

The Patient Experience Post

Healthcare's Resource for
Service Excellence
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Since the mid-1990s, Baird has helped healthcare organizations nationwide improve the patient experience and enhance organizational culture. Baird's culture assessment and diagnosis include experience mapping, medical mystery shopping, and focus groups to reveal the real customer experiences within your organization. Using your patients' experiences, Baird and her team prescribe critical next steps for improving patient satisfaction and HCAHPS scores.

Making Training Stick - Baird's 4-Step Model

by Kristin Baird, RN, BSN, MHA

In 2018, U.S. companies spent \$87.6 billion on training, [according to an annual survey conducted by Training magazine](#). Despite the fact that this represents a 6.4 percent decline from the previous year, it's still a significant investment in the payroll and costs of external products and services to keep employees up to date on important issues and provide them with the skills they need to perform their jobs effectively.

Unfortunately, a large amount of that investment doesn't yield intended results.

Most Training Doesn't Stick

According to the [Association for Talent Development](#), only 20 percent of employees will actually change the way they work as a result of the training they receive. Stated another way, *\$70 billion* of the investment made in training by companies around the country is wasted.

How much did you spend on training last year? How much was wasted? Perhaps even more importantly, how many opportunities to wow patients with exceptional service were missed?

For healthcare organizations, the ability to make training stick—long beyond the actual delivery of training—is critical both to reap the rewards of the investment made in training, and to support an ongoing culture of exceptional patient care and service.

So what needs to happen to make training stick? Concerted effort applied, not just during the training event, but before and after the event. In fact, the Baird Model suggests an approach that turns the traditional approach to training on its head to ensure that training sticks.

Why Traditional Training Approaches are Flawed

In traditional training approaches, 85 percent of the training effort takes place during the training itself—10 percent of the effort is done prior to training and only 5 percent after. The breakdown of effort with the Baird Model looks like this:

- Culture-specific pre-work prior to training – 25%

- Focused training – 25%
- Coaching and feedback after training – 25%
- Recognition, standards, and connection to purpose – 25%

To stick, training must be anchored in the culture and standards of your organization. In other words, it must reflect the reality of your organization. It becomes simply “the way” of the organization.

Too often, organizations make a major investment in a one-and-done training event, with very little pre- or post-work. Then they wonder why the training failed to achieve sustained results. I can’t tell you how many times I’ve spoken with senior leaders who have bemoaned the fact that a training initiative they invested in “didn’t work.” When I ask them about when the training was done it’s not uncommon to hear something like, “oh, I think it was about five years ago...” Five years? With an annual average turnover rate of 20 percent in the healthcare industry, how many employees attending that training are still working with you? And, of those remaining, how many recall or are continuing to perform in alignment with the training they received five years ago?

The Baird Model

Here’s what’s needed to make training stick:

- Prior to developing the training, leaders must gain alignment on the culture, standards, and desired outcomes they hope to achieve. They need to ensure that these standards and outcomes are consistent with how the organization actually operates. They need to analyze and identify existing gaps between current and desired performance. And *then* they use training as a means to close those gaps.
- They need to deliver the training. That can be done in a variety of ways, but, importantly, it should not be considered a one and done event. With service behaviors, the best approach is an interactive one where attendees can practice and get feedback.
- Following the training, when employees are back on the job, they need to be coached by supervisors and managers who are observing them to make sure that the desired behaviors are being followed consistently.
- Further, supervisors and managers need to recognize and reinforce the desired behaviors. This might involve recognizing people who are following through on expectations, reinforcing learning through additional refreshers that could occur during



Transforming culture. Shaping patient experience.

morning huddles, during staff meetings, during one-on-ones, through talking points and story-telling using the words of the standards or the mission, vision and values, etc. This will happen consistently when leaders and trainers have the tools and materials they need.

That's how you make training stick. That's the Baird Model.

So, [what do you want to "stick?"](#)

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Nurse, author, and consultant Kristin Baird, "Healthcare's Customer Service Guru," is the author of *Raising the Bar on Service Excellence: The Health Care Leader's Guide to Putting Passion into Practice* (Golden Lamp Press, 2008), *Reclaiming the Passion: Stories that Celebrate the Essence of Nursing* (Golden Lamp Press, 2004), and *Customer Service In Healthcare: A Grassroots Approach to Creating a Culture of Service Excellence* (Jossey Bass, 2000). The Baird Group provides consulting, mystery shopping, and training services for improving the patient experience. To learn more, please visit <http://baird-group.com> or call 920-563-4684.