

# MEDICAL CALL CENTER NEWS

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## Meeting Intrinsic Agent Needs in the Medical Call Center

By Kelli Massaro

Retaining top agents is essential to a medical call center's success. The challenge is to create a positive work culture that sustains, nurtures, and engages employees – both as part of a team and individually. While retention strategies must also address extrinsic factors (organizational or departmental systems that support employees), this article will focus on how medical call center managers can meet the intrinsic needs of their agents.

Agents have several basic needs that must be met in the workplace to feel satisfied. As a call center manager, if you can meet these needs, you can positively influence retention. In many cases, nurturing good relationships with your employees can override the negative effects of extrinsic organizational factors. Here are some key areas to consider.

**1) Good Relationships with Supervisors:** After job fit, fair supervision is the second biggest factor in employee retention. Supervisors and managers who use a constructive “coaching” style when delivering feedback nurture growth and learning among their employees. Conversely, supervisors that “police” for infractions and shortfalls create fear and inhibit employees’ growth potential.

**2) Belonging to a Team:** A sense of belonging is created when an individual feels a personal investment in the call center's shared vision and participates in call center decision-making. Stay open-minded to new ways of looking at things, and take advantage of networking with other call centers to explore alternative solutions. This will push your program and your agents to new heights.

**Contribution:** Agents enjoy the opportunity to make a meaningful contribution to their workplace. Pooling their unique talents, gifts, and interests creates an opportunity for each employee to excel and have unique ownership for a project, or for the work itself.

**Security:** When security (whether financial, physical, or emotional) feels threatened, employees begin to experience anxiety, stress, and dissatisfaction. Communicating regularly – and even more often during times of change – promotes trust.

**Control:** Employees don't like change when they feel it is “done to them.” Managing change poorly is a frequent cause of job dissatisfaction among medical call center staff. Implementing change with staff suggestions in mind will achieve better staff support and results that are more positive.

**Recognition and Appreciation:** Recognizing a job well done and showing appreciation to employees on a regular basis goes a long way toward keeping employees satisfied. This can be done in small ways, such as a verbal “thank you” or a written note.

Although a powerful motivator, no incentive program can replace good leadership and management practices. The key to retention is attending to the basics because no amount of praise or rewards will keep and attract staff if their basic intrinsic needs are not met.

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## **The Buck Stops with You**

*By Danita Johnson-Hughes, PhD*

Never before has it been more obvious that the medical call center world needs leaders who have the willingness to make things better for everyone. To do that, the ability to connect with other people becomes important. First, however, you have to understand who you really are. And you can't do any of these things until you begin to take responsibility for yourself and your part in the world. If you want to create change in your call center, your community, or yourself, you have to be willing to let the buck stop with you.

There are three areas of responsibility, all of which must be addressed before change of any kind can take place: personal, proximal, and social.

**Personal responsibility** requires introspection. You have to take responsibility for yourself, your actions, and what you accomplish in your life. You have to know who you are and what you value.

When you take personal responsibility, you create worthy goals and are able to act on those goals, becoming the best you can be and creating the ability to help others in the process.

**Proximal responsibility** means taking responsibility to support your boss, coworkers, and subordinates by giving them honest feedback, sharing information, encouraging them when their actions positively affect you or your call center, and holding them accountable when that effect is negative.

**Social responsibility** is built on interlocking relationships in which everyone takes responsibility for each other as a group. A person who takes action to make a positive difference in her department, division, or the call center as a whole understands by reaching out to affect the greater good she strengthens the bonds that tie customers, managers, and employees together, increasing the call center's chances to not only survive but to thrive and be successful and improving everyone's chances for individual success.

To be clear, if you really want to change yourself and your world, you must operate from all three areas of responsibility – none of the areas works well without the other two. Taking responsibility for your life and your actions is the foundation that must be established before beginning to take on the proximal responsibility of helping others. As a result, you will gain the skills necessary to take on greater social responsibility. This is how responsibility works. This is how successful organizations work, when they do work.

Danita Johnson Hughes, PhD, is a healthcare industry executive, public speaker, and author of the forthcoming book *Turnaround*. In her first book, *Power from Within*, Danita shares the “Power Principles for Success” that helped her overcome meager beginnings and achieve professional, community, and personal success. For more information visit [www.danitajohnsonhughes.com](http://www.danitajohnsonhughes.com), or write her at [danitahughes@edgewaterstems.org](mailto:danitahughes@edgewaterstems.org).



## **The Healthcare Debate Continues**

*By Peter DeHaan, Editor*

As a magazine and Web site publisher, all manner of articles and press releases show up in my inbox on a daily basis. Although some of them are carefully targeted to the markets I serve, most are widespread missives that are sent to every publisher with a pulse, regardless of their beat or focus.

Leading up to the historical – some would say, infamous – healthcare vote in the US house earlier this year, I received an increased number of press releases against the bill. Since I wasn't interested in using any of them, I quickly scanned them while pressing delete; I do not recall any that were in favor of the bill.

Also appearing in my inbox were numerous "op-ed" submissions decrying either the bill or the process. Even though I've never published an op-ed piece and never plan to, the submissions continued to arrive. What amazed me was that, for the most part, there was no effort to present a thoughtful discourse or an elegant argument; the submissions were all filled with polarized perspectives and emotionally laden rhetoric. While I might have agreed with their general point, I was repelled by their tenor, tone, and tack.

Even after the bill was passed and signed by President Obama, I have continued to receive press releases and op-ed pieces in opposition to what had happened – and fear of what might happen. A new element was added – announcements of lawsuits being filed.

It would seem that the vote approving the bill and its subsequent signing into law will not end the debate; it will merely shift to a new venue.

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## **"Avaya Compliant" Earned by Amcom**

Amcom Software announced that its contact center applications are compliant with Avaya Aura™ Application Enablement Services (AES). The Amcom contact center applications, a foundational element for its unified communications solutions, help organizations create safer and more efficient environments through fast, intelligent information sharing. The applications now are compliance-tested by Avaya for compatibility with Avaya Aura AES 5.2.

"Companies like Amcom Software are expanding the choices available to Avaya customers," said Eric Rossman, vice president, developer relations at Avaya. "With a broad selection of standards-based solutions that are compliance-tested for interoperability, businesses can use communications strategically in their operations and make critical information readily available to both clients and employees."

Amcom Software is a member of the Avaya DevConnect program – an initiative to develop, market, and sell innovative third-party products that interoperate with Avaya technology. "Amcom is committed to ensuring seamless integration with Avaya solutions so we can continue to be a single source for customers' end-to-end unified communications requirements," said Chris Heim, CEO of Amcom Software. "The fact that Avaya's innovative solutions are based on open, standards-based platforms enables our customers to incorporate new technologies alongside their Amcom solutions easily and cost-effectively. This helps them create forward-thinking communications infrastructures based on fast, accurate data exchange."

## **Triage Seminars to Help Improve Quality and Reduce Risk**

Carol Rutenberg of Telephone Triage Consulting, Inc announced the location and dates for the upcoming seminars: "Telephone Triage as Professional Nursing Practice: Improve Quality & Reduce Risk." The goal of the two-day seminar is to train participants to:

- Perform a risk assessment of their own program
- Begin development of a plan to apply telehealth nursing standards to their practice
- Recognize telephone triage as professional nursing practice
- Identify critical program design elements for successful triage
- Conduct a quality patient assessment over the phone
- Perform safe, legally defensible telephone triage in their setting
- Provide leadership and insight regarding the practice of telephone triage to others in their clinical setting

There are three dates and locations to pick from: July 14-15 in Dolce Valley Forge, King of Prussia, Pennsylvania; July 20-21 at Four Points by Sheraton BWI Airport Hotel, Baltimore, Maryland; and July 26-27 at Austin Hotel, Hot Springs, Arkansas.

For more information, visit [www.telephone-triage.com](http://www.telephone-triage.com) or call 501-767-4564.

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## **Survey Results: 70 Percent of Healthcare Execs Believe Reform Will Hurt**

Nearly three-quarters of healthcare executives surveyed earlier this month say that healthcare reform will have a negative financial impact on their facilities, while more than 60 percent note that reform will have a somewhat or very detrimental effect on the quality of care their facilities are able to provide. These are among key findings from the "2010 Survey of Healthcare Executives: Initial Response to Healthcare Reform on Cost, Quality" conducted by AMN Healthcare, the nation's leading provider of comprehensive healthcare staffing and management services.

The survey was targeted to executives who will be among those responsible for implementing the new healthcare system put into place by healthcare reform. "AMN's survey signals that the initial response to healthcare reform by the majority of hospital and medical group leaders is one of concern, and it highlights the fact that many healthcare executives are apprehensive about how reform will affect their facilities," said Susan Nowakowski, AMN Healthcare's president and CEO.

Only about one in five of those surveyed (22 percent) were greatly or moderately pleased by the passage of healthcare reform.

In addition, the survey suggests that the majority of healthcare executives believe that reform will create more patient demand for the services they offer and therefore a need for more clinicians. Sixty-two percent of those surveyed said healthcare reform will cause them to add more physicians, 56 percent said reform will cause them to add more nurses, and 56 percent said healthcare reform will drive them to add more allied healthcare professionals.

The complete survey is available at [www.amnhealthcare.com](http://www.amnhealthcare.com).

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## Healthline Raises \$14 Million for Medically Guided Search

Healthline Networks announced that it has raised \$14 million in a third round of financing; it will use the proceeds to expand research and development, engineering, sales, and network services to meet the growing demand from a broad spectrum of consumer-focused media and healthcare businesses looking to improve the way consumers find, understand, and manage health-related information.

"Consumers have become increasingly engaged in their own healthcare, and smart organizations are looking to capitalize on this trend," said Phil Dur, managing director, IGC, who led the financing; Dur has also joined Healthline's board. "IGC's investment in Healthline, given its innovative search and advertising technology, is consistent with our track record of partnering with industry-leading companies. We're looking forward to assisting Healthline with its efforts to continue to provide products that not only help consumers but media and healthcare partners as well."

Since its launch in late 2005, Healthline Networks has built a consumer-health destination Web site, [www.healthline.com](http://www.healthline.com), which is a Top 10 health information site as measured by comScore MediaMetrix.

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## Personal Health Records Use Growing

*By Nicole Lewis, InformationWeek*

Nearly one in ten adults surveyed report using a Web site to record health information. A new survey finds that people who use a personal health record (PHR) are likely to learn more about their health, have a better understanding of the care doctors provide, and those with two or more chronic illnesses ask more questions to improve their health compared to before they used a PHR.

Published by the California HealthCare Foundation (CHCF), the study interviewed 1,849 people and found that 7 percent of adults used a PHR, which entails using a Web site to record health information online. That's more than double the proportion identified as users of a PHR two years ago.

The report showed that 56 percent of respondents said that using a PHR made them feel like they knew more about their health, and 52 percent said that it helped them to better understand their doctor's decisions. The survey also indicated that older, less-educated people who have more than one chronic illness are more likely than others to say they are more knowledgeable about their health because of using a PHR.

Sixty-one percent of respondents forty-five-years-of-age or older and 61 percent without a college degree were more likely than others to say that they know more about their healthcare as a result of using a PHR. Additionally, 58 percent of respondents with two or more chronic conditions said they know more about their health compared to 44 percent of those with one or no chronic conditions.

"People with lower incomes, less education, and those who are living with multiple chronic illnesses have the most to gain from PHRs," said Veenu Aulakh, senior program officer in the Better Chronic Disease Program at CHCF. "This reinforces our assertion that getting a PHR in the hands of more consumers could positively impact the health of the country," Aulakh added.

This article is provided by [InformationWeek Healthcare](#).

## UM Study Shows Shift Workers at More Risk for IBS

Nurses participating in shift work, especially those working rotating shifts, face a significantly increased risk of developing Irritable Bowel Syndrome (IBS) and abdominal pain compared to those working a standard daytime schedule, according to research published in the *American Journal of Gastroenterology*.

“We know that people participating in shift work often complain of gastrointestinal symptoms such as abdominal pain, constipation, and diarrhea,” says Sandra Hoogerwerf, MD, assistant professor of internal medicine at the University of Michigan Medical School. “These are the same symptoms of IBS.”

“Our findings suggest that nurses participating in shift work, particularly those who participate in rotating shift work, have a higher prevalence of IBS and abdominal pain. This association is independent of sleep quality,” the authors write. “We know the colon has its own biological clock, and that’s what increases the likelihood of having a bowel movement in the first six hours of the day.”

The researchers say their study suggests that sleep disturbances do not completely explain the existence of IBS or abdominal pain associated with shift work. Meanwhile, the researchers suggest, “Practicing gastroenterologists should be aware of this association and educate patients with IBS on the possible impact of their work schedule on their symptoms.”