Managing Conflict: A Crucial Skill for Creating a Culture of Trust and Safety

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Thank You

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The Tulane SOM Professionalism Program
All of You

Disclosures

I have nothing to disclose

Team Sport

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Touchstones: Psychological safety

- Confidentiality
- Speak your truth and let others speak theirs
- Invitation, not demand

Outward Bound of Difficult Conversations

Dr. Dismissive

You are called by an anesthesiologist with complaints about an interventional cardiologist:

They can be demeaning and hostile to various team members

- *Blames them for not moving the cases along fast enough*
- *Dismissive of clinical concerns*
- *Refuses to discuss operative plans*
- *Demeaning: tone, content (you all are just on the clock)*

How many of you want to give feedback to Dr. Dismissive?

How might Dr D respond to your giving them feedback?

Common responses

Inadequate data
Exactly who said this?

Personal sabotage
Dr. X is trying to discredit me

Other people like me

I am special and talented
I do work that no one else is qualified to do

This is a systems problem
If this whole system functioned better…

Common responses

Unfair process
I'm being singled out because …

Patient advocacy
Others aren't responsible for patients the way I am

Prove harm
Give me one example …

Personal style
I don't mean anything by it

I am no worse than others
I am certainly not the only one

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Critical Skill for Leaders:

Managing conflict and giving feedback to promote growth and learning for yourself and those you lead

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I'm going to focus on conflict management and giving *critical* feedback

Not the same as reflections after scenarios/procedures/overall performance, or evaluations

What is feedback?

"When a learner is offered insight into what he or she actually did as well as the consequences of his or her actions."

Ende J.

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Constructive feedback

- Specific

- Considerate in tone

- Contains no threats or statements attributing poor performance to internal causes

<div align="right">Baron RA.</div>

Give Feedback to Dr. Dismissive

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Give Dr. Dismissive Feedback

- Breakout in dyads
- One person plays the role of Dr. D
- The other plays role of Dr. D's Chief
- 5 minutes of giving Dr. D Feedback
- Then switch roles x 5 minutes
- After total 10 minutes we'll bring you back to main room for group debrief

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Think of a time when something went wrong interpersonally and you

Knew you should give feedback but didn't

or

You gave feedback but it didn't go well

Why saying *Just Do It* doesn't work

What is your biggest personal barrier to giving feedback?

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Why we're conflict avoidant

- Perception of time commitment

- Fear of retaliation

- May demoralize the other person

- Skepticism regarding change

- We want to be liked

- Not enough "data"

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- Underestimation of importance

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Not giving feedback is NOT neutral ...

"Without feedback, mistakes go uncorrected, good performance is not reinforced, and clinical competence is achieved empirically or not at all."

Ende J. JAMA 1983; 250:771-781.

Not giving feedback is NOT neutral …

"Without feedback, mistakes go uncorrected, good performance is not reinforced, and clinical competence is achieved empirically or not at all."

Ende J. JAMA 1983; 250:771-781.

… but destructive feedback is even worse than none at all.

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- Culturally unacceptable

Giving and receiving feedback – positive and critical – should become a habit

Why we're conflict avoidant

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- Fear of retaliation
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- We want to be liked

- Not enough "data"
- Underestimation of importance
- Culturally unacceptable
- Safe/trusting environment?

Creating a climate of *trust*

"The deepest principle in human nature is the craving to be appreciated."

William James

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Why we're conflict avoidant

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- Not enough "data"
- Underestimation of importance
- Culturally unacceptable
- Safe/trusting environment?
- Emotions

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Emotional Triggers

Righteous anger
Negative underlying assumptions

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Photo by David Knox on Unsplash

Righteous anger

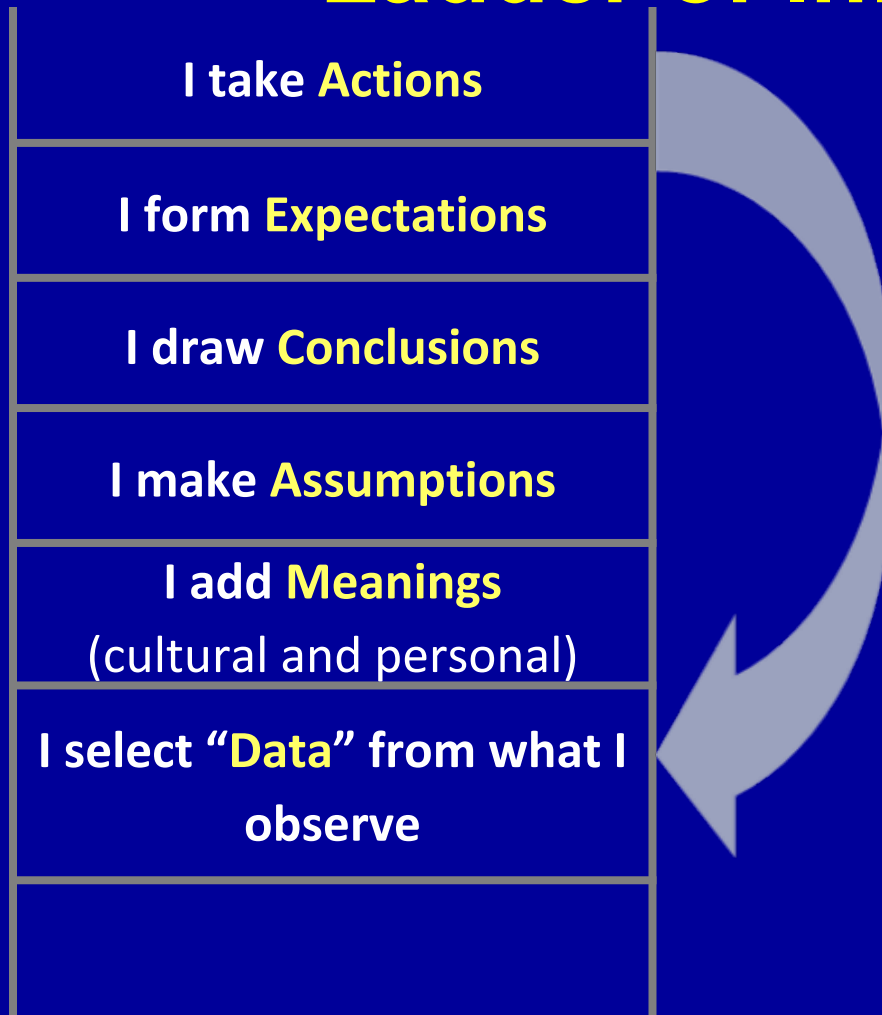# Emotional Triggers

Righteous anger
Negative underlying assumptions

Negative underlying assumptions: Ladder of Inference

I take **Actions**

I form **Expectations**

I draw **Conclusions**

I make **Assumptions**

I add **Meanings**
(cultural and personal)

I select "**Data**" from what I observe

The reflexive loop:

Our expectations and actions affect the data we perceive and select the next time...

Adapted from Ross R. The Ladder of Inference. In Senge P, Kleiner A, Roberts C Ross R, Smith B. *The Fifth Discipline Fieldbook*. New York: Doubleday, 1994, p243.

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Anatomy of Feedback:

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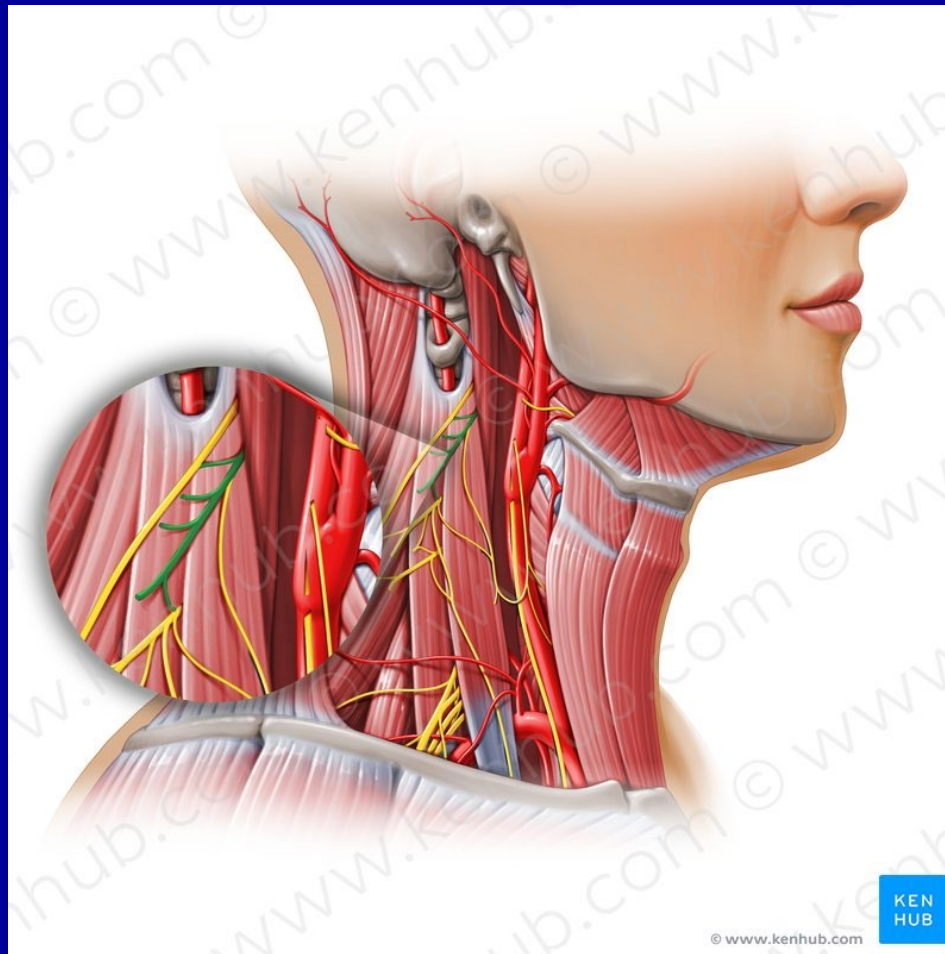
What are various traditional approaches?

Harsh judgment
"Non-judgmental"
Sandwich

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Clarity

Sandwiches are not healthy in some settings

You can be *empathic*
and *clear* at the same time

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Frame-Based Feedback and Conflict Management

Trying to learn the other person's perspective through genuine curiosity and exploration

Frame-based feedback algorithm
(Me, You, Us)

- Me – My frame as feedback giver

- You – Your frame as feedback receiver

- Us - Gaps and overlap between our frames

    Next steps

Rudolph et al, 2012

Frame-based feedback: Me/You/Us

Me (my frame)

- Setting context
- Common ground
- *Specific behavior(s)*
- Concern or appreciation

Photo by SOON SANTOS on Unsplash

- Rudolph, et al.

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Photo by Nathan Dumlao on Unsplash

Clarity is a gift

Be *specific*

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I need to manage my own emotions

If I don't, then I will
react instead of *respond*

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Recognizing and naming

Frame-based feedback

Me (My Frame)

- Setting context
- Common ground
- Specific behavior(s)
- Concern or appreciation

You (Their Frame)

here's why you need to do this...

- Rudolph, et al.

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You know *what* happened, but not *why* it happened

Therefore, you may not know how to prevent it from happening in the future

Hold the Basic Assumption

I assume that you are a dedicated person who shows up at work intending to do an excellent job.

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Intent vs. Impact

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Get curious

"When the going gets rough, turn to wonder."
Parker Palmer

Photo by Vincent Guth on Unsplash

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Frame-based feedback

Me (My Frame)

– Setting context

– Common ground

– Specific behavior(s)

– Concern or appreciation

You (Their Frame)

ask them...

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- Rudolph, et al.

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Frame-based feedback

Me (My Frame)

   –   Setting context

   –   Common ground

   –   Specific behavior(s)

   –   Concern or appreciation

You (Their Frame)

   –   Short open-ended question (for starters)

Us (Discuss based on their Frame)

   –   Gaps and overlaps between the frames

   –   Next steps

- Rudolph, et al.

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Photo by Toa Heftiba on Unsplash

Common ground

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Context Dependent

Hierarchy

Power

Degree of seriousness

Pattern vs single occurrence

Relational trust

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Frame-based feedback

Us (Discuss based on their Frame)

      depends on context and their FRAME

I never saw it that way; thanks for explaining

I appreciate your apology

Thought you'd want to know

Dr Henry Hypercritical

HH is a physician colleague who recurrently berates the clinic support staff. They feel constantly criticized and devalued.
Henry's colleague has witnessed this behavior

Person A: play role of Henry's colleague and give feedback to Henry

Person B: play role of Henry

5-minute exercise.

Then switch roles x another 5 minutes

Group Debrief

What if you really, really don't like their frame?

Anticipating reactions

Denial
Deflection
Externalizing
Rationalizing
Minimizing

Don't underestimate your own reactions

A word about

the rogue elephants

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Mr. Leering

- Susan is a female PA rounding with her male attending, Dr. A
- In Mr. Leering's room Susan says: "We need you to get up and walking so you don't get pneumonia."
- Mr. Leering responds: "I'd be happy to walk around anywhere with you, beautiful, as long as you're holding my hand."

Fisher, H.N., Chatterjee, P., Shapiro, J. et al. "Let's Talk About What Just Happened": a Single-Site Survey Study of a Microaggression Response Workshop for Internal Medicine Residents. J Gen Intern Med 2021 Nov; 36(11): 3592–3594

Simulation

Common responses	Appropriate feedback
Inadequate data *Exactly who said this?*	Not a court of law
Personal sabotage *Dr. X is trying to discredit me*	Not an isolated incident
Other people like me	You shouldn't have a disruptive working relationship with anyone
I am special and talented *I do work that no one else is qualified to do*	Not a performance evaluation
This is a systems problem *If this whole system functioned better…*	Yes, systems issues are important, *and* …you are still responsible for your behavior

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| Common responses	Appropriate feedback
Unfair process *I'm being singled out because …*	We hold everyone to the same standards
Patient advocacy *Others aren't responsible for patients the way I am*	Disruptive behavior is a safety risk
Prove harm *Give me one example …*	We don't need to
Personal style *I don't mean anything by it*	Impact not intent
I am no worse than others *I am certainly not the only one*	We are focusing on your issues right now

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When *not* to use:

Accountability escalation

Misconduct or illegal behavior

Leaders Need to Model
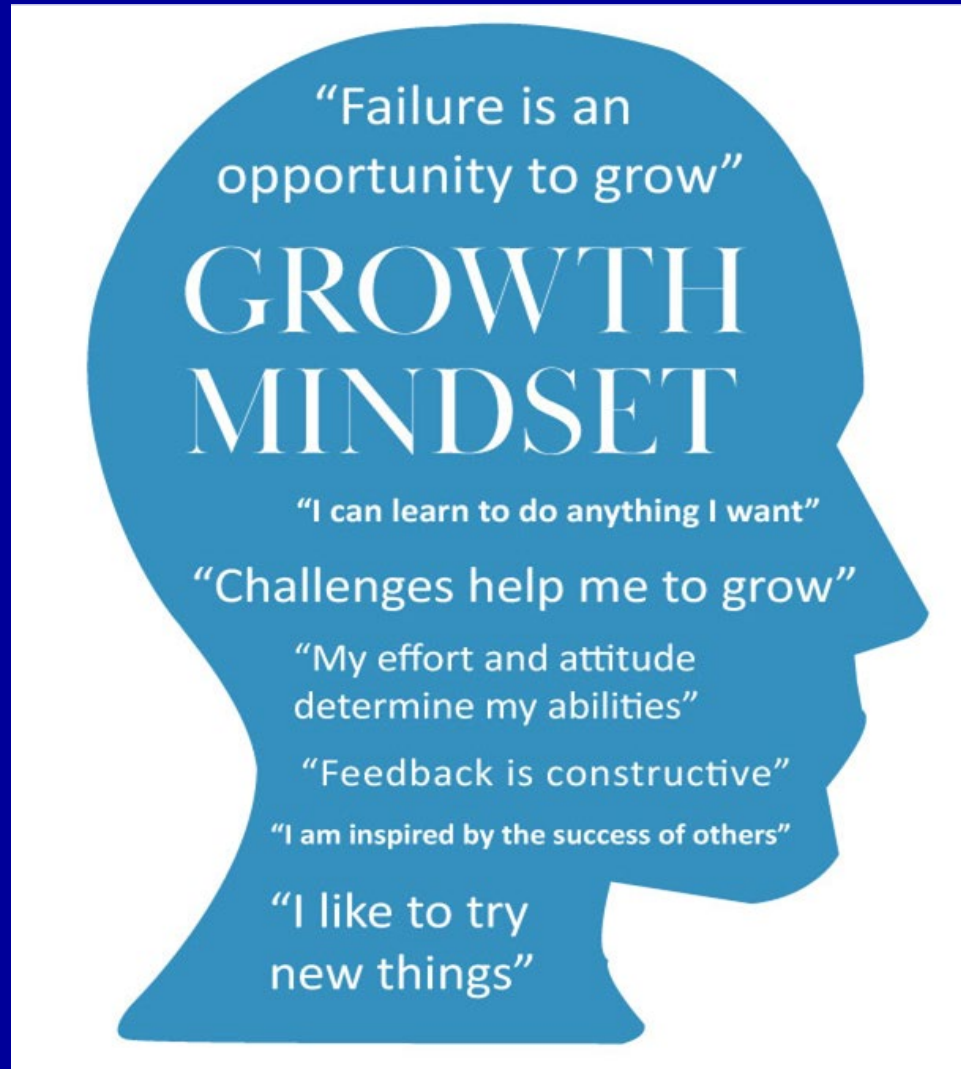
Dr. Carole S. Dweck

Leaders Need to Model

Expressing fallibility

Soliciting and giving feedback

Encourage speaking up

Helping people do the right thing

Holding ourselves and others accountable

Listening and acting on concerns

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NEW YORK TIMES BESTSELLER

Douglas Stone & Sheila Heen

of the Harvard Negotiation Project and coauthors of
DIFFICULT CONVERSATIONS

Thanks for the Feedback

THE SCIENCE AND ART OF
RECEIVING FEEDBACK WELL *

even when it is off base, unfair, poorly delivered,
and, frankly, you're not in the mood

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Not buying it?

- What about frame-based feedback/conflict management do you not buy?

- Remaining questions, affirmations or concerns?

The "must remember" skills

- Get a handle on your own emotions
- Establish trust (hold Basic Assumption)
- Clarity: specific behaviors and concerns

- Frame-based: maintain curiosity
- Separate behaviors and character
- Set expectations
- Make feedback expected/routine

This is all about building and sustaining relationships

… and in our case safer patient care and clinician wellbeing

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