Critical Conversations

MASTER OF APPLIED NUTRITION
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Goals for this Workshop

- Identify your assumptions and expectations about your role and the student's role
- Identify how your conflict management style affects your approach to managing critical conversations
- Develop additional strategies and ideas from other preceptors about how to approach critical conversations

Preceptor Roles

"...Supervisors are expected to combine the contradictory roles of facilitator and guide as well as disciplinary gatekeeper and critic."

(Manathunga, 2007, p.211)

Personal Boundaries

Rate your comfort level in responding to the following scenarios:

- 1) Your student discusses their upcoming wedding plans, in great detail, with you.
- 2) Your student asks you to go for a beer (or other alcoholic drink) after placement.
- 3) Your student discloses some mental health concerns, and wants to talk about strategies to manage them.

Reflective Practice

Three main components:

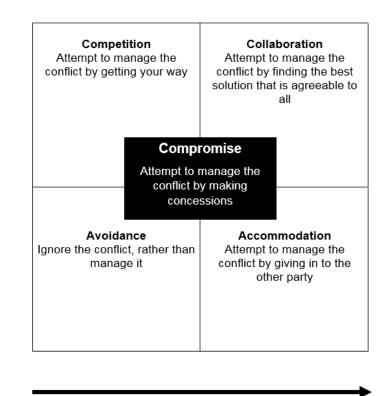
- 1. Self-awareness
- 2. Self-inquiry
- 3. Self-reflection (critical self-reflection)

Impact of assumptions, expectations, & values on practice

* adapted from Larrivee (2000)

Conflict Management

- Thomas-Kilmann Conflict resolution styles
- 5 styles based on degree of assertiveness and degree of co-operation
- All 5 styles are useful

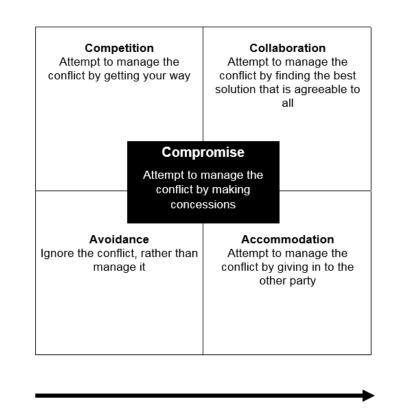


Assertiveness

Co-operation

Conflict Management

Pros & Cons in the Preceptor Role



Assertiveness

Co-operation

Having Critical Conversations

- 1) In your group read your assigned case scenario.
- 2) As a group, discuss the following questions:
 - What is the underlying issue?
 - Imagine you are the preceptor described in the scenario. How would you respond? Is this different than how you personally might respond?
 - What might the student be thinking or feeling?
 - How would you solve the issue you've identified?
- 3) We will return to a large group to share responses.

Ting Li is a new outpatient dietitian at a local hospital and a new preceptor for a master's practicum student. Ting Li feels that she understands the student's perspective well... She felt she would have benefited from more detailed instructions while learning on the floor during her clinical rotation, and she plans to debrief her intern before each counselling session.

Julie is going into her first rotation of the MAN program. By the end of Julie's first week, Ting Li is disappointed she has not finished reading the binder, nor seems to be responsive to/interested in Ting Li's detailed instructions.

Scenario 1 Outcome

There is a responsibility on both the learner and the preceptor for ensuring effective communication and learning.

Julie approaches Ting Li to communicate her feelings of being overwhelmed by the volume and pace of content being reviewed before counselling appointments.

Ting Li and Julie create a practical plan to briefly discuss cases the night before instead of right before the appointment. This plan allows Julie time to review materials at her own pace at home and improves her learning & overall performance at placement.

Sasha is going into her clinical rotation at a Family Health Team.... At the start of the second week, the preceptor George decides she is ready to take on two of his regular, more stable clients independently. One of the patients has long-standing diabetes and is now coming in for a check-up.

After reviewing Sasha's electronic chart notes at the end of the day, he notices she recorded 2 hypoglycemic episodes in the past 2 weeks from the client's log book readings, but had not addressed them during the session. She did record the client's symptoms of tiredness & dizziness, but had recommended the client speak to their family doctor at their appointment next month.

Scenario 2 Outcome

George immediately contacted the client via phone. He reviewed the rest of Sasha's documentation for any other inconsistencies and red flags.

George realized that it would have been more helpful to review similar case studies with Sasha beforehand, to ensure she would be both able to identify and act on any major concerns that arose.

George discussed his concerns with Sasha and his reasoning behind resuming direct supervision and questioning before counselling.

George called the practicum coordinator to confirm if Sasha had been taught this through coursework. George could then revise some clinical learning objectives for Sasha with the practicum coordinator, and provide the practicum coordinator with written feedback.

Ellen has worked as a dietitian for 4 years at a local Diabetes Education Program within a Family Health Team (FHT). The facility has had dietetic interns with more previous intensive clinical experience in the past, and Lindsay is the first master's practicum student. The client population has become more complex since Ellen has started working at the FHT...

After the first week, Ellen feels that Lindsay is struggling to complete thorough assessments and recommend practical interventions. Ellen is further surprised that Lindsay is asking basic questions about diabetes medications.

Scenario 3 Outcome

Both the student and preceptor have a responsibility in building this relationship. Lindsay approaches Ellen to discuss her lack of confidence in her knowledge and requests additional learning resources. They identify client safety as the primary concern and plan a learning agreement with objectives related to specific knowledge gaps.

Ellen encourages Lindsay to discuss her learned objectives at a later date, and further provides insight from her personal experiences. Lindsay comes away from placement feeling empowered and confident with both researching topics and understanding practical applications.

Jennifer is starting her practicum working in the hospital cafeteria. Jennifer hasn't had any food services experience to date and seems like a fish out of water to her preceptor, Barb.

In the first week Jennifer shows little initiative and is slow to start assigned work. Staff have started complaining that Jennifer is slowing them down and have stated that they believe that Jennifer thinks working in a cafeteria is beneath her. Jennifer has been late for her shift on two occasions and is often in the intern/practicum student resource centre instead of the cafeteria.

Janet is a practicum student starting her second week of her Community rotation... When Janet's preceptor, Diane, asks her about the readings and how the theory applies to practice, Janet's responses are unclear and at times she remains silent and is not able to answer the questions. Janet hesitates when describing the evidence and rationale behind the prenatal and infant nutrition recommendations, yet her client assessments are accurate.

Diane notices that Janet appears to interact well with prenatal clients, their children and other members of the prenatal team. In the past, when Diane has met with Janet, she has remained silent for much of the meeting.

A student, Charles, is doing his first nutrition care placement in an acute care hospital setting. It is his third week of placement working with Anna, the dietitian in General Medicine. He has observed Anna and is now familiar with the nutrition care process. Under Anna's supervision, Charles has successfully collected assessment information from several patients. Now Anna has asked Charles to take the lead on a session with a patient with Crohn's disease.

Charles comes away from the session, which obviously was not perfect as it was his first attempt leading a full session with a patient. His preceptor, Anna, asks, "How do you think it went?" Charles replies, "Fine, I thought I did quite well, no problems really?"

Constructive Feedback

Set the stage

- Discuss expectations
- Set realistic goals with the student
- Agree on the format and frequency of feedback

Identify the constructive purpose for feedback

Give positive, as well as negative, feedback

Be timely

Describe specific behavior – avoid judging or accusing

Describe your reaction

Offer specific, actionable information

Demonstrate trust in the person

Critical Conversations

- 1. Reflective practice
- 2. Conflict
- 3. Constructive feedback
- 4. Part of the preceptor-student relationship

References

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Larrivee, B. (2000). Transforming Teaching Practice: Becoming the critically reflective teacher, *Reflective Practice*, 1(3), 293-307, DOI: 10.1080/713693162

Manathunga, C. (2007). Supervision as mentoring: the role of power and boundary crossing, *Studies in Continuing Education*, *29*(2), 207-221, DOI:10.1080/01580370701424650

Scenarios 1-3 developed by Master of Applied Nutrition students.

Scenario 4 adapted from Dietitians of Canada (2009), Are You an Excellent Preceptor? Focus on Feedback Resource Guide

Scenario 5 used with permission of the authors, Helen Toews, RD, Internship Coordinator, Hamilton Health Science Centre and Vicki Edwards, Public Health Nutritionist, City of Hamilton

Scenario 6 adapted from Healey & Spencer (2007), Surviving Your Placement in Health and Social Care, with additions from Jane Bellman, MEd, RD; Alexia Prescod, MSc, RD; and Marlene Wyatt, MA, RD