

How To Confront

Suzie runs into the office, grabs her coffee, and joins your daily morning team huddle ... late.

Mary doesn't always get the operatory set up properly for the next patient.

Your inventory of gloves has gotten too low for the third time in four months.

Confrontation — When do you do it? (Hopefully before you go crazy.) How do you confront others in a positive way? (With forethought.) Why do you avoid it? (You don't want to be hurtful, or get hurt.)

Two rules about confrontation: First, **praise in public and confront in private**. Last month, I talked about the incredible positives that result from empowering others with specific and sincere praise. Your praise will have even more of an effect when done in public. However, pick a private moment to confront someone.

Second, **confront before the situation gets out of hand**. Once you get emotional, you lose. If you are a parent, you don't have to think too hard to conjure up strong anecdotal evidence on your "ballistic barometer." Perhaps the incident that enraged you is not that important, but it's the fifth time and you've finally reached your limit.

It's the little stuff that needs confronting before it gets out of control. Yet, it's the little stuff that typically gets buried under the proverbial rug because you may think, "Why bother?" or "I just want to have everything flow smoothly and things are pretty smooth right now." But little things become big things and the ultimate price is that standards drift.

Dave Allison, president of Dave Allison and Associates, suggests these five excellent steps to logical confronting:

Step 1: Tell them what bothers you.

You have 10 seconds to complete this step. The longer you talk, the harder it is to stop talking. Plus, the more you say, the more defensive the listener will become. In this 10 seconds, you will be specific. The confrontation subject will be about a real behavior that you can see or hear, rather than an attitude.

Example: "When you are late to work twice a week ..." "When the operatory is not set up properly ..." That's all you say in Step 1.

Step 2: Tell them how it makes you feel.

Use "soft" words that will keep defenses down, such as "concerned," "troubled," "disappointed," and "worried."

Example: "When you are late to work twice a week, I get concerned." "When the operatory is not set up properly, I'm troubled."

Step 3: Tell them why you feel that way.

Frame the confrontation between your team member's standard behavior and the patient, not YOU.

Example: "When you are late to work twice a week, I get concerned because the patients will think we don't care." "When the operatory is not set up properly, I'm troubled because the patients may worry about our OSHA standards."

By the time you get to Step 4, you have talked for only up to 60 seconds.

Step 4: Ask: "How do you feel about this?"

This is not an optional step. In the legal world this step is called "arbitration." You must hear the other side. There really are no magical communication statements, but there are magical questions ... and this question is magic.

Karen Cortell Reisman, MS

Ms. Reisman teaches organizations how to increase productivity by communicating effectively. She has been a visiting faculty presenter at The Pankey Institute, a speaker at dental meetings, and president of Speak for Yourself® for 14 years. To get Karen's Top Ten list on how to blow it as a communicator, send a fax to (972) 385-7652. Contact Ms. Reisman at www.SpeakForYourself.com.



Example: "When you are late to work twice a week, I get concerned because the patients will think we don't care. *How do you feel about this?*" "When the operatory is not set up properly, I'm troubled because the patients may worry about our OSHA standards. *How do you feel about this?*"

You will hear one of these three responses:

a. "I really did not know this was part of my job to be at every team huddle meeting."

You now have the opportunity to reset your standards.

b. "Big deal. I wasn't that late. My child/dog/cat was sick again."

Relax! Don't go crazy. Reiterate how important the issue is to the patient. Say, "Sounds like the timing is bad. It really is important to our patients that we are all on the same page. What can we do?" Repeat this question as often as needed.

c. "Wow. I really didn't look at it that way. I see what you mean."

This is a positive outcome. You can go to Step 5 from here.

Step 5: Ask: "*What can we do about this?*"

As with Step 4, this is your opportunity to listen and educate. Together you can derive a plan of action that meets your standards.

Example: "When you are late to work twice a week, I get concerned because the patients will think we don't care. *How do you feel about this? ... What can we do about this?*" "When the operatory is not set up properly, I'm troubled because the patients may worry about our OSHA standards. *How do you feel about this? ... What can we do about this?*"

Leadership is not about changing others. Leadership is about the ability to find out if others want to change. These five steps can help you shape the type of team you really want.

© 2004, **Karen Cortell Reisman, MS**