

Coaching Emotional Intelligence

Scenario 1 – John

Dr. Smith, the program director, has asked John, the program coordinator, to analyze and report on trainee evaluations for the Clinical Competency Committee's (CCC) quarterly meeting. After running reports, John noticed there was a large number of incomplete evaluations, specifically from Dr. Jones, the Associate Program Director. John then emails Dr. Jones requesting that evaluations be complete but receives no response. Afterwards, John realizes Dr. Jones is away at an international conference and will return tomorrow but he then goes right onto a very busy inpatient service. John's deadline is tight and he needs to have the preliminary reports sent to the members of the CCC in a week for them to review for the upcoming meeting.

The following day, John sees Dr. Jones in his office and approaches him requesting the outstanding evaluations be complete. Dr. Jones responds angrily and suggests that he have more time to complete the evaluations and that, in the future, John send more frequent reminders to him to complete evaluations. Dr. Jones ended the conversation stating he would be unable to complete the evaluations in the next week.

John notices that every time he thinks about preparing the preliminary CCC reports he feels anxious. The closer the date comes, the more nervous he gets, disrupting his eating and sleeping patterns.

The day before the preliminary reports are to be sent to the CCC members, John meets with Dr. Smith to explain that there is critical information missing from the report. Dr. Smith wants to know specifically why evaluations weren't completed. John explains that Dr. Jones has not completed a single evaluation of the trainees over the past quarter. Dr. Smith demands that John work with Dr. Jones on completing all outstanding evaluations before the preliminary report is sent to the CCC members.

John prints out the outstanding evaluations for Dr. Jones and brings them to him on the inpatient service. John explains that Dr. Smith wants him to complete the evaluations before the preliminary reports are sent to the CCC members. Irrate, Dr. Jones takes all of the evaluations from John and starts randomly checking boxes and scoffing out loud, ridiculing John. Once complete, Dr. Jones dismissively hands John the evaluations.

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Scenario 2 – Sandra

Sandra has been a fellowship program coordinator for three weeks when she received an email from her supervisor, Debbie, informing her Human Resources was working on job reclassification. Sandra originally accepted the position with the understanding that fellowship coordination would be 75% of her effort, and 25% of her effort would be to support the division chief. Debbie explained that her position would be reclassified as an Administrative Associate (AA) because her jobs functions were, “similar to other AA’s at the University.”

Sandra, upset by the email quickly replied indicating her dissatisfaction with this decision and that she felt like the reclassification was unjust. She also stated that Debbie should have been forthcoming about the job reclassification when she interviewed for the position.

Debbie met with Sandra immediately, informing her that her email was unprofessional and that this issue is beyond her control.

Unsatisfied, Sandra met with the program director, Dr. Doe, to ask if anything could be done regarding the reclassification. Dr. Doe, unaware of the event and little time to talk suggested that Sandra speak to the Graduate Medical Education (GME) office.

Sandra then emailed the GME office to ask for help to handle the situation. After a week, frustrated by not receiving a response, Sandra went to the GME office to speak with Human Resource specialist who offered little advice. Sandra felt hopeless and backed into a corner.

Debbie informed Sandra that the job reclassification would go into effect in two months and that if she felt that dissatisfied with the situation, perhaps she should consider looking at other positions.

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Scenario 3 – Stephanie

In July, Stephanie, a program coordinator, learned that one of her trainees would be taking a maternity leave of absence in October. She immediately contacted the Graduate Medical Education (GME) office to begin the process for on call coverage. The GME office responded to Stephanie with the necessary paperwork to complete, as well as a timeline. The GME office required that all paperwork be submitted within 60 days of the need for on call coverage. Aware of this timeline, Stephanie made sure to have all paperwork completed and submitted by the first-week of August.

After three weeks had passed, Stephanie sent an email to the GME office inquiring the status of the on call coverage request. No reply was received.

At the monthly coordinators meeting in mid-September, Stephanie inquired about the status of on call coverage but was told the process is currently being reviewed and may change. Frustrated, Stephanie sent an email to Julie, the DIO and head of GME, requesting a status update on the request submitted in August. Julie responded, "The request is on the agenda for the next Graduate Medical Education Committee (GMEC) meeting in October."

Dr. Andrews, the program director, asked to meet with Stephanie to discuss on call coverage for October. Stephanie explained to Dr. Andrews the process and challenges she was facing with getting a response from the GME office. Dr. Andrews insisted that Stephanie figure out a solution, fast, since the on call coverage schedule for October needed to be finalized in a week. Stressed by the situation and unresponsiveness from the GME office, Stephanie drafted the on call schedule for October with the additional coverage not yet approved by the GMEC.

The day after the scheduled GMEC meeting, Stephanie sent a follow-up email to the DIO regarding the on call coverage. Again, no reply was received. The on call coverage schedule Stephanie had drafted was circulated to the entire division, with the unapproved coverage.

Weekly, Stephanie sent emails to the GME office regarding the on call coverage request. Since the shifts had and were already covered, Stephanie needed to figure out how to get compensation to the trainees who covered the additional shifts.

Finally, at the end of December an email was sent to all coordinators at the institution to explain the new policy and procedure for requesting on call coverage.

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Scenario 4 – Angela

In December, Angela was recruited as the senior program coordinator for a large training program. She had come from a neighboring institution, *Fictitious University*, with eight years of experience and now would be working with a staff of two, Tom and Susan, who have been with the program for over three years. In January, the program director, Dr. Richards, met with Angela and asked her to prepare for the program's Annual Program Evaluation retreat that is scheduled for mid-June. Afterwards, she set up a meeting with her colleagues, Tom and Susan, to plan for the retreat.

Angela began the meeting with a general timeline of events that needed to take place and information that needed to be gathered for the retreat. Angela quickly delegated responsibilities and was about to end the meeting with little input from her colleagues. Tom interrupted and suggested that Angela understand what the program historically done to coordinate and prepare for the annual retreat. Angela was dismissive and explained that this is how it was done at *Fictitious University*.

Afterwards, Tom, feeling dissatisfied, met with the division manager to share his feelings about the meeting and Angela. The division manager stopped Angela in the hall and told her about the conversation she had with Tom and suggested that she meet with him one-on-one.

Angela, frustrated, stormed to Tom's desk and demanded to know why he didn't come to her with his grievances. Tom retreated, apologizing for not approaching Angela first. Susan, witnessing the entire incident was shocked. After that incident, Tom and Susan avoided Angela, if possible. From that point on they complied with her requests but didn't feel invested in their work.