

The Elevator Pitch: Communicating Your Expertise, Experience, and Value to Patients, Co-Workers, and Prospective Employers in an Instant

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Presenter's disclosure of conflicts of interest is found at the end of this article.

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Abstract

During JADPRO Live Virtual 2020, Andrew S. Guinigundo, MSN, RN, CNP, ANP-BC, provided guidance to advanced practitioners on creating their elevator pitch and communicating their role.

As the saying goes, you only have one chance to make a first impression. Mastering the “elevator pitch” can be an invaluable skill for advanced practitioners. During JADPRO Live Virtual 2020, Andrew S. Guinigundo, MSN, RN, CNP, ANP-BC, defined the concept of an elevator pitch and its application to advanced practitioners and described strategies for creating a personal brand in health care.

Mr. Guinigundo explained that the term “elevator pitch” originates from the idea of having to impress a senior executive during a brief ride up an elevator. Whether a short description of an idea or a company, the pitch should be delivered in the span of an elevator ride (approximately 30 to 120 seconds).

According to Mr. Guinigundo, however, succinct and persuasive

sales pitches are not confined to the business world. In health care, advanced practitioners also benefit from learning how to quickly communicate their expertise, experience, and value to patients, co-workers, and prospective employers.

“The elevator ride is both a hazard and opportunity,” Mr. Guinigundo cautioned. “In order to have more of the latter and less of the former, you need to prepare.”

PERSONAL BRANDING

According to Mr. Guinigundo, self-awareness is an essential part of personal branding in that the brand must truly reflect the individual behind it.

“We must know ourselves before we can project it to others,” he explained. “If the persona is not really you, then it will not stand up under stress.”

With that in mind, Mr. Guinigundo shared 10 rules of personal branding created by Goldie Chan, a social media strategy leader and personal branding expert.

1. **Have a Focus:** “By attempting to be (or please) everyone, you will spread yourself too thin, and what different people want from you may contradict,” said Mr. Guinigundo, who noted that one’s focus may change along with experience and jobs. “When you’re new, your ‘brand’ may be young, ambitious, and fresh. As you are around longer, however, the brand could evolve to one of wisdom and experience.”
2. **Be Genuine:** “In other words, be yourself,” said Mr. Guinigundo. “If you have an interest, immerse yourself in it and become the expert in that thing.”
3. **Tell a Story:** “People relate to stories, so if you can tell a unique and authentic story, you can win them over as an audience,” he said.
4. **Be Consistent:** “You can’t change who you are on a daily basis in terms of how you practice,” he said. “It’s about being consistent, but still using what’s needed.”
5. **Be Ready to Fail:** “You learn from your mistakes,” said Mr. Guinigundo. “You’ll achieve the best branding once you’ve failed several times by pushing beyond your comfort zone. The world is full of examples of famous failures who learned from their mistakes and used them to energize their success.”
6. **Create a Positive Impact:** “There are two ways to grow your established brand: hop over others and burn bridges or steadily grow community around your brand,” said Mr. Guinigundo. “Obviously, I’m in favor of the latter. Keeping a positive attitude and helping others grows your brand in the long run.”
7. **Follow a Successful Example:** “This speaks to mentorship, and there are a lot of different opportunities for mentorship at JAD-PRO,” said Mr. Guinigundo.
8. **Live Your Brand:** “This is not about being a persona or a personality,” he said.
9. **Let Other People Tell Your Story:** “I find no bigger compliment than when a patient

comes in and says, ‘You take care of my best friend, and she says that you’re awesome,’ ” said Mr. Guinigundo. “Those are the things that warm your heart and make you want to do well.”

10. **Leave a Legacy:** “Hopefully, you’re building something that lasts well beyond your time in health care,” said Mr. Guinigundo.

KNOW YOUR AUDIENCE

Both the content and delivery of speech should depend on the audience, said Mr. Guinigundo, as individuals within these groups all come from different places. Understanding the concept of emotional intelligence can thus help providers better understand where someone is coming from.

“When you communicate, your purpose is not what *you* want to do,” Mr. Guinigundo emphasized. “Instead, it is what you want your audience to do as a result of reading what you wrote or listening to what you said.”

“To communicate effectively, you must adapt to your audience,” he continued. “Therefore, you must know your audience. The words we use and how we use them will differ depending on if you are speaking to a patient, co-worker, manager, practice president or CEO, or prospective employer.”

EMOTIONAL INTELLIGENCE

Otherwise known as emotional quotient (or EQ), emotional intelligence is the ability to understand, use, and manage one’s own emotions in positive ways to relieve stress, communicate effectively, empathize with others, overcome challenges, and defuse conflict. Mr. Guinigundo noted the following four attributes of emotional intelligence: self-management, self-awareness, social awareness, and relationship management.

According to Mr. Guinigundo, there are three factors that govern how humans behave and think: intelligence quotient (IQ), personality, and emotional intelligence. Of these three factors, only emotional intelligence is flexible enough to be improved.

“While we can definitely acquire more knowledge, for example, our ability to process that knowledge doesn’t necessarily change,” he said. “Similarly, we may have changes of heart, but rarely do we undergo concrete changes in personality.”

Emotional intelligence, on the other hand, can change over time.

“With practice,” said Mr. Guinigundo, “we can learn to read people better, we can understand ourselves better, and we use that awareness to communicate with people more effectively.”

Strategies for improving social awareness include paying attention to nonverbal body language, mastering timing, clearing away the clutter, practicing the art of listening, testing for accuracy, and stepping into another’s shoes.

DELIVERING THE PITCH

According to Mr. Guinigundo, the components of the elevator pitch seek to answer the following questions: Who are you? What do you do? What do you want, and what is your call to action?

Mr. Guinigundo outlined several scenarios. A patient may ask, “When will you finish? When do you become a doctor?”

A response could be, “I am already finished! I received my Masters in 2000! (Who are you?)

I am not becoming a physician. When I chose this path, the NP role offered everything I wanted in a timeframe that fit my life. (What do you do?)

Anyway, how did that chemotherapy go last week? (What do you want?)

Here are some things you can do to help with some of the side effects you encountered last time.” (Call to action.)

A patient may say, “You’re not Dr. Jones! Where is Dr. Jones? Dr. Jones said she would see me back in 1 week. Who are you?”

A possible response is “Hi, Ms. Smith, my name is Andy Guinigundo and I am a nurse practitioner. Dr. Jones has asked that I see you today. (Who are you?)

We utilize a team approach here. Sometimes you will see your physician, and sometimes you

will see an advanced practitioner like myself. Who you will see for the next appointment is usually decided at the time of your last appointment. I apologize that you were unaware that you were seeing me today. Often, the scheduler will tell you when making an appointment and/or write it on your appointment card. (What do you do?)

Now, I understand you received your first dose of chemotherapy with doxorubicin and cyclophosphamide last week. How did it go?” (What do you want?/Call to action.)

Another scenario Mr. Guinigundo outlined is if you hear a fellow advanced practitioner referring to advanced practitioners as “mid-level providers” or “MLPs.”

A response could be, “Did you just refer to us as ‘MLPs’? I don’t know about you but I am NOT a mid-level provider. (Who are you?)

I only provide ‘advanced’ care. (What do you do?)

I want patients, administrators, physicians, and others to treat us like the experienced, well-educated, and well-trained practitioners we are. (What do you want?)

Maybe it sounds like a pet peeve, but I prefer that you call us advanced practitioners.” (Call to action.)

Finally, Mr. Guinigundo emphasized advice from his 7th grade teacher: proper prior planning prevents poor performance.

“Unless we’ve carefully considered how we perceive ourselves and how we want to project ourselves to our audience, we’ll just be winging it,” he concluded. “And under stress, winging it just doesn’t work.” ●

Disclosure

Mr. Guinigundo had no conflicts of interest to disclose.