Office of Clinical Research First Friday

FIRST FRIDAY

UC Health — IN SCIENCE LIVES HOPE.

Team Science: Communication, the Cornerstone of Successful Teams

Friday, May 7th, 2021

Learning Objectives:

1) Describe the basic principles of Team Science and the value of working on teams

2) Discuss personal styles of communication and how they impact working relationships and team functioning

3) Review some strategies for having difficult conversations by using the "Crucial Conversations" model

Target Audience:

Clinical Research Professionals (CRPs) at UC/H and Cincinnati Children's Hospital Medical Center (CCHMC): including Principal Investigators (PIs), Research Nurses (RNs), Critical Care Unit Nurses (RNs), Pharmacy Technicians and Regulatory Specialists.

Off-Label Disclosure Statement:
Faculty members are required to inform the audience when they are discussing off-label, unapproved uses of devices and drugs. Physicians should consult full prescribing information before using any product mentioned during this educational activity.

Learner Assurance Statement
The University of Cincinnati is committed to resolving all conflicts of interest issues that could arise as a result of prospective faculty members' significant relationships with drug or device manufacturer(s). The University of Cincinnati is committed to retaining only those speakers with financial interests that can be reconciled with the goals and educational integrity of the CME activity.

Accreditation Statement for Directly Sponsored Activity
The University of Cincinnati is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The University of Cincinnati designates this live activity for a maximum of 1 *AMA PRA Category 1 Credit™*. Participants should claim only the credit commensurate with the extent of their participation in the activity.

CRPs, NPs, PAs, and RNs can count activities certified for *AMA PRA Category 1 credit™* for professional credit reporting purposes. Other healthcare professionals should inquire with their certifying or licensing boards.

Disclaimer Statement
The opinions expressed during the live activity are those of the faculty and do not necessarily represent the views of the University of Cincinnati. The information is presented for the purpose of advancing the attendees' professional development.

Speaker Disclosure:

In accordance with the ACCME Standards for Commercial Support of CME, the speakers for this course have been asked to disclose to participants the existence of any financial interest and/or relationship(s) (e.g., paid speaker, employee, paid consultant on a board and/or committee for a commercial company) that would potentially affect the objectivity of his/her presentation or whose products or services may be mentioned during their presentation. The following disclosures were made:

Planning Committee Members:
- Brett Kissela, MD, Course Director – No Relevant Relationships
- Maria Stivers, MS – No Relevant Relationships
- Zachary Johnson, BS – No Relevant Relationships
- Nate Harris, BS, Course Coordinator – No Relevant Relationships
- Brandon Armstrong, CME Program Coordinator – No Relevant Relationships

Speakers:

Angela Mendell, MS, CCRP

No Relevant Relationships

Elizabeth J. Kopras

No Relevant Relationships

Stephanie Schuckman, MA

No Relevant Relationships

John R. Kues, Ph.D.

No Relevant Relationships

May 2021 Study of the Month

Compliance Corner

Remote monitoring:

EpicCare Link is a feature of the EMR of UC Health.
Only IRB approved studies can be monitored through the use of EpicCare Link.
Access to EMR for auditing and monitoring purposes is required and remote monitoring is an IRB and FDA approved method.

When requesting remote monitoring using EpicCare Link, please be sure to check if an **EpicCare Link UC Health Confidentiality Agreement for Researchers document** has been executed between UC Health and Sponsor/Company who is requesting remote monitoring, keeping in mind that only one agreement is required between UC Health and the Sponsor/Company in order to monitor multiple studies the Sponsor/Company may have active at UC Health.
A new agreement is not needed per study. But remote monitoring must be requested per each individual study.

For detailed information on the remote monitoring process, please see the following SOP:
UCH-OCR-ACC-SOP-003-
Access to Electronic Medical Records by Study Monitors, Auditors, and External Research Staff for the Purpose of Human Subjects Research

All OCR SOPs are accessible from the UC Health intranet home page utilizing the Compliance 360 policy search function, or reach out to the Office of Clinical Research with any questions or concerns.

UC Health

Office of Clinical Research Lunch & Learn

Thursday, May 20th, 2021
12:00 noon - 1:00 pm
Virtual Presentation
UC Health Clinical Research Billing: Best Practices and FAQs
Please join us for an overview of common research billing challenges, addressing different points in the lifespan of research billing, including Coverage Analysis, RedCap study submission, and Research Encounter Form submission. This presentation will also touch on the future of research billing as well as best practices.

Charlie Fremont
Clinical Research Applications/Systems Administrator
UC Health Office of Clinical Research

UC Health Clinical Research Orientation and Training (CRO&T)

**Thursday, June 10th, 2021
9:00 am - 3:00 pm
Virtual presentation**

The last day of registration is EOB Friday, June 4th, 2021

**Please contact Nate Harris
Nate.Harris@UCHealth.com
for information and registration**

Communication: The Cornerstone of Successful Teams

First Friday, May 7, 2021 | 9:00 – 10:00 a.m.

Please:
- **Take** a brief assessment: **https://redcap.link/CRP_Colors**
- **Turn on** your Video Camera (if able & comfortable)
- **Mute** your microphone when you are not speaking
- **Know** this workshop is being recorded

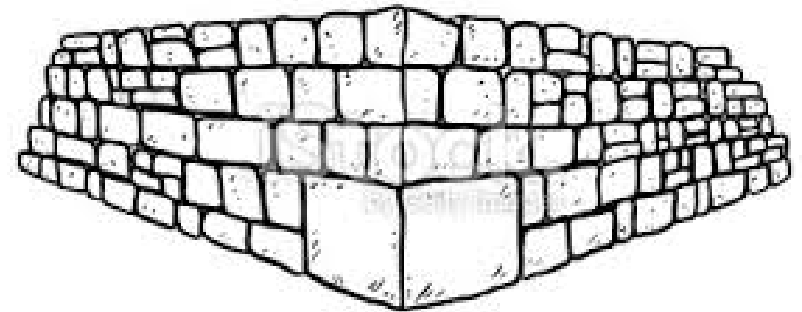**Please follow this link to take a brief assessment**

***before* we get started:**
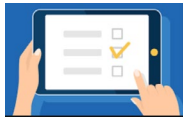
https://redcap.link/CRP_Colors

Communication: The Cornerstone of Successful Teams

UC Health: Office of Clinical Research
First Friday Series
Friday, May 7, 2021 | 9:00 – 10:00 a.m.

Have you completed the assessment?
Please follow the link in Chat.

CIS-Team Science Faculty

Jack Kues, PhD
Associate Dean,
Continuous
Professional
Development

Megan Lamkin, PhD
Assistant Professor,
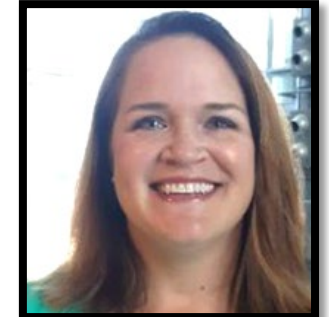Undergraduate
Research

Jason Blackard, PhD
Professor,
Internal Medicine

Angela Mendell, MS
Program Manager,
Center for
Improvement Science

Laura Hildreth, MS
Program Director,
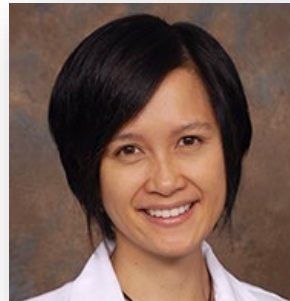Center for
Improvement Science

Stephanie Schuckman, MA
Program Manager,
Center for
Improvement Science

Rebecca Lee, PhD, RN
Associate Professor,
College of Nursing

Jackie Knapke, PhD
Associate Director,
Continuous
Professional
Development

Jennifer Molano, MD
Associate Professor,
Neurology and
Rehab Medicine

Megan Johnstone, PhD
Postdoctoral Fellow,
CCHMC

Elizabeth Kopras
Senior Clinical
Research
Professional,
Internal Medicine

Soni Regan, PhD
Assistant Professor,
Family Medicine

Learning Objectives

- Describe the basic **principles of Team Science** and the value of working in teams.

- Introduce **personal styles of communication** and how they impact working relationships and team functioning.

- Identify strategies for **difficult conversations** by using the *"Crucial Conversations"* model.

UC Health
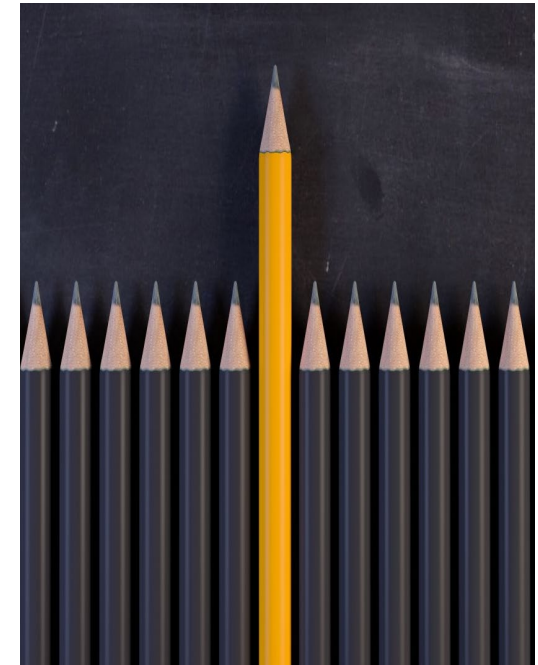
Definition: *The Science of Team Science (SciTS)*

...a *new* interdisciplinary field...which aims to *better understand* the circumstances that **facilitate or hinder** **effective team-based research and practice** and to **identify the unique outcomes of these approaches** in the areas of **productivity, innovation, and translation.**

(Stokols et al., 2013 p. 4)

- On average, *half* of the teams you work on are at least **somewhat dysfunctional.**

- You have *almost daily "uncomfortable"* encounters with team members.

- A *significant portion of job stress* is due to **team dysfunction & communication problems.**

- **….**turnover, quality errors, "re-do," burnout…….take up *too much time and energy.*

Miscommunication Can Be Painfull

"When I nod my head I want you to hit it!"

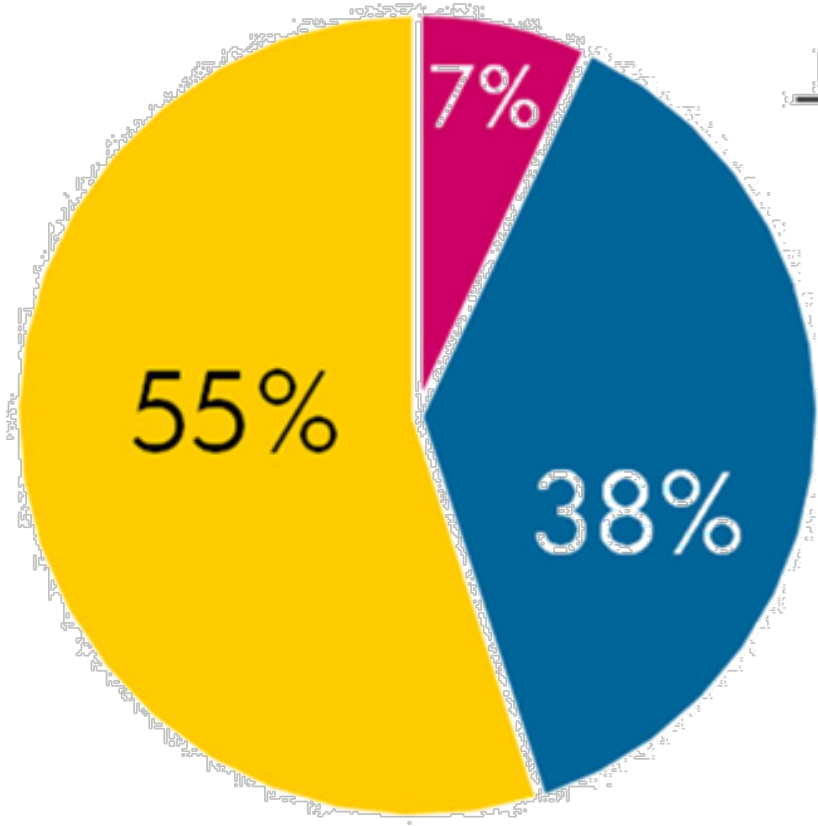# Biggest Communication Mistakes

1. Communicate too much in writing
2. Don't fully listen
3. Don't adapt our style
4. Not clear about options & impact
5. Don't ask people to repeat our message

Personal Communication

Dr. Albert Mehrabian's 7-38-55% Rule

Elements of Personal Communication

- 7% spoken words
- 38% voice, tone
- 55% body language

What is Communication Style?

Logical **Analytical** **Fact Based** **Quantitative**	**Holistic** **Intuitive** **Integrating** **Synthesizing**
Organized **Sequential** **Planned** **Detailed**	**Interpersonal** **Feeling-Based** **Kinesthetic** **Emotional**
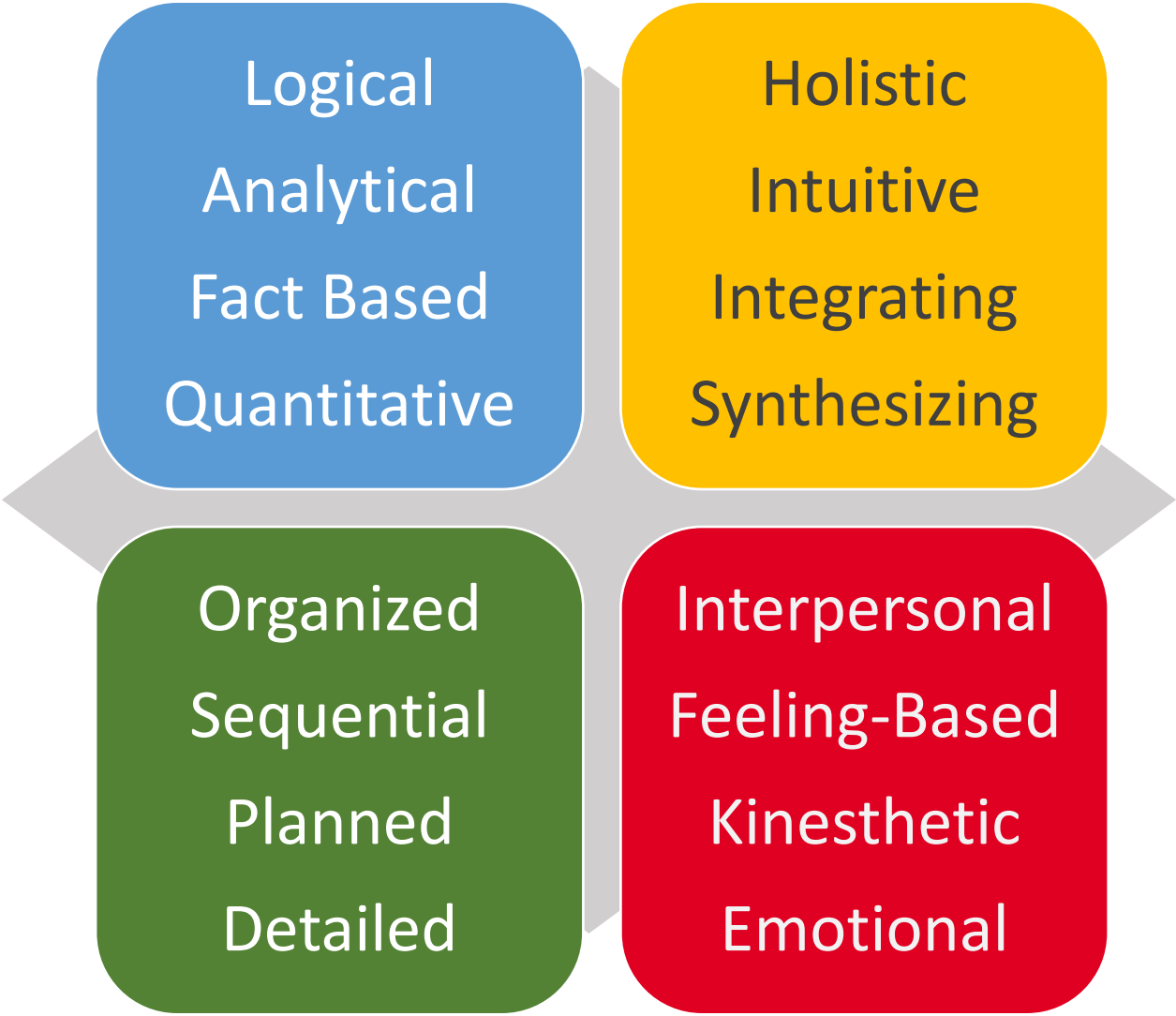
← **Task-Oriented** — **Relationship-Oriented** →

Polling Question #1

Which color *best* represents your communication style?

- Blue

- Green
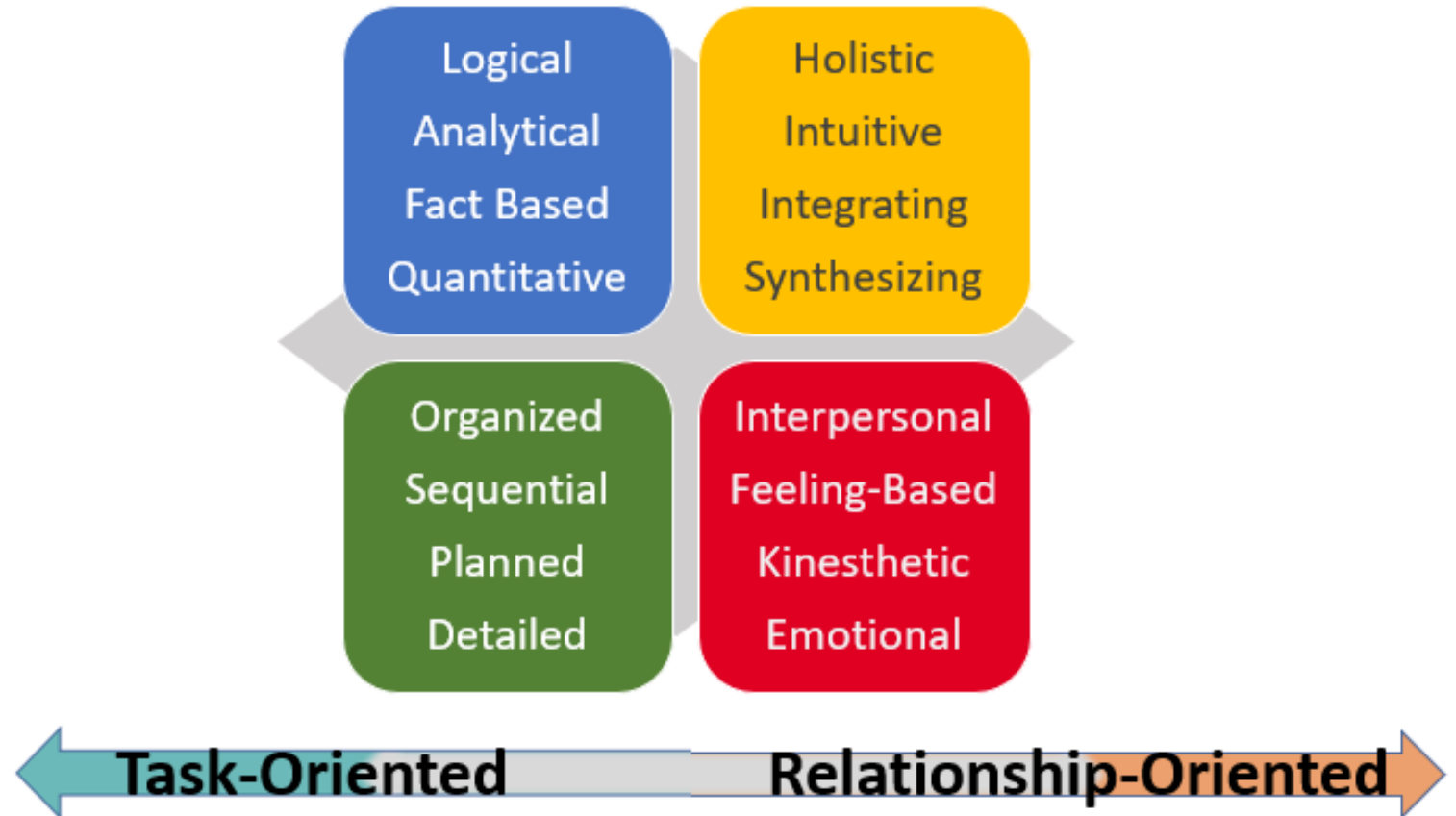
- Red

- Yellow

Logical Analytical Fact Based Quantitative	Holistic Intuitive Integrating Synthesizing
Organized Sequential Planned Detailed	Interpersonal Feeling-Based Kinesthetic Emotional

← Task-Oriented   Relationship-Oriented →

BLUE

- Style is logical, analytical, **decisive**, **tough**.
- No decision made without **facts.**
- Values action, **timelines, the bottom line.**
- Tends to get **impatient.**
- Very **results-oriented.**
- **Outspoken, assertive** and **likes control.**

BLUE – *in the workplace*

- May appear rushed and **abrupt**.

- Want people to **get to the point quickly**.

- Can be hardnosed, with a great emphasis on **success at any cost**.

- Require his/her staff to be well versed in the **facts**.

- Use **logic** rather than intuition or gut feelings to **make decisions**.

Effective Communication with BLUES

- Be direct and to the point.

- Allow choice when possible.

- Discuss how the results will be accomplished.

- Does it use facts?

- Is it quantified?

- Does it show clear analysis?

GREEN

- **Detail-oriented**, systematic, and structured.

- Organized, **analytical.**

- On time, accurate, and **delivered as promised.**

- **Neatness** and following protocol count.

- **Perfectionist**, critical of yourself and others.

GREEN – *in the workplace*

- Weighing **facts** and supporting **data** *before making decision*.

- Values following orders; **meeting project deadline**.

- A well-organized office; **accurate documentation**.

- Often *misunderstood* because may be overly concerned with **accomplishing an error-free task**.

- **Time costs money**.

- **Most private** of all styles.

Effective Communication with GREENS

- Give ***opportunity to ask questions***.

- Give them the facts; **show it in writing**.

- Focus on *doing the right thing*.

- Does it provide enough detail?

- Is it in sequential order?

- Is it neat?

- Is it in appropriate format?

- What is your deadline?

RED

- Human **values and feelings** are paramount.

- Genuine **concern for others**; sympathetic, friendly.

- Highly participative and **team oriented.**

- Considerate, and likes **harmonious relationships.**

- Prefer to **avoid conflict.**

RED – *in the workplace*

- **Blends well with all the other styles**, focusing on nurturing relationships.

- Considers **people as the most important asset**.

- Workplace should be friendly, condones open communication: **"my door is always open."**

- Known as the **"office counselor."**

- If something doesn't seem right, standard protocol is to address the problem *in a sensitive way*.

- May have **difficulty standing up for themselves**.

Effective Communication with REDS

- Appreciate "calm, cool & collected" style.

- Ask them for their help/cooperation, ***preferably not at the last minute.***

- Consider their schedule.

- Is it people-focused?

- Is it helpful and user-friendly?

- Does it acknowledge emotional issues?

YELLOW

- Intuitive, holistic, adventurous, risk-takers.
- "If there is a better way, let's try it out."
- Experimentation is highly valued.
- Animated, energetic and spontaneous.
- Looks at "big picture" and can tend to overlook details.
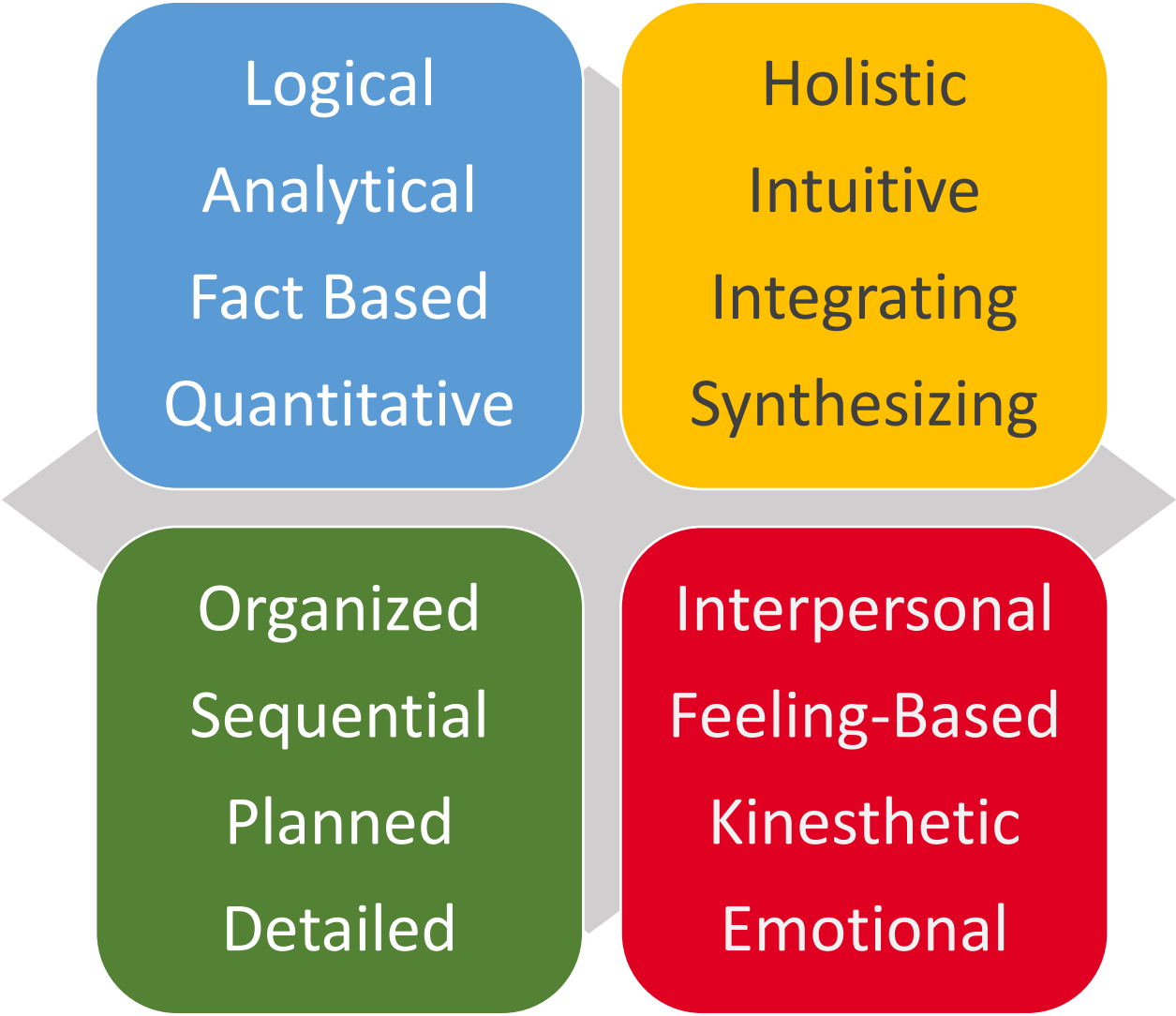- Who you want on the team for long-term, strategic thinking.

YELLOW – *in the workplace*

- Most talkative of all the styles. Open to all.
- May have difficulty listening to directives or concerns; busy thinking, talking and developing relationship rapport.
- Normal to try out several approaches at once.
- Looks to the future, overlooking short-sighted solutions is common trait.
- Most creative with others; sharing ideas.
- Shows interest through interaction & input.

Effective Communication with YELLOWs

- **Does it look at the big picture?**

- **Is it conceptually sound?**

- **Is it visual and colorful?**

- **Does it use metaphors?**

- **Does it look at the future?**

Vignette #1:

K: "We need a sample from the patient in Room B for the ABC study, but I have to run these samples across the street. Can you help me out and consent her? It's a simple blood draw in two red tops."

A: "Oh, Hey! How was your weekend? You were going out of town right?"

K: "Yeah, It was great. Can you take care of the consent and blood draw or not?"

A: "Sure, I can do it. I haven't been trained on it yet but maybe Cheryl can help if I have questions."

K: "I added you to the protocol."

A: "Yes, but I haven't seen the Case Report Forms, and nobody has trained me, yet. But Cheryl's back from her trip. Maybe she can show me pictures!"

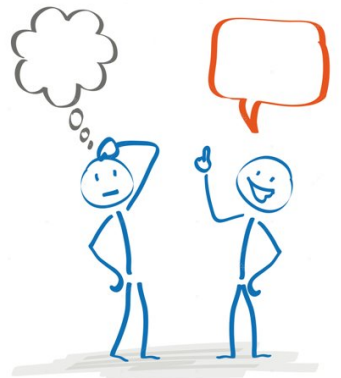K: "All you have to do is go over the consent form and get a blood sample. It's not rocket medicine."

A: "O......K.   How much blood do you need?"

K: "Two tubes."

A: "What do I do with the sample? Does it have to set and clot? Can it go in the fridge while I finish the patient in Room C?"

K: "Why do you always make everything so hard? Just consent and get the blood! I'll be back soon."

A: "Why are you getting so mad at me? I'm sorry, I'm just trying to help you out."

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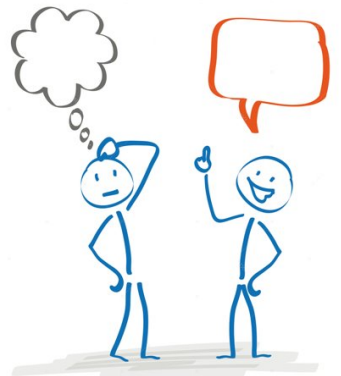
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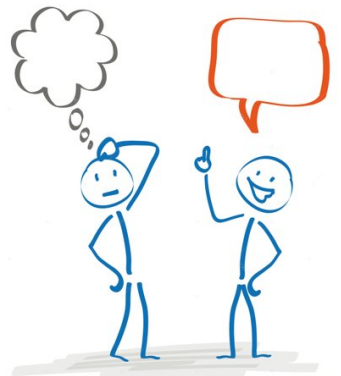
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Vignette #2:

K: "What's wrong?"

A: "Oh, it's Zelda. She went home and didn't put all the patient

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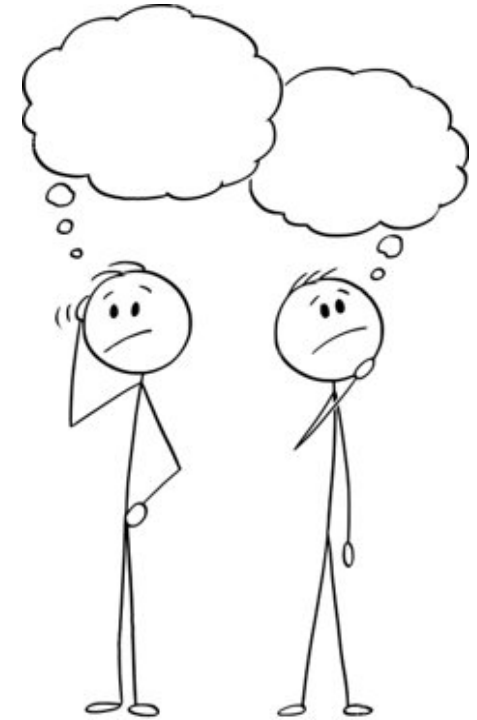
K: "She'll do it in the morning. She always does."

A: "Data are supposed to be entered as soon as possible so we don't make mistakes. She does this all the time."

K: "Well, you know she has to leave by 4:30 every day. Maybe she'll do it tomorrow or maybe she'll do it at home. If you're really worried about it, maybe you could do it."

A: "She needs to organize herself better. The data are supposed to be entered immediately. We can't afford mistakes."

K: "It's not that big of a deal. Are you okay?"

A: "I just think she needs to do her job. You're always taking her side!"

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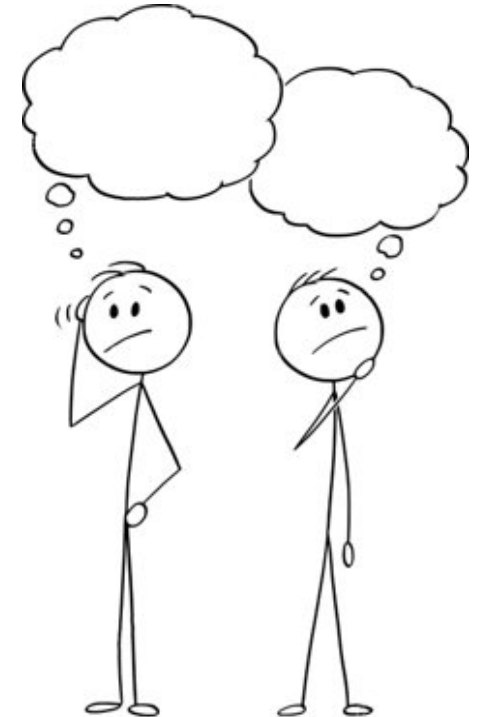K: "She'll do it in the morning. She always does."

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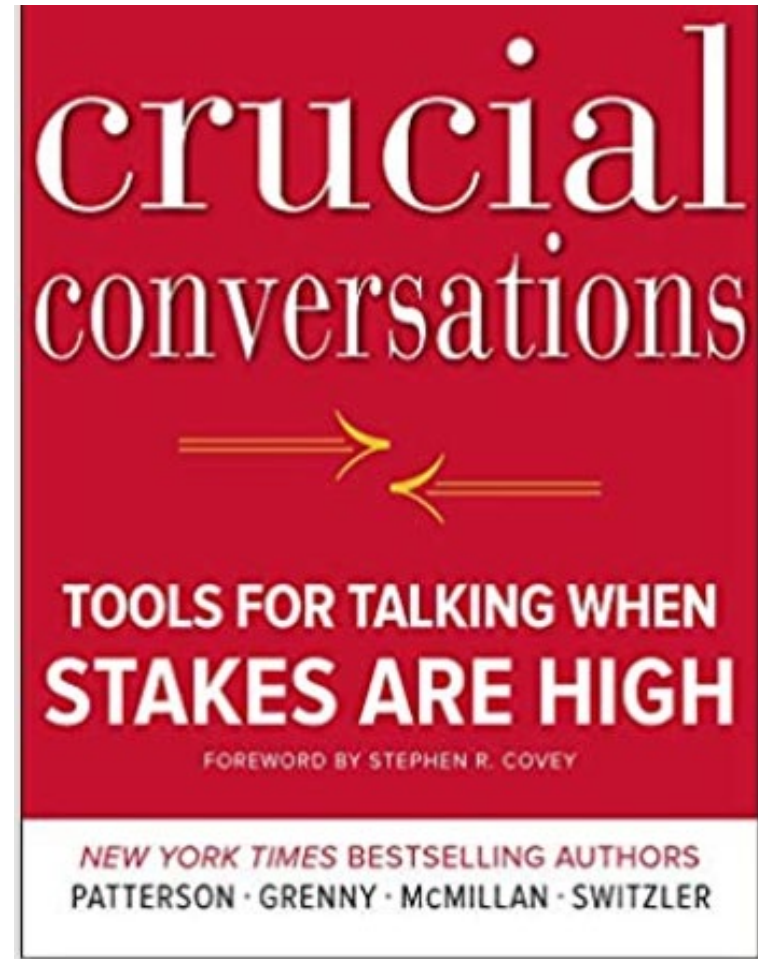
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Crucial Conversations

1. Know yourself
2. Learn to look
3. Make it safe
4. Master your stories
5. Explore others' paths
6. Move to action

crucial conversations

TOOLS FOR TALKING WHEN STAKES ARE HIGH

FOREWORD BY STEPHEN R. COVEY

NEW YORK TIMES BESTSELLING AUTHORS
PATTERSON · GRENNY · McMILLAN · SWITZLER

Crucial Conversations

1. Know yourself
2. Learn to look
3. Make it safe
4. **Master your stories**
5. Explore others' paths
6. Move to action

State Your Path

- **S**hare your facts
- **T**ell your story
- **A**sk for others' paths
- **T**alk tentatively
- **E**ncourage testing

Be aware of *color styles* when having crucial conversations.

Questions & Feedback

Tell Us What You Think!

Please take this 1-2 minute survey:

https://redcap.link/TSWorkshopsEval-050721

References

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Patterson, K., et al. (2012). *Crucial Conversations: Tools for talking when stakes are high*. New York, McGraw-Hill.

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More Team Science Resources

- CCTST CIS Website: cctst.org/programs/CIS
- Northwestern University Clinical & Translational Sciences Institute:
  http://www.teamscience.net
  Four learning modules about Team Science (simulations)
  - The Science of Team Science
  - Team Science Research Process in Behavioral Science
  - Team Science Research Process in Basic Medical Science
  - Team Science Research Process in Clinical Medical Science

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