APPENDIX 2
Principles and Practices of Relationship-centered Meetings
Anthony L. Suchman, and Penelope R. Williamson, ScD

Relationship Centered Health Care (www.rchcweb.com)

From
LEADING CHANGE IN HEALTHCARE
transforming organizations using complexity, positive psychology and relationship-centered care
Edited by
Anthony L. Suchman, MD, MA, David J Sluyter, EdD and Penelope R. Williamson, ScD

The quality of relationships within a work team or committee has a profound effect on the group’s results. It determines their willingness to bring forward their diversity and differences as a resource for creativity, their openness to change, their motivation and initiative, and their commitment to the group and its work. Many (if not most) meetings are conducted in way that actually inhibit relationships and engaged conversation, resulting in meetings that feel dull and unproductive. Fortunately, there are some straightforward principles and simple meeting formats that can make meetings more relational and elicit high-quality participation. These methods require no additional time, only a little bit of courage to try something new. You can provide the leadership needed to suggest or implement these methods regardless of whether you are a team leader or a team member.

Principle #1: Invest time in relationship building; it will pay large dividends in efficiency and performance. When members of a team know and trust each other, people can say what they think and explore each others’ positions. Differences of opinion and perspective are a stimulus for creativity, not conflict. Meetings are enjoyable and the group makes rapid progress. Conversely, when people don’t know each other well, they get hung up on stereotypes (“what do you expect from an immunologist, or a social worker?”). They hold their ideas back for fear of ridicule and they waste a lot of time defending themselves and protecting their turf, time that could be better devoted to the work at hand. Often the urgency of the work makes it tempting to short-cut relationship building (“we don’t have time for this ‘soft stuff,’ there’s real work to do”) but it is always a false economy. The more urgent the work, the greater the likelihood of inadvertent relational breaches that amplify over time, the more urgently good relationships are needed, and the poorer the efficiency and outcomes will be if they are lacking.

Methods

Initial meeting: There are many ways to help people get to know each other at the first meeting of a group. Participants can take turns introducing themselves, saying a bit about what they had to do or give up to attend the meeting and why it was important to do so. And/or they can tell a brief story about how they have come to be where they are at this point in their careers and lives. If the group numbers between 8 and 16, you might invite people to divide into pairs.
People take turns interviewing each other for a few minutes using the questions above, then when the whole group reconvenes each person introduces her/his partner. If the group numbers 8 or less, you might still use the paired interview approach or you can invite people to tell their stories directly to the whole group. In the latter case, it helps establish trust in the group to give people the option of passing if they’d rather not address the whole group (people rarely avail themselves of that option but it makes them comfortable to know they have it).

Subsequent meetings: At the start of each meeting, it’s helpful to begin with a round of “checking-in,” offering an invitation to each person (always with the option to pass) of reflecting on how they’re doing at the moment or what might be going on for them outside of the meeting that might be diverting their attention. Often simply naming the distraction helps to ameliorate it, and if it is something truly difficult (a child’s or parent’s illness or a major home repair in progress, for instance), the team members can offer support and will know not to take it personally if that person is observed during the meeting to be staring off into space and scowling.

Another approach to check-in is to offer each person an opportunity to describe something that has gone well since the previous meeting.

**Principle #2: Foster high quality conversation.** The “free for all” conversational format at most meetings wastes time and potential. People have to fight to get the floor only to be interrupted before they can complete their thoughts; some people are not heard from at all. This leads to poor listening, ineffective articulation of ideas, a poor sense of teamwork and low commitment to any decisions that result. So instead of a free-for-all, use a little light structure in the service of better conversation.

**Methods**

**Nominal group process:** This is just a fancy term for giving each person in turn a specified amount of time without interruption to say what they think. You can allow a brief period of questioning before proceeding to the next person, or you can wait to hear from everyone before proceeding to questions and/or freeform dialog. In one variation, people suggest one idea at a time and keep going around the circle until there are no further ideas. Recording ideas on a board or flip chart can ensure that ideas are not lost. It’s often useful to engage in another round of nominal group process after a discussion has been in progress for a while to see what level of consensus exists and what issues still need more attention.

**Talking stick:** This method involves using an object (traditionally a stick, but any object will do) to signify who has the floor. After finishing, a speaker passes the object to someone else who then has the floor. This method brings a little order to the conversation and helps people finish their thoughts without interruption.
**Principle #3: Explore difference with openness and curiosity.** When faced with a difference of opinion, people are all too easily hooked into a struggle over who’s right and who’s wrong. They fight as if their lives are at stake, and it’s no wonder given all the humiliation associated with being wrong in traditional medical learning environments. The challenge here is to recognize that most situations are more complex than any one person can grasp, that everyone has a unique piece of the puzzle, and if anyone’s piece is lost everybody loses. When people see things differently, most of the time they both are right.

**Methods**

**The cone in the box:** The figure reproduced below is a simple and effective graphic for helping people recognize that different perspectives are not mutually exclusive. It shows a cone inside a box. People looking through a peephole at point A will see a circle, and through point B a triangle. Their observations may seem mutually incompatible and they will argue forever unless they can get past the belief that someone else’s different perception invalidates their own and accept that reality is more complex than what they are seeing on their own.

![Cone in the Box](image)

**Listen for Internal Reactions:** A failsafe indicator that you have a difference of opinion is your internal reaction. The most useful thing you can do when you suddenly experience a strong feeling (eg., anger, defensiveness, humiliation) in response to what someone else says or does is to pause for a moment and “turn to wonder” -- “I wonder why I’m feeling this way?” “I wonder what led him or her to that stance?” The discipline of shifting from “knowing that you are right” to curiosity about your response allows you to move to Inquiry.

**Inquiry and advocacy:** When encountering a difference of opinion, presume that the other person is competent and conscientious. Resist the initial temptation to argue and instead use inquiry – exploratory questions – to better understand the other person’s views and reasoning. If you can show that you understand his/her view by accurately reflecting it back, so much the better. Only then is it time to advocate your own perspective, clearly explaining your reasoning. And by then, you may have discovered there is in fact no difference, or that the heart of the difference is something other than what you thought at first, so you can respond more effectively. As a facilitator, you can help your group recognize when they are getting stuck in a right-wrong conversation and invite them to use more inquiry and less advocacy to find their way through.
Principle #4: In pursuing change, learn from successes. Most groups working on organizational change focus on problems, trying to identify and fix the root causes. The major problem with this time-honored approach is that the problems are too often equated with people. No one likes to be a problem, so people divert a lot of energy into defending themselves to avoid shame; the conversation makes little headway. An effective and Zen-like alternative is to seek out and learn from instances in which the desired change is already present. They’re almost always around if you look for them.

Method

Appreciative Inquiry: This philosophy and methodology for organizational change is based on discovering and building upon the existing capacity within an organization. For example, if we want to foster better interdisciplinary collaboration, we’ll make more progress by learning from successful instances – what went right, what factors made it possible, and how do we do more of that – than discussing where things went wrong and why. Curiously, we’ll end up talking about exactly the same issues, attitudes and behaviors in either conversation, but with very different emotional tones that profoundly influence people’s openness to change. A typical AI process begins with people pairing up and taking turns telling each other stories of successful collaboration. The interviewer can explore the partner’s experience in more detail using questions such as:

- what did you do or bring to the situation that contributed to the success,
- who else was involved and what did they do that helped?
- what aspects of the setting or situation made a difference?
- what useful lessons can we take from this story?

Partners can then present each other’s stories and lessons learned back to the whole group. This method is, in fact, a powerful form of participative inquiry. It invites people to step forward from a place of capacity rather than defensiveness, and helps people feel more hopeful and welcoming of change. Appreciative debriefing: A similar approach can be applied in miniature at the close of each meeting. You can invite (with the option of passing, as always) each participant to reflect on moments during the meeting that they found particularly useful, important or engaging. This encourages people to become more aware of the process of their meetings and to discover how they can be helpful to each other. Positively reinforcing these helpful behaviors increases the likelihood of their use in future meetings and builds the sense of connection in the group, thus serving Principle #1.
Principle #5: Trust the process; don’t try to control the outcome. Good group process draws forth the best capacity of the group. You will no doubt find yourself heading into some meetings convinced that you already know what decision the group should make, and trying (subtly, or so you think) to steer the group towards your predetermined outcome. There are two major problems with this approach:

(1) people don’t like feeling manipulated; they will fight you and will be unmotivated to follow through.

(2) The group is smarter than you are, so your solution is unlikely to be as good as what the group would come up with. Rather than focusing on the desired outcome, focus on the maximizing the quality of the process – on the quality of relationships and trust, and on the quality of listening, exploring, advocating and understanding. If the process is as good as possible, the best possible outcome will result.

Methods

All of the above!

The relationship-centered principles outlined above rest on a strong body of evidence. Relationship quality is well-associated with a wide variety of organizational outcomes in healthcare including quality and safety of care, cost, patient and staff satisfaction, and the capacity to learn new procedures. The principles and methods are also easy to apply. They may be unfamiliar and may feel a bit awkward at first. But if share your awkwardness with the group and let them know what you’re trying to do and why, they will support you. Just remember what you are trying to accomplish – creating a more relational environment in which to work and get care. Bold change is accomplished by people who are willing to risk something new. Using these simple principles and methods, you can help your teams reach a new level of performance and engagement. We create the new model by living it in each meeting, and it will grow in ways none of us can imagine. May you have courage and success!