

Quality Improvement Basics: Communication and Facilitation Transcript

Slide 1:

Welcome to the Quality Improvement Basics course” Communication and Facilitation” module.

Slide 2:

Our topics in this module are:

- Understand Team Communication concepts
- Use Facilitation Techniques to overcome Challenges

Also, before we start, please open the related documents for this module (tools, templates and any samples) which are available on the web page where you found this module link. It will help you to have those ready for quick reference as screenshots of the documents may not legible on your screen.

Slide 3:

Team Communication

Slide 4:

At the highest level, communication for the QI team is the process by which information is exchanged between individuals, departments, and within organizations.

More specifically, communication is a process whereby information is clearly and accurately conveyed to another person using a method that is known and recognized by all involved. It includes the ability to ask questions, seek clarification, and acknowledge the message was received and understood.

Ensuring that you take time to communicate well within your team assists in avoiding conflict. It is, of course, better to invest your efforts in constant and clear team communication rather than having to resolve misunderstandings and possible conflicts that are frequently the byproduct of not communicating with clarity and frequency.

Source: Team STEPPS:

<https://www.ahrq.gov/teamstepps/instructor/fundamentals/module3/igcommunication.html#importcom>

Slide 5:

Communication within your QI team should:

- Invite questions and dialogue (which fosters an atmosphere of openness and removes judgement from ideas that are contributed)
- Meetings should not just be about reporting out ...but rather the creative work of finding solutions for your goals



- Send materials in advance to prep for meetings and discussions...this is always a time saver and a way to ensure that most, if not all, are ready to be as productive as possible at each meeting.

Slide 6:

As QI goals are aimed at more efficient and effective ways of working in order to produce the best possible results and outcomes, it is imperative that the team communicate in a way that each team member shares in a common "mental model". From a definitional perspective...the "shared mental model is

The perception of, understanding of, or knowledge about a situation or process that is shared among team members through communication

Another definition that may help the shared mental model concept resonate with you is offered by the federal Health and Human Services. Agency for Healthcare Research and Quality (AHRQ) in its Team STEPPS program: A mental model is a mental picture or sketch of the relevant facts and relationships defining an event, situation, or problem. When all members of a team share the same mental model, this is referred to as a "shared mental model"

Slide 7:

Let's consider some reasons why the "shared mental model" is important for QI team members and how communication factors into the model:

- Keeps the team on the same page
- Clear communication of expectations at the outset (and maintaining those expectations throughout) ensures that team members know what to expect, and when and how they will receive communication
- Synchronizes work
- Fostering communication in this way ensures that team members are working at an appropriate pace to complement one another and move the project forward and helps to alleviate bottlenecks.
- Articulates the goal
- Including a shared understanding of the project goals ensures that everyone on the team has a clear image of what we are jointly trying to achieve and creates commonality of effort and purpose
- Enables better prediction and anticipation...by knowing what each team member's role is on the QI project, and what information will be needed to keep the team moving forward, we can then anticipate what each team member will need. In the patient care setting, for example, think of a patient coming in for a cataract surgery. The patient arrives and will go through a process of check-in, prep for surgery, surgery, recovery, and discharge. At each step the staff members anticipate what the patient and staff will need for the next step – they understand the flow and what is anticipated to occur and what will be needed at each step. Knowing each other's work, process and desired outcomes for the process is having a shared mental model. The antithesis of this is only knowing your specific tasks or work with no regard to upstream or downstream consequences to what you do and how it impacts others. Imagine how the patient undergoing cataract surgery would experience their care without the team members having a shared mental model.

Slide 8:

The five standards of effective communication are a good basis to consider how your team is communicating and are good standards beyond QI work

- Complete: Communicate all relevant information. (does your team truly have the full picture?)
- Clear: Convey information that is plainly understood
- Brief: Communicate the information in a concise manner (the meeting facilitator should be cognizant of this standard to keep presentations brief when agendas are full)
- Timely: Offer and request information in an appropriate timeframe
- Authentic: Verify the information...check sources and confirm the facts

Slide 9:

Here are some common communication techniques that you can employ in your QI team work. I'll discuss each one in a bit more detail in the following slides and we'll learn about the purpose of each and how you might use it in your QI project work:

- Situation-Background-Assessment-Recommendation (SBAR)
- Elevator Speech
- Right message, right audience
- Check-Back

Slide 10:

SBAR is a quick and concise method to communicate the status of your team's work, provide the needed context and move on to "next steps". You can use this tool within your team or to inform and request action by stakeholders outside your team.

The components of SBAR include:

- Situation - What is going on? (describe the current situation at hand)
- Background - What is background or context? (how did we arrive at the current situation and what lead up to it?)
- Assessment - What do you think the problem is? (now that you have provided context, assess what you think is happening)
- Recommendation - What would you recommend? (this is the 'take action' component and will help you to move your work forward)

Slide 11:

It is common practice when we are time-constrained to ask someone "Can you just give me the elevator speech"...a quick synopsis in about the time it takes to go up a few floors in an elevator. The elevator speech should be something that each QI team member can recite from heart (each team member's version doesn't have to be exactly the same)...but this shorthand method of communicating should help solidify and confirm that your team has a shared mental model of your project and what, if any, participation or action you are requesting from the listener.

The sample you see here on the screen is a very 'canned' approach and is only meant to provide a brief example. Your summary may be a bit longer and an elevator speech does not necessarily need to have a request at the end.

Here's a quick example:

We have assembled a team of process stakeholders as part of our Quality Improvement efforts to help improve our cataract surgery outcomes. We aim to improve the patient outcomes by reducing the percentage of patients needing follow up treatment within 30 days from 4 percent to 1 percent within the next 3 months.

Slide 12:

The "right message, right audience" helps the QI team to think about and communicate the problems or issues that they are solving for a specific audience – what is in it for THEM. Like the elevator speech approach: you want to pare things down and only communicate what your audience truly cares about. Another way to think of this is to ask yourself: "Have I tailored the message, the contents and information I wish to convey to the particular listener or audience, knowing who they are and what they are likely interested in?"

What would your organization's leadership want or need to know?

What would particular stakeholders need or want to know who are carrying out parts of the process...but not part of your QI team?

What would patients who are impacted by planned improvement need to know to be more engaged and informed about their healthcare as a result of your team's work?

Slide 13:

A check-back is a closed-loop communication strategy used to verify and validate information exchanged.

This strategy involves the sender initiating a message, the receiver accepting the message and confirming what was communicated, and the sender verifying that the message was received. Here is an example of the use of a check-back:

One team member shares that, "Our goal this year is to reduce admissions rate from 8% in the 4th quarter last year to 5% for the first quarter of this year." Another team member verifies and validates receipt of the information by saying, "Got it; we want to bring our readmission rate down to 5% for the first quarter this year compared to our higher 8% rate for the previous quarter." The original sender of the information completes the loop by confirming, "Correct"

The check-back communication approach is also known as the "teach-back" method when a provider is explaining to a patient how to follow medical instructions and has the patient repeat their understanding in their own words, telling the provider what they heard and what action they need to take to care for themselves.

The check-back method of communicating is a great way to ensure that the sender and receiver are on the same page and that no assumptions are made about whether what was intended to be communicated was indeed received and understood.

Slide 14:

Regular communication with all stakeholders, those having a direct interest in or impact on the process, helps reduce uncertainty when introducing change into your organization. A communication plan is designed to engage all stakeholders at the appropriate level of participation in identifying, planning, implementing and optimizing Quality Improvements and keeping them abreast of project activities. Creating a communication plan and following it throughout your QI team work, helps not only to "keep everyone in the loop" but also sets expectations that stakeholders will be informed and not caught off guard, which will increase needed buy-in and support for your QI efforts.

The communication plan ensures that the right message is delivered to the right stakeholders by the right staff, using the right medium, and at the right time. If you've ever worked with medication administration, you'll hear the echoes of the 5 r's method.

At one of your initial QI meetings, have your team think through what you'd like to share about your project with your stakeholders and broader organization (and beyond your walls as needed...your patients, for example) and document your plan with this tool be consistent and deliberate about communication and transparency for your project.

On the next slide we'll see how these communication plan elements are combined into a basic communication plan sample document

The communication plan can be a simple table, as seen in our sample screenshot here, that tracks what to communicate, to whom, by whom, how, and when. Some communications are two-way, such as meetings, phone calls, email threads and discussions; but many are one-way, including "FYI" emails, bulletin boards, and general information about your QI project progress. One-way communication lacks an immediate feedback mechanism, so plan ways to obtain feedback. Also, be sure to communicate using plain language and spell out or explain acronyms. Healthcare is loaded with acronyms and its best to assume your audience (especially any audience beyond your QI team) doesn't know them all.

A final note on communication plans: While the optimal approach is to create this plan at the outset of your project, keep in mind that it is a living document that should be modified throughout your project as the need to communicate will likely change over time. An example of this will be when you test different changes to process that will impact or modify the way work is done...you'd certainly want a plan to communicate and inform process stakeholders about your test and how the changes will impact them.

Slide 16:

Facilitation Challenges and Solutions

Slide 17:

One of the team roles is that of facilitator. The facilitator should be capable of keeping the meeting and agenda moving forward, synthesizing and summarizing discussion. They'll also need to be able to address some typical challenges that come up in collaborative team work. Keep in mind that one person may take on multiple roles in your team, so these responsibilities may be taken on by the team leader if they or you also function as the facilitator.

No doubt you and your QI team will run into challenges in communication...and ultimately ...communication will need to be clarified and at times, if not, it may result in disagreement or conflict. Some common team communication challenges include:

- Distractions
- Physical proximity (facilities, team members that might be working in remote or different locations)
- Personalities
- Workload
- Varying communication styles. (we may be hearing the same message but translating through our own lens a bit differently)
- Language barriers (not everyone speaks English as their first language)
- Conflict
- Lack of information verification

Overall, we each receive, digest and comprehend communication and messaging differently. Is the message you intend to communicate arriving and being understood as intended? Use the check-back method we covered a few slides back to confirm your message is being received and understood correctly.

Slide 18:

Conflict resolution is an area which requires a deeper set of skills to navigate differences that arise during your team meetings and work.

Here are four typical results of poorly managed conflict and what results from these approaches to conflict resolution

- Compromise (both parties settle for less)
- Avoidance (issues are ignored, or side stepped)
- Accommodation (focus is on preserving relationships)
- Dominance (conflicts are managed through directives/ultimatums for change)

The good news is that we will now look at a method to help you resolve conflicts. This skill is usually the domain of the team lead or team facilitator

Slide 19:

A conflict resolution approach that may help you is the DESC or D-E-S-C method, whose initials stand for:

Let's run through a sample of using this tool

Describe the specific situation

- D: "I (resident) am sensing that you (attending) are upset with me for ordering the Foley catheter for your patient."

Express your concerns about the action

- E: "When you question my judgment in front of others, it embarrasses me and makes me very uncomfortable. It also undermines my credibility with the patient."

Suggest other alternative and seek agreement

- S: "If you are concerned or have a question regarding my performance, I would appreciate it if you would speak to me in private."

Consequences should be stated in terms of impact on established team goals

- C: "A private conversation would be more beneficial to me because I would feel less embarrassed and would be able to ask questions and supply information. Can we agree to follow such a procedure if this were to occur again?"

The idea is to intervene and insert a pause in the discussion or disagreement and step through the DESC four components and then resume the conversation once the team or disagreeing parties have taken a moment to absorb and consider the leader or facilitator's summary using the DESC approach. If possible, seek to reach a resolution among the disagreeing members and team to keep the work moving forward. If you are not able to find immediate agreement, determine if you are able to have a later side-bar discussion and find a resolution to keep the team's work on track.

Slide 20:

Lastly, if you are able to achieve a mutually satisfying approach ...all the better. This takes collaboration among the team members as well as dedication and compromise to focus on the QI goal. By keeping the focus on the team's goals (the common mission), this can help elevate discussions above individual agendas or points of view and help you arrive at an "all-win" outcome.

You've no doubt heard the well-worn expression 'there is not 'I' in team' ...and that is what collaboration is all about.

Slide 21:

Thank you for taking to learn about Communication and Facilitation as part of the QI Basics course. Please join me for the next module: Change Management Basics