

## Stakeholder Dialogue Series CoP: Notes

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**Subject Matter Experts (SMEs): Lisa Jacobs and Laura Gertz**

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The session began with a brief welcome from the facilitator, who also introduced the community of practice's (CoP's) SMEs.

Afterward, the SMEs provided the overview and goals of the CoP and asked participants to introduce themselves. The SMEs then shared a composite of a potential RETAIN participant: Sam, a construction worker who was injured on the job, went on unpaid leave for shoulder surgery, and wants to RTW, but they are concerned their employer will not allow it. The SME then asked participants how they are influencing or persuading others at work.

**Participants responded to the SMEs' question on what ways they are influencing or persuading others at work as follows:**

- One participant noted the importance of focusing on the patient (i.e., making it about improving the patient's life) rather than having an outsized focus on the program.
- Another participant mentioned first connecting with the patient and then playing off that connection to inform them about the program and how it could benefit their current situation.
- An SME mentioned a book by Dan Pink, a work behavior expert, that states people spend about 40 percent of their time at work engaged in non-sales selling. The SME asked participants if 40 percent was conservative for them.
- A participant responded that 40 percent was conservative, because persuading people to join RETAIN was their job and took up most of their time.

The SMEs then discussed creating an on-ramp for participant conversations by developing the right questions. The SMEs used Sam (the composite RETAIN participant) to frame this discussion, which led to a Jamboard activity on creating on-ramps for productive conversation.

## **Participants responded to the Jamboard activity on ways they can create on-ramps for productive conversations as follows:**

- Gather as much information as possible about the participant before calling to make the conversation more personal.
- Try not to sound too robotic or as if you are reading a script.
- Deliver appointment reminders via text, phone, or social media direct messages.
- Avoid using acronyms and internal program jargon, such as SAW/RTW.
- Come from a place of curiosity.
- Offer empathy when an individual shows they are struggling; this shows you truly care.
- Look at the person's medical chart to find how the injury occurred or any pre-existing conditions.
- Be mindful of health equity and inclusivity.
- Have interpreter services ready as needed for the initial call.

**Afterward, the SME said part of the on-ramp experience is developing good questions. This led to another Jamboard activity in which participants developed questions they would ask Sam.**

## **Participants responded to the Jamboard activity on what questions they would ask Sam during their initial conversation about RETAIN as follows:**

- How are you doing today?
- What is your number one goal as you recover?
- What short-term goals are you focusing on?
- Do you have anyone to help you achieve your goals?
- Are you open to a new job in a different industry?
- What are your biggest job worries right now?
- Could you tell me a bit more about how your injury has been impacting you?
- How long have you worked in construction?
- How have you been coping so far?
- What are your needs?

**The SME then discusses how it is important to know Sam's interests, desires, and concerns. The SME said the technical, functional, and emotional benefits model can help home in on interests and tailor conversations. The technical benefits are the program's components and services; the functional benefits are how the program works, or the process for engaging with the program; the emotional benefits are how participants feel or what they experience when engaging with the program. This led to a Jamboard activity for each piece of this model.**

**Participants responded to the Jamboard activity on key messages and information Sam needs to know about RETAIN to spark their interest, demonstrate value, and encourage participation, first focusing on technical benefits as follows:**

*Technical benefits are what RETAIN does.*

- If now is not a good time to enroll, we will be here if anything changes with your situation (until March 2024).
- We coordinate with your employer to provide reasonable stay-at-work accommodations.
- We share and explain any eligibility requirements.
- We don't share your specific health information with your employer.
- All of the identifiable information will be removed for future sharing of research information.
- We can help you return to work sooner by connecting you with different services.
- We won't speak to anyone without your permission first.
- We can help with any social work needs that you may have (rent, prescription costs).
- All your information is kept secure and fully confidential, only disclosing to those you give permission.
- Lines of communication are always open; any question you may have, we are always willing to discuss.
- You can withdraw at any time.

**Participants responded to the Jamboard activity on key messages and information about functional benefits as follows:**

*Functional benefits are how RETAIN works.*

- Our nurse navigators can help explain any questions you might have after your visit with the medical provider.
- I can provide you with any necessary enrollment information via mail, drop-off at your practice, link in an email, or over the phone.
- Participant meetings are available after hours if they have a full day of rehab.
- We do not share any personal information without your approval.
- We will work with you on what works best for the enrollment process (i.e., virtual, in-person, telephone).
- You can decide how you'd like to communicate (calls, texts, emails, etc.) and how often.

- We can help you with the enrollment process. We have translators and other supports available to help.
- We can conduct enrollment via Zoom or over the phone.
- We can help you complete the state benefit and enrollment forms.
- A liaison (RN) is used to communicate between your doctor, the patient, and the employer.

### **Participants responded to the Jamboard activity on key messages and information about emotional benefits as follows:**

*Emotional benefits are how RETAIN feels.*

- Normalize and validate how they are feeling.
- We are here to work with you.
- Make a personal connection and help them see a better future.
- RETAIN can connect with your employer and provider to create a plan so you can safely return to work.
- RETAIN's coaching and coordination services can help you keep your job or find a new one if necessary.
- We can help you maintain your financial independence and avoid losing income in the future.
- Getting back to work can help relieve the stress of not working.
- We've found that sometimes employers are nervous about how to do accommodations correctly. We have a trained professional who can make that process easier, and help you advocate for yourself as well.
- We are finding what the barriers are and working together to find ways to reduce those barriers and helping participants SAW/RTW.
- We can help you stay at or return to work safely with the tools and supports you need.

**The SMEs then wanted participants to brainstorm key messages and communication strategies. To do this, they presented another RETAIN participant profile: Aasha, a certified nursing assistant who injured her back and wants to return to work in a position with fewer physical demands. Aasha speaks but does not read English; Somali is her native language. Participants engaged in another Jamboard activity to think through technical, functional, and emotional messaging in relation to Aasha.**

### **Participants responded to the Jamboard activity putting together technical, functional, and emotional key messages and communication strategies for Aasha as follows:**

- Information can be provided in Somali, and an interpreter is available if needed.

- How would it feel to have someone advocate for you and talk to your employer about accommodations?
- We can work with employers to find more accommodations—or if not possible, use our services to find them a different job that accommodates the injury until she recovers.
- Find out how she is doing emotionally and whether she is feeling any guilt or blaming herself for her injury.
- Technical: Get an interpreter if needed to make her feel more comfortable.

**The SME then discussed another concept from Dan Pink: attunement, which involves getting in sync with people, matching energy levels, and adapting style. If you are an extrovert, this may require practicing some introvert skills, and vice versa if you are an introvert. The SME also discussed the concept of clarity, which involves sifting through all the information about RETAIN to present what's most relevant to the patient.**

**The SMEs brought up the concept of motivational interviewing and using irrational questions (as opposed to rational questions) to help motivate people.**

**Using these concepts, the participants then engaged a small group exercise to get below the surface and discover what they have in common.**

**Afterward, the SME discussed the concept of pitching, including 1) the question pitch, in which statements are actively received and processed; 2) the rhyming pitch, which makes statements memorable; and 3) the subject-line pitch, which can make a difference on affect whether a participant opens an email.**

**The SME also discussed improvisation techniques, which call for saying “yes, and” instead of “yes, but.” This technique can be a good conversation starter.**

**The SME also brought up the concept of serving, which requires understanding how RETAIN aligns with a participant’s purpose; for example, in the case of Sam, ask: If Sam agrees to proceed, are you helping them get closer to the desired RETAIN outcome?**

**The SME concluded by asking participants if there are one or two things they are going to try when interacting with potential participants, and whether there are any best practices they would like to offer.**

### **Participants responded to the concluding questions as follows:**

- One participant loved the idea of “yes, and,” and wondered what it would look like when applied to RETAIN.
  - The SME said if a patient states, “I am worried I am never going to get back to work,” you may reply, “Yes, and we have some help for you.”

- Another participant said they need to make conversations more personal, rather than just reading a script. They liked the idea of bringing up the 1–10 scale, then asking why their rating wasn't lower (an irrational question).