

A Leader's Approach to Facilitating Clinical Reasoning

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Objectives

- Define clinical success including expertise and excellence
- Identify three components of a critical thinking/clinical reasoning model
- Differentiate supportive strategic leadership tactics for the novice and experienced clinicians

What is clinical success?

- Patient perspective

- Being able to do what he/she deems important
- Returning to his/her prior level of activity
- Returning to his/her prior life roles

- Therapist perspective

- Achieving or surpassing established goals in a plan of care
- Achieving positive outcomes
- Implementing evidence based practice
- Developing innovative approaches
- Utilizing “best practice”
- Achieving clinical excellence
- Developing expertise

Foundations for Clinical Success

Experience

- Knowledge or skill gained over a period of time
 - Involvement
 - Exposure

Expertise

- A high level of knowledge and skills in a focus area

Foundations for Clinical Success

Excellence

- The provision of quality care in an effective way
 - Technical performance
 - Access to services
 - Effectiveness of care
 - Continuity of service
 - Interpersonal relations

***Insanity is doing the same thing
over and over again while
expecting a different outcome.***

Albert Einstein

What is clinical reasoning?

The *thought processes* associated with a clinician's examination and management of a patient or client

Jones, Jensen, Rothstein

Clinical Reasoning in the Health Professions

Clinical Reasoning

- Clinician needs to be able to “zoom” the focus
 - Understand the patient’s “story”
 - “Big picture”
 - Specific problems related to current condition
 - Collaborate to find solutions

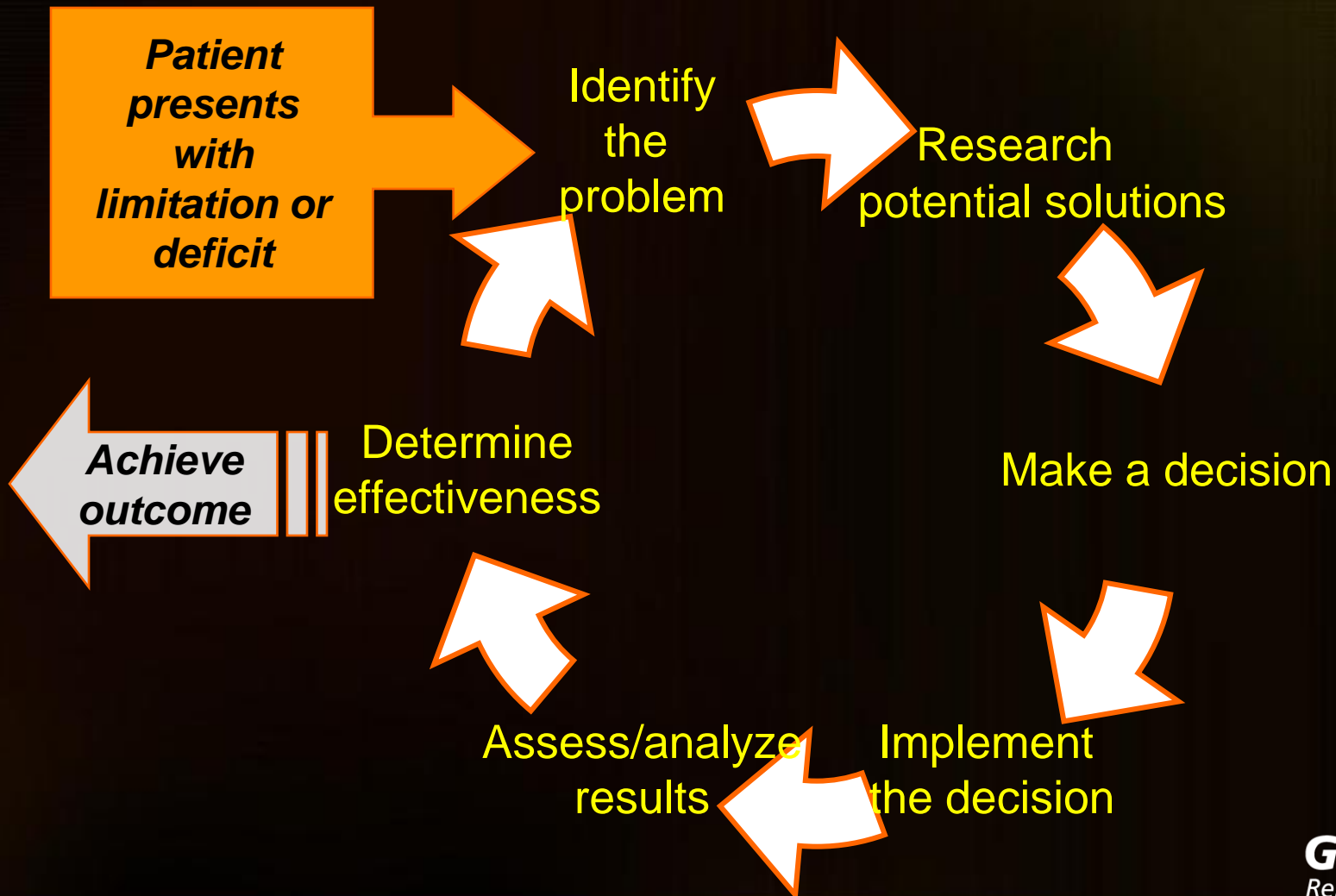
Clinical Reasoning

Expertise evolves from professionals' *use of critical analysis* during and after their interaction with their patients, often in unclear or indeterminate situations.

Jones, Jensen, Rothstein
Clinical Reasoning in the Health Professions

- The clinician needs to use critical thinking to:
 - Raise relevant, precise questions
 - Blend experience with knowledge
 - Incorporate analysis and interpretation

Clinical Reasoning Process



1. Identify the Problem

What is the “root cause” of the limitation/deficit?

- Requires:
 - Knowledge
 - Discipline specific education
 - Professional journals
 - Continuing education
 - Advanced degree
 - Mentor program
 - Evidence-based practice

2. Research Potential Solutions

What can be done to correct/support the limitation/deficit?

- Requires
 - Experience
 - Length of employment
 - Diversity of practice sites
 - Diversity of patient populations
 - Integration
 - Knowledge
 - Prior experience
- Establish the anticipated outcome

3. Make a Decision

What is the best option for addressing the limitation/deficit area and achieving the outcome?

– Requires:

- Ethics – frame of reference
- Creativity – “out of the box” approaches
- Flexibility – ability to change what/how something is accomplished
- Adaptability - the ability to change behaviors and/or actions

4. Implement the Decision

Initiate the treatment utilizing the selected therapeutic intervention(s)

– Requires:

- Creativity
- Flexibility
- Adaptability

5. Analyze/assess the Results

Did the intervention(s) elicit the response that was intended?

6. Determine the effectiveness

Has the desired outcome been attained?

– Outcome achieved

- Move onto next deficit area
- Discharge skilled service
- “File” results as experience for future reference

– Outcome not achieved

- “File” results as experience for future reference
- Re-examine the problem and continue the process

Our *EXPERIENCE*

with critical thinking

can improve

critical thinking.

*You did then what you knew
how to do and when you knew
better... you did better!*

~Maya Angelou

Is there a skilled need?

Hilda has been a resident in your facility for the past 2 years, and has been independent with self feeding and swallowing, with no reports of dysphagia or weight loss.

For the past week, nursing reports that she has been taking longer to get to eat and is expectorating some food particles during her meal.

The nursing staff is asking for the patient to be placed on rehab caseload to address these issues.

PMH: CHF, DJD, s/p MI, early stage dementia

Is there a skilled need?

Louis has been re-admitted following a 2 day hospitalization for a UTI.

Prior to hospitalization, he was independent at a wheelchair level for mobility and required supervision for transfers.

He has fallen twice recently, once about 6 weeks ago and once about 1 month prior to that.

Enhancing Clinical Reasoning

- Leadership needs
 - Knowledge
 - Practice areas
 - Clinical reasoning process
 - Assessment skills
 - Is the clinician completing each step of the cycle?
 - Is the clinician analyzing the outcomes effectively?
 - Leadership skills
 - Coach/mentor the clinician's abilities
 - Identify and provide resources

Coaching/Mentoring Clinical Staff

- Situational Leadership
 - Ken Blanchard & Paul Hersey
 - Focuses on the *individual's* needs related to the **current situation**
 - What is the need for support?
 - What is the need for direction?

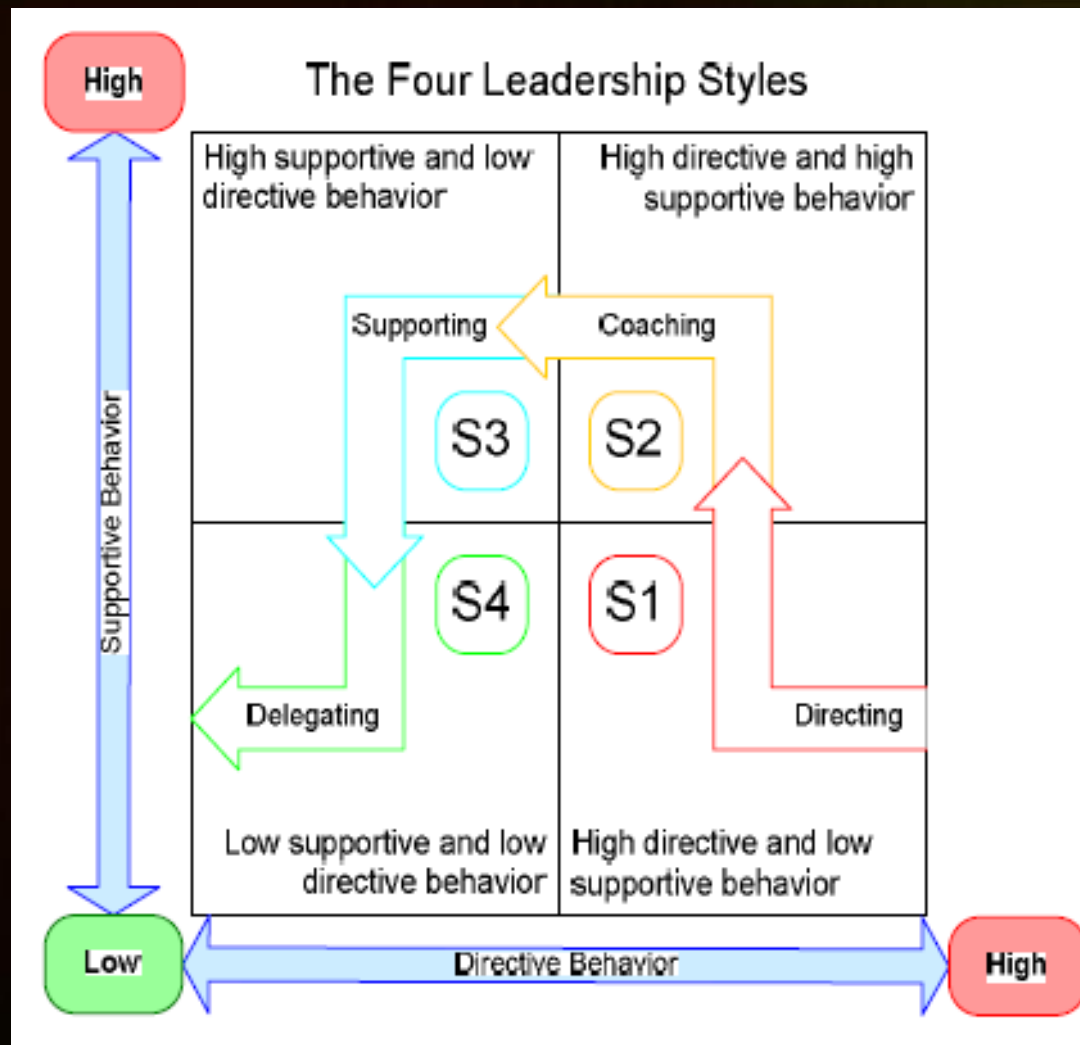
Situational Leadership Model

- Level of the employee:
 - D1: Low competence/low commitment
 - May lack skills, confidence, motivation
 - D2: Some competence/low commitment
 - Some skills, may need help; may be new task
 - D3: High competence/variable commitment
 - Experienced & capable however may lack motivation & confidence
 - D4: High competence/high commitment
 - Experienced & comfortable with the task; may have greater skill level than manager

Situational Leadership Model

- Leadership Behaviors:
 - S1: Telling/directing
 - Makes decisions; supervises closely
 - S2: Selling/coaching
 - Solicits ideas/suggestions; makes decisions; provides direction & supervision
 - S3: Participating/supporting
 - Takes part in decisions, but allows employee to make final decision; provides some support for motivation & direction
 - S4: Delegating
 - Employee determines participation by leader; little supervision or direction required

Situational Leadership Model



Cody Shive, The Arrington Group, *Technical Management with Situational Leadership*, 2002

Situational Leadership Model

Applying the Four Leadership Styles

<p>Situation 3</p> <p><u>Type of Staff</u></p> <ul style="list-style-type: none">• Mid-level Staff• Senior-level Staff who need additional support <p><u>Behavior</u></p> <ul style="list-style-type: none">• Involved; needs facilitator• Mid-level Staff who've made it "over the hump" but need your support in their decisions• Senior-level Staff who need some support to continue their project	<p>Situation 2</p> <p><u>Type of Staff</u></p> <ul style="list-style-type: none">• Mid-level Staff• Accelerated junior Staff <p><u>Behavior</u></p> <ul style="list-style-type: none">• Interested; needs motivation• Needs more coaching than directing• Sometimes afraid to make a decision on their own• Needs your help to "get over the hump"
<p>Situation 4</p> <p><u>Type of Staff</u></p> <ul style="list-style-type: none">• Typically senior-level Staff• Second hardest to manage <p><u>Behavior</u></p> <ul style="list-style-type: none">• Self-directed; needs delegation• Needs you to give them the project – they'll handle the rest.• Doesn't need your support• May not work well with others – unless leading them• Likely to "over-engineer" a solution• Short on status updates	<p>Situation 1</p> <p><u>Type of Staff</u></p> <ul style="list-style-type: none">• Junior Staff or developed Staff new to the situation• One of two types of hard-to-manage staff <p><u>Behavior</u></p> <ul style="list-style-type: none">• Dependent; needs direction• Less likely to make decisions on their own• You must show him/her how to do their job• They want your immediate approval and feedback

Cody Shive, The Arrington Group, *Technical Management with Situational Leadership*, 2002

Enhancing Clinical Reasoning

- What is this clinician's need(s)?
 - Knowledge
 - Ability to apply or integrate information/concepts
 - Ability to make decisions
 - Ability to analyze
 - Background/experience
- Does the clinician need support or direction?
- What resources are available to meet those needs?
- What is the clinician's level of commitment?

Enhancing Clinical Reasoning

- Novice clinician (≤ 2 years experience)
 - Characteristics
 - Rigid in application of “rules” or principles of practice
 - May not consistently consider context before applying “rules” or principles
 - What are the clinician’s needs?
 - Knowledge
 - Ability to recognize patient needs
 - Understanding of critical thinking process

Enhancing Clinical Reasoning

- Intermediate clinician (3 – 6 years experience)
 - Characteristics
 - Able to “bend the rules” to fit the situation
 - Judgment not directed by what was read or observed
 - What are the clinician’s needs?
 - Knowledge
 - Ability to recognize subtle changes in patients’ abilities
 - Understanding of components of critical thinking process

Enhancing Clinical Reasoning

- Experienced clinician (6+ years experience)
 - Characteristics
 - Understands how treatment fits into the whole picture
 - Treatment is organized around responses and constantly adapted
 - Able to respond quickly as able to recognize patterns of presentation & use those as a source for decision-making
 - What are the clinician's needs?
 - Creativity
 - Flexibility
 - Adaptability

Enhancing Clinical Reasoning

- Clinician new to practice setting
 - Novice
 - Intermediate
 - Experienced

How does this impact the need for support & direction?

Enhancing Clinical Reasoning

You are calculating how many screens turned into evaluations for the month and notice that Speech Therapy has not evaluated one patient from screening.

- For the **NOVICE** clinician
 - What question will you ask
 - First?
 - Second?
 - Third?
- For the **EXPERIENCED** clinician
 - What question will you ask
 - First?
 - Second?
 - Third?

Enhancing Clinical Reasoning

- You are reviewing your weekly financial reports and notice that productivity for Speech is really low.
- For the Novice Clinician
 - What will you ask
 - First
 - Second
- For the Experienced Clinician
 - What will you ask
 - First
 - Second

Does *your* leadership style promote clinical reasoning within your department?

- What are you going to do tomorrow to improve your staff's clinical reasoning skills?
- What are the benefits to the staff and/or to the department?
- What are the barriers and how can they be minimized?

Any questions?

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