ENGAGE
WEBINAR SERIES



The Weight of Your Words

How Leaders Shape Culture Through Language and Why a Leader's Sentences Carry More Mass Than Anyone Else's

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- Kevin is a professional speaker and leadership facilitator with four decades of experience helping people and organizations think clearly, communicate effectively, and act with purpose
- His leadership perspective is forged as a firefighter and first responder, working in the midst of crisis and trauma where clarity and compassion matters most
- Kevin partners with healthcare organizations across the United States, supporting leaders and frontline teams in building people-centered cultures
- He currently serves as a Corporate Implementation Specialist with Custom Learning Systems, helping healthcare organizations build the kind of leadership that makes better people and, in turn better business

The Weight of Your Words

Participant Workbook

"The Weight of Your Words" is built for hospital and FQHC leaders, grounded in the simple, research-backed idea that a leader's language carries more weight than anyone else on the team, and that this weight quietly shapes culture, trust, and patient safety, whether a leader manages it on purpose or by accident.

The session's goal is to leave participants with a plain-language understanding of why this happens and tools they can start using the same day.

How to Use This Workbook

This workbook follows the same six segments as the keynote.

Each section has room to write during the session, plus the full research behind what you heard, with citations, in case you want to go deeper afterward.

You do not need to fill in every blank live.

Come back to it.

The Culture Audit

Where Culture Actually Gets Built

Culture is built in three ordinary places: what you ask about most, what you repeat, and what you let slide. Use the space below to run the audit on your own last two weeks.

1. **What do I ask about most often?**
   Think about your last five check-ins or huddles.
   What question came up in nearly all of them?
   What does that question tell your team you actually value, whether or not it matches your stated values?

2. **What have I repeated, on purpose, since the start of the year?**
   What is the one priority you are still actively saying out loud, not just the one you announced once?
   What is something important that has quietly slid off your radar because it stopped feeling urgent?

3. **What have I let slide without comment?**
   Think of a specific moment: a shortcut, a disrespectful comment, a corner cut.
   What did your silence communicate?
   What is one thing you will name out loud the next time you see it?

The Weight Imbalance

Correction and encouragement are not equally weighted. It can take five to nine specific, genuine positive interactions to offset the weight of one piece of criticism, especially when it comes from someone with authority.

Build your surplus

Think of one person on your team right now.
Write one specific, genuine thing they have done well recently, specific enough that it could not apply to anyone else on the team.

Before your next hard conversation

Who is it with, and what is the core value they clearly care about, patient care, their team, doing the job right, that you can connect to before you get to the correction?

Source and Ownership

What you meant matters far less than how it was received. The repair is in owning the impact, not explaining the intent.

Write your ownership line

Fill in your own version of the repair script below. Keep it short. Resist the urge to add an explanation after it.

"That landed harder than I meant it to, and I own that."

Practice distanced self-talk

Before your next hard conversation, coach yourself by name instead of using "I."
Write your own line below using your own name.

"[Your Name], you know what to do here. Own it and stop talking."

The One Sentence Commitment

Small, deliberate, on purpose. Use the tracker below to follow through this week and keep going after it.

Person	The Sentence	Date Said

The Research Behind It

The keynote keeps the science in plain language. If you want the actual research, it is here, along with what it means for the work you do.

Words and Brain Chemistry

Supportive, affirming language and harsh or threatening language do not just feel different, they engage different neural systems.

Affirming words, and reflecting on personally meaningful values, are associated with activity in reward and self-processing regions of the brain, including the ventral striatum and ventromedial or medial prefrontal cortex.

Threatening or harshly critical language engages the amygdala and the body's stress response system, including cortisol release, the same circuitry the brain uses to respond to physical danger.

What this means for you: when a sharp comment from a leader lingers longer than you would expect, that is not oversensitivity. It is the brain doing what it evolved to do with threat-relevant information.

Falk, E. B., O'Donnell, M. B., Cascio, C. N., et al. (2015). Self-affirmation alters the brain's response to health messages and subsequent behavior change. Proceedings of the National Academy of Sciences, 112(7), 1977 to 1982.

Cascio, C. N., Konrath, S. H., & Falk, E. B. (2016). Narrative self-affirmation and empathy: A neural account. Related work reviewed in Sherman, D. K., Lokhande, M., Muller, T., & Cohen, G. L. (2021). Self-affirmation interventions. In Handbook of Wise Interventions.

The Research Behind It (cont'd)

Incivility and Patient Safety

A 2024 systematic review and meta-analysis in the Journal of Advanced Nursing pooled data from forty-one studies on workplace incivility in hospital settings.

It found a pooled prevalence of 25.0 percent for experienced incivility and 30.1 percent for witnessed incivility among nurses and other healthcare professionals.

Workplace incivility was negatively associated with multiple domains of patient safety culture, including teamwork, reporting of safety events, communication openness, and communication about error.

It was also directly associated with a range of patient safety outcomes: near misses, adverse events, reduced procedural and diagnostic performance, medical error, and mortality.

What this means for you: when a leader lets disrespect or a shortcut slide in a healthcare setting, the research says the downstream cost is not just morale. It reaches the patient.

Freedman, B., Li, W. W., Liang, Z., Hartin, P., & Biedermann, N. (2024). The prevalence of incivility in hospitals and the effects of incivility on patient safety culture and outcomes: A systematic review and meta-analysis. Journal of Advanced Nursing, 81(9), 5603 to 5622.

Self-Affirmation Before Feedback

Self-affirmation theory, developed by Claude Steele and extended by David Sherman and Geoffrey Cohen, proposes that people become defensive against threatening information when their sense of self-integrity feels at risk.

Briefly reflecting on a core personal value beforehand, even for thirty seconds, restores that sense of self-integrity and measurably increases openness to information that would otherwise be resisted.

A 2015 neuroimaging study published in the Proceedings of the National Academy of Sciences found that participants who reflected on a core value before receiving a threatening health message showed greater activity in reward-related brain regions during the message, and that activity predicted actual behavior change afterward, not just self-reported agreement.

What this means for you: opening a hard conversation by connecting to a value the other person clearly holds, patient care, their team, doing the job right, is not softening the message. It is making sure they are in a state where they can actually hear it.

Sherman, D. K., & Cohen, G. L. (2006). The psychology of self-defense: Self-affirmation theory. Advances in Experimental Social Psychology, 38, 183 to 242.

Falk, E. B., O'Donnell, M. B., Cascio, C. N., et al. (2015). Self-affirmation alters the brain's response to health messages and subsequent behavior change. Proceedings of the National Academy of Sciences, 112(7), 1977 to 1982.

The Research Behind It (cont'd)

Distanced Self-Talk

Psychologist Ethan Kross and colleagues at the University of Michigan ran a series of seven studies with 585 participants, examining how the language people use in their own heads under stress affects performance and emotion.

Participants who referred to themselves by name, or used the pronoun you instead of I, while reflecting on a stressful task reported less anxiety and were rated as performing better than participants who used I and me.

The researchers call this distanced self-talk.

It works by creating enough psychological distance for a person to reason about their own situation the way they would reason about a friend's, rather than being immersed inside the emotion of it.

What this means for you: before a conversation where you know you need to own an impact and then stop talking, coach yourself by name. It is a small language shift with a measurable effect on how well you can actually follow through.

Kross, E., Bruehlman-Senecal, E., Park, J., et al. (2014). Self-talk as a regulatory mechanism: How you do it matters. Journal of Personality and Social Psychology, 106(2), 304 to 324.

Moser, J. S., Dougherty, A., Mattson, W. I., et al. (2017). Third-person self-talk facilitates emotion regulation without engaging cognitive control: Converging evidence from ERP and fMRI. Scientific Reports, 7, 4519.

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The Weight of Your Words

Date: September 22, 2026

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5. On a scale of 1 – 5, this presentation: (Met My Expectations) ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1 (Did Not)

I am interested in the following educational resources (please ☑ where applicable):

6. ☐ Enter a draw for **two (2) scholarships** to attend the 26th annual HealthCare Service Excellence Conference(November 9 – 11, 2026, in Reno, NV).

7. ☐ Enter a draw for a two-day onsite leadership development program Ignite the Patient Experience™ (including travel and per diem cost).

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