

WIN 5.1 - Open Communication

Lesson 4 - During the Interview

Joan:

Nice to meet you. I'm Joan Selkirk, the Nurse Manager.

Amisi:

It's a pleasure to meet you, Joan. I'm Amisi Santos.

Narrator:

Some body language is universal. Other body language is not. From the moment you meet a new candidate, you can be sure that they're behaving in ways they believe will demonstrate how well suited they are for the job. But for IEHPs, this behaviour may be based on what's important in their culture, not on what is usual in Canadian culture. Since most IEHPs are motivated to learn and adapt to new ways of doing things, this is a short-term issue. But it can be an important one initially.

Research shows that gestures, body language, and speaking style can account for over ninety percent of a first impression. In order to find the best candidate for the job, someone with the knowledge, skills and abilities needed, it's always in an employer's best interest to be aware of this area for potential bias, and to work through it.

Joan:

Nice to meet you, I'm Joan Selkirk, the Nurse Manager.

Amisi:

It's a pleasure to meet you, Joan. I am Amisi Santos.

Joan:

Great. Why don't you follow me.

Amisi, you can just sit here.

Amisi:

Thank you.

Joan:

Sorry I'm late. This place is so crazy-busy right now! It just feels like we're constantly playing catch up, we're so understaffed. Now I have another RN having to work extra shifts; I've got to find an RD. Honestly, it's just about holding the fort down right now. So! What do you know about CHC's?

Narrator:

At the beginning of an interview, breaking the ice with small talk is a good idea. But keep in mind that your organization is being assessed right along with the candidate. It's important to set the stage properly for the interview so that both sides get the best possible opportunity to make an educated decision about whether or not to move forward.

Joan:

Amisi, thanks for coming today. Did you have any trouble finding the place?

Amisi:

Oh no, Joan. It's very accessible for me. Of course, Google Maps always comes in usefully.

Joan:

It's hard to imagine what we'd do without that.

Now Amisi, I'd like to just take a moment to go over what you can expect for the next hour. There will be no surprises.

Amisi:

Oh! That's good!

Joan:

All of the questions I'm going to ask you are based upon the job ad that you responded to. First we'll talk about your education, your clinical skills, any additional training you may have had; and then I'd like to hear about your work experience. And at any time you'd like to take notes, or just need a few seconds to collect your thoughts before you answer my questions, it's not a problem.

Amisi:

Thank you.

Joan:

And if I say anything that confuses you, or you just have any questions at all, please feel free to ask me. And I'll do the same with you.

Amisi:

That sounds wonderful, Joan.

Joan:

Okay. So you may have noticed coming in, this is a thriving health community centre and we're very excited to be hiring another Registered Nurse. Our clients are mainly seniors, families with young children, youth, and newcomers. We provide them with clinical care, general health services and a wide variety of social services.

Amisi:

I see.

Joan:

You would be performing physical assessments, triage, health education, and working closely with all members of the team. You would be maintaining clinical records and helping the place run more smoothly. One of things we're very proud of here is our wide range of training opportunities that we provide for all the staff. We also have a very competitive benefits package.

I think also I should say here how much we all love what we do. We've become a very big part of this community, and what we're looking for—in addition to all the obvious things—is someone with a fantastic attitude; someone who loves working with people, and can enjoy the challenges a place like this will offer.

So that's my speech, Amisi. Do you have any questions so far?

Amisi:

Yes - I might have a few questions.

Narrator:

By now you've got a solid list of interview questions that will help you determine each candidate's credentials, experience, competencies, and attitudes. Now it's time to focus on how you ask these questions, especially if your candidate is an IEHP.

Keep in mind that in many cases English may not be the candidate's first language. And while Amisi wouldn't be at the at this stage of the interview process without having a solid grasp of English, she may still need time to translate what you say into her first language, and what she wants to say into English.

Joan:

Amisi, I'm impressed. You clearly have the education and training we're looking for. Now let's talk about your work experience.

Amisi:

I would be happy to.

Joan:

Can you tell me—what is your greatest strength?

Amisi:

Oh... that is quite difficult. I don't want to boast about myself. I would say...

Joan:

Let me rephrase the question. Can you tell me what is your best quality as a nurse, and maybe include an example of using that quality?

Amisi:

Yes, My best quality as a nurse is my ability to do a lot with a very little, and to handle a heavy caseload.

Back home, I worked for five years in a healthcare facility similar to this one. We were always understaffed. Our health centre was located in a region where there were lots of people, so we always had many people to treat every day, with few resources. I learned very quickly how to be creative with what we had. I understand your staff are using the Open Access scheduling system? And this is very similar to the system we used - fitting in as much as possible into one appointment to cut back on future visits. This worked very well for us. So I would say my ability to handle a heavy caseload and to use resources efficiently would be of use to you.

Joan:

I would agree with you, Amisi.

Now let me ask you another question. Can you tell me when you used effective communication at work, and what was it that made that communication effective?

Amisi:

In my experience, effective communication is about much more than the spoken word.

Our clinic was located in a region where there were many islands, and people spoke many different dialects, so we had to be able to communicate with them in other ways. One day an elderly woman came in with a deep laceration in her arm, so distressed that she would not let the doctor touch her. Simply by speaking calmly to her, and stroking her hand, I was able to calm her down enough for the doctor to treat her wound.

I know that you have many newcomers at your clinic, and I feel I could communicate very well with them.

Joan:

That's a wonderful story, Amisi. Thank you. Now can you tell me about a situation where you felt you hadn't communicated very well, and how you corrected that.

Amisi:

Well, when I first arrived in Canada, I was surprised that many people didn't understand my English. At my first job, many people - especially the elderly - had trouble understanding me. I took a bridging program, which helped, and I continue to work hard. In fact, I belong to a conversation group that meets once a week, and I find that helps me. Also, my volunteer work at the hospital encourages me to always be improving. I know you have many elderly patients here, but I now feel comfortable speaking with them and I find they understand me most of the time.

Joan:

Nice. Well I'm glad to hear all that.

Amisi:

Yes - the bridging program...