Module 4:

In the absence of any evidence of grasping during the handoff, the speaker can use specific inquiry techniques to increase confidence grasping has occurred.

This is necessary because despite our best efforts, sometimes the receiver does not appear to reveal an understanding of our handoff, an acceptance of responsibility for follow through, or an awareness or appropriate follow-up actions.

Questions that do not work:

- Do you understand?
- Will you be able to get this done?
- It is a big job, are you up for it?
- Is this something you can manage?
- Will you be able to cover for me next Monday?
- Do you have a good handle on what needs to be done?

Key features of questions that do work:

- A. They ask for cognitive and/or behavioral evidence of understanding such as
 - 1. What do you think is the most difficult challenge for this patient?
 - 2. Which tests are likely to give us the best information?
 - 3. How does this compare with similar patients you have worked with?
 - 4. Which patient do you think will require the most attention?
 - 5. Should this patient be placed on a different unit?
- B. They invite the receiver to calculate something which can be expressed using numbers:

- 1. How long do you think this will take?
- 2. What time Thursday do you think is the best time to get this to me?
- 3. How much time do you think you will need for the procedure on this patient?
- 4. When do you think we can discharge this patient?
- 5. When do you think you will be able to send me a draft of this project plan?

Practice Session:

- 1. Can you bring potato salad to my family reunion this Saturday?
- 2. Our bicycle club is doing a 30 mile ride Friday, can you make maps for everyone?
- 3. You are responsible for discharging a young patient with a broken arm now in a cast. Apply the content of this program and tell the mother what she needs to do for her child.
- 4. You want to give someone a research assignment. Think about something you could ask a colleague, resident, intern, medical student, or assistant to research for you. Applying the content of this program, give the assignment.

Practice sharing these skills:

Teach your partner the 4-step flowchart for raising the bar on the handoff:

- Purpose
- Process
- Assess Confidence
- Inquiry

Additional applications:

- Leadership
- Education
- Training
- Coaching
- Parenting



Checking for grasping needs to be a part of every handoff.

Raising the Bar on the Handoff



Dinner and Registration: 5:00 - 6:00 p.m. Program: 6:00 - 8:00 p.m.

9/12/17	Tulsa County Medical Society
9/13/17	Tulsa County Medical Society
9/13/17	OK State Medical Association
9/26/17	OK State Medical Association
9/27/17	OK State Medical Association
9/28/17	Tulsa County Medical Society
10/24/17	OK State Medical Association
10/25/17	Tulsa County Medical Society

Lunch and Registration: 11:00 - 11:45 a.m. Program: 11:45 a.m. - 1:45 p.m.

9/13/17	Tulsa County Medical Society
9/27/17	St. Anthony Hospital, Rapp Conference Center



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Raising the Bar on the Handoff: A communication event between two people resulting in follow-through action(s).

Desired Outcomes

Participants are able to think in the following ways:

- 1. Describe both physical and oral handoffs.
- 2. Reflect upon the physical purposes of oral hand-offs and verbalize outcome oriented objectives.
- 3. Discriminate between expressive and outcome oriented speech.
- 4. Discriminate between the presence or absence of spontaneous evidence of a successful handoff.
- 5. Use cognitive and behavioral prompts for effective inquiry when soliciting evidence of grasping.
- 6. Recognize and describe the futility of questions that ask for yes/no responses. They are non-productive forms of inquiry during handoffs.

Participants are able to take the following actions for maximum handoff success:

- Decide upon desired outcome(s). 1.
- Assess receiver's abilities.
- Engage the other party in the handoff. 3.
- 4. Look for spontaneous evidence of grasping. If this occurs, stop here.
- 5. Follow up using effective inquiry when there is no compelling spontaneous evidence apparent.
- Participants can demonstrate effective handoffs.

Module 1:

The goal of an effective handoff is not to give, but rather for the receiver to get.



Zooming in on physical handoffs:

- Perception •
- Slow motion analysis
- Experiencing physical grasping
- The giver/sender's responsibility to moni-٠ tor/assess grasping

Vocabulary that connects physical and oral handoffs:

- 1. Attention: Caring for and observing the receiver.
- Purpose: Intended outcome or result. 2.
- Performance: Observable behavior. 3.
- 4. **Expressive**: Throwing words into the air without a specific target or purpose.
- 5. **Outcome Oriented**: Sending words in ways they can be caught and used.
- 6. Feedback: Naturally occurring selfcorrecting responses to our behavior.
- 7. Grasping: Successfully catching an object or an idea.
- 8. **Spontaneous Evidence**: Feedback that reveals if the receiver has grasped
- 9. Soliciting Evidence: Follow up inquiry in the absence of spontaneous evidence of grasping.



Module 2:

The result of a handoff flows from the initial thinking of the goal or purpose of the handoff-for the sender to give information or for the receiver to grasp the value and utility of that information.





2

Practice Session:

Practice converting expressive goals to result or outcome driven goals which include indicators of success:

Outcome Goals Expressive Goals ? • Give a compliment Give feedback 2

- ? Explain my reasons ?
- Tell you about a patient ٠
- Explain the bloodwork results ٠

In summary, how do you know when they get it and what are your options if you suspect they are not getting it?

Module 3:

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The speaker, not the receiver, is responsible for monitoring grasping—while speaking. Monitoring grasping during a communication is a skill that we can all develop.

Practice Session:

Monitor your receiver against three levels of attention, while you tell a story.

- Level 3: Receiver is visibly inattentive, distracted, disinterested, even disrespectful.
- Level 2: Receiver is faking it with occasional eye contact and a periodic "yep."
- Level 1: Receiver is sincerely attentive making eve contact, mirroring posture, interrupting with appropriate questions that advance your story.