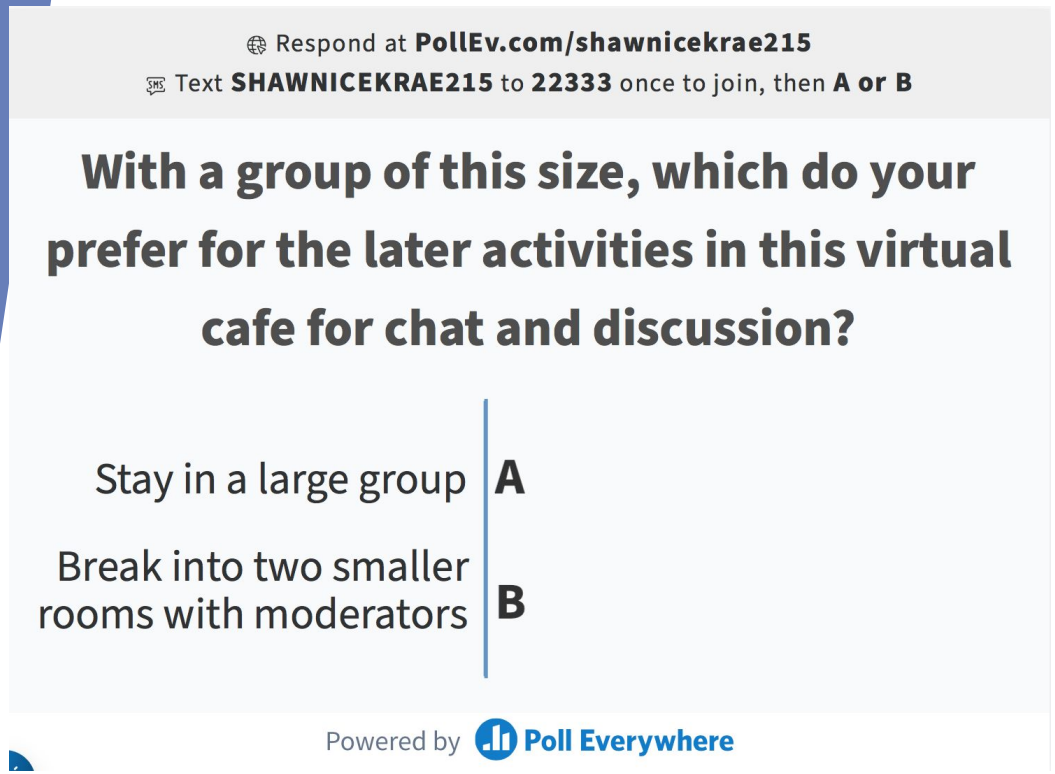
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WELCOME! THANK YOU FOR BEING HERE!



DROP THIS IN THE CHAT:

WHAT ARE SOME WORDS THAT DESCRIBE HOW YOU FEEL WHEN HAVING A DIFFICULT CONVERSATION WITH A RESIDENT?

Association of Pediatric Program Directors

APPD CREC VIRTUAL CAFE

“Chiefing 102”: Having Difficult Conversations with Residents as You Transition from Peer to Leader

September 19, 2022

Association of Pediatric Program Directors

OBJECTIVES

- Identify challenges in communication as Chief Residents.
- Discuss a framework for how to approach challenging conversations.
- Practice using communication skills in approaching challenging conversations.

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WELCOME FROM THE CHIEF RESIDENT EXECUTIVE COMMITTEE (CREC)!

PURPOSE

The Committee is formed to represent the interests of the Chief Resident members of the APPD, including, but not limited to:

- Chief Resident professional development as educators, administrators, leaders, and clinicians
- Resident education
- Resident wellness

CREC LEADERSHIP

Faculty Leads



Blair Dickinson, MD, MS
St. Christopher's Hospital for Children



Jay Homme, MD
Mayo Clinic

Faculty Mentors



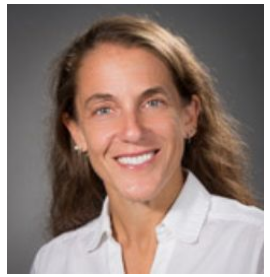
Alisa Acosta, MD
Baylor College of Medicine



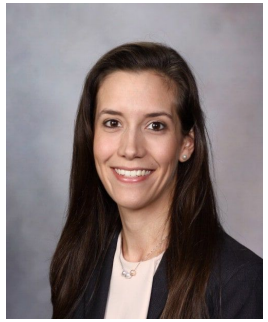
Eric Zwemer, MD
UNC Health



Sophia Goslings, MD
University of South Alabama



Cheryl Taurassi, MD
Cohen Children's Medical Center



Margarita Corredor, MD
University of Rochester Medical Center

APPD CREC 2022-2023



Chair: Zuri Hudson, MD

Chief Resident
Children's Mercy Hospital



Vice Chair: Ryan Lion, MD
Chief Resident
Stanford University



Secretary: Libby Ireson, MD

Chief Resident
Cincinnati Children's Hospital Medical Center



Member-at-Large: Taylor Olian, DO

Chief Resident
Jersey Shore University Medical Center



Member-at-Large: Matthew Present, MD

Chief Resident
Univ. of Rochester Medical Center



Member-at-Large: Kristin Sundy-Boyles, MD

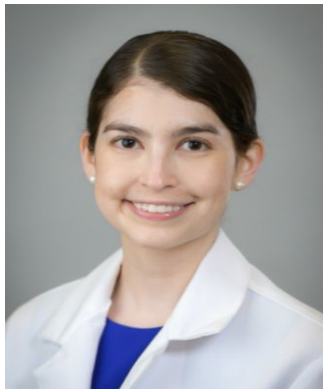
Chief Resident
Nationwide Children's Hospital

APPD CREC 2021-2022



Chair: Leah Heidenreich, MD

Former Chief Resident
Mayo Clinic



Vice Chair: Sarah Soffner, MD, MPH

Former Chief Resident
UT Southwestern



Secretary: Shawnice Kraeber, MD

Former Chief Resident
Kaiser Permanente NorCal



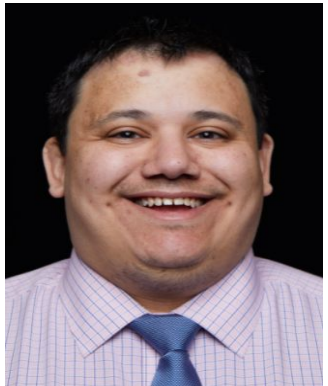
Member-at-Large: Samara Jinks-Chang, MD, MPH

Former Chief Resident
Seattle Children's Hospital



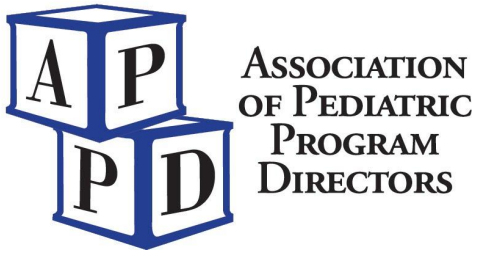
Member-at-Large: Molly Mack, MD

Former Chief Resident
Univ. of Pittsburgh Medical Center



Member-at-Large: Robert Trevino, MD, PhD

Former Chief Resident
Univ. of Illinois - Peoria



COMMUNICATION

COMMUNICATION

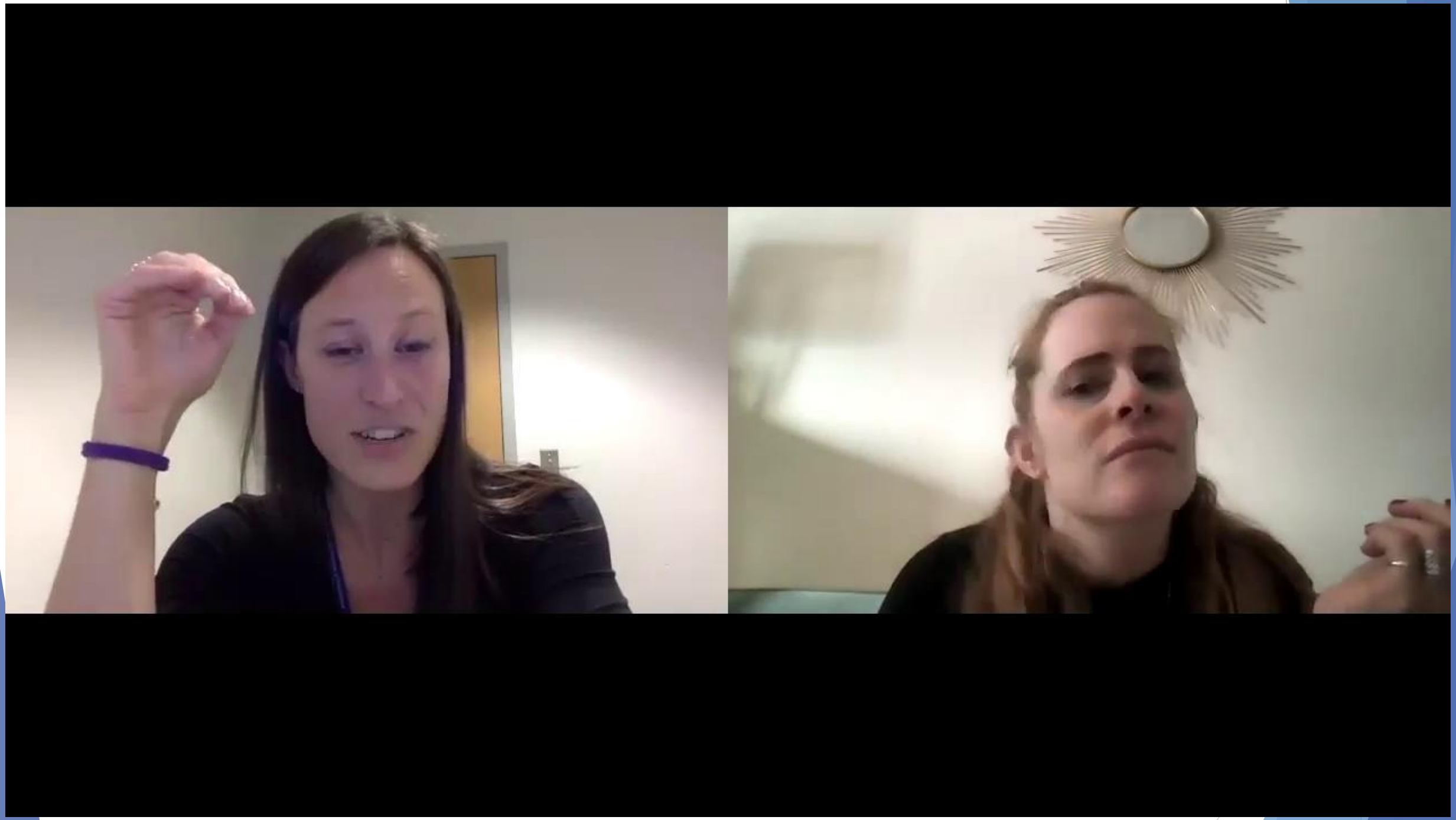
A CORE SKILL FOR CHIEF RESIDENTS

- Sharing important information
- Communicating program needs
- Advocating for residents' needs and concerns
- Facilitating communication among peers, faculty, and program









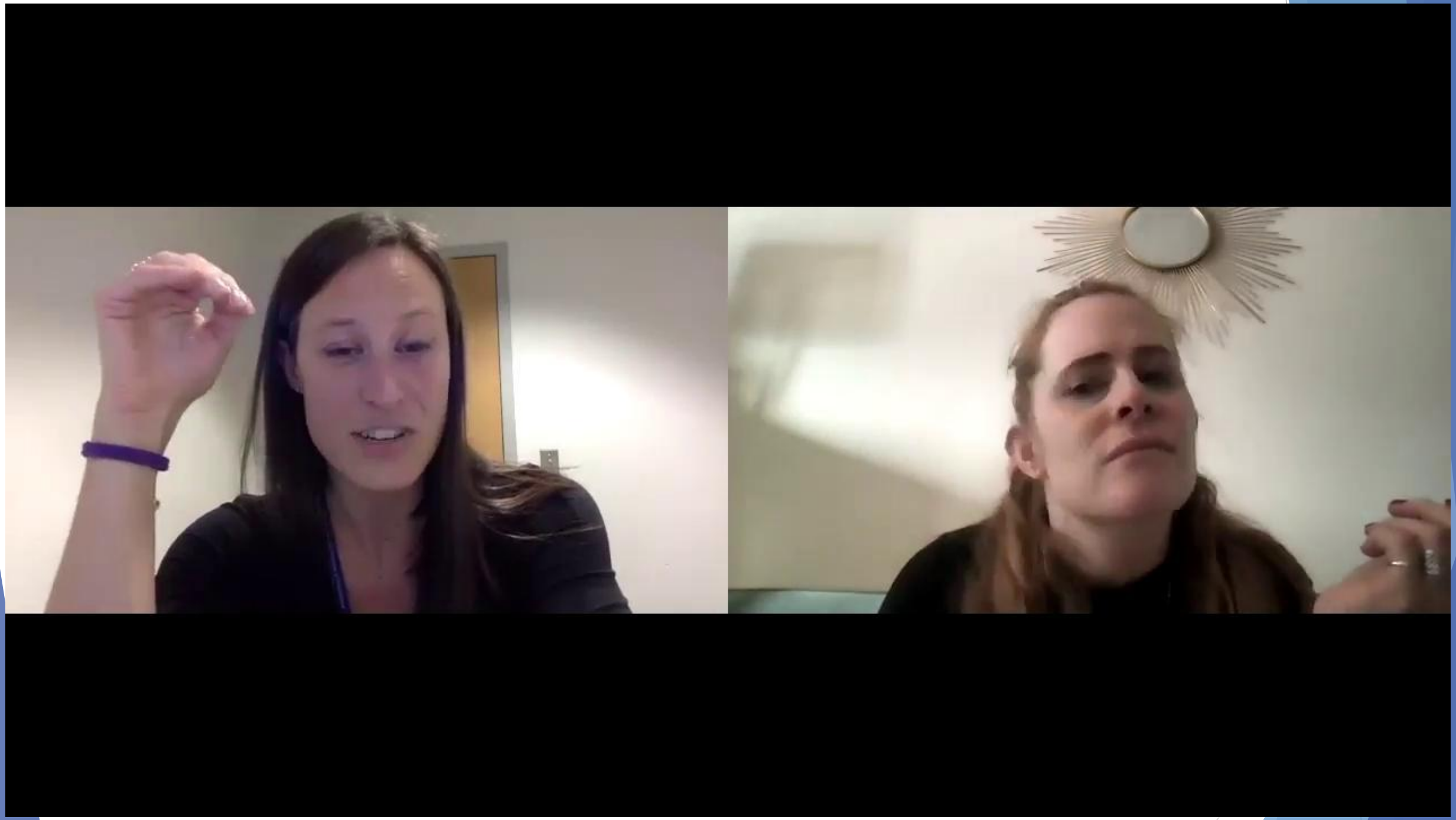
VIDEO REFLECTION

HOW DID THAT CONVERSATION GO?

Please share in chat or unmute yourself:

- What worked well?
- What did not work well?
- Any other thoughts or reflections?





VIDEO REFLECTION

HOW DID THAT CONVERSATION GO?

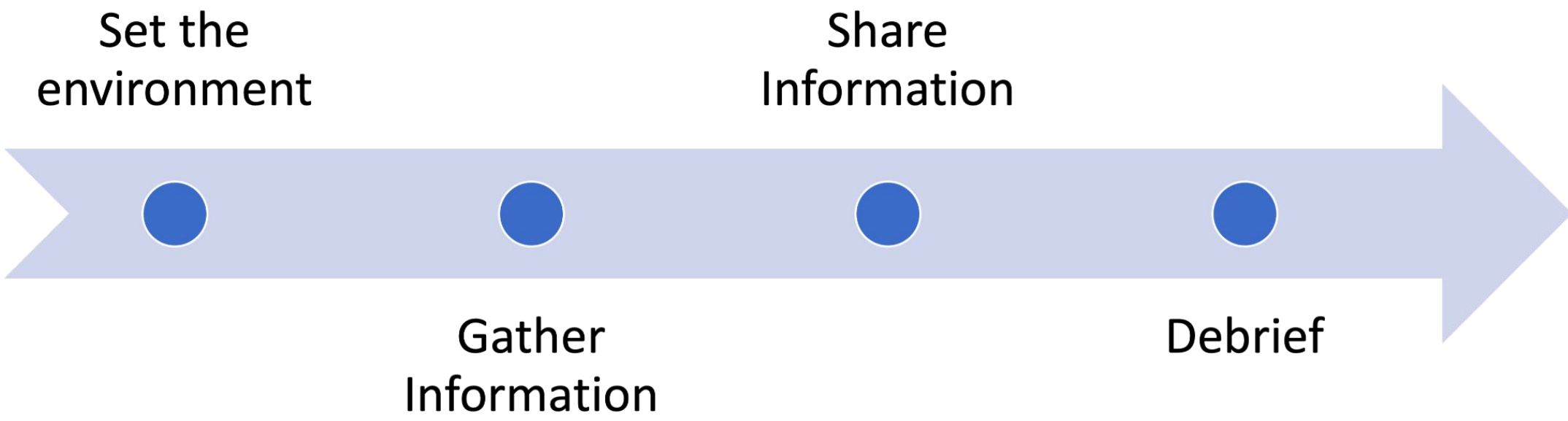
Please share in chat or unmute yourself:

- What worked well?
- What did not work well?
- Any other thoughts or reflections?



PLANNING DIFFICULT CONVERSATIONS

A ROAD MAP



SETTING THE ENVIRONMENT

- In person vs. phone vs. Zoom
- Find coverage for your pager
- Who should be part of the conversation?
  - One-on-one
  - Other parties affected
  - Program leadership
- Wire your brain for positivity!
  - Imagine how things could go as WELL as possible!



GATHERING INFORMATION

PREPARING THE MESSAGE



- What information will be discussed? Will background information be needed?
- Who should you talk to before the discussion?
- What information needs to be documented?

SHARING INFORMATION

DELIVERING THE MESSAGE



SHARING INFORMATION

RESPONDING TO EMOTION



Back, Anthony, and Robert Arnold. *Mastering communication with seriously ill patients: balancing honesty with empathy and hope*. Cambridge University Press, 2009.

DEBRIEFING

CHECK IN ON YOURSELF, EACH OTHER

Check-in: How are YOU doing?

Take some time for yourself

- After a challenging conversation
- To think about a situation
- When you need it

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Breakout Rooms: Working through Challenging Conversations

CASE 1: NEED FOR BACKUP

It's New Year's eve, and one of your residents, Charlie, paged you this morning indicating they were vomiting, had fever, and diarrhea, with sudden onset the day before. You see that on backup is your friend Alex, a PGY3 who told you they "really hoped they would not get called for backup this weekend, as [they] have tickets for a New Year's Eve concert that day."

Later in the day, you get an angry set of messages from Alex, who saw on IG that Charlie had attended that same event and was posting it on Instagram instead of working the scheduled shift.

What setting would be best for this conversation?
How would you approach the situation?
Do you need any additional information?
Do you need to involve anyone else in the conversation? If so, who?

CASE 2: COVID-19 POLICY CHANGES

The hospital where you work recently indicated that due to social distancing restrictions, only half of the team is now allowed in the inpatient floor at any given time, and there is also now 24 hour coverage needed at all times. This change would require you to split the team in half, but also change their hours dramatically, with some residents doing nighttime hours and possibly needing additional coverage from residents previously on elective.

What setting would be best for this conversation?
How would you approach the situation?
Do you need any additional information?
Do you need to involve anyone else in the conversation? If so, who?

CASE 3: INTERPERSONAL CONFLICT

You are in your office when the attending on the inpatient team comes in and closes the door to speak with you privately. He shares that one of the residents has been coming in late to rounds and also has missed important orders for patient care. Most recently, the resident got into a verbal altercation with another resident in the team after a patient was discharged later than expected. When you ask if the attending spoke with the residents involved, he said that he wanted you to have that conversation.

What setting would be best for this conversation?
How would you approach the situation?
Do you need any additional information?
Do you need to involve anyone else in the conversation? If so, who?

CASE 4: RESIDENT REQUEST

One of your residents approaches you requesting to change a Gen Wards month for an elective month. They've already found another person they could switch with, although it would require the other resident to do 5 inpatient blocks in a row. The resident mentions the other resident is ok with the switch. The new block starts in 2 weeks.

What setting would be best for this conversation?
How would you approach the situation?
Do you need any additional information?
Do you need to involve anyone else in the conversation? If so, who?

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Regroup:
Lessons Learned

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KEEP IN TOUCH!

PLEASE JOIN THE APPD CREC CHIEF RESIDENT PEER MENTORSHIP NETWORK! MEET OTHER CHIEF RESIDENTS, DISCUSS COMMON CHALLENGES, AND BRAINSTORM SOLUTIONS!

Chief Resident Peer Mentorship Network