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PETER UBEL **BEDSIDE MATTERS**

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Do Starbucks Employees Have More Emotional Intelligence than Your Physician?



A Starbucks barista. (Photo credit: Wikipedia)

A cranky customer snaps at his barista, lodging an unjustifiable complaint about the service, the temperature of the drink...about anything and everything. He came into the store angry (and in pain from a chronic illness) and he needed something—or someone!—to take it out on. He is met by a well-trained smile, the barista doling out a few words of sympathy while bending over backwards to make sure he knows she has taken his complaint seriously.

Meanwhile down the street, a cranky patient snaps at his physician, lodging an unjustifiable complaint about the service, the temperature of the exam table...about anything and everything. He came into the clinic angry (and in pain from his cancer) and he needed something—or someone!—to take it out on. He is met by indifference: The doctor is focused on the patient's lab values and doesn't have time to deal with these complaints which, frankly, irk him because he knows the patient's criticisms are unjustified.

Why are Starbucks employees often better at responding to their clients' emotional needs than experienced physicians? It comes down to training.

As described in Charles Duhigg's *The Power of Habit*, Starbucks employees undergo rigorous training in how to recognize and respond to customer needs. They learn about what the company calls the "Latte Method" of responding to unpleasant situations (and really, would you have them call it anything else?). The Latte Method involves:

"We Listen to the customer, Acknowledge their complaint, Take action by solving the problem, Thank them, and then Explain why the problem occurred"

The result? Baristas learn to recognize when their customers are exhibiting negative emotions and, more importantly, how to address these emotions in positive ways.

Contrast that with most medical training. We physicians spend thousands of hours memorizing Latin words, learning to recognize signs and symptoms of illness. We spend thousands more familiarizing ourselves with tests and treatments—with medication side effects, surgical indications and whatnot. But outside of psychiatry training, or the rare enlightened medical school, we don't even receive a fraction of the training that Starbucks employees receive about how to recognize and respond to people when they express negative emotion. This dearth of training has predictably dire consequences. According to audio recordings of interactions between patients with metastatic cancer and the senior oncologists caring for them, doctors respond appropriately to patients' expressions of negative emotions less than one in five times. Not just any doctors either, but senior oncologists, who've spent years interacting with patients suffering from terminal illnesses.

A patient with cancer riddling his dying body tells his doctor: "I'm scared," and the oncologist responds by saying: "Well, it looks like your blood pressure has been a little high lately."

A patient says she is in pain and the oncologist says: "Let's look at those lab results."

In my book *Critical Decisions*, I explore the challenge of shared decision making—of doctors and patients working together to make difficult medical decisions, when the "right" choice depends on a given patient's specific values and preferences. Key to sharing these decisions is for doctors and patients to communicate effectively with each other.

But how can people hold an effective conversation when one of them—the expert in the white coat—is oblivious to the other one's emotions?

Maybe we should require students to work at Starbucks before allowing them to apply to medical school!

About Peter Ubel:

I am a physician and behavioral scientist at Duke University. My research and writing explores the quirks in human nature that influence our lives — the mixture of rational and irrational forces that affect our health, our happiness and the way our society functions. (What fun would it be to tackle just the easy problems?) I am currently exploring controversial issues about the role of values and preferences in health care decision making, from decisions at the bedside to policy decisions. I use the tools of decision psychology and behavioral economics to explore topics like informed consent, shared decision making and health care spending. My books include *Pricing Life* (MIT Press 2000) and *Free Market Madness* (Harvard Business Press, 2009). My newest book, *Critical Decisions* (HarperCollins), is coming out in September of 2012, and explores the challenges of shared decision making between doctors and patients.