

# **Do We Have to Talk About It? Leveraging Emotional Intelligence and Navigating Crucial Conversations**

# Meet the Faculty

**Shelby M. Albertson, PharmD, BCACP**

Clinical Pharmacy Specialist – Ambulatory Care  
Eskenazi Health

[shelby.albertson@eskenazihealth.edu](mailto:shelby.albertson@eskenazihealth.edu)

**Todd A. Walroth, PharmD, BCPS, BCCCP, FCCM**

Pharmacy Manager – Clinical Services  
Eskenazi Health

[todd.walroth@eskenazihealth.edu](mailto:todd.walroth@eskenazihealth.edu)

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# Learning Objectives

1. Describe the four domains of Emotional Intelligence (EQ)
2. List the nine dialogue skills of Crucial Conversations
3. Apply self-assessment, emotional intelligence, and crucial conversation principles to various precepting scenarios

# Activity 1: Emotional Self-Reflection

## Precepting Scenario

You are on rounds with an interdisciplinary Internal Medicine service that is post-call. You have a PGY2 IM pharmacy resident with you on rotation. During a patient presentation, the medicine intern incorrectly says the patient was taking **NPH 50 units Q12hrs** at home and wants to restart this dose.

You noticed in the EMR that according to the medication history from the pharmacy technician in the ED last night, the patient is only taking **NPH 15 units Q12hrs**. You politely bring this up on rounds hoping to prevent harm to the patient.

# Activity 1: Emotional Self-Reflection

## Precepting Scenario

The attending physician tells you not to interrupt the medical intern during a patient presentation and that they are going to start NPH 50 units Q12hrs since that is what the intern would like to order. The intern proceeds to say **incorrect doses** for the patient's home **warfarin** and **lisinopril**.

***Reflect on this scenario. What type of emotions would you experience and how would you respond to this situation?***

# Activity 1: Emotional Self-Reflection

## Precepting Scenario

***Reflecting on this scenario, please take a few minutes to answer the following questions on the handout provided:***

1. As you think about this situation, what physical reactions do you experience in your body?
2. What are 2-3 key emotions around this situation?
3. What are your thoughts about the situation, yourself, and the other person involved?

# Emotional Intelligence (EQ)

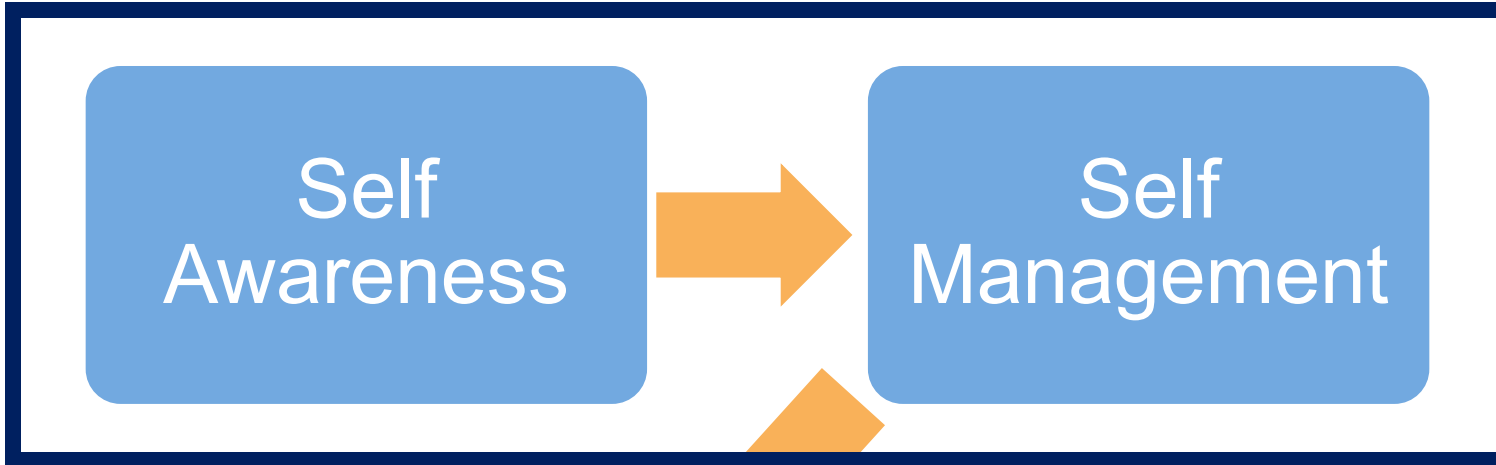


# EQ Defined

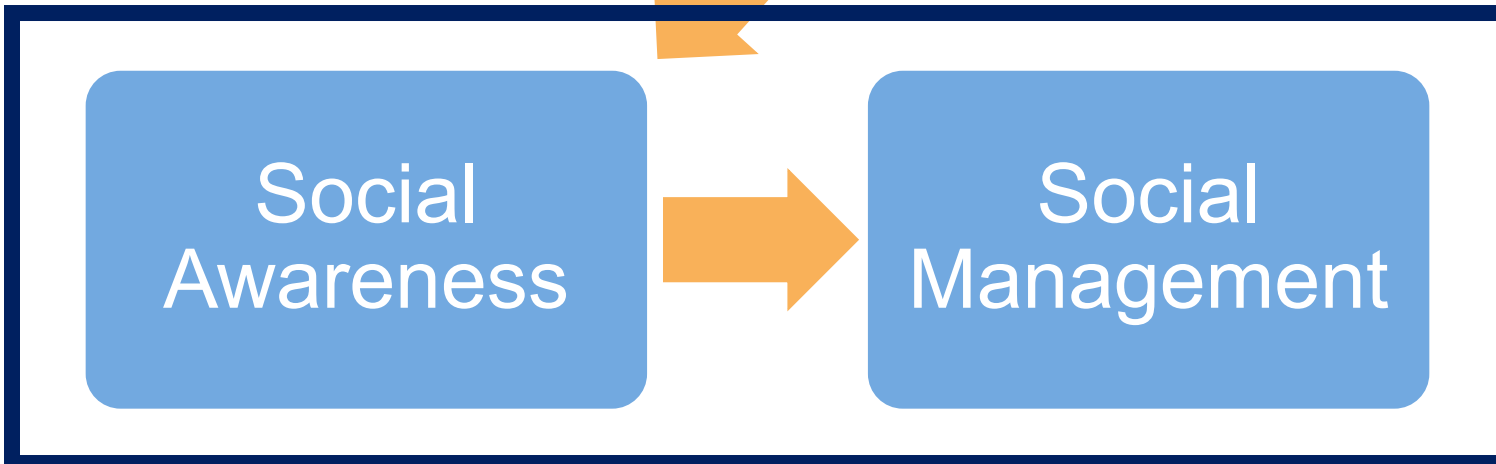
“Your ability to recognize and understand emotions in yourself and others, and your ability to use this awareness to manage your behavior and relationships.”

# EQ Framework

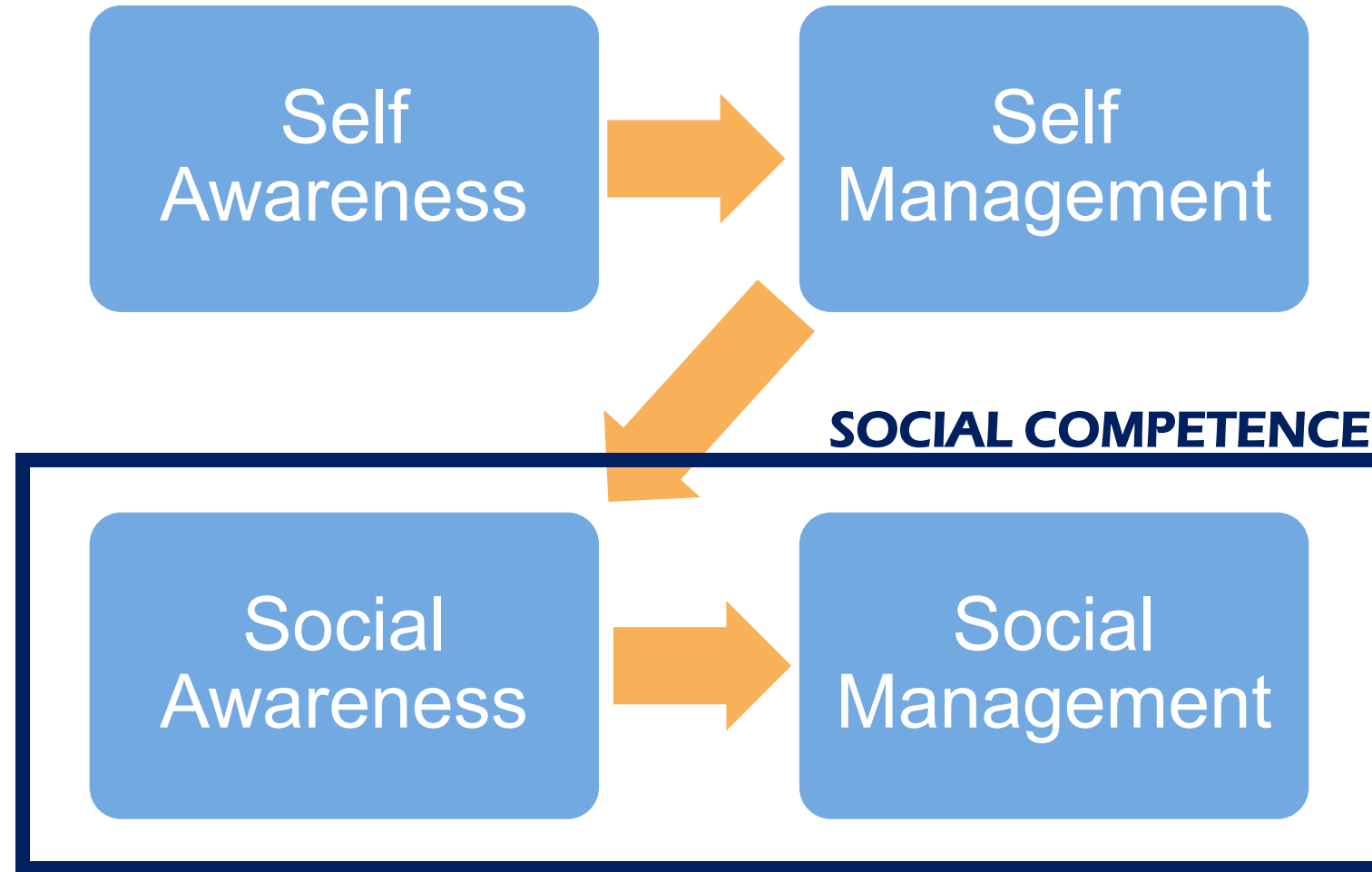
## PERSONAL COMPETENCE



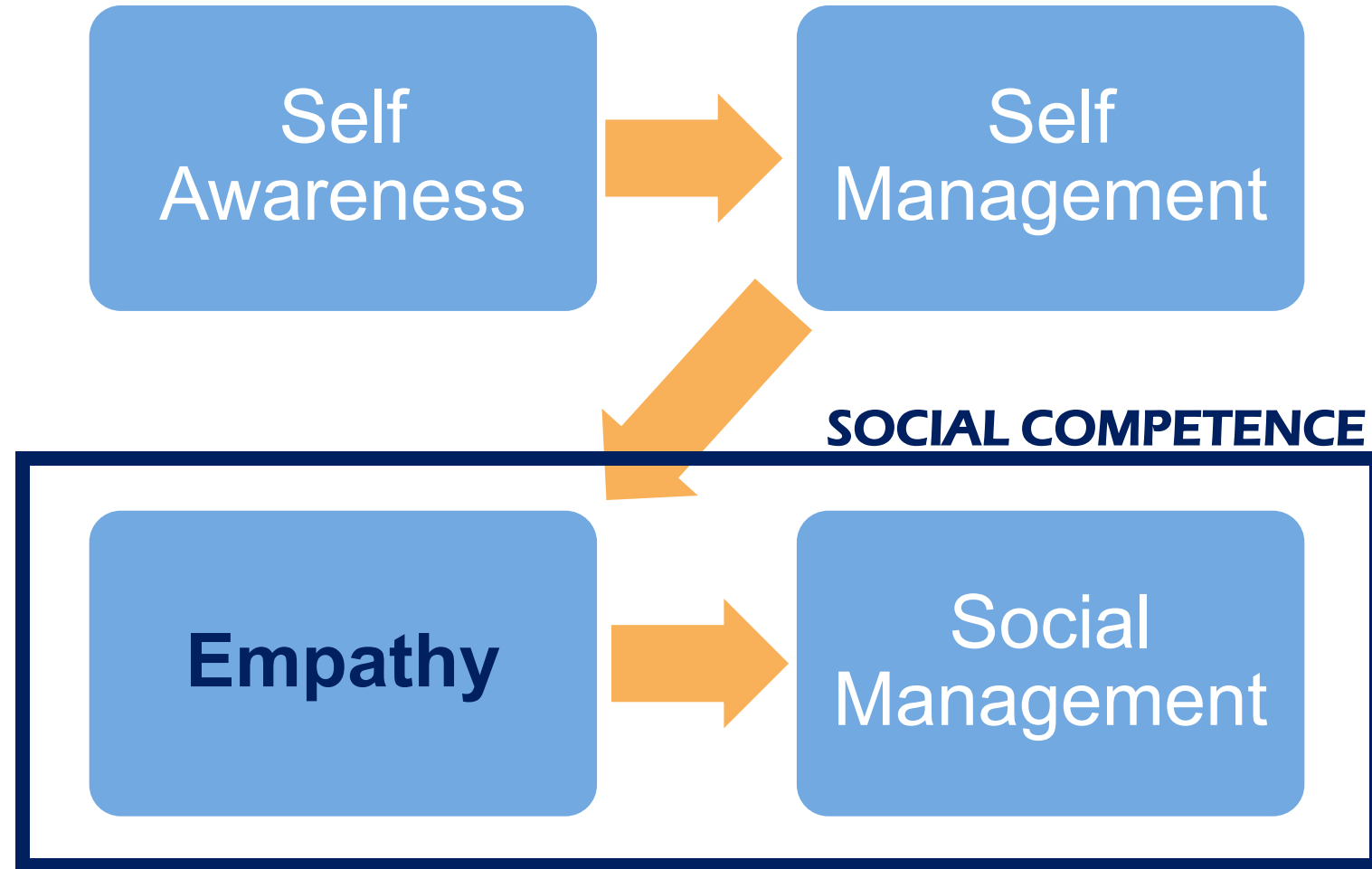
## SOCIAL COMPETENCE



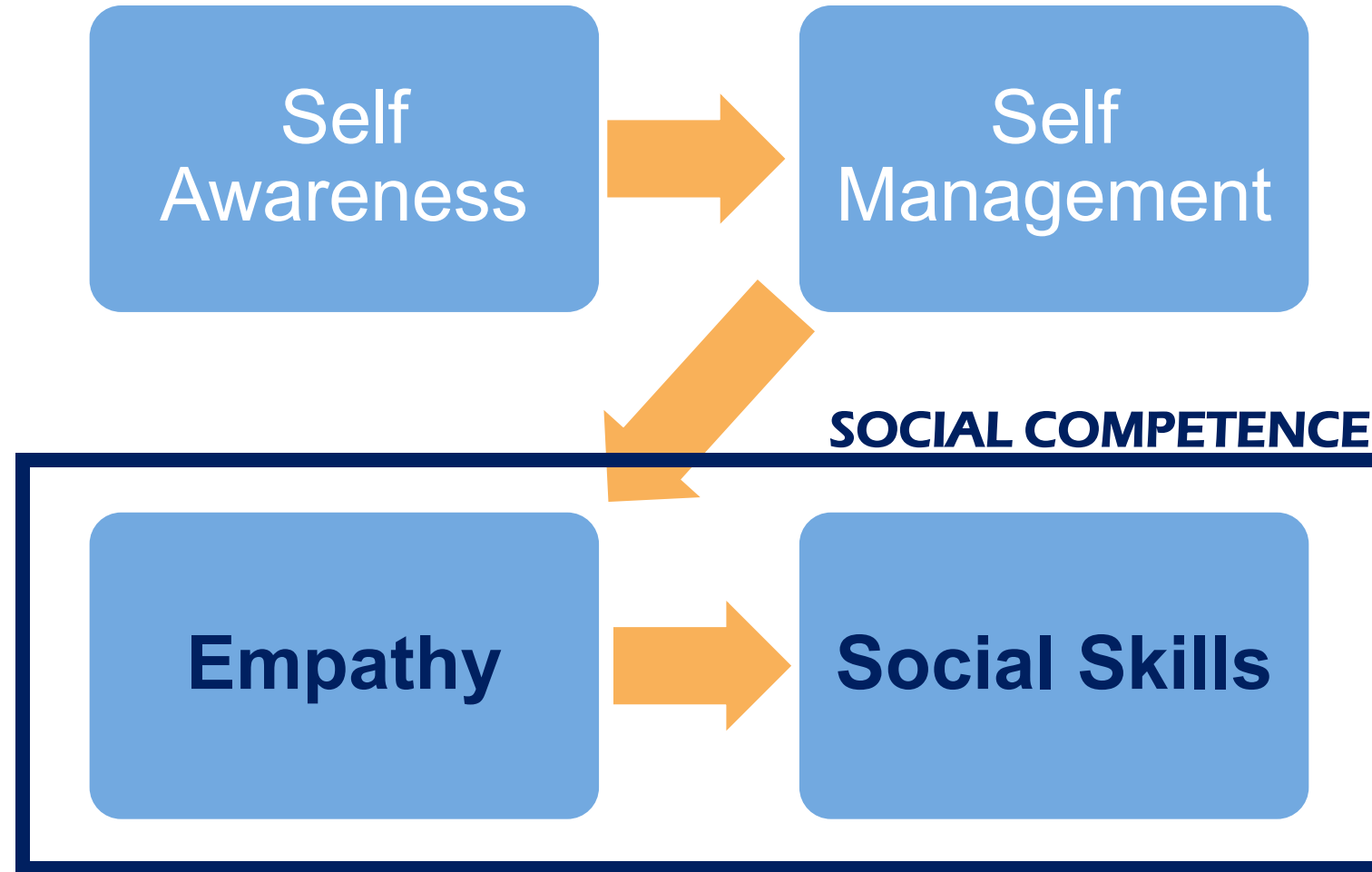
# EQ Framework



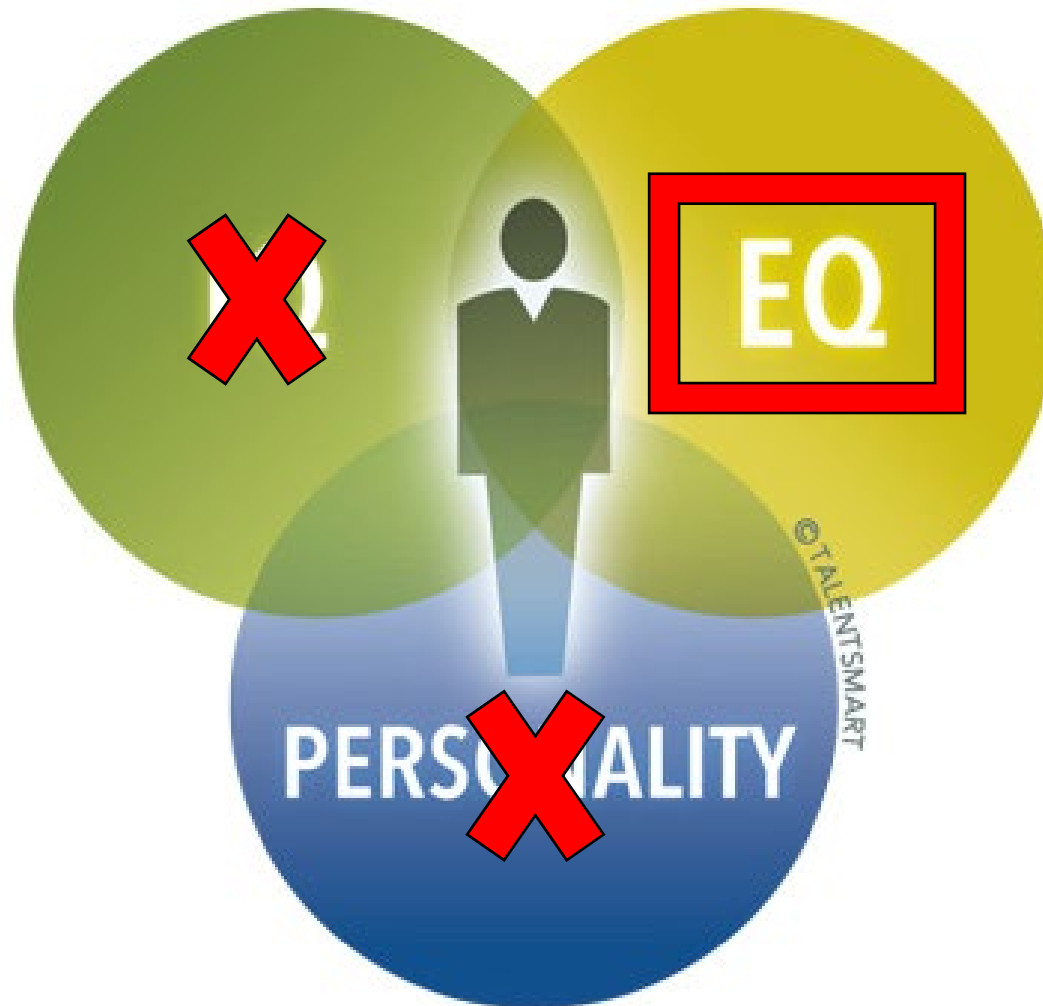
# EQ Framework



# EQ Framework



# What's Your EQ?



# What's Your EQ?

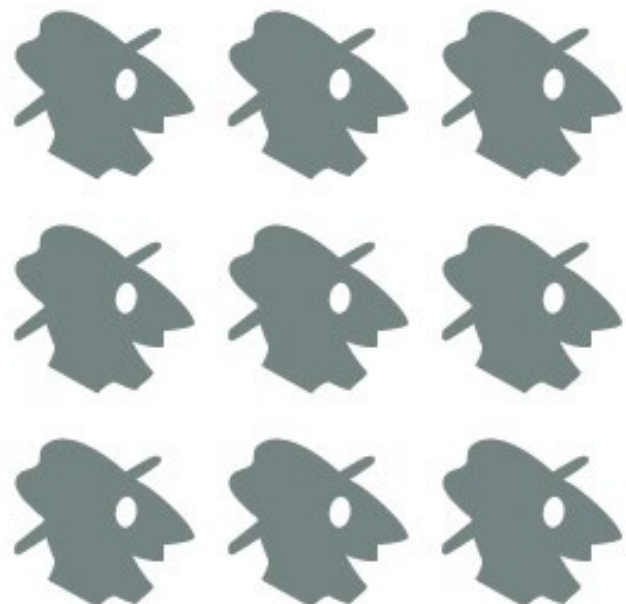
- “Emotions can help you and they can hurt you, but you have no say in the matter until you understand them.”
- Only 36% of over 500,000 people tested are able to accurately identify their emotions as they happen
- Good decisions require more than factual knowledge (self-knowledge and emotional mastery should be employed when they are most needed)
- Emotional intelligence can be learned with time and commitment

# EQ & Learners

- ACPE standards require colleges of pharmacy to include activities that allow student pharmacists to become self-aware, collaborative leaders
- In one study, P1 student pharmacists completed a Self-Awareness Outcomes Questionnaire (SAOQ) before and after a 4-hour EQ workshop
- Self-awareness increased ( $p < 0.001$ ), without change in emotional cost ( $p = 0.300$ )
- EQ can improve with education, making this an important topic to share with our students and residents



# EQ Affects Performance



90%

*of top performers  
have high EQ*



*EQ is responsible for*

58%

*of your job  
performance*



\$29,000

*People with high EQ  
make \$29,000 more  
annually than their  
low EQ counterparts*

# EQ & Pharmacy

## Haguchi Y, et al.

- EQ positively impacts **empathetic behaviors** in hospital pharmacists, which can improve patient interactions
- Positive correlation between EQ and **entrepreneurial orientation** in community pharmacists

## Frenzel JE.

- Higher EQ correlated with **risk-taking, innovation, proactiveness, and autonomy** among community pharmacists

## Malik M, et al.

- Positive correlation between EQ and pharmacists' **motivation levels**, leading to a higher overall provision of care
- Pharmacists displayed higher levels of **self-awareness, self-motivation, and social skills** compared to other healthcare professionals

## Hall CM, et al.

- Additional training programs may have a **positive impact on development of EQ** for pharmacy leaders in various care settings

# EQ & Pharmacy (cont.)

- Only 4 studies (0.19%) were included out of 2089 obtained from search
- Further research is needed (e.g., longitudinal, pre/post assessments, etc.)
- As pharmacists continue to be more involved in providing patient-centered care, they need to upgrade their skill sets to include EQ
- Processes and resources need to be developed:
  - Pharmacy School curriculum
  - Ongoing CE/Professional development programs

# Our Emotions

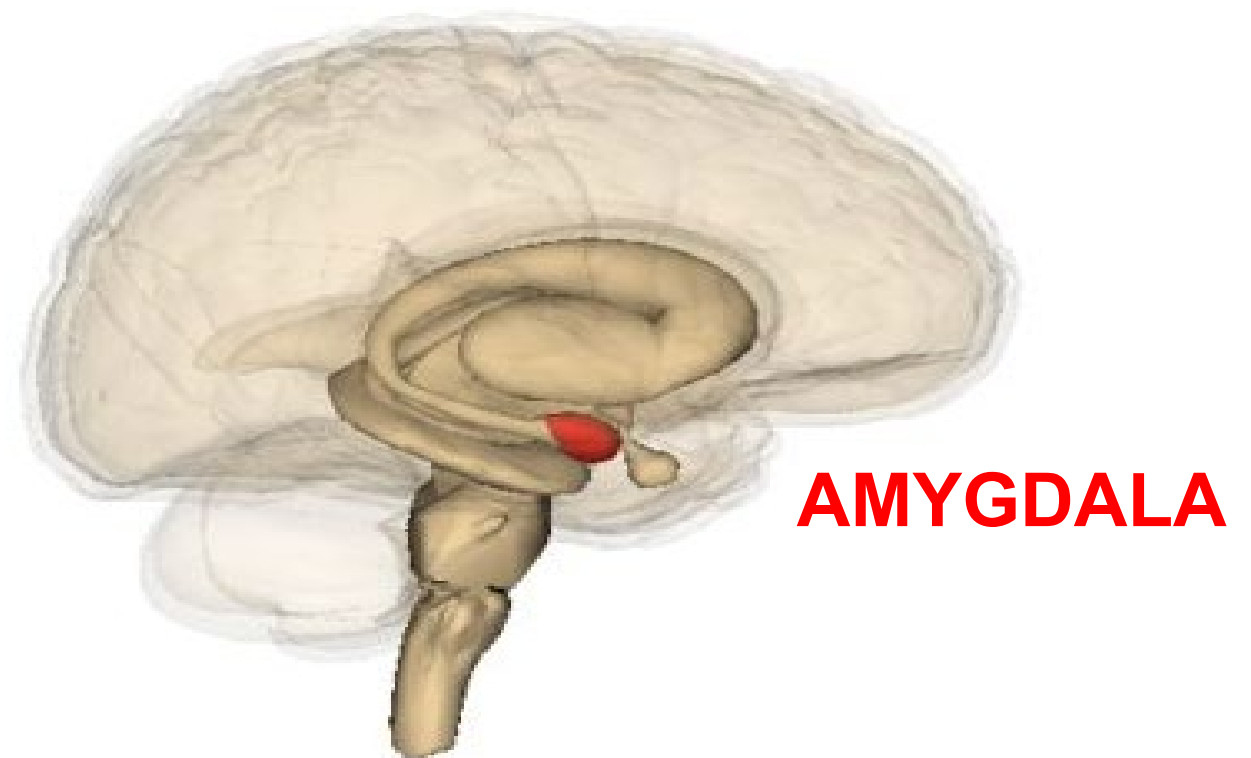
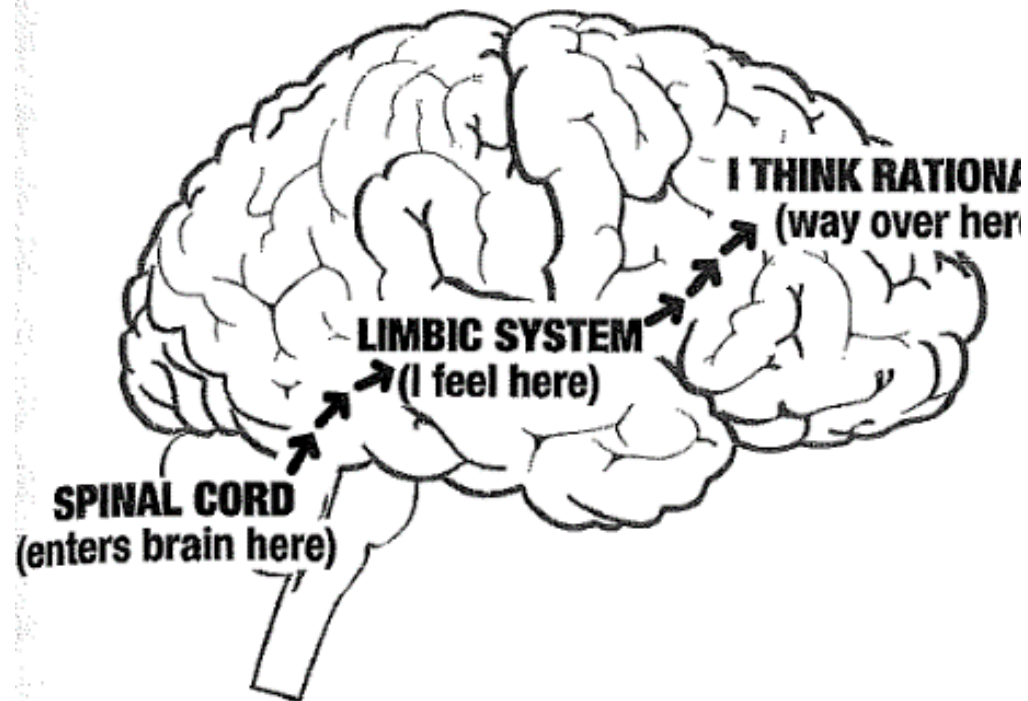
- We have so many words to describe our feelings
- We are subject to a constant stream of emotions throughout the day
- All emotions are derivations of five core feelings:
  - Happiness
  - Sadness
  - Anger
  - Fear
  - Shame
- We have emotional reactions to almost *everything* that happens in our lives



# Emotional Pathophysiology

- Reason vs. emotion
- Fight-or-flight response
- Communication between your rational brain vs. your emotional brain is the physical source of emotional intelligence

# Emotional Pathophysiology



# Amygdala Hijack

- *“An immediate and overwhelming emotional response out of proportion to the stimulus because it has triggered a more significant emotional threat”*

# Don't Get Hijacked!



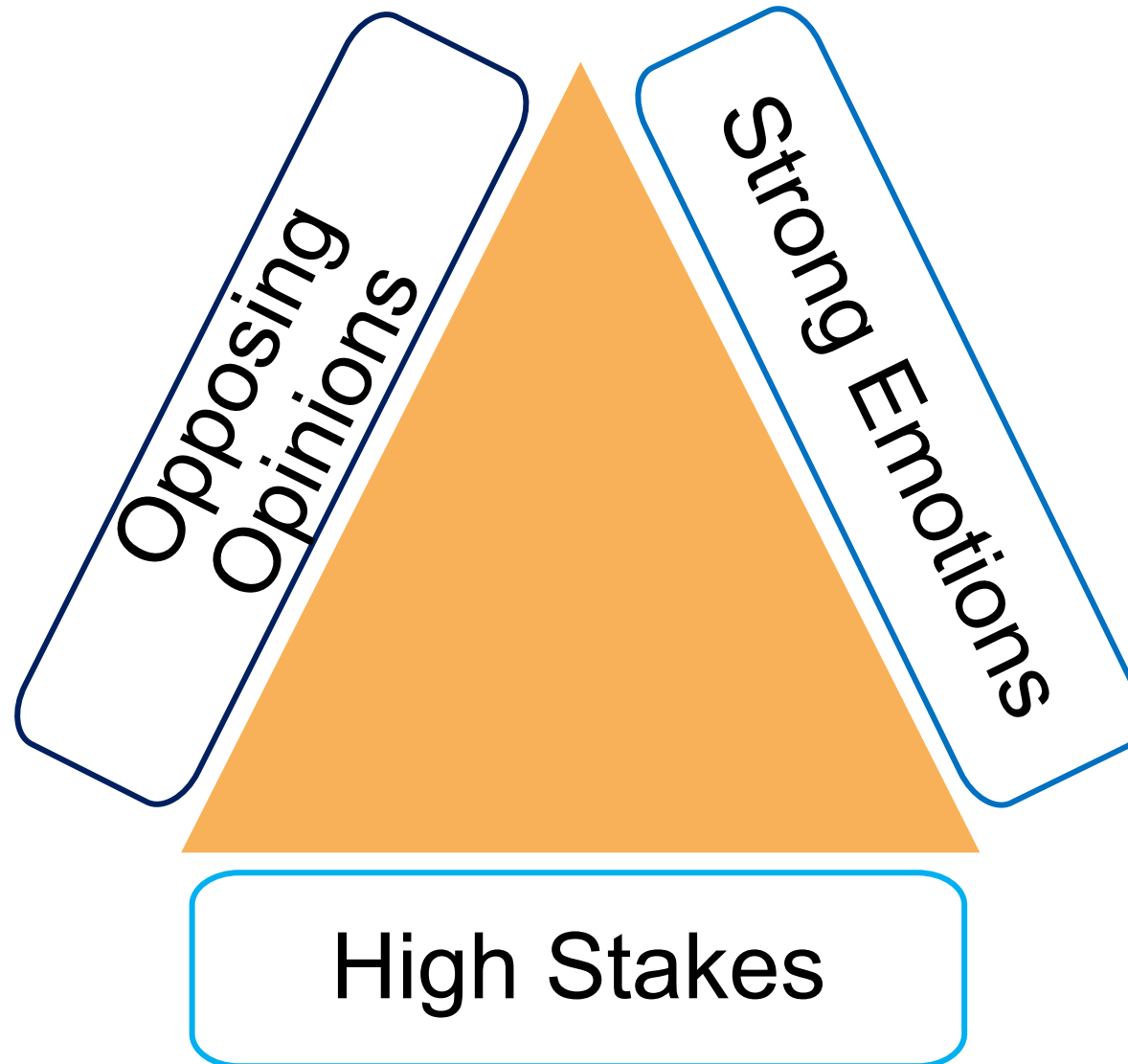


## Activity 2: Self-Reflection (Triggers/Amygdala Hijack)

1. Who triggers an amygdala hijack for you?
2. What situations trigger your amygdala hijacks?
3. What mental/emotional response do you have?
4. If you could observe this situation from a 3<sup>rd</sup> party point of view, what do you think you would see?

# Crucial Conversations

# Crucial Conversations



# Common Examples

Breaking up

Overbearing  
in-laws

Healthcare  
team

Repaying a  
loan

Unfavorable  
eval

Substance  
abuse

Bad feedback  
to boss or  
preceptor

Conversations  
with learners

Lazy  
teammates

# Crucial Conversations

- When the three conditions are met, *casual* conversations transform into *crucial* ones
- Effects of conversations gone bad can be both devastating and far reaching
- Stakes can start out fairly low → time and growing emotions lead to damaged relationships (high stakes)
- Strong relationships depend on our ability to talk openly about high-stakes, controversial topics

# How Do We Handle Them?

- We can avoid them **F**
- We can face them + handle them poorly **C-**
- We can face them + handle them well **A+**

***At the heart of most problems lie crucial conversations that we are either not holding or not handling well... we owe it to each other to skillfully navigate them.***

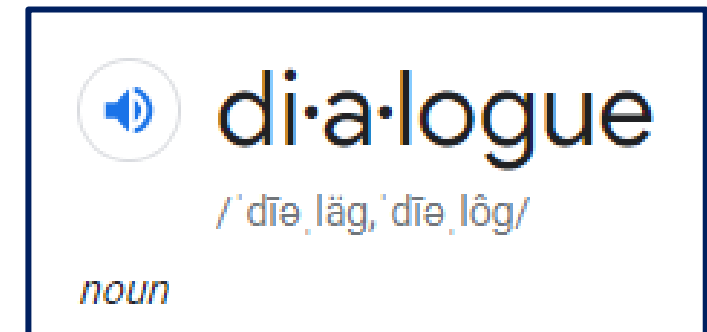
# Measures of Success

- Failing a crucial conversation can affect every aspect of our lives: careers, communities, relationships, health
- Save over **\$1500** and an **8-hour workday** for every Crucial Conversation employees hold rather than avoid
- Respond **5 times faster** to financial downturns
- **Two-thirds more likely** to avoid injury/death due to safety concerns
- Better **health** (strengthen immune system, less major diseases)
- Improved **relationships** and **quality of life**

# The Power of Dialogue

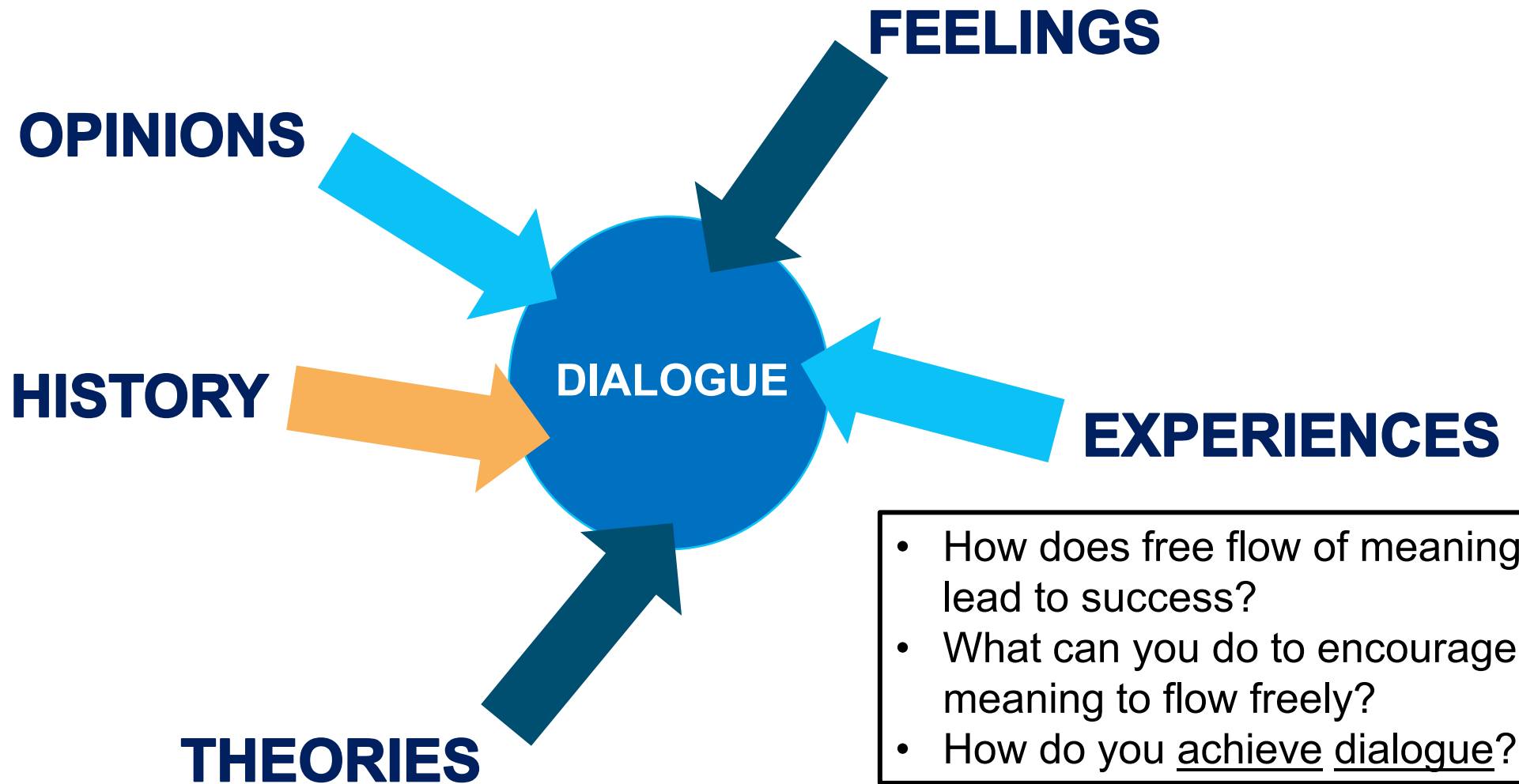
**“The free flow of meaning between two people”**

- All relevant ideas are out in the open
- Free flow of information
- Openly and honestly express opinions and feelings
- Willing to share controversial or unpopular views
- Safe environment
- Mutual respect





# Achieving Dialogue



- How does free flow of meaning lead to success?
- What can you do to encourage meaning to flow freely?
- How do you achieve dialogue?

# Getting it Right (or Wrong)

EVERYONE  
CONTRIBUTES

- Smarter decisions
- Everyone understands
- Unified
- Committed

- Not everyone agrees
- People maintain their own opinions
- Criticism
- Resent outcome

NOT EVERYONE  
CONTRIBUTES

# 9 Dialogue Skills

**Choose Your Topic**

**Start with Heart**

**Master my Stories**

**Learn to Look**

**Make it Safe**

**S.T.A.T.E. my Path**

**Explore Others' Paths**

**Retake your Pen**

**Move to Action**

# Pharmacy Resources

- ASHP and CSHP provide pharmacy-specific resources and systematic approaches
- Tools and techniques for self-awareness and communication for crucial conversations
- Impacts learners, employees, preceptors, supervisors, and healthcare teams

Identify common goal

Determine problem

Explore options

Review pros and cons

Make a decision

# Learn to Look

## *How to notice when safety is at risk*

- Are you in or out of dialogue?
- Look at: 1) **content** and 2) **conditions**
- Recognize Crucial Conversations → look for that moment when things become *crucial*
  - Physical signals
  - Emotions
  - Behavioral cues
- Learn to watch for safety problems
  - When it's safe you can say anything
  - When it's unsafe you start to go blind
- Watch for others moving toward Silence or Violence

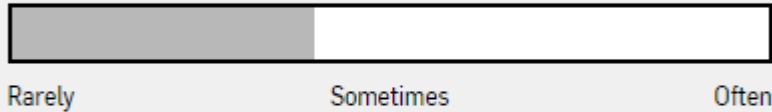
# Activity #3: Self-Assessment

- Identify a relationship
- Identify a tough circumstance
- Apply those to each of the statements listed (T/F)

<https://www.vitalsmarts.com/style-under-stress-assessment/>

# Style Under Stress Score

*How often do you move towards silence?*

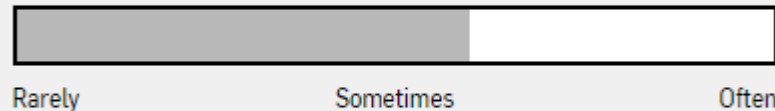


Silence Score Breakdown

- Masking: 0
- Avoiding: 1
- Withdrawing: 2

3

*How often do you move towards verbal violence?*



Verbal Violence Score Breakdown

- Controlling: 1
- Labeling: 2
- Attacking: 1

4

- **HIGHER = WORSE!**
- **Silence and Violence are each out of 6 points total**
- 2 on any behavior means you tend to use that behavior, so that is an area you need to improve

# Learn to Look: Style Under Stress

## SILENCE

“Any act to purposefully withhold information from the pool of meaning as a method of avoiding potential problems”

Masking

Avoiding

Withdrawing

## VIOLENCE

“Any verbal strategy that attempts to convince, control, or compel others to your point of view and forces meaning into the pool”

Controlling

Labeling

Attacking



# Learn to Look: Self-Monitor

- Most difficult element to watch closely is often your *own* behavior
- Look for your own Style Under Stress manifesting
- Become a vigilant Self-Monitor:
  - Pay close attention to what you're doing
  - Understand what impact it is having
  - Alter your strategy if needed
- One good way to increase your self-awareness is to explore your own Style Under Stress

# Learn to Look: Summary

Are you in or out of dialogue?



Recognize Crucial Conversations

Watch for others moving toward  
Silence or Violence

Avoid your own Style Under  
Stress

# Make it Safe

*How to make it safe to talk about almost anything*

**When people aren't safe they move to Silence or Violence**

- Step out of the conversation and Make it Safe
- Don't get stuck in what's being said
  - Worst: ignore what's going on; say whatever is on your mind
  - Good: recognize safety is at risk; fix it the wrong way
  - Best: don't play games; talk about the problem to fix it

**Step out → Make it Safe → Step back in**

# Make it Safe: Purpose & Respect

- Decide which condition of safety is at risk:
  - Mutual Purpose
  - Mutual Respect
- **Mutual Purpose** → the entrance condition
  - Others perceive you're working toward a common outcome
  - You care about their goals, interests, and values (& vice versa)
  - It's truly mutual
- **Mutual Respect** → the continuance condition
  - If people perceive others don't respect them, the conversation becomes unsafe
  - Dialogue stops and the focus shifts to defending dignity

# Make it Safe: Safety Tools

## What do you do once you step out?

- **Create** a Mutual Purpose
  - Sometimes we just have different purposes
  - Commit, Respect, Invent, or Brainstorm
- **Apologize** when appropriate
  - When you've violated respect or when you are truly wrong
- **Contrast** to fix misunderstanding
  - When others misunderstand your purpose or intent
  - Contrasting is a “don't/do” statement
  - Start with what you don't intend or mean (address concerns)
  - Then explain what you do intend or mean (confirm respect)

# Make it Safe: Summary

	Clear Problem?	Misunderstanding?
Mutual Purpose (entrance)	Apologize	Contrast
Mutual Respect (continuance)	Create a Mutual Purpose	Contrast

# Dialogue Skills Assessment

## *Dialogue Skills Score*

Choose Your Topic (Chapter 3): 2

Start with Heart (Chapter 4): 1

Master My Stories (Chapter 5): 1

Learn To Look (Chapter 6): 1

Make It Safe (Chapter 7): 2

STATE My Path (Chapter 8): 0

Explore Others' Paths (Chapter 9): 1

Retake Your Pen (Chapter 10): 1

Move to Action (Chapter 11): 1

- **HIGHER = BETTER!**
- 1 or 2 means you do that behavior naturally, continue that
- 0 is an area you need to improve

# Hone in on These Skills First

## Learn to Look

- Are you in or out of dialogue?
- Recognize Crucial Conversations
- Watch for others moving toward Silence or Violence
- Avoid your Style Under Stress

## Make it Safe

- Mutual Purpose
- Mutual Respect
- Show interest in others' views
- Take a timeout
- Apologize
- Ask questions



# Activity 4: Application Scenarios

## SCENARIO 1

You are an APPE student on an ID rotation

## SCENARIO 2

You are precepting a PGY1 resident on an Amb Care rotation

# Activity 4: Application Scenarios

## *Now you try!*

- Read through the following scenarios and explain how you would respond if put in a similar situation
  - Scenario 1 – Odd breakout rooms
  - Scenario 2 – Even breakout rooms
- Think-Pair-Share with others in your breakout rooms
- How could you leverage Emotional Intelligence and Crucial Conversations principles to successfully navigate the situation?
- What outcome(s) do you ultimately anticipate in each scenario?


# Activity 4: Precepting Scenarios

- **Scenario 1:** You are an APPE student reviewing your patients with your preceptor. There are multiple students on this rotation with you. This is the first week of your first clinical rotation, Infectious Diseases, and you do not feel confident with your recommendations. As you are presenting your first patient, your preceptor states your recommendations are wrong. You remember evaluating the guidelines and drug resources, but you must have missed important lab values or notes. He then asks you why and how you made these thoughtless and incorrect decisions in front of the other students.
- **Scenario 2:** You are precepting a PGY1 resident, Jennifer, on her Ambulatory Care rotation in January. You sit down with her after clinic today to do a topic discussion on continuous glucose monitoring, which she is leading. She has prepared a handout. There are also two APPE students on rotation with both of you, and they are present for the topic discussion. A few minutes into the presentation you quickly realize her handout looks very familiar, and you find a topic discussion handout in your files from one of last year's residents that is nearly identical, with only a few minor changes here and there. You suspect Jennifer may have copied this other resident's handout in an attempt to pass it off as her own.

# Wrap-up

# Key Takeaways:

## Emotional Intelligence

- Self-awareness and self-management are critical to successfully applying EQ to your relationships with others
  - Consider applying these principles to your own interactions with patients, co-workers, family, friends, or the medical team
  - EQ tools can be applied to any situation, including precepting
- 

# Key Takeaways: Crucial Conversations

- DO SOMETHING – anything is better than nothing!
- Start thinking of Crucial Conversations you can improve now
- Be persistent, you do not have to be perfect
- Small changes can lead to huge progress with learners

# Tools You Can Use

- ***Emotional Intelligence 2.0*** (Travis Bradberry & Jean Greaves; 2009)
- ***Crucial Conversations, 3<sup>rd</sup> Edition*** (Grenny, Patterson, McMillan, Switzler, & Gregory; 2022)
- *HBR's 10 Must Reads: On Emotional Intelligence* (Harvard Business Review Press; 2015)
- *Change Your Questions, Change Your Life, 3<sup>rd</sup> Edition* (Marilee Adams, PhD; 2015)
- *Mindset: The New Psychology of Success* (Carol S. Dweck, PhD; 2008)

# DISCUSSION & QUESTIONS





# Do We Have to Talk About It?

## Leveraging Emotional Intelligence and Navigating Crucial Conversations

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