3.3 Observation and reflection tasks Phase 3: Pack 5 (tasks 5-8)

3.3.1 Introduction to pack 5

We trust that you have now almost forgotten (??) that you are taking part in the health communication learning process, and that practicing communication skills with awareness has become – routine? Or – are you still deciding consciously when and how to practice your new skills? Maybe a bit of both?

Several examples of your successful practice of the skills have filtered back to the training team, and this is of course very inspiring for us. Your continued learning, and also communicating about it to us, is keeping up the motivation in the hard-working training team!

We trust that you have communicated well with your HODs after the workshop, and that you have managed to share some of your new skills with colleagues. We are looking forward to the reports about your learning, and – about your challenges. Telling us about challenges means that we can bring them up in the follow-up course in (date), and really use the opportunities that this process learning offers.

Even though you are the (x) group to be trained, the course is still being shaped, and your comments and contributions are very useful. So – please keep telling us your ideas, to help us continue to improve the course!

In this next set of observations, we ask you to focus your attention on *how you communicate with your supervisors,* on what happens when you create a safe situation for patients, and on what happens when you deal with patients' emotions, as well as your own. We trust this should give you some interesting moments at work!

You – a trainer? In a separate letter, we will invite you to apply to become a trainer in health communication. We are going to expand our trainers' group, and look forward to reading about why you want to become a trainer, how you plan to use the skills you get, and – why you think we should select you for this position. These are the questions we will ask you to answer, so – start thinking!

3.3.2 Task throughout: Natural ways to use your skills, and barriers

The task to stay aware, and keep reflecting on how you use your skills, will continue. Do you take your awareness, your skills and your motivation to do things differently, with you into your routines? How? Where do you find opportunities to use your new skills, and which skills does it feel "natural" to practice? Are there skills you hesitate to use, for any reason(s)? Does it feel awkward to practice some of the skills? If so- how, and why? Do you share course info with colleagues? Do you give feedback? What do you learn?

Take a moment to reflect on these questions every day throughout the practice period, to monitor your own changes, and make a few notes. If there is a situation you handle differently – please note down examples of what happens, what you do, what the effect is, and any reflections you have. Note situations you still have problems with, and let us know – for the follow-up course. *This task can be done throughout the practice period.*

3.3.3 Tasks 5a and 5b: Patterns of communicating with your supervisor

Hierarchy, status and power influence how we communicate. Both national and professional cultures have their own power structures that set out norms (mostly unwritten) for how we should – and should not behave, and how we should interact with persons at different levels in the hierarchy. For most of us, the influence happens on the subconscious level, and our reactions are mostly automatic. A lot of emotions have to be suppressed to be able to keep the "status quo", and as we know – this can have a high cost.

But does it have to be that way? Or is there a way to increase our awareness about how important relationships at work affect us, and take steps to improve? Could it be the case that if one person in a relationship takes steps to improve, this might affect the other one positively, too, if there is a way to focus on a common goal? A way to focus on learning, rather than judgment?

These two observation tasks (2 weeks) are about observing and mapping your pattern with a significant person (or persons) in your working life: Your immediate supervisor(s).

The relationship with a **supervisor** is usually very important for how comfortable a person is at work, for how he or she relates to colleagues, and for how well the person can carry out his or her duties.

We invite you to observe the patterns of your relationship with your supervisor, and the effect of it on different aspects of your life. As the patterns become clear to you, we invite you to reflect on them, and start deciding what you would like to **change** (but NB – don't do this too early – give yourself time to really understand what is happening, first!!)

Remember – becoming irritated and having conflicts is a natural part of life. How you feel towards the people at work, including those with power over you, will often automatically determine how you act when you sense you are threatened (i.e. not treated fairly, not understood, not given support, not appreciated or respected, being blamed, etc). Dealing well with conflicts is a very useful skill for relationships with patients, colleagues, supervisors, friends and personal partners (husband or wife, and other family members).

Make a map: WHAT makes you react? And HOW?

The first task is to define what kinds of situations you are faced with in relation to your supervisor, and how you react in these situations. What is it that makes you react positively, and makes you able to deal well with your challenges? What makes you react negatively? Is it better, or worse on certain days? Is it better when you have slept well, or feel well for other reasons? Is it worse when you have other troubles at home? Does stress influence how you react?

The key is to become conscious of what makes you react, so you can recognise the danger signals and take action to stop the automatic (emotional) reactions.

Make a map to become more familiar with your patters of reactions. Make your own system for taking notes if you want to add other aspects. The important thing is that you observe what makes you react positively and negatively every day during one whole week as you interact with your supervisor, and that you write it down several times during the day (as soon as possible after it happens). *Otherwise, you will forget!* Keep the list in your pocket, perhaps? Or note on your phone?

Example: Write down in some detail a typical example of what makes you react positively or negatively, and that results in preventing/solving a conflict, or contributes to starting one.

Write down as many as possible of the things that make you react. You could add a few things of your choice (e.g. how long does the good feeling or the irritation/anger last? What makes it go away?), but do not add too many things. The secret behind good observation it too keep the task *simple, and focused.*

NOTE: If you *do not* feel much irritation, ask yourself: Am I *not* irritated at all? Or do I just hide my feelings of irritation because I do not want to deal with it? Or are we simply communicating and cooperating well?

Task 5a (week 1): Reacting to my supervisor

Day	Action, reaction or situation that makes you react positively (be specific – what especially is it that triggers you?)	How do you react (automatically, or with awareness?)	Comments (e.g. on how you deal with your reaction)
1			
2			
3			
	Action, reaction or situation that irritates you/ makes you angry (be specific – what especially is it that triggers you?)	How do you react (automatically, or with awareness?)	Comments (e.g. on how you deal with your reaction)
1			
2			
3			

My example:

Comments and reflections, including surprises, on what you have discovered and what you have learnt. For example, comment on what could have influenced your own reactions to the incident (*use more space if needed*).

Task 5b (week 2): The effect of your reactions on yourself, and on your supervisor(s)

We trust that you have now started to see what is the pattern of your reactions to your supervisor. Now is the time to also look at **the effect** of your reactions on yourself, the way you feel, and the way you react to your colleagues and patients (and if you like – also the way you react to friends and partner/husband/wife).

Day	Action, reaction or situation that makes you react positively (be specific – what especially is it that triggers you?)	How do you feel? <i>(effect)</i>	How does it make you react (give examples)?	What could have influenced the way you react?
1				
2				
3				
	Action, reaction or situation that irritates you/ makes you angry (be specific – what especially is it that triggers you?)	How do you feel? <i>(effect</i>)	How does it make you react (give examples)?	What could have influenced the way you react?
1	you/ makes you angry (be specific – what	-	you react (give	influenced the way
1	you/ makes you angry (be specific – what	-	you react (give	influenced the way

My example:

Comments and reflections, including surprises, on what you have discovered and what you have learnt (*use more space if needed*):

Comments and reflections on the effect of your actions, on your supervisor(s):

3.3.4 Task 6: Taking care of safety; effects on communication

In the course, we dealt with how you create a safe situation for yourselves, and for your patients, and discussed how **feeling safe** affects communication. Please check your notes to review which aspects affect how safe you feel, and what are important actions you can take to make the patient feel safe. Note here what they were:

- Making me feel safe:
- > Making patients feel safe:
- How are you using this knowledge in your daily work? What are you doing to create safe situations for yourselves? How does this affect the way you communicate?
- How do you use the knowledge to create safe situations for patients? What are the effects on communication?

Observe and reflect throughout the week on what you do, and on whether (and how) it makes a difference to how you communicate, and to how the patient(s) communicate. Reflect specifically on how creating a safe situation relates to **showing respect**.

Describe a situation which illustrates how you use your new methods.

3.3.5 Task 7: Showing respect for patients' emotions; the effect of this on you

Further reflections on changing the interaction with the patient

Many of you describe how you have become more aware of patients' emotional needs before and during an interaction, and how you have responded to and met these needs in different ways than before, including treating them with respect. You also describe how meeting these needs makes you feel different than when using your "old" behavior, and many have noted the difference in the relationship when you show respect to the patient. One of you asked if using such behavior, e.g. listening and showing respect, did something to your "inner person", and contributes to changing your own mood from being sad to feeling joy, or changes your mood in any other way.

Does it?

In the next couple of weeks, take time to observe what you do to meet patients' needs, and how it "works". Reflect on what happens in these interactions you have with patients, and what the effects are of this type of interaction on yourself (especially on how you feel), and on your work. Some ideas for what to observe:

- What is it you actually do when you "show respect"? How do you know the patient is "getting your message" of showing respect?
- What happens to the relationship between you and the patient when you treat him/her with respect?
- What happens to your energy/mood when you treat the patient with respect?
- What happens to your emotions?
- > Any other effects or reflections?

You could look at the "classical" health care provider-patient relationship as a "Good Mother – Dependent Child"-relationship (*where the HCP is the "Mother" who knows/has the power, and the patient is the "Child" who is dependent on the "Mother's" goodwill/positive reactions, and "does what she is told"*). The type of relationship we are suggesting as more constructive is an "Adult – Adult"-relationship, with respect as a basis and partnership as an aim. The two types of relationship

have different effect on the patients – and on the health care provider, especially related to emotions. We will discuss this further in the course.

3.3.6 Task 8. Taking care of your own emotions

In your daily work, you are often faced with situations that make you upset, or sad, or frustrated, or angry. Not all of these fit into the situation described under task 3.

Many of you have made a note of good ways of taking care of yourselves – and we would like for all of you to please make some mental notes about what you do on this, which works well, and be able to share some of these with colleagues during the workshop.

In the few weeks before the workshop, we thus encourage you to pay special attention to how you take care of emotions – your own, and the patients'. Also look at the effect of managing your own emotions in dealing with patients, colleagues etc)

This is the most difficult task to do well, and – we can see you have made great progress on this.

3.3.7 Finally – a Preview: Preparing your Best Practice Examples

In (month), we will ask you to select your "Best Practice" example", and bring it to the training with you. The "BP" is a situation which has happened since the (date of) training where you felt you used your communication skills well, and got a good result. We would like you to **show us** what happened – as a role play/demonstration in front of the group.

We will give you more details in (date/month) – but we mention this already now – in case you get a very good example already in this month! If you do, please take careful notes about what happened, what you said and did, and the effects – and on **why** you think this is a good example.

Please write: Examples, with reflections, on the tasks, and hand it in by (deadline).

We are looking forward to meeting you all again in (date/month), and to continue the learning process!

Best regards from the training team.

Have fun! And please make notes on your observations. Questions, comments, examples to (..)

NOTE: The follow-up course is set for (dates), to allow the trainer group to have more opportunity to use their skills with you. Please feel free to suggest topics you would like to learn more about.