

Achieving Best Practice Through Effective Communication

STEP UP 2014

VCH / PHC Annual

Physiotherapy Education Retreat Day

April 8, 2014

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Learning Objectives:

- Understand the key role of communication and relationship in enacting best practices
- Understand how self awareness is the first step in effective communication.
- Learn the ABCD communication model and its application in enhancing teamwork

Centre for Practitioner Renewal (CPR)

Health care is about living/dying, curing/healing;
art/science, mind/heart, skills/knowledge,
technology/compassion

Health care is based on a business model of efficiency, the
work we do is about relationship—relationship with
self, other and Other

Relationship is often sacrificed to action and efficiency

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- How do we sustain health care providers in the work place?
- What is the effect of being in the presence of suffering?
- What would be reparative, healing or restore resilience for health care providers?

“Efficiency Through Relationship”

Our Experience at CPR

Sustaining Healthcare Providers in the workplace:

Burnout / Compassion Fatigue / Vicarious
Trauma / Moral Distress / Grief / Depression
/ Anxiety

Our Experience at CPR

Sustaining Healthcare Providers in the workplace:

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and

“Lateral Stress” among colleagues

Lateral Stress:

Accumulated stress discharged between colleagues

- Irritability, frustration, lack of patience
- Intolerance of difficult emotion
- Silencing response
- Scapegoating/bullying/incivility

Challenges to Well Being in Health Care

“High demand/low control is bad enough; high demand/low control/low support can be deadly.”

Sotile W.M. and Sotile, M.O. (2002) *The Resilient Physician*.

Core Messages

- Relationships can enhance functioning and sustain resilience if they are nurtured and maintained (self, other and Other)
- Relational intelligence begins with self
- The past is always present

Relationship-centered Health Care

- An approach that recognizes the importance and uniqueness of each health care participant's relationship with [*one's self and*] every other, and considers these relationships to be central in supporting:
 - high-quality care
 - high-quality work environment
 - superior organizational performance

Safran, DG, Miller, W. and Beckman, H
Organizational Dimensions of Relationship-centered Care
J Gen Intern Med 2006: 21:S9-15

Relationship-centered Health Care

Principles:

1. Relationships in healthcare ought to include the personhood of the participants
2. Affect and emotion are important components of relationships in health care
3. All health care relationships occur in the context of reciprocal influence
4. The formation and maintenance of genuine relationships in health care is morally valuable

Beach, MC, Inui, T, Relationship-Centered Care Research Network.
Relationship-centered Care: A Constructive Reframing
J Gen Intern Med 2006; 21:S3-8

Relationship-centered Health Care

Recognizing clinicians' relationships to:

- Self
- Patients + their families/friends
- Colleagues
- The healthcare system
- The community
- Transcendence

How does communication relate to best practice?

Mental Health outcomes

- Self Care
- Resilience
- Vocational Satisfaction
- Compassion Satisfaction

Team outcomes

- Collaboration
- Innovation
- Error Reduction
- Care Improvement

Literature on Teams

- “70 to 80% of medical errors are related to interactions within the healthcare team”
(Schaefer, Helmreich & Scheidegger, 1994)
- “Teamwork among Healthcare providers is considered both a component of a culture of safety and an essential ingredient for reducing medical errors”
(Singer & Vogus, 2013)

Literature on Teams

- “Incivility in healthcare can lead to unsafe working conditions, poor patient care, and increased medical costs.”

(Clark & Olender, 2011)

- “Research has shown that teamwork can significantly reduce workloads, increase job satisfaction and retention, improve patient satisfaction and reduce patient morbidity.”

(Canadian Health Services Research Foundation, 2006)

Literature on Teams

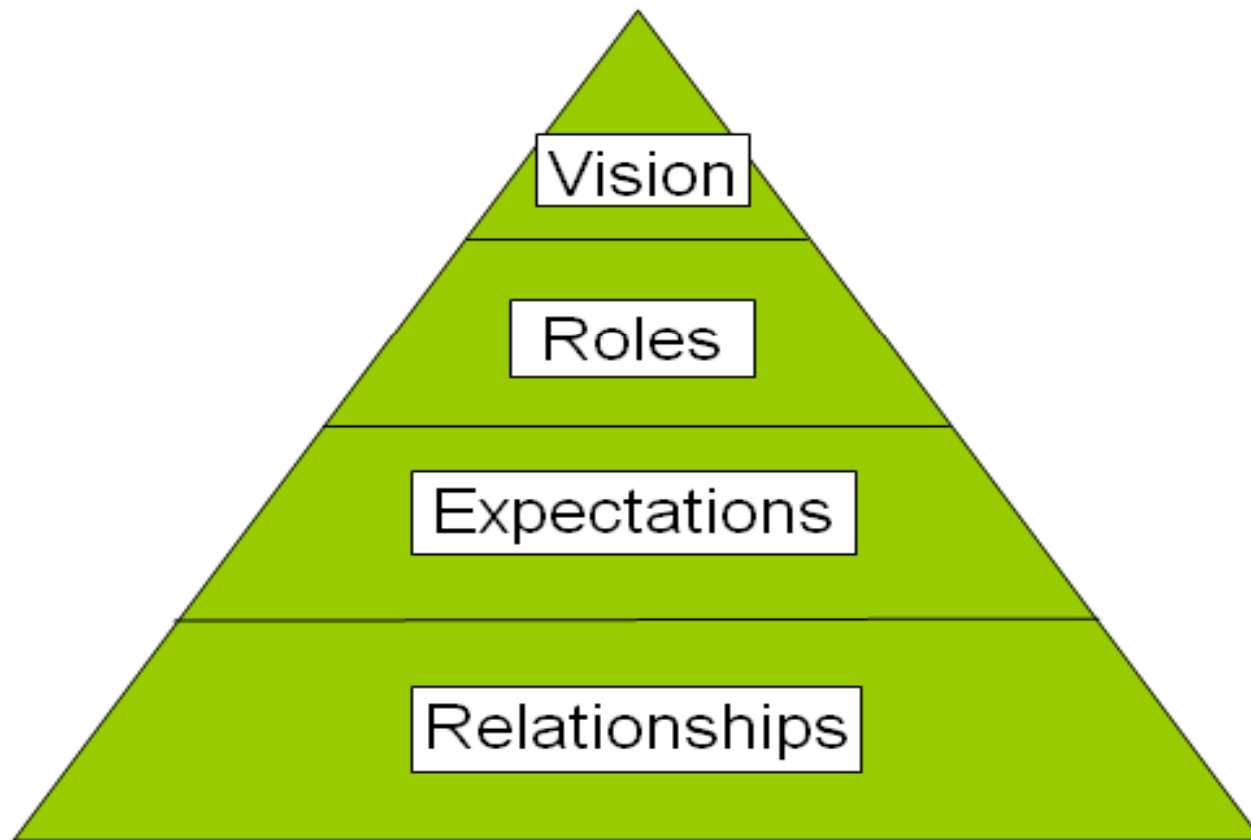
- Strained inter-professional relationships can have adverse effects on job satisfaction and healthcare outcomes.

(Barrett et al, 2007; Etchells, O'Neill, & Bernstien, 2003; Hall, 2005; Lingard et al., 2004)

- Collaboration and teamwork lead to improved patient care, reduced healthcare costs and improved job satisfaction.

(Baggs & Schmitt, 1997; Baker & Norton, 2004; Hendel et al, 2007)

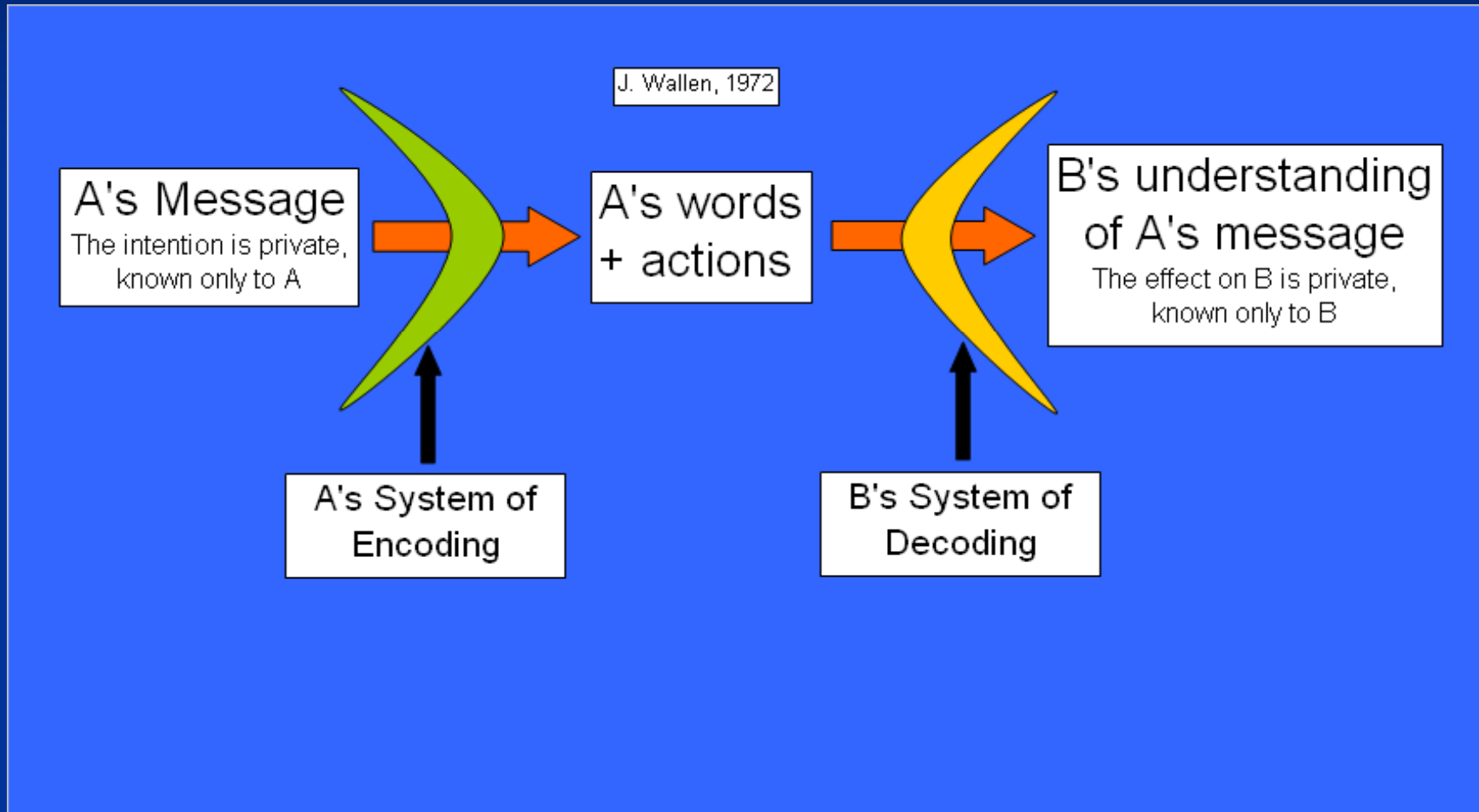
Hierarchy of Needs for Effective Teams



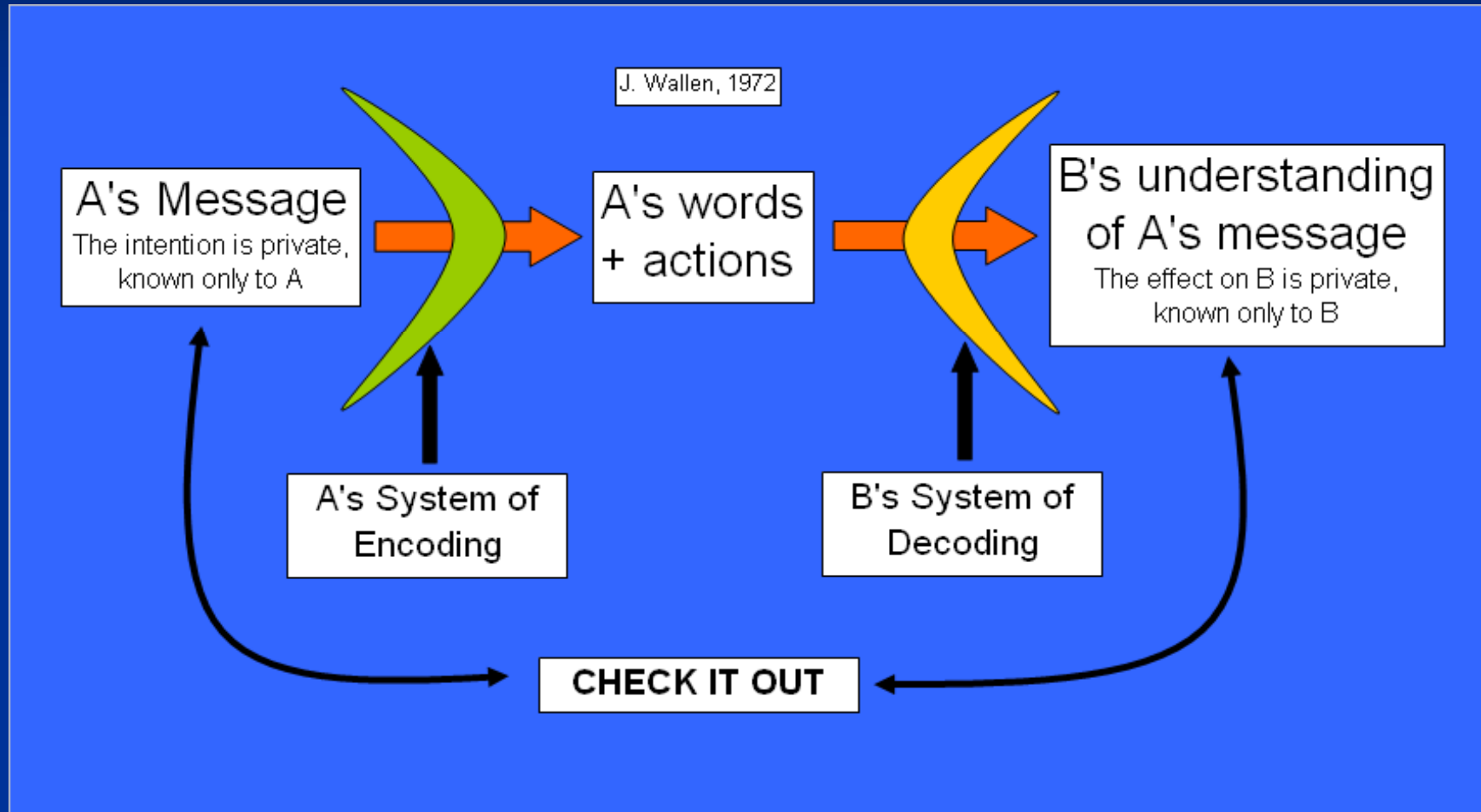
Complexity of 'Team' in Healthcare

- Healthcare teams are often unstable, changing, or 'loosely associated'
- One healthcare provider may play a role on many different teams
- Healthcare teams can be affected by multiple influences from many levels
 - Enable, Enact, Elaborate (Singer and Vogus, 2013)

The Interpersonal Gap



The Interpersonal Gap



Communication Template

*A*ttend

*B*ridge

*C*omment

*D*evelop Contract

Communication Template

Attend

- Self: What am I experiencing? What am I aware of within myself?
- Other: What is the other person experiencing?
- Context: What is happening around us right now?

Bridge

- Ask if it is a good time to talk
- Introduce Topic

Communication Template

Comment

- Deliver message
- Check for understanding

Develop Contract

- Acknowledge impact on other person
- Establish time-line/follow-up

Communication (Attend)

- Self
 - Emotional state?
 - Goal for communicating?
 - Role communicating from?
- Other Person
 - Emotional state?
 - Readiness to listen
 - Role communicating to?
- Context
 - Action or Presence orientation?

Action versus Presence “Mode”

Whitehead, 2012

■ Action Mode

- Acute situations – Life or Death
- Focus on pre-established protocols or pathways
- Reduced personal/emotional experience

■ Presence Mode

- Calmer situations – No immediate need for intervention
- Focus on mindful awareness of self and other
- Greater receptivity to new information

Action versus Presence “Mode”

Whitehead, 2012

- Presence Mode is required for the effective communication of personal information. It allows us to feel ‘seen, heard, and understood’ by others as well as vice versa. It creates the possibility for interpersonal civility and respect.
- However, in healthcare it is not always possible to operate in presence mode, and miscommunications and hurt feelings occur frequently when action mode and presence mode collide.

Communication (Attend)

- Self
 - Emotional state (*Action or Presence?*)
- Other Person
 - Emotional state (*Action or Presence?*)
- Context
 - *Action or Presence?*
 - Does the work context encourage ongoing options for reconnection with Presence after acute periods of Action Mode?

Self Awareness

What is your relationship with:

- Expression of emotion, especially anger
- Conflict (aversion, avoidance, attraction)
- Being wrong; difference of opinion
- Need to be 'right'
- Authority
- Friendship vs. Collegiality (Dual relationships)
- Bullying/Uncivil behaviour?

Communication Navigation Skills

- Self-Awareness
- Flexibility in giving and receiving communication
- Strategic awareness of your context
 - (i.e., Enable, Enact, Elaborate – Singer & Vogus, 2013)
- ABCD – Work the relationship

The vital need for supportive relationships

“Adults remain social animals ... in some important ways, people cannot be stable on their own – not should or shouldn’t be, but can’t be. This prospect is disconcerting to many, especially in a society that prizes individuality as ours does. Total self-sufficiency turns out to be a daydream whose bubble is burst by the sharp edge of the limbic brain. Stability means finding people who regulate you well and staying near them.”

Lewis, Amini & Lannon. A General Theory of Love. (2000).

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