

Clinical Scholar Didactic Course March 2011 Tentative Schedule Day 3, Wednesday, March 16, 2011

Time	Objective	Presenter
8:00 - 8:30	Thoughts / reflections	Karren Kowalski
8:30 - 9:20	Demonstrate / model effective modes	Dianne McCallister, MD,
	of interdisciplinary communication	Chris Layne
9:20 – 9:40	Break	
9:40 – 11:20	Discuss the types of communication relevant to the role of the clinical scholar	Karren Kowalski
11:20 – 12:20	Describe the components in creating a	Karren Kowalski
	culture of inquiry	Marianne Horner
12:20 - 1:05	Lunch	
1:05-2:15	Culture of inquiry, continued	Karren Kowalski
		Marianne Horner
2:15 - 2:30	Logbook time & sharing Pages 28 – 31	Karren Kowalski
2:30 – 3:20	Identify common types of conflict relevant to the clinical scholar	Sara Jarrett
3:20 - 3:30	Break	
3:30 – 4:30	Discuss strategies for managing conflict	Sara Jarrett
4:30 – 5:00	Logbook time and sharing Pages 32 – 35	Karren Kowalski

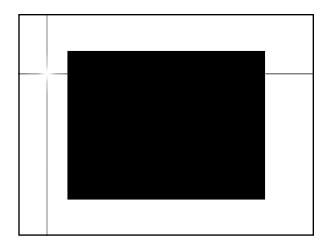
Pro	esenter: Chris Layne	Topic:				Date: M	Date: March 17, 2011			
			Scale							
Re	garding the Presenter:		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	No Opinion / N/A		
1.	The speaker was knowledgeable presented	regarding the content	0	0	0	0	0	0		
2.	The presentation was stimulating	and interesting	0	0	0	0	0	0		
3.	The content presented will be use a Clinical Scholar	eful to me in my role as	0	0	0	0	0	0		
4.	Appropriate reference materials v	vere provided	0	0	0	0	0	0		
5.	Handouts or other materials are c	lear	0	0	0	0	0	0		
6.	The presenter was responsive to audience	questions from the	0	0	0	0	0	0		
7.	7. The content was at an appropriate level, not too elementary, not too complex		0	0	0	0	0	0		
8.	The content was covered satisfac	torily and completely	0	0	0	0	0	0		
9.	The speaker's selected teaching s discussion, small groups, etc.) ma		0	0	0	0	0	0		
Con	nments:									

Clarity and Teamwork The Key to Patient Safety

Dianne McCallister, MD, MBA Chief Medical Officer/VP Patient Quality and Safety Systems Porter Adventist Hospital

Communication Overload and Assumptions

Does The Following Seem Familiar?



Communication & Teamwork

- 90-98% of errors in the hospital have communication as a major causal factor
- The Airline Industry has reduced crew caused errors to 0 by use of communication/teamwork training
- JCAHO now considers communication failures a sentinel event – rude style AND/OR failing to speak up

How much can one mind hold?

- The law of 7's
- The law of pattern bias

Human Factors – How Our Brains Wiring Affects Errors

- In Physician's Differential Diagnosis can create a knowledge-based error
- This type of logic has
 - 30% chance of error
 - 30% chance of not detecting an error was made

Medical Training Addresses These Errors

- Tactics Used to Prevent Errors in Differential Diagnosis/Complex Patient Care
 - Structured problem solving same information in same order every time – (might look rigid to others)
 - Identify all possibilities and then identify the right answer based on facts
 - Interruption = Restart From the Top

Techniques to Improve Communication in a Team

- Never Guess
 - Repeat Backs
 - Clarifying Questions
 - Phonetic and Numerical Clarification
- Clarity
 - SBAR
- Participation
 - Speak-Up
 - Creating a Safe Environment
 - Ownership

Nursing – Areas Where SBAR is Helpful

- Rapid Response
- Codes "Blue", Out of Control Patient
- Hand-Offs
 - Shift to Shift
 - Unit to Unit
 - Nursing Unit to Testing Department

Presenter: Dianne McCallister Topic: Clarity & Teamwork						Date: M	Iarch 17, 2	2011
			Scale					
Re	egarding the Presenter:		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	No Opinion / N/A
1.	The speaker was knowledgeable presented	regarding the content	0	0	0	0	0	0
2.	The presentation was stimulating	and interesting	0	0	0	0	0	0
3.	The content presented will be use a Clinical Scholar	eful to me in my role as	0	0	0	0	0	0
4.	Appropriate reference materials v	vere provided	0	0	0	0	0	0
5.	Handouts or other materials are c	lear	0	0	0	0	0	0
6.	The presenter was responsive to audience	questions from the	0	0	0	0	0	0
7.	The content was at an appropriate elementary, not too complex	e level, not too	0	0	0	0	0	0
8.	The content was covered satisfac	torily and completely	0	0	0	0	0	0
9.	The speaker's selected teaching s discussion, small groups, etc.) ma		0	0	0	0	0	0
Con	nments:							

A CULTURE OF INQUIRY

Karren Kowalski, PhD, RN, FAAN Marianne Horner, CNM, MS

COLORADO CENTER FOR NURSING EXCELLENCE

Day 3 Kowals

Definitions

• Culture:

• The set of shared attitudes, values, goals and practices that characterize a unit or corporation

• Inquiry:

- Examination into facts or principles
- A request for information
- Systematic investigation

Questions are the



Of the Mind

QUESTIONS ...

Lead the student
Through the
Process of Discovery



What is the toughest question any student could ever ask you?????

CATEGORIES:

- Questions asked by the Instructor
- Questions asked by the Student

REASONS TO ASK QUESTIONS:

- Stimulate the Brain
- Create an Exchange
- Discover Knowledge and Issues
- Allows Instructor to Listen
- Provides opportunities to Acknowledge
- Lead the Student through a Process of Discovery

Guidelines for Asking Questions

- •I. Know Your Purpose
 - •What is to be gained?
 - Put yourself in the student's shoes
 - Phrase the question as a Win-Win

Guidelines: II. The Delivery

- Speak clearly, calmly & directly
- Be Positive
- No underlying negativity or disapproval
- Don't bury the question
- Display interest in the answer

Guidelines: III. The Response

- Listen Actively
- Use specific Active Listening skills
 - Can you paraphrase the response?
 - Are follow up questions clear, easy?

Guidelines: IV. The Evaluation

- As you listen, evaluate the response
- Clarifying questions may be needed
- Be prepared to question until the issue reaches completion

Guidelines: The Payoff

- Act on the information attained
- If performance improves, acknowledge the student

When to use Questions

- 1. To persuade
- 2. Gain information
- 3. Plant the instructors ideas or thoughts
- 4. Clarify thinking
- 5. To motivate students
- 6. To solve problems

When to use questions cont.

- 7. Take the sting out of criticism
- 8. Open lines of communication
- 9. Reduce mistakes
- 10. Overcome objections
- 11. Obtain Cooperation
- 12. Clarify instructions

When to use questions cont.

- 13. Reduce anxiety
- 14. Defuse volatile situations
- 15. Gain control in difficult situations

SMART QUESTIONS

- 1. What has to be done?
- 2. Can you explain the process?
- 3. How do you feel about it?
- 4. Can you explain that further?
- 5. What can I do to help you?
- 6. From what perspective are you asking?

SMART QUESTIONS cont

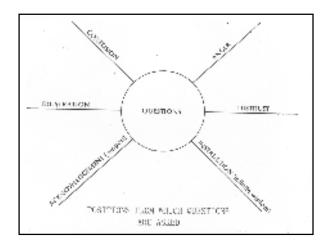
- 7. What are some of the reasons this didn't work as well as you had hoped?
- 8. What can be done to make this work better?
- 9. What key results are we looking for?
- 10. How do you plan to proceed?

WHY QUESTIONS

- A DANGEROUS APPROACH
 - Creates defensiveness
 - Cuts off communication
 - Rephrase to
 - What
 - How
 - Could

QUESTIONS from Students

- 1. When the instructor doesn't know the answer.
 - To the question asked by the student
 - The question asked by the instructor
- 2. When students expect to be spoon fed.
- 3. When students ask Tough/Emotional Questions



Response to Tough Questions

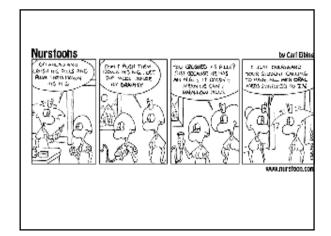


- 1. Breathe
- 2. Acknowledge the questioner
- 3. Appreciate the learning
- 4. Be open NO Judgment
- 5. Be willing to deal with difficult issues

When you lose it!!!



- 1. Recognize you are in Reaction
- 2. Feel it! Get in Touch with it!!
- 3. See What the Truth Is
- 4. Have Compassion for SELF
- 5. Experience the Safety of being Vulnerable
- 6. Choose Love for Self



NURSING FACULTY DEVELOPMENT INITIATIVE CLINICAL SCHOLAR COURSE CONFLICT QUESTIONAIRE

Directions: Consider situations in which you find your wishes differing from those of another person. For each of the following statements, think how likely you are to respond in that way to such a situation. Check the rating that best corresponds to your response. Please try to honestly assess your personal views.

	Very Unlikely	Unlikely	Likely	Very Likely
I am usually firm in pursuing my goals.			• · · · · · · · · · · · · · · · · · · ·	***************
2. I try to win my position.				
3. I give up some points in exchange for others.				
4. I feel that differences are not worth worrying about.	 '			
5. I try to find a position that is between hers and mine.				
6. In approaching a negotiation, I try to consider the other person's wishes.	·			
7. I try to show the logic and benefits of my position.	·			
8. I always lean toward a direct discussion of the problem.				
 I try to find a fair combination of gains and losses for both of us. 			·	
10. I attempt to work through our differences immediately.	440-440-440-4		<u></u>	
11. I try to avoid creating				

		Very Unlikely	Unlikely	Likely	Very Likely
12.	I might try to soothe other's feelings and preserve our relationship.	·	· · · · · · · · · · · · · · · · · · ·	· .	•
13.	I attempt to get all concerns and issues immediately out.				
14.	I sometimes avoid taking positions that create controversy.				
15.	I try not to hurt the other's feelings.	·			

Clinical Scholar Course Conflict Resolution

Completion of Conflict Assessment Tool

By completing this assessment tool you will have a self-awareness of your own conflict management style. Take about 5 minutes to complete (only 15 brief statements) and score your responses.

Overview of the concepts and processes related to conflict

A. What is conflict?

Conflict is defined as a struggle between opposing or incompatible behaviors, needs, or feelings within one person or between two or more people. The potential for conflict exists in every organization. Once thought of as dysfunctional, it is now regarded as normal and growth enhancing.

B. What are the ingredients of conflict?

Needs

Perceptions

Power

Values

Feelings and emotions

C. What are the steps (process) for managing conflict?

Analyze the conflict

Determine the management strategy

Pre-negotiation

Negotiation

Post-negotiation

D. Conflict Resolution Strategies and Outcomes: What are ways to resolve conflict?

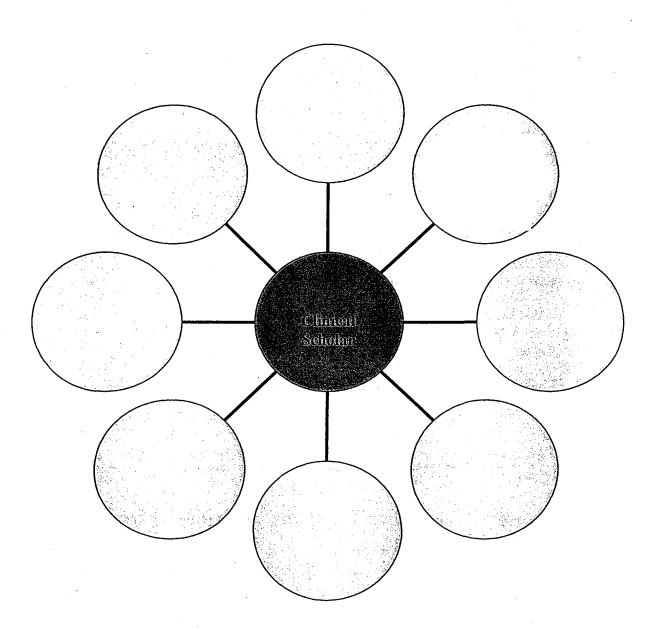
- 1. **Competition**: (win-lose); based on power, aggressive and uncooperative; people pursue their own needs and goals at the expense of others.
- 2. Avoidance: (lose-lose); withdraws from situation, unassertive & uncooperative; delays responding to conflict.
- 3. Accommodation: (lose-win); suppresses and smoothes over differences, dreads conflict, maintains harmony.
- 4. Compromise: (no lose-no win); middle of the road position, give and take by both parties, seldom confronts conflict.
- 5. Collaboration: (win-win) assertive and cooperative, objectively evaluates differing views, often leads to creativity and new ideas.

What are the potential			•	1	11 1 1 1 1 0
What are the notential	COURTORS	At Contlict	111 3701111 1	ഹിക മറ വ	olinical coholary
What are the notential	SOULCES	OI COMMING	. III vvui i	UIU as a	cimicai scholai i

Discuss examples of positive and negative effects of conflict in the workplace environment.

Conflict Resolution Scenarios and Discussion Questions

Clinical Scholar Course Sources of Conflict in Your Clinical Scholar Role



NURSING FACULTY DEVELOPMENT INITIATIVE CLINICAL SCHOLAR COURSE

CONFLICT MANAGEMENT

What causes conflict?

What are common sources of conflict for clinical scholars?

Conflict Resolution-what are ways to resolve conflict?

- 1. Competition (win-lose)-based on power, aggressive and uncooperative, short-term
- 2. Avoidance (lose-lose)-withdraws from situation, tries to remain neutral, delays responding to conflict
- 3. Accommodation (lose-win) –suppresses and smoothes over differences, dreads conflict, maintains harmony
- 4. Compromise (no lose-no win)-middle of the road position, give and take by both parties, seldom confronts conflict
- 5. Collaboration (win-win)-assertive and cooperative, objectively evaluates differing views, often leads to creativity and new ideas

Nursing Faculty Development Initiative Clinical Scholar Course Scoring for Conflict Questionnaire

Scoring: Very Unlikely = 1, Unlikely = 2, Likely = 3, Very Likely = 4

	Item:	Item:	Item:	
COMPETING: COLLABORATING:	1 8	2 10	7	TOTAL
COMPROMISING:	3	5	9	TOTAL
AVOIDING:	4	11	14	TOTAL
ACCOMMODATING:	6	12	15	TOTAL

Presenter: Sara Jarrett Topic: Conflict				Date: March 17, 2011				2011
			Scale					
Regarding the Presenter:		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	No Opinion / N/A	
1.	The speaker was knowledgeable regarding presented	ng the content	0	0	0	0	0	0
2.	The presentation was stimulating and int	eresting	0	0	0	0	0	0
3.	The content presented will be useful to na Clinical Scholar	ne in my role as	0	0	0	0	0	0
4.	Appropriate reference materials were pro	ovided	0	0	0	0	0	0
5.	Handouts or other materials are clear		0	0	0	0	0	0
6.	The presenter was responsive to question audience	ns from the	0	0	0	0	0	0
7.	The content was at an appropriate level, elementary, not too complex	not too	0	0	0	0	0	0
8.	The content was covered satisfactorily as	nd completely	0	\circ	0	0	0	0
9.	The speaker's selected teaching strategy discussion, small groups, etc.) maximize		0	0	0	0	0	0
Con	nments:							

Presenter: Marianne Horner Topic: All Topi		Topic: All Topics				Date: March 17, 2011		
Regarding the Presenter:			Scale					
			Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	No Opinion / N/A
1.	The speaker was knowledgeable regarding the content presented		0	0	0	0	0	0
2.	The presentation was stimulating and interesting		0	0	0	0	0	0
3.	The content presented will be useful to me in my role as a Clinical Scholar		0	0	0	0	0	0
4.	. Appropriate reference materials were provided		0	0	0	0	0	0
5.	6. Handouts or other materials are clear		0	0	0	0	0	0
6.	The presenter was responsive to questions from the audience		0	0	0	0	0	0
7.	7. The content was at an appropriate level, not too elementary, not too complex		0	0	0	0	0	0
8.	The content was covered satisfactorily and completely		0	0	0	0	0	\circ
9.	. The speaker's selected teaching strategy (lecture, discussion, small groups, etc.) maximized my learning		0	0	0	0	0	0
Con	nments:							
_								
_								
_								

Presenter: Karren Kowalski Topic: All Topics		Topic: All Topics				Date: March 17, 2011		
			Scale					
Regarding the Presenter:		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	No Opinion / N/A	
1.	The speaker was knowledgeable regarding the content presented		0	0	0	0	0	0
2.	The presentation was stimulating and interesting		0	0	0	0	0	0
3.	. The content presented will be useful to me in my role as a Clinical Scholar		0	0	0	0	0	0
4.	. Appropriate reference materials were provided		0	0	0	0	0	0
5.	5. Handouts or other materials are clear		0	0	0	0	0	0
6.	. The presenter was responsive to questions from the audience		0	0	0	0	0	0
7.	7. The content was at an appropriate level, not too elementary, not too complex		0	0	0	0	0	0
8.	The content was covered satisfactorily and completely		0	0	0	0	0	0
9.	O. The speaker's selected teaching strategy (lecture, discussion, small groups, etc.) maximized my learning		0	0	0	0	0	0
Con	nments:							
_								
_								
_								
_								