

2 Key Questions for Success with a Crucial Conversation

Half of all nurses and four out of five physicians say they work daily with a colleague who breaks rules, makes mistakes, fails to offer support or appears critically incompetent (study conducted by VitalSmarts and the American Association of Critical Care Nurses, www.silencekills.com). However, only one in 10 actually speaks up when facing these kinds of concerns — and far fewer speak up when the concern is with a physician. People's failure to speak up is highly related to quality of care, employee morale, productivity and retention.

The study identified seven categories of conversations that are difficult yet crucial for health care professionals to hold. One of the most common difficult conversations is related to disrespect and abuse. How do you speak up to an abusive boss or physician?

As a preceptor, it is important to show your preceptee and your co-workers how to react in these tough situations. Use the following suggestions and those listed in the next column to guide your next crucial conversation.

Before you open your mouth, ask yourself two key questions.

1. What is it that I really want long-term out of this conversation — for me, for the other person and for the relationship?

Asking this question helps you take the high road and helps you find a win-win-win solution. You don't want to beat up the other person.

2. What do I respect about the abusive person?

You can always find things you *don't* respect, but you can't have a productive discussion unless you can focus on the elements you *do* respect. We call this Mutual Respect.

Confront Disrespect and Abuse with Crucial Conversations

Begin by deciding what the problem is. The most common mistake people make is to confront a single incident of abuse as if the incident were the only problem. Most likely, the problem is not a single incident; it's a pattern of abuse. If you focus on the incident, you're likely to get bogged down in the details of who said what and why.

Next, try to put yourself in the other person's shoes. Ask yourself, "Why would a reasonable, rational and decent person get angry and abusive like this? What is she trying to achieve, and why is she so frustrated?" You will be much more successful if your approach solves the other person's problems, as well as yours. We call this Mutual Purpose.

So, let's begin. Find a private place and ask the person's permission to bring up a problem. Use Mutual Purpose and Mutual Respect to make it clear that you want to help, not attack, the person.

"I'd like to talk about what happened this morning when the tech wasn't prepared. It was clearly a frustrating situation for both of us. My goal is to make this place less frustrating — to make it more efficient, effective and safe. Can we talk?"

Next, explain what the problem is. Often, it's helpful to anticipate the ways the other person could misunderstand your purpose. For example, she might think you aren't buying into her reasons for attacking the person. You can use a skill we call contrasting to clarify you aren't disagreeing with her high standards. Your disagreement is with how she handles violations of these standards.

"You have very high standards, and I want to make sure my team meets them. I don't want you to think I disagree with your standards. I want to talk about how you react when someone doesn't meet your standards. You often say things like, 'Are you trying to kill my patient?' or 'How did they let you graduate nursing school?' Other times you raise your voice and shout or call people names. When you do that, I end up having to protect them, when I'd rather be helping you coach them to fix the problem."

Something to understand: When people become defensive, it's because they feel unsafe. They think you are attacking them. If the person starts to become defensive, step out of the conversation and restore safety by reconfirming Mutual Purpose and Mutual Respect.

"I don't mean to question your clinical judgment. I have total confidence in your ability. I want to focus on how you can work with the team to get the best support possible." Then, step right back into the content. *"I want you to be completely frank about your concerns but without raising your voice or being disrespectful. Does that sound reasonable to you?"*

Get an agreement from the person, but don't expect them to change overnight.

Tell them you want to be able to give them a "heads up" if you see a problem brewing and then follow up with them. It will take some reminders and some praise to keep the person on track.

Contributed by David Maxfield, co-author of The New York Times bestseller, "Influencer: The Power to Change Anything." This book is a great resource for preceptors and all hospital employees. www.vitalismarts.com