wants to be treated like they are your only customer. They know that isn't true, just as well as you do, but they still want that kind of attention. A service oriented philosophy says that you are there for your customer.

How do you feel about knowing that customers today are much more demanding than they were 50 years ago? The customer's expectations are higher than ever, they know more about you and your products, and they also know about your competition.

Here are six ways to meet your customer's expectations.

- If the phone is ringing, make sure someone answers it. If no one is available, then a voice prompt will suffice (provided that it is working properly). People appreciate talking to people when they call to get service.
- When a customer enters your premises, greet them as though you are happy to see them. Don't leave someone standing awkwardly.
- Be present for your customer. Your body language and tone of voice, whether you are on the phone or in person, need to let your customer know that you want to be there and you are pleased to serve them.
- Be polite. There is no excuse for bad manners. Your customer will not forget rudeness, even when they are being difficult.
- Pay attention to the details. If you promise something, make sure you deliver. Wow them by being on time and remembering all of the required pieces.
- Always thank your guest. There is a lot of competition out there, so your goal is to retain your customer, not send them on. Even if you are providing a service they cannot get somewhere else (like a government department issuing a driver's license), be thankful for their attention and business.

THE SECOND CRITICAL ELEMENT - DEFINED IN YOUR ORGANIZATION

Standards are helpful because they let us know what is expected of us. They also tell us what we have to do in order for our work to be considered satisfactory by our supervisors or managers.

Standards also need to meet the expectations of our customers, with a degree of reasonableness. The customer may feel that the phone should be answered on the first ring, but the company may have a standard of two or three rings. Since this is pretty close to what the customer expects, it might be considered close enough. However, we should make certain that our standards are meeting or exceeding the expectations of our customers. The only way to do this is to ask our customers, on an ongoing basis, if they are satisfied with the service.

In order to meet expectations, we need to know what the standards are. Here are some sample standards.

- If customers ask to have their repairs completed in 24 hours, and your standard turnaround is three days, you have to be clear on what you can do.
- If employees are driving company cars that they sign out as needed, a standard may be that the car is returned with a full gas tank.

You can replace these with standards that actually fit with your organization. If you have not set standards yet, perhaps now is the time to do so.

Create standards for the following items.
Answering the phone
Returning voice mail messages
Dress while at work
Providing coffee to visitors

THE THIRD CRITICAL ELEMENT - GIVEN LIFE BY THE EMPLOYEES

If we make a commitment to provide excellent customer service, that commitment must be demonstrated by our employees, from the front line people right up to the CEO. When the commitment is only demonstrated by some employees, our customers will sense that there is a gap and their experience with the company will be diminished.

QUIZ

Put an "X" in the correct column on the right:	Yes	No
1) Do people usually buy from someone they dislike?		
2) Do you understand the power of a smile?		
3) Do you show sincere interest in your customer and engage in preliminary small talk?		
4) Do you treat new customers differently than existing customers?		
5) Are you aware that a negative first impression may turn a prospect off of your product?		
6) Do you open with a sincere compliment?		
7) Do you promptly offer a prospect refreshments and a comfortable place to sit?		
8) Do you pay attention to what you wear and how you look?		
9) Do you welcome visitors with a warm greeting and/or firm handshake?		
10) Are you congenial no matter what the outcome?		

COMMUNICATION SKILLS

Empathy

The Importance of Empathy

We can do a lot to keep problems from happening in the first place. If you develop your empathizing skills, you can put yourself in the other person's shoes. This doesn't mean that you do not have to agree with them, but it helps you see where they are coming from.

If you are practicing being empathetic (and we recommend that you do) you should avoid phrases like, "I agree" or, "Yes, that's true." Don't reinforce a concern, either. You can simply express your empathy by rephrasing the key topic of the person's statement. Some phrases you might use include:

- "I hear..."
- "I understand..."
- "I think you're saying..."

Rephrasing before answering gives you:

- A chance to empathize with the concerns
- An opportunity to show the person that you understand the concern
- A moment to think of an appropriate response

It's also important to check that the other person is satisfied with your level of understanding or your explanation. Your ability to empathize will play an important role in your overall communication skills and your ability to foster a positive and productive environment.

Dangerous Misconceptions

Although we believe that we are being clear when we speak, we're not always being as efficient as we think. Here are some important misconceptions for you to keep in mind when you are having a conversation:

- People always pay attention when you are speaking to them.
- When people say they are paying attention, they really are.
- When someone says "I know," they really do.
- Saying something over and over will ensure that your listener understands.

Defining Communication

What is communication? It is more than just sending and receiving messages; it is about understanding those messages. There are lots of things that can get in the way of understanding a message, such as:

- · Noise
- Language
- Culture
- Disinterest
- Experience
- Education
- · Emotion
- Vocabulary
- Mood

Here are two tips for removing those barriers.

- Empathy: Make a conscious decision to try to understand. We often talk about empathy as taking off your own shoes to walk in someone else's. This helps you to understand where they are coming from and to set aside your judgments or biases in order to give your full attention to the other person.
- Rephrasing/Re-framing: This technique gives you a chance to think of your response. It also allows you to demonstrate that you understand while putting it into words that you can relate to.

Remember the saying: "We have two ears and one mouth so we can listen twice as much as we talk."

Body Language Basics

Much of our face-to-face communication is through body language. While we deliver a message through words, we are also emphasizing, confirming, or even negating what we say through our tone of voice and our non-verbal body language.

Facial Expression - This needs to be pleasant, or at least neutral. The face should be relaxed instead of tense to convey that you are comfortable with your role.

Smiling - Smiles are always welcome and help people to relax. When we are tense, however, our smiles can look like grimaces. Practice smiling in a mirror and get comfortable with offering more smiles. This shows that you like what you are doing.

Workbook

Eye Contact - When you speak with people, your eye contact needs to be steady and confident. Don't stare people down, but do look at them. While there are cultural aspects to eye contact, it's our position that you need to look at people so that they see you are being genuine and honest. Also, if you are nervous you will tend to blink more frequently which can make it look like you have something to hide. Try to relax so that you blink at a more normal rate.

Overall Message - This needs to be welcoming, confident, and comfortable. Even if we are incredibly busy, our body language should show that we are interested and focused on this conversation with this person at this time. Leaning into the conversation, avoiding distractions such as phone calls or people at the door, controlling nervousness, all convey positive messages through our body language.

Voice

Your attitude is projected through your voice as well as your body language. Make sure your body language always says, "I'm here to help as best I can."

When your voice is annoyed, impatient, or condescending, the other person may become angered or angrier. Speak with a calm, firm, caring, soothing tone. Your communications will be more relaxed, more pleasant, and better understood.

The speed and rhythm of your speech is important as well. Clear communication includes appropriate pauses and inflections to support the words being said.

Here are some tips:

- As people talk to you, say to yourself: "Which means that..."
- Be clear in your own mind what you hope to achieve.
- In sales or when dealing with problems, take the lead in conversations wherever possible. This gives you the psychological advantage, putting you in a stronger position to direct the conversation along lines that are favorable to you.
- · Check your understanding with your six helpers: why, what, where, when, who, and how.
- Talk less than you listen.
- Try silence.

Asking Questions

We spend a lot of our lives asking and answering questions, but we aren't always aware of how we ask questions. Open questions in particular often give us difficulty, which is unfortunate, since they are the most important ones for us to become skilled at using.

Closed questions can be answered with a single word or two, or a simple yes or no. They can begin the closing process in a conversation, or provide confirmation of a detail, but they don't usually lead to gathering more information. Where most people need more practice is asking the **open question**, those where the listener is given a chance to explain, to tell how they feel about an issue, or offer suggestions.

Open questions give us more information because:

- They encourage other people to talk
- We get opinions and ideas from others
- They can help us determine if people have interpreted what we say correctly
- They can help us arrive at consensus much more readily

Good open questions include:

- "What is your opinion?"
- "How do you think we should solve the problem?"
- "What would you do in my shoes?"
- "Tell me more about..."

Note: Be very careful about "why" questions. All too often these questions sound like accusations, and the listener immediately becomes defensive.

It is **easier to build relationships** with potential customers if we become skilled at asking questions that give us more information about that person and their wants and needs. The questions help us find common ground with someone, show the person we are interested in them, and we put the emphasis on them rather than on ourselves.

Good customer-focused questions can include:

- What do you think we can do about this?
- · What would you like me to stop doing?
- Would it be helpful if I...?
- Supposing we were to...?
- Help me understand where you're coming from?
- Can we set a time to talk about the changes we're prepared to make?
- I'm prepared to... Would that ease the situation?

TELEPHONE TECHNIQUES

Telephone Basics

One of the most important things to remember about telephone communication is your tone. In significant (though often misinterpreted) research, Albert Mehrabian found that when it came to discussing emotions, only 7% of the speaker's message was communicated by words, and that tone of voice was responsible for about 38% of the meaning, and body language was responsible for about 55%. This means the words themselves played only a very small part in conveying meaning. In other conversations (not the ones about emotions), we know that tone of voice and body language still have a significant influence on meaning.

Your Initial Greeting

Identify the organization, the department, yourself, and then offer to help. Be careful about verbal shorthand or internal jargon. Don't make the caller say, "Is this Velsoft?" or "To whom am I speaking?" Try to make the telephone experience easy for your caller.

Personalizing Service

All customers are important. Together, they represent the sum total of our reason for working where we do. However, each individual customer craves to have their uniqueness recognized and acknowledged in the process of being served. We can appreciate each customer's importance by knowing and using their name.

A Formula to Practice

- Prepare to hear the name.
- Write it down immediately. If you miss it, ask the person to repeat it.
- Ask, "Let me be sure I've spelled your name right. Is that J-a-y-s-o-n?"
- Repeat the name immediately in your next comment to the person.
- Use the name occasionally in the conversation. It's an attention getter at the beginning of the sentence.
- Thank the person and use the name again as you are parting.

Addressing a Person

Should you call a person Mr., Ms., or Mrs., or use their first name? It really depends on the company and whether you have spoken to this person before. Usually, it's best to err on the side of caution and use "Mr." or "Ms." until the customer says otherwise. Remember that the expectation may be different depending on your industry. Know what is appropriate and endorsed within your company.

Your Telephone Voice

Keep these tips in mind for a pleasant telephone voice.

- Speak at the right volume, neither too loudly nor too softly.
- Don't talk too quickly.
- Practice when you start working with a new or unfamiliar phone system. Telephones distort sound to varying degrees, so you need to adapt your speaking voice in order to be understood.
- If you are using a headset, practice with a colleague so you can set the microphone volume at the right level.
- Use a pleasant, friendly tone.
- Speak clearly and pronounce your words carefully.
- If you have an accent that customers or clients might have trouble understanding, spell things out or use simpler language to make sure they have it right.
- Last but not least, smile! Customers can hear a smile through the phone.

Your Listening Ear

Never interrupt. Wait to be sure your caller is finished before you start to talk. However, don't hesitate to ask your customer to repeat anything you don't understand. You, in turn, should repeat important information that they give you, such as numbers, spelling of words, important names, cities, and streets.

Listen for the caller's mood to try to determine not only what they are saying, but how they feel about it. Remember the importance of asking questions until you are sure that you understand the problem or have as much information as possible.

Your Format for Closing

If necessary, summarize the main ideas of your call by confirming details discussed or follow-up actions promised. Rather than just saying, "Goodbye," try to close with a friendly, courteous phrase such as:

- "Is there anything else I can do for you?"
- "It was nice talking to you."
- "Thank you for calling."
- "Thanks for your help."

Handling Everyday Requests

- The person they want isn't there.
- You have to transfer a call.
- You have to put a caller on hold, get information, and return to the line.
- You have to take a message.

Transferring Telephone Calls

An impression of poor service and lack of interest often results when calls are transferred improperly within an organization. A call should only be transferred when the person transferring it cannot help the caller, and is reasonably sure the person to whom the call is transferred will be able to help the caller.

The reason for the transfer should be explained, along with the name of the person to whom the caller will be transferred. This prepares the caller for what is about to happen, and doesn't look like you are giving them the run-around. This is known as a warm transfer.

Here's an example:

"Mark Jenson in Fire Prevention handles that. I'll transfer you to him, Mrs. Smith, if you'll just hold the line."

Then the person transferring the call should announce the call to the person receiving it. This will prepare him and eliminates the need for the caller to repeat information.

Putting Callers on Hold

If you are handling a call and you must put the caller on hold, ask their permission and explain why you are putting them on hold. You should also give them your best estimate of how long they will be on hold. Remember that you are asking permission and not making a statement; if they don't want to be put on hold, you need to keep the call open.

If you think the waiting time might be more than three minutes, give the caller the option of holding or having you call back. Waiting time always seems longer than it actually is.

Progress Reports

A progress report means informing the waiting person what progress is being made on the call.

Here's an example:

"Mr. Johnson, I'm still checking the code for that. Do you mind waiting a little longer, or should I call you back?"

Proper Return to the Line

Attract the person's attention by thanking them for waiting and using their name or a suitable expression.

"Thank you for holding, Mr. Leonard. I have the information that you were asking for."

Taking a Message

Taking a message for your supervisor or another employee should be relatively simple. However, a great deal of business is lost each year by incomplete or forgotten messages. A courteous person returns telephone calls, but only if they get the correct message.

Taking Messages Accurately and Completely

- · Keep a notepad handy.
- Write while you are on the line. Take notes as you handle the call, not after you hang up the receiver.
- Request, rather than demand, information. Consider the value in saying, "May I have your name, please..." rather than the more common but very curt, "What is your name and number?"

- · Verify spelling.
- Get the person's first name, too.
- Spell names out phonetically if they are difficult.
- Give feedback for verification. (For example, "So that's spelled J-a-y-s-o-n?")

What to Record

- To whom: The name of the person called.
- From whom: The name of the call and his business connection.
- Where: The caller's telephone number and extension number.
- What: The message itself.
- Why: Action requested and the action promised.
- By whom: Name of the person who recorded the message.
- When: Date and hour of the call.

Other Tips

To ensure the accuracy and completeness of a message, consider the following suggestions:

- · Listen attentively to the message.
- Check to be sure all telephone numbers are correct and use feedback for verification.
- Verify the spelling of difficult names using phonetic helpers.
- After the telephone call has been completed, make additional notes from memory.
- Attach any useful papers, reports, or lists of information to the message.

When asking to take a message, if the caller says, "No, I'll call back," courteously ask one more time. For example you could say, "If I could just tell him who called, I'm sure he will be interested. Of course, you can call back if that would be more convenient."

Tips and Tricks

Do's and Don't's

Do Say...

He's not in his office at the moment.

She's away from her desk at the moment.

He's out of the office until tomorrow.

She's not in the office today.

He's out of the office for the next two weeks.

Don't Say...

He hasn't come in yet.

She's on her coffee break.

He left early today.

She's sick today.

He's on vacation for the next two weeks.

Phrases to Avoid Using

- "I believe he went to the men's room."
- "He's taking a nap right now." (This actually happened. The man had a heart attack and his physician ordered him to rest 45 minutes after lunch each day, but this information should not be known to the caller.)
- "She has a doctor's appointment this afternoon."
- "He's at the bank."

Sentences That Damage Your Image or Lose Goodwill

- "I can't put your call through unless I can say who is calling."
- "I don't have anything to do with your problem."
- "He's busy. Would you call him back?"
- "I'm working with someone right now. Could you call back?"
- "There's nothing I can do about it that's our policy."
- "We might have it but I don't know for sure."
- "We're getting ready to go home. Would you call back in the morning?"
- "I just came in. Could you call back in about 15 minutes?"

Remembering and using these telephone techniques will enable you to give the same exceptional service on the telephone as you would give your customers and clients in person.

DEALING WITH CHALLENGES ASSERTIVELY

An Assertiveness Model

One difficulty that we can face in our customer interactions is the need to act assertively. Being assertive is not natural for some people. It can cause anxiety for the person responsible for customer service. However, sometimes customer demands really are outrageous or cannot be met. Sometimes they are rude and we must intervene assertively in order to resume a sense of calm and professionalism, either in the workplace or over the telephone.

Speaking assertively doesn't mean being aggressive, angry, or disrespectful. Assertive behavior means standing up for your personal rights, and acting in direct, honest, and appropriate ways that express your thoughts, feelings, and beliefs without violating others' rights.

There is an assertiveness formula that can help when we aren't sure how to tell others how we think or feel and how we would like them to behave. There are several variations to this formula, and the formula doesn't work in all situations, but it can be useful. When using the model, you will frame your conversation in the following way:

- When you (specific behavior)
- I feel (specific feelings)
- I would appreciate it if you (suggested change of behavior)

Example:

"When you come into our restaurant and yell at me to get you a good seat, I feel like you expect me to ignore the lineup that is here in front of you, and I feel embarrassed. I'd like you to acknowledge me, say good morning, and then wait your turn like everyone else."

Think of situations where you could use this formula. Practice the wording to yourself, and then try it out in a fairly non-stressful situation and see how it works. Like most things, it gets easier with practice, and feels more natural with time.

You don't have to act assertively in every situation, and this formula isn't the only way to deal with difficult or stressful situations. For example, most of us hate being criticized, but rather than become defensive, or react assertively, allow the criticism to prick your curiosity. Ask questions like, "Why do you feel that way?" or, "What exactly do you mean when you say I'm not playing fair?"

Small Group Work
Develop some suggestions for dealing with each of these challenges.
You don't know the answer to the customer's question.
You have to say no to the customer's request.
Your computer is moving slowly and the customer is getting impatient.
The customer has unreasonable expectations.
The customer is skeptical about what you're telling him.

The customer is angry for no apparent reason.
The customer refuses to give you all the information you need.

DEALING WITH DIFFICULT PEOPLE

Getting to the Heart of the Matter

Despite our best efforts and our good use of customer service techniques, our attempts can seem to be for nothing. Behaviors we thought we had influenced positively (or corrected altogether) can regress.

For example, your manager might have spoken with an employee (not you, of course!) about some below-par behavior: perhaps they are always late for work, despite the fact that they are supposed to be answering phones and greeting visitors promptly at 9:00 a.m. The manager has spoken with the employee, and although this will lead to improved behavior for a few days, he always slips back to being late.

What's Missing?

They aren't getting to the heart of the problem. It's not enough to tell the individual that they are breaking the rules, or that a colleague has to cover their tasks when they are late. If it were enough, the behavior would stop.

You can learn a lesson from this that will help you help customers. Ask yourself what is really bothering you to get at what is really bothering them. Often the behavior touches a nerve that is much more personal. For example, if you do a favor for a friend, and then they demand more from you, you may feel that they are taking advantage of the relationship. That's at a much deeper level than just the rules that are being broken.

If the person is perpetually late because they do not set their alarm (and get up to it) because they really do not care about their job, or they feel underutilized, or they are being bullied by a co-worker and cannot drag themselves into the office, then we are getting at the root of the real problem.

The ability to peel an issue back to its core takes patience and precision. Sometimes we don't do this because it can take time to uncover the real problem. We can often find ourselves in too much of a hurry to do this properly. At other times, our emotions get involved and we make a decision that we really don't want to go there because we'll also have to deal with what is bothering us.

If you don't stop to think about the big picture, you'll end up either missing the problem or going after too many problems at once. To stop yourself from being over-involved, you must be able to state the problem in a single sentence. If you make it longer, your conversation will lose focus as soon as it starts.

The Three F's

To get to the heart of the problem, evaluate the 3 F's: facts, frequency, and frustrated relationship.

Facts

What are the facts of the issue? Create a list so that you do not get sidetracked while you plan your conversation. Don't drag in other stories or unrelated issues that have happened previously. If you are talking to someone about a shipping problem, stick to that and leave quality or customer service issues out of it.

Frequency

Make sure you have a very clear history of the frequency of the issue and any patterns. For example, if they say they've called the customer service line "tons of times," get an exact number, with dates and times if possible.

Frustrated Relationship

If your real concern is about the relationship, but you only focus on the pattern, then you are not likely to get the change that you are aiming for. You have to discuss what is important to you in terms of the relationship. Remember: the ability to peel an issue back to its core takes patience and precision.

Types of Difficult People

Difficult people get themselves sorted into categories, just so we can develop a strategy for dealing with them. If you pick up almost any book on the subject, you will find descriptions of these people and some suggested ways of dealing with them.

The Stubborn One	
Description	
Solutions	

The Quiet One	
Description	
Solutions	
The Jester	
Description	
Solutions	
Yakety-Yak	
Description	
Description	
Solutions	

Off Base
Description
Solutions
The Know-it-all
Description
Solutions
The Whiner
Description
Description

MANAGING ANGER

Coping Strategies

Too many people are angry. Workplace violence is an extreme example, but there are examples everywhere. Even without violence, every day we hear of managers and co-workers who are mad at each other, their co-workers, their employees, their bosses, their customers, the company, and the world itself. Anger interferes with teamwork and productivity. It also contributes to an environment that is negative, hostile, and frightening.

Companies face legal pressures to prevent this type of environment. From employees' points of view, anger takes the fun out of work. Because anger is a natural emotion, it would be unrealistic to ask people not to feel it. Instead, the goal is to help (and sometimes, require) that people deal with their anger appropriately.

Problems don't come from anger. Problems come from the negative ways people express anger.

Iow can we manage our own anger?

Dealing with Other People's Anger

As you prepare for conversations, and if you find yourself in an angry encounter, use these tips to help you.

- Use positive self-talk.
- · Check your body language.
- · Acknowledge the other person's feelings.
- Share your own feelings and fears (carefully, of course).
- · Show that you are listening.
- Make a conciliatory gesture.
- Express your own needs and wants calmly and persistently (like a broken record).
- When trying to work with hostile colleagues, keep in mind that their self-esteem may be in the dumps. Sincerely compliment them whenever possible. Avoid arguing with them, even though that's often what they want. Sometimes the challenge is preventing an exchange from escalating into anger.

Guidelines for Assertive Anger

We know that you won't have this list handy during an encounter, so we encourage you to read through this information several times to lock it into your memory. Talk about the tips provided here to others, modify them to work for you and to match your natural style of speaking with people, and speak with your colleagues about them so that you can remember and apply them when needed.

Be Direct

- Use the first person point of view and say, "I'm feeling irritated/annoyed/angry."
- Don't distance yourself from your feelings with impersonal, third-person statements and generalizations such as, "When people..." or, "It can be annoying when..."
- Use "I" messages instead.

Specify the Degree of Anger

- This can vary from, "I've been getting slightly irritated," to, "My fury is reaching the boiling point."
- Giving this information often helps the other person listen more carefully.
- If you just say, "I am angry with you," you may unnecessarily freeze the other person with fright or prompt them into aggressive defensive behavior.

Don't Accuse Others of Making You Angry

- Remember that your irritation might be my pleasure!
- No one has the power to make us feel anything. So instead of saying, "You make me feel angry," say, "I get angry
 when you..."

Share Your Feelings of Threat and Fear

- For example: "I'm frightened of saying this to you because you may think I am being very petty or you may reject me/fire me/ hit me, but..."
- This will help you to feel more in control of your feelings and may get you some welcome and helpful reassurance. (For example, they may respond with, "No, I promise that I will try and listen to what you have to say without walking away or punishing you.")

Acknowledge Your Responsibility

- Tell the other person what part you see yourself playing in the situation.
- Examples:
 - "I appreciate that I should have said something earlier."
 - "I am the kind of person who has very high standards."
 - "I may be overreacting because I am managing a lot of deadlines right now."

Avoid Self-Put Downs or Invitations to Criticism or Retaliatory Anger

- Don't say things like:
 - "I know that I'm a bit of a nag..."
 - "I'm over-sensitive."
 - "I'm too soft."
 - "You'll probably scream at me/want to kill me when I tell you..."
- You could be putting unhelpful and inflammatory ideas into otherwise quite amenable heads!

Self-Protective Techniques to Block Criticism

Criticism is one of the chief weapons of an angry person. Often it is used indiscriminately and is well off target. However, you can learn to cope with this behavior. In order to protect yourself, stop the flow, and keep criticism from escalating, use these techniques.

- The broken record: You keep repeating more or less the same statement over and over again, in a calm, controlled voice.
- **Fogging:** Agree that there may be some truth in what the person is saying.
- Negative assertion: Simply, calmly agree with your critic using a serious, matter of fact tone of voice, without
 adding any put downs or unnecessary justifications.

THE FOURTH CRITICAL ELEMENT - BE A PROBLEM SOLVER

Reducing Conflict

Conflict occurs when the emphasis is on the differences between people. The more divided you seem to be, the more differences there are. You get along better with people when the emphasis is on similarities. The difference between conflict with a friend and conflict with a difficult person is that with a friend, the conflict is tempered by things you have in common. Obviously, then, reducing differences is essential to your success in dealing with people you can't stand.

Here are some key tools for reducing conflict.

Blending

Blending is any behavior by which you reduce the differences between you and another person in order to meet them where they are and move to common ground. Blending increases your rapport with others. For example, have you ever been in conversation with someone when you unexpectedly discover that you both grew up in the same place? In that moment of discovery, differences were reduced and you felt closer.

Or you go to a restaurant with a friend, look at the menu, and ask, "What are you having?" Your question may have had little to do with menu choices and a lot to do with sending a signal of friendship.

You blend with people in many ways. You blend visibly with your facial expression, degree of animation, and body posture. You blend verbally with your voice, volume, and speed. And you blend conceptually with your words.

As natural as it is to blend with people you like or with people who share similar objectives, it is equally natural not to blend with people whom you perceive as difficult. The failure to blend has serious consequences, because without blending, the differences between you can become the basis for conflict.

Here are some examples of blending in a conflict situation.

Example 1

Customer: You people keep messing up my computer. I've had it in here twice since I bought it and it still isn't working.

Help Desk Technician: I'm sorry your computer still isn't working. When mine is not working, it's so frustrating. Waiting to have things fixed, especially when they are new, is even more frustrating. Let me try and help you today.

Here we demonstrate blending with the statement, "When mine is not working, it's so frustrating."

Example 2

Customer: I ordered those winter tires weeks ago! I can't believe that they aren't here yet. You must not have ordered them.

Helpful Tire Technician: I'm really sorry about the delay. Now that winter has arrived, I know I'd want my tires too. I can see here that they were ordered five weeks ago. Let me track the shipment and see where they are, or what the delay is.

Here we demonstrate blending with the statement, "Now that winter has arrived, I know I'd want my tires too."

Redirecting

Redirecting is any behavior by which you use rapport to change the outcome of your interactions and reach a more satisfactory outcome. Blending always precedes redirecting, whether you are listening to understand or speaking to be understood.

Identify Positive Intent

We can define positive intent as the good purpose meant to be served by a given communication or behavior. Our failure to recognize and appreciate positive intent can have lasting consequences.

A powerful key to bringing out the best in people at their worst is to give them the benefit of the doubt and assume a positive intent behind their problem behavior. Since your difficult person may be unaware of this, ask yourself what real purpose might be behind a person's communication or behavior and acknowledge it. For example, someone may be upset because they have not received the service they required. They may be difficult toward you and make personal remarks, but the positive intent behind their words is that they don't want special treatment, nor do they necessarily mean ill toward you. They just want to get what they asked for.

If you are not sure about that positive intent, be creative and make something up that could be true. Even if the intent you ascribe to the behavior isn't true, it will allow you to blend and develop rapport.

Identify Highly Valued Criteria

Criteria are the standards by which we measure whether ideas are good or not, the means for determining what a thing should be, and the benchmark by which people gauge whether they are for or against an idea. Criteria become especially important when differing ideas or points of view are being discussed.

Money, bonding, teamwork, or increasing knowledge are some of the things that may be important to us.

Whenever a discussion starts to degenerate into conflict, try to ascertain the reasons why people are for or against something. Then look for an idea or solution to the problem that blends these criteria together. That is another way to turn conflict into cooperation.

When Discussions Degenerate Into Conflict

When your problem person is talking:

- · Blend visibly and audibly
- Backtrack or echo some of their own words
- Clarify their meaning, intent, and criteria
- · Summarize what you've heard
- Confirm to find out if you got it right

While blending is an important skill to use when dealing with others, never blend with a hostile gesture directed at you. Don't meet aggression with aggression. If the other person raises their voice or shakes their fist, the key to blending is to underplay it assertively.

Your action plan for angry, aggressive people should include:

- Holding your ground and use deep breathing to stay calm.
- Interrupting the attack by repeating their name several times.
- Quickly backtracking or echoing their main point to show them you have been respectfully listening.
- · Aiming for the bottom line by taking ownership and expressing the situation from your point of view.

Some more important points to keep in mind when you are dealing with difficult people:

- No one cooperates with anyone who seems to be against them. In human relations there is no middle ground.
 Unconsciously, people want to know, "Are you with me or against me?" That's one of the things you have in common with your difficult people.
- Express your truth in a way that builds someone up rather than tears them down.
- Use "I" language, because "you" statements can be accusatory.
- Be specific about the problem behavior.
- Show them how their behavior is self-defeating.
- · Suggest new behaviors or options.

Perhaps the biggest obstacle to being honest with someone is concern about hurting their feelings. But you do no one a favor by withholding information and allowing them to continue behaviors that don't work for them either.

Problem Solving in Six Steps

Step One: Define the Problem

- Discuss symptoms (especially if the problem is unknown).
- Discuss size (or seriousness) and impact (effect) of the problem.
- Determine the exact wording of the problem in question form.
- Define terms in the question.

Step Two: Research and Analyze the Problem

- List topics that need to be researched or discussed, including causes and past efforts to solve the problem.
- Research the problem if necessary.
- Discuss the research in an organized way.
- State the first topic to be discussed.
- Give everyone a chance to cite research or their opinion on the topic.
- Ask if anyone has anything further to say on the topic.
- Summarize the group's findings on the topic.
- State the next topic to be discussed and repeat the procedure until all topics have been discussed.

Step Three: Establish a Checklist of Criteria

- List all possible criteria and give everyone a chance to respond.
- · Discuss each criterion.
- Reduce the list to a workable length by combining criteria where possible.
- Rank remaining criteria from most to least important.

Step Four: List Possible Alternatives

- · Think outside the box. This means you have permission to get creative and find alternatives that are outside what we usually think of.
- These are just possibilities, so list anything that comes to mind.

Step Five: Evaluate Each Alternative

- · Read through the list of alternatives, eliminating those that obviously do not meet the criteria agreed on in the third step.
- Reduce the list further by combining any similar alternatives.
- · Discuss each remaining alternative's strengths and weaknesses, referring to research presented in the second step when necessary.
- Determine how well each alternative meets the criteria (according to the number of criteria and importance of each).
- Continue reducing the list until the best alternative (or alternatives) is reached.

Step Six: Select the Best Alternatives as Your Solution and Discuss How to Implement Them

- Outline the who, what, when, where, why, and how.
- Make sure you consider all people involved.
- You may want to develop contingency plans.

Role Play

Situation One: Happy Burgers

Jane is working at Happy Burgers alone one night. A customer comes in and orders a Super Smiley Meal. This customer then changes his mind and wants a Beamer Special. He then changes his mind again and wants a Smirky Sundae. He becomes frustrated because Jane can't get his order right.

Situation Two: Your Cash Bank

Sam walks into the bank one day to take money out of his account. The teller informs him that that account has been closed due to suspicion of criminal activity. Sam becomes very upset and demands to speak to the supervisor, who is not in.

Situation Three: Acme Widgets Inc.

On her way to work, Erin stops in at Acme Widgets to pick up her company's order. She is told that their order hasn't been received and will need to be placed again. This is the fourth time that this has happened this year and Erin is not happy.

Situation Four: Fresh Veggies

Tom is planning a big birthday dinner and goes to Fresh Veggies to get everything he needs. He's particularly excited about the fresh berries that the store's flyer promised. However, when he arrives at the store, there are none to be found. A cashier tells him they are out of stock.

Situation Five: Leaky Pipes

Jacob calls in a plumber to fix his leaky bathtub. He goes downstairs to let the plumber do his work. He returns to the bathroom to find the plumber asleep in the bathtub and the work uncompleted.

Situation Six: We Fix It

Joan calls technical support one evening to fix a recurring problem with her computer. She is told that the computer is supposed to do this and there is nothing they can do. Naturally, she is not very happy about this.

SEVEN STEPS TO CUSTOMER PROBLEM SOLVING

The Process

Before the lunch break, we looked at a process to help us solve problems in general. Now, let's look a specific process that we can use to resolve a customer's problem.

- 1) Express respect
- 2) Listen to understand
- 3) Uncover their expectations
- 4) Repeat the specifics of their problem
- 5) Look for possible solutions
- 6) Take action and follow through
- 7) Double check for satisfaction

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The Recovery Process

Once a customer problem is identified, the service recovery process should begin. Not all of the six steps described below are needed for all customers. Use what you know about your products and services, and what you can discover about your customers' problems, to customize your actions to the specific situation. One size doesn't fit all.

You should always take immediate steps to solve problems. The sense of urgency you bring to the problem solving tells your customers that recovery is important to you and to your organization.

Apologize.

It doesn't matter who is at fault. Customers want someone who will acknowledge that a problem occurred and show concern.

Listen and empathize.

Treat your customers in a way that shows you care about them as well as about their problem. People have feelings and emotions. They want the personal side of the transaction acknowledged.

Fix the problem quickly and fairly.

A "fair fix" is one that's delivered with a sense of professional concern. At the end of the day, customers want what they expected to receive in the first place. The sooner, the better.

Keep your promises.

Service recovery is needed because a customer believes a service promise has been broken. During the recovery process, you will often make new promises. When you do, be realistic about what you can and can't deliver.

Follow up.

You can add a pleasant extra to the recovery sequence by following up a few hours, days, or weeks later to make sure things really were resolved to your customer's satisfaction. Don't assume you've fixed the problem. Check to be sure.

THE FIFTH CRITICAL ELEMENT - MEASURE IT

Tools to Use

Wouldn't it be great if all of our customers were happy and we didn't have to deal with complaints or problems? The only way to know what's really going right and wrong is to measure regularly. When we rely on our memories, we can let a lot of things slip away.

Critical Evaluation

You can measure a particular service or product in great detail. Follow up with customers and ask what's working, what can be improved, and how much they like it. Also ask what could be done differently to develop options. Then assess the advantages and disadvantages to determine whether it makes sense to make changes.

Informal Surveys

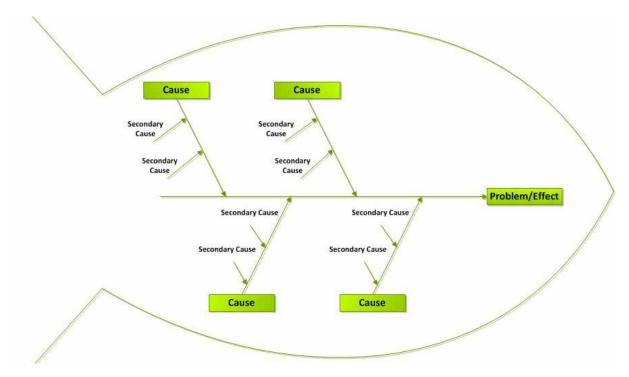
Ask your customers what they want. Ask them how you are doing. If you ask the same questions from one year to the next, you can compare periods of time. Offer your customers a gift to thank them for participating.

Focus Groups

These usually have eight to ten participants who are pre-screened for subject matter experience. During the focus group, a moderator discusses specific issues with participants. These are very structured sessions, and after group discussion, the moderator produces the results in a report format. Don't try this if you haven't participated in one or done sufficient research into focus group structure, questioning, and analysis. If done well, expect to get lots of detailed feedback and to have a very good understanding of what the group thinks.

Fishbone (Cause and Effect, or Root Cause)

This method is used to identify the causes of a problem. Each major bone of the fish has a heading that is a cause of the problem, such as Equipment, Systems, Processes, People, and Environment. The head of the fish is the problem. This method allows participants to discuss the problem and categorize possible reasons under the headings. Each heading is then examined to determine if it is causing a symptom until the root cause is determined. The fish bone is a way to combine brainstorming with a visual representation that organizes the information at the same time.



Workbook

Brainstorming

Everyone in the group makes suggestions and shares ideas. All ideas are considered. Ground rules establish that there are no poor or stupid ideas. No critical comments are allowed during the brainstorming activity. The point is that although an individual idea may not be feasible, someone might use that idea and expand on it to create a fantastic idea.

Benchmarking

See how others do what you do and use their ideas if they are applicable. Sometimes you can simply ask and they will let you know how they do things. Otherwise, you will have to do some research, or measure yourself at a particular time and set your benchmarks from there. Benchmarking is helpful whether you are looking at systems, processes, or methods.

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Suggest the best measurement technique to solve the problem.

Situation One Happy customers will return to our company again. How will we know our customers are happy with our products and services?
Situation Two We introduced a new product six months ago. It is selling well; we sold 90% of the first run within 90 days, but those are the last statistics gathered. However, production costs are increasing, which will narrow our profit margin. Do we continue to produce and sell this product?

Situation Three Our call center staff tells us that callers are complaining because they have to wait on hold for too long before speaking to a representative.
City of in Provi
Situation Four Our front counter staff has been asked by customers to add chairs to the waiting area so that people can sit and wait instead of standing in line. The staff has also been told on "many occasions" that the parking lot access is poor, with concrete steps and uneven pavement.
Situation Five In previous years, our super salad was our best seller, accounting for about 65% of our lunch and supper time sales Now it has dropped to about 45%. Do we need to change our menu? Or should we come up with something different?

THE SIXTH CRITICAL ELEMENT - REINFORCE IT

Reinforcement Techniques

Once an organization decides how they are approaching customer service and makes a commitment to their processes, they must live up to the expectations that they have subscribed to. Just as important, those practices must be reinforced.

If you are receiving pay (hourly, salary, or by commission), then you are getting paid to do your job, and that is often reinforcement enough to deliver what is expected. Sometimes companies will put enhanced reinforcement in place by doing things such as:

- Having customers complete a survey about the service they received
- · Having supervisors observe when we do good work and provide some kind of recognition
- Celebrating when targets are met, like an increase in returning customers

All of these activities are a way to reinforce our commitment to providing excellent customer service. They reflect the relationships we build within the organization and with our customer base.

Developing and Maintaining Relationships

Relationships are the key to a functional, positive team. There are several parts involved when developing and maintaining relationships with your team members.

Clear Expectations - Every partner in a relationship has certain expectations of other partners. Most expectations remain unspoken until they have been violated. One way to develop and maintain effective relationships is to make your expectations of one another clear.

Recognizing the Reciprocal Quality of Relationships - We can use the reciprocal nature of our relationship with others to establish interpersonal cooperation and trust. Remember two clichés: "It's a two-way street," and, "You only get back what you give."

Understanding Different Communication Styles - We can communicate more successfully with others and establish more meaningful relationships if we not only understand others' styles, but can also attune our styles to theirs.

Recognizing the Power of Your Behavior

The secret to success is not very hard to figure out. The better you are at connecting with other people, the better the quality of your life. Is there a natural talent for getting along with people or is it something we can learn? The truth is that it's a bit of both.

Connecting with other people brings infinite rewards. Connecting is what our ancestors were doing thousands of years ago when they gathered around the fire to eat woolly mammoth steaks.

Likability Works

No matter what you do or where you live, the quality of your attitude determines the quality of your relationships—not to mention just about everything else in your life. The good news is that attitudes are yours to select. And if you are free to choose any one you please, why not choose a really useful attitude?

In face-to-face situations, your attitude precedes you. It is the central force in your life—it controls the quality and appearance of everything you do.

Power Talk

Phrases for Customer Service Success

Ten Most Helpful Phrases

- 1) I care.
- 2) I'd like to understand. Help me to understand.
- 3) How are things with you?
- 4) Let's define the problem.
- 5) This is what I heard you say.
- 6) Let me put this another way.
- 7) How can I help you? Can I do anything to help?
- 8) What would you do?
- 9) Thank you.
- 10) Silence, with concern.

Ten Least Helpful Phrases

- 1) You shouldn't feel that way.
- 2) Why did you do/say that?
- 3) That's not important.
- 4) I know exactly how you feel.
- 5) I know what you are going to say.
- 6) How come you're not as good as...?
- 7) Do you want to know what I think? Here's what you should do.
- 8) I told you so.
- 9) Any phrase that contains the words always, never, all the time, everyone or permanently.
- 10) Silence without concern/indifference.

How to Feel Powerful in Your Position

What comes out of our mouths can strengthen our relationships with our customers, or weaken our place in their heart. Along with our knowledge, skills, abilities, and a willingness to provide excellent customer service, the words we use with our customers are so powerful that they can build or destroy relationships.

Power Talk examples:

- "That may be so, but...." can be changed to "That may be so, and..."
- Instead of "I disagree," how about, "I understand. Let's consider another viewpoint."
- Change, "I think I got that," to, "Let's verify that."
- Change, "I'm so sorry, I'm afraid I've forgotten your name," to, "Hello I'm...."

Whether at work or in your personal life, people who make things happen learn how to phrase their words so they are encouraging and decisive. We can project positive expectations, both in ourselves and in others, by remembering some basics of good communication.

Project Positive Expectations

If you're going to say...

I'll have to

I'll try

I'd hate to

I can't

If you can

This is a terrible problem

I'm never any good at ...

I'll spend time/money

That's impossible

Give Credit Where It's Due

If you're going to say...

I really just got lucky

I've never done this before

I'm getting too old I feel good.

They did a good job

Rebound From Failure

If you're going to say...

I failed

I can see negative consequences

I'm a loser

Accept Responsibility

If you're going to say...

They make me so mad

I don't have enough time

It's the other guy's fault

Someone else will do it

I can't change things

Try instead...

I'll be glad to

I will

I want to

I haven't yet, and I can

When will you

This is a challenging opportunity

I'm improving at....

I'll invest time and money

That can be done

Try instead...

I planned well and worked hard

This is an opportunity to learn

I have lots of experience.

You did a good job!

Try instead...

I learned

I can see positive consequences

I'm a winner

Try instead...

I feel mad when

I can manage my time

It's my responsibility

I will take care of it myself

I choose to make the best of what is

DEALING WITH STRESS

Stress can be positive and negative, but too much negative stress can take a toll on our mental and physical health. When we channel the energy from stress in positive ways, we can accomplish things that we never imagined. When a lot of negative stress builds up, we can have trouble getting our work done, feel unusually tired, and lose our usual motivation. If stress seems to be wearing you down and you are having trouble bouncing back, you may need to consult your doctor. For the usual day to day stressors that we encounter, here are some quick, easy ways you can lower your stress levels quickly.

Deep Breathing

Loosen your clothes, close your eyes, mentally relax your body, and take ten or more deep breaths. Your goal is to breathe into the bottom of your lungs (where the oxygen is readily absorbed), not the usual upper lung breathing we do. Put your hand on your stomach and feel it move as you breathe in in order to make sure you are getting the air in good and deep. We call this **diaphragmatic breathing** because you are using your diaphragm muscle to breathe. When people are experiencing anxiety they are most often breathing into the upper area of their lungs rather than the bottom.

Each time you exhale, count silently: "one," after the first breath, "two," after the second breath, etc., up to at least ten. If you lose count, or find yourself working on thoughts as they pass through your mind, start your count over again. When you are finished, you should feel more calm and relaxed. (Your blood pressure will go down temporarily, too.) If you're in a meeting, on the phone, or dealing with a customer, count in your head.

Visualize

Use positive imagery to boost your mood and enhance your visible performance. In your mind, picture a place that you love. Feel the sunshine on your face, or the breeze on your skin. See the things that you enjoy in great detail. If you are getting ready for a presentation or an interview, visualize yourself performing it perfectly, so that when you get to the event your mind thinks you've done it before. (This is a technique used by athletes and peak performance coaches.)

Music

Music has the power to soothe or to give us energy. It actually has healing power, too. Find a type of music that relaxes you, and play it when you need to calm down. When you feel tired and listless, play some rousing music (rather than relying on caffeine or other stimulants) to give you a pick-up.

Acupressure and Massage

Holding a fingertip to the point of most pain or tension and pressing very hard into the offending muscle for up to a minute can avert a headache or relieve tension. Have a friend or spouse learn how to do massage therapy and/or acupressure on tense muscles, since daily treatment is better than once or twice a month.

Laughter

Laughter is the best medicine of all. A good belly laugh can lower blood pressure, slow your adrenaline, and reverse the stomach acid that comes with negative responses. Be on the lookout for jokes and cartoons you can share with family and friends. For a smaller dose, find a cartoon or picture that always makes you smile and post it near your desk. (Just make sure it's appropriate for all audiences!)

Replace Worry with Problem Solving

Focus on what you can do, and then go ahead and do it. Chronic worriers tend to focus on what they cannot do, what should be happening, or how things are going wrong. Replace worry with problem solving so that you identify where you can step in. Then, stop waiting for the perfect time and just get on and do it.

Meditation

The purpose of meditation is to free your mind from its normal busy activities. There are several different techniques that can be used. Some people use a word as a focal point (a mantra), while others suggest you focus on a color, your breathing, an abstract concept, or an object.

Here is a good process for meditation. Sit quietly with your eyes closed and relax all your muscles from head to toe. Become aware of your breathing. Breathe through your nose easily and naturally, in and out... Begin to silently repeat the word you have chosen or focus on the color you have chosen. In and out... Let distracting thoughts pass through your mind. Continue doing this for 15 to 20 minutes.

Resilience

Each stressful experience that you have prepares you to deal with one in the future. The more resilient you become, the less of an impact each of these events has on your mind and body. Many of us go to great lengths to avoid stress, and although avoidance initially feels like you are doing alright, the reality is that stressful things come up in our life all the time. The better we are at handling them, the more resilient we become, and the healthier we can be.

Each stressful experience can lead us into a cycle of confusion and even anguish. If we stay with those feelings, however, things actually get worse. But if we make a decision to deal with those circumstances by problem solving and adapting, we develop resilience. This means that we can enjoy life more and be more successful.

As you encounter more stressors in life (and we all do), we can rely on the experience we've had in dealing with negative circumstances in order to cope. We get more effective at managing that cycle of confusion and anguish, problem solving, adapting, and moving on.

Dealing with Negative Feelings

Put yourself in charge of you.

Take a leaf out of Eleanor Roosevelt's book and refuse to beat up on yourself or make yourself a victim in these situations.

Be proactive rather than reactive: notice what is going on around you, and when possible deal with potential problems right away. (For example, you can plan team meetings to ensure issues are addressed before they explode.)

Monitor your self-talk.

Become more aware of what you tell yourself both before and after dealing with a difficult situation. Remember the reality of how what we tell ourselves comes true, whether those messages are positive or negative.

Be in control.

Plan how you will handle the situation and visualize yourself feeling in control. After a situation has been handled, analyze it, learn from it, and then put it aside. If you still feel angry after you have dealt with a situation, use that anger constructively to clean your office, or let it propel you out the door for a walk.

Work on your sense of humor.

Research tells us that laughter is a proven method for dispelling stress and feeling better about the world. If things are getting heavy for you right now and you can't find much to laugh about, try renting a comedy or watching your favorite comedian.

Have a support team.

One of the most important things that you can do to deal with your negative feelings is to have a support group – people you can go to and just talk about how you feel. In your organization, do you feel you have that kind of support? Do all staff have that kind of support? (This is very different from gossiping; confidentiality is a big factor here.)

However great your support system is at home, others will rarely be able to understand just how you feel as well as someone who is working within the same culture and walking in a similar pair of shoes. Part of your action plan for the end of today may be to work with others to create a safe haven (a partner or confidante or some other support mechanism) where you can let off steam and pent up emotion.

Recommended Reading List

Anderson, Kristin. Great Customer Service on the Telephone. American Management Association, 1992.

Benjamin, Susan F. Perfect Phrases for Dealing with Difficult People. McGraw-Hill, 2008.

Blanchard, Ken, and Sheldon Bowles. High Five! The Magic of Working Together. William Morrow, 2000.

Bramson, Robert. Coping with Difficult People. Dell Publications, 1988.

Carnegie, Dale. How to Win Friends and Influence People. Pocket Books, 1998 (Reprint).

Hseih, Tony. Delivering Happiness - A Path to Profits, Passion, and Purpose. Business Plus, 2010.

Weinzweig, Ari. Zingerman's Guide to Giving Great Service. Hyperion, 2004.

Personal Action Plan			
I am already doing these things well:			
I want to improve these areas:			
I have these resources to help me:			
As a result of what I have learned in this workshop, I am going to	My target date is	I will know I have succeeded when	I will follow up with myself on

Disease Pathology



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