

VCI Seminars at Sea – August 21, 2014

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4 SUPPORTING THE TEAM EDUCATIONALLY AND COLLECTIVELY REAPING THE BENEFITS

We've looked at the needs of our pyramidal structure, its stability, and the need to support it both by adequate numbers to keep the pinnacle from toppling over, but also from within to keep the pinnacle from collapsing in upon itself. Inner support is strengthened by mentoring the entire team and keeping communication open between managers and upper levels especially so management needs are not left hanging. Inner support is also strengthened by the stake holding of every team member who has a 'buy-in' to the practice and willingly comes to work to ensure that his or her piece of the pie is humming along to do its part to ensure the whole pie complete and providing a tasty outcome to be proud of. Not every stakeholder, employee, etc. in our team is going to be operating at the peak of his/her self-actualization all of the time. So how do we reach, keep, or excite them and instill support for confirming knowledge they have and lighting a fire to learn more or to go that extra step?

First, before we address educating the team, we need to discuss YOU getting YOUR 'bang for your buck!' Simply providing CE funds and time to attend CE isn't enough; it's a start for sure, but not enough! Communicate with your staff and your managers the needs of the practice and your clientele. How is that done? Ensure that your Standards of Care (SOCs) or Standard Operating Procedures (SOPs) are in place for all areas of your hospital AND that your team members are tuned into them. These are the gold standards your practice concentrates on for your patients and your clientele have come to expect them. Remember these standards are still just below the line. Your basic needs for education and those of your staff are those CE opportunities that help solidify and reaffirm your SOCs or SOPs.

How do you make the below the line CE; the CE that keeps your practice operating at its' expected gold standard, worth everyone's while? Engage each team member in an area that is NOT their expertise and to engage it a little bit more. Whether it's more understanding of how a piece of equipment works and why, the receptionist can better explain to the client why it's not good to bring urine collected in an unsterile baby food container, or the associate remembers to take an extra couple of minutes to explain why the first urine is more important to collect than the last urine of the day. These extra moments are gold where staff take a few more minutes out of their time to go over and above the line to explain why something is important to the health of a pet by minimizing the need for repeat testing, improving accuracy, etc. Having the rest of the team hear how someone else 'says the phrase' might actually be a learning experience that will help down the road or even promulgate a revision of a training protocol. Review of SOCs and SOPs occasionally is a good thing! The team's stake holding in the very basic SOP and SOC philosophies of a practice create the matrix – strong and solid – in our pyramid and it's transparent for all to see because the team eat, sleeps, and lives the SOPs/SOCs.

Our basic CE is handled, our base is strong, but that is not enough. Because this is an energized, supported team with a strong rooted belief in the company's mission and goals, our team will be itching for more. Determining the best route takes a little bit more finesse of the evaluations we discussed before, input from the team on what they would do to change one thing, and so forth. This is where all your fact gathering becomes your personal CE of sorts. It won't do any good to decide to plop a laser into the practice if no one in the practice understands its' purpose, has a desire to use it, sees any benefit, or only sees the clinic paying \$XXXXXX for a piece of equipment that they don't understand the benefits let alone how to sell them to the client.

Addressing more intense education, the type of education that helps loft your team members up to the next level in their respective pyramid, needs to be more individualized. Here is where your managers will really excel at their expertise in knowing their specific team needs. Your communication with them and letting your managers and upper levels be aware of the long term goals and changes on deck for the practice will help them be on the lookout for CE that might be beneficial to send team members to. In addition, those employees who come home all jazzed about a new procedure or protocol may be the potential targets for adding a new service to the hospital. As a potential specialist hiring into a practice, having team members already willing and ready to take up the banner for your services is like having a red carpet with added benefits. At the same time you have also supported these team members by stimulating their brains to become active again, not complacent in their everyday 'normal' veterinary lives. They are now stakeholders in something new that can benefit their patients and clients and they can see themselves adding to the practice. A win-win.... As long as they see you follow it through.

Where practices and pinnacles fall through in the support of the team with education is paying loads of money out for CE. The mandatory requirements, if needed, are met ON PAPER, yet within a week, what is retained? The body was physically there, the mind was at the moment, but was learning accomplished? Education is a big buzzword, but the true meaning we are looking for is RETENTION. If the information is not retained, nothing is learned, nothing can be used, protocols and procedures cannot be changed. We go back to our practices and fall into the same old same old. This is why wet labs can be so popular because at least there, hands on helps solidify SOME learning. WHY? In a wet lab, more senses are used or as explained in Howard Gardner's Theory of Multiple Intelligences – more than one intelligence is used to learn something. The more intelligences you use to learn something the more it sticks. And people are better at some intelligences than others (Gardner, 1993). Multiple intelligences work similarly to the five senses technique I use to teach my students in anatomy; always adding that we use taste sparingly, of course!

Close your eyes as you run the gut through your fingers, say the names of the small and large intestine sections out loud in order so your ears hear them as your fingers pass over each. Allow your fingers to sense, and really feel the subtle differences of the bends, width, and shape of the gut. Then open your eyes, incise the gut and do the same within the cavity. Smell, touch, and visualize what you see. Take the time committing each to memory using as many senses as you can. When you read a test question on the gut, stop and visualize it in your mind. Slow down and run it in your brain like a mini video, add in the physiology you've studied, and then address the question again. See if that helps you clarify and focus where you need to be

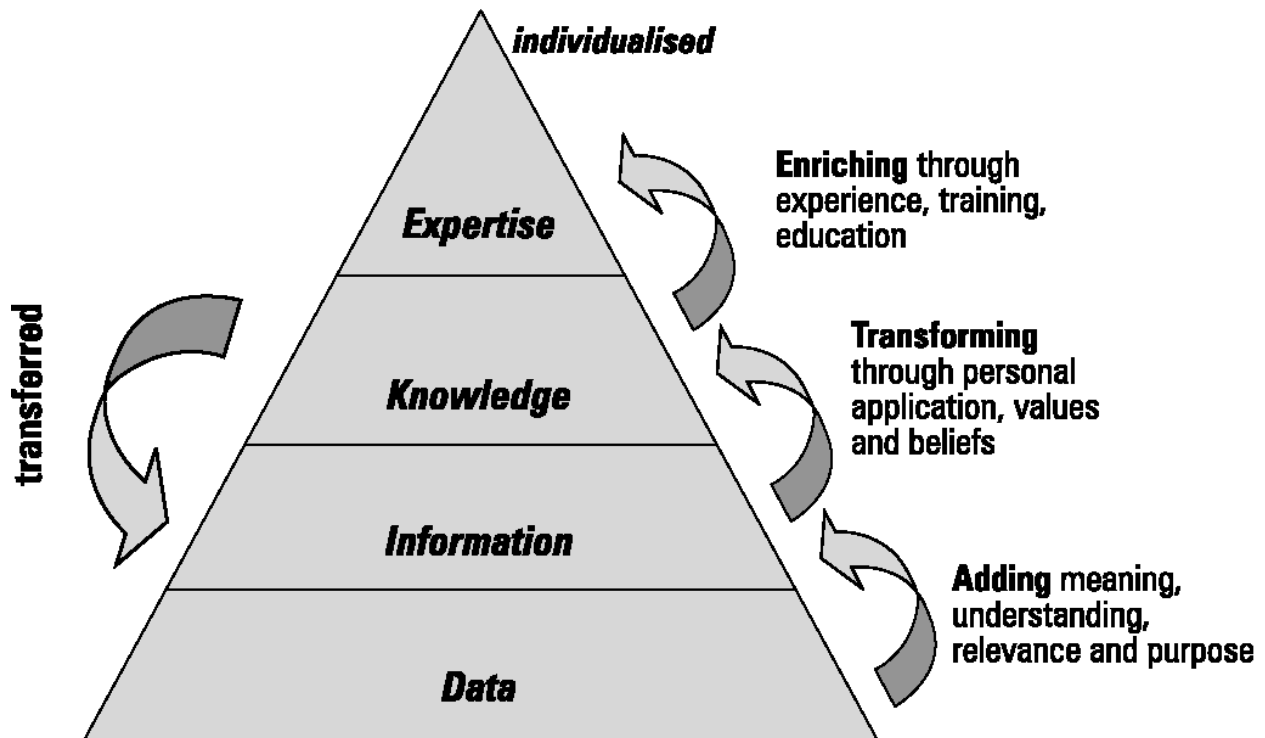
and remember all possibilities you need to remember without hard memorization you are using your senses to pull your memories out and focus.

The older crowd, Baby Boomers (born before 1965) and earlier are used to and generally learn best when presented with matter of fact book learning, regimented, 'this is the way it is' procedural formats. We can learn other ways, but this is often our most comfortable way to learn or natural 'fall back into' when it comes to something new. Generation X (the love children of the late 60's through the 70's) are about as 180 degrees from most of the other generations as you can get, preferring to limit work schedules to a set max amount, wanting their play time, and not being very good about planning ahead. They live in the here and now and can be extremely focused, but generally are not going to be the folks looking to buy into a practice and willing to make it their long time livelihood (at least not their primary responsibility). They are very willing to try new things, almost to a fault, and can be great movers and shakers in the veterinary community because what's new is good! Millennials are those born from the 80's to the mid 90's and are highly intelligent, very technical (having never lived without electronic gadgets), and seemingly have a focus problem, but in reality are able to flit from one thing to another with ease and stay on topic and focus which can be mind boggling to the post WWII generation folks whose minds may not be able to switch that fast. When you mix all of these age groups up in a practice or work situation you have a potpourri of mind over matter and attitudes, one CE will NOT fit all. As a matter of fact, my experience as an educator both online and in place, having all of these age groups in a class of students can be a challenge both for a CE course as well as a veterinary school or veterinary technology program at a university or college.

This is where multiple intelligences helped revolutionize education in the 1960's and 70's and is still being utilized today; continuously being redefined, but essentially involves finding differing ways of teaching to get students (of all ages) to learn concepts better. Each person, regardless of the generation they were born into (and to some degree which generation they were raised with – e.g. how old the parents were when they were born) has all of the intelligences. How s/he exhibits and learns with each intelligence is what will vary. Gardner (2009) defined an intelligence as the 'biological and psychological potential to solve problems and/or create products that are valued in one or more cultural contexts.' Armed with this definition and these criteria, he identified seven relatively autonomous capacities that he named the multiple intelligences: linguistic, logical-mathematical, musical, spatial, bodily-kinesthetic, interpersonal, and intrapersonal. These were the primary 7 intelligences and of these, each person usually exhibits 2 or 3 very strongly. Those intelligences exhibited the strongest are the best means to which to teach to and resultantly are the best ways for that individual to learn the easiest. For example, most medical professions fall into spatial & logical-mathematical. They are able to put images into their brains and manipulate them like a three dimensional model mentally and then the logical/math (and this includes science) part takes over to do the critical thinking portion of what to do in a systematic way to solve a problem. Even if someone is a Gen X'er, if his/her intelligences are strong in these two areas and perhaps the interpersonal, this person can communicate, learn, and work better with the Boomers and Millennials. If a person is instead musical, intrapersonal, and bodily-kinesthetic, his/her learning will involve potentially putting notes into a song form to learn a process, studying alone, or even performing a dance or doing something physical that helps interpret the process to better understand it to learn it. This latter person can learn just as much as the first, but is likely to get some pretty weird looks in a classroom! As you visualize this (and I know you will), I can tell you that I have seen some pretty

incredible interpretations of student presentations utilizing song and dance (rap, poetry, interpretive movements for the birthing process of a horse, etc.) It is amazing how well the majority of the class remembers the subject points of some of these presentations. The dance may have hit a minor intelligence, but all the other points were in there and that last little piece of the puzzle brought it all home. And – we all learned, improved, took another step, and smiled!

So, back to how a manager and the pinnacle work together to come up with how to utilize education then to support the team as a whole. A manager who knows his/her team well and knows what the future plans are from the upper levels will be keeping an eye on how best to reward the team with education. Conferences, special speakers, special workshops, and even events that are team building or community building to show off the practice to the community can be utilized to support the team educationally. A good manager is on top of what's out there, identifies it, suggests specifics to the team members for buy-in, and sells it to the powers that be to finance it. Support from within is achieved when the manager successfully sells this product as a win-win for all involved. Product sold, but when does the practice SEE the result? Here is where the advancement, stake holding, support of the team AND mid-levels all rolls into a nice package: Staff member (regardless of level) returns to practice and presents a short overview of what was learned to the entire staff, such as at a staff meeting. The subject could be a new technique, a better understanding for that staff member on a process that was an 'a-ha' moment of understanding, or something that enlightened this staff member in some way that s/he wants to share. It doesn't matter if everyone else already knows all about it. What's important is that it is important for THAT staff member AND that s/he gets to share it with the group and take ownership of it. See one, do one, teach one. As you can see from the following pyramid, the benefits are cross cultural for the entire staff. A receptionist doesn't have to understand the full medical aspects of GDV, but if s/he GETS enough information out of a staff led mini seminar to recognize when a client calls and says a dog ate a large meal quickly, drank a lot of water, is now acting lethargic, the stomach looks really full, that information corresponds to the SOP's check off the receptionist has for emergency procedure phone calls, and it corroborates and given MEANING and UNDERSTANDING enough to have



this receptionist realize, “I learned about this from that mini seminar. I need to tell this person to get this dog in NOW.”

Even for those team members that hate to present to a group of people, encouragement to present in any manner they see fit to get their point across allows his/her multiple intelligences to shine through. Maybe you have a budding videographer in your midst who videos what s/he learned and shows that – and it’s GOOD? Bingo, you’ve just realized you have another talent in your midst that you can potentially utilize to help your practice AND support that person’s self-actualization in his/her own pyramid. A good pinnacle can realize this, support management to encourage brainstorming in ways to work with this staff member to create a new niche. You’ve just supported your manager, the team member, benefitted the practice (in multiple ways), and came out smelling like a rose because you acknowledged a positive, communicated, and potentially excited the team raising everyone to step up.

There is a word of caution for the presentations. They need to be handled just like the brainstorming events. NO negatives or belittling. If a presentation on a medical issue is presented, it is wise if the presentation is reviewed by someone eligible to review it first to ensure the concepts are intact and you protect that team member. Keeping the rest of the crew under control and respectful of the speaker is important, especially the first few times you incorporate this technique in practice. “What comes around goes around” will eventually catch up to everyone. The extra ‘oomph’ this team member feels by support from within puts a smile on a face that gets seen by the client, felt by the patient, and exudes to the team. As Dennis Snow (2013) states in his lecture on ‘Wow your customer:’ “When it comes to a company’s environment, recognize that ‘everything speaks.” Just as the old customer service adage reminds us to ‘smile’ before we answer the phone, the same holds true throughout the hospital between one another and especially in how we handle the animals. A little positive goes a long way. Happy personnel means happy patients, happy clients (usually ☺), people want to come to work, and the practice moves along and grows.

Are we above the line yet?

Learning is realizing you know so little that you become so eager to fill it up. (Terry Mark)

The mediocre leader tells. The good teacher leader explains. The superior teacher leader demonstrates. The great teacher leader inspires. (Nanette Walker Smith adapted from a quote by Ritu Ghatourey)

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