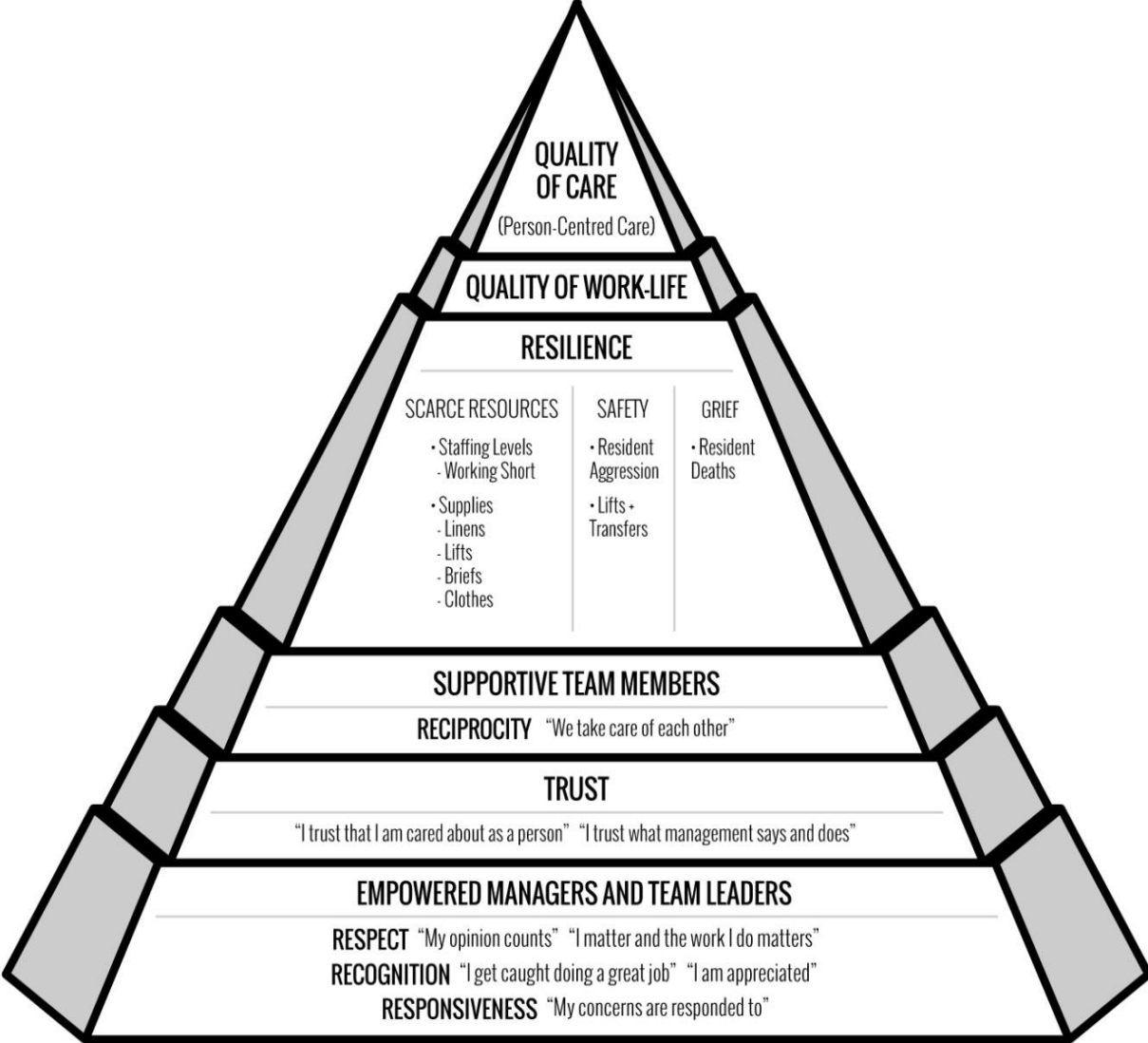


# The Art of Responsive Leadership

Leading Through Relationship Building

Sienna Caspar, PhD  
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Since leadership is so important to the care environment, how can we help care team leaders be more responsive and supportive?





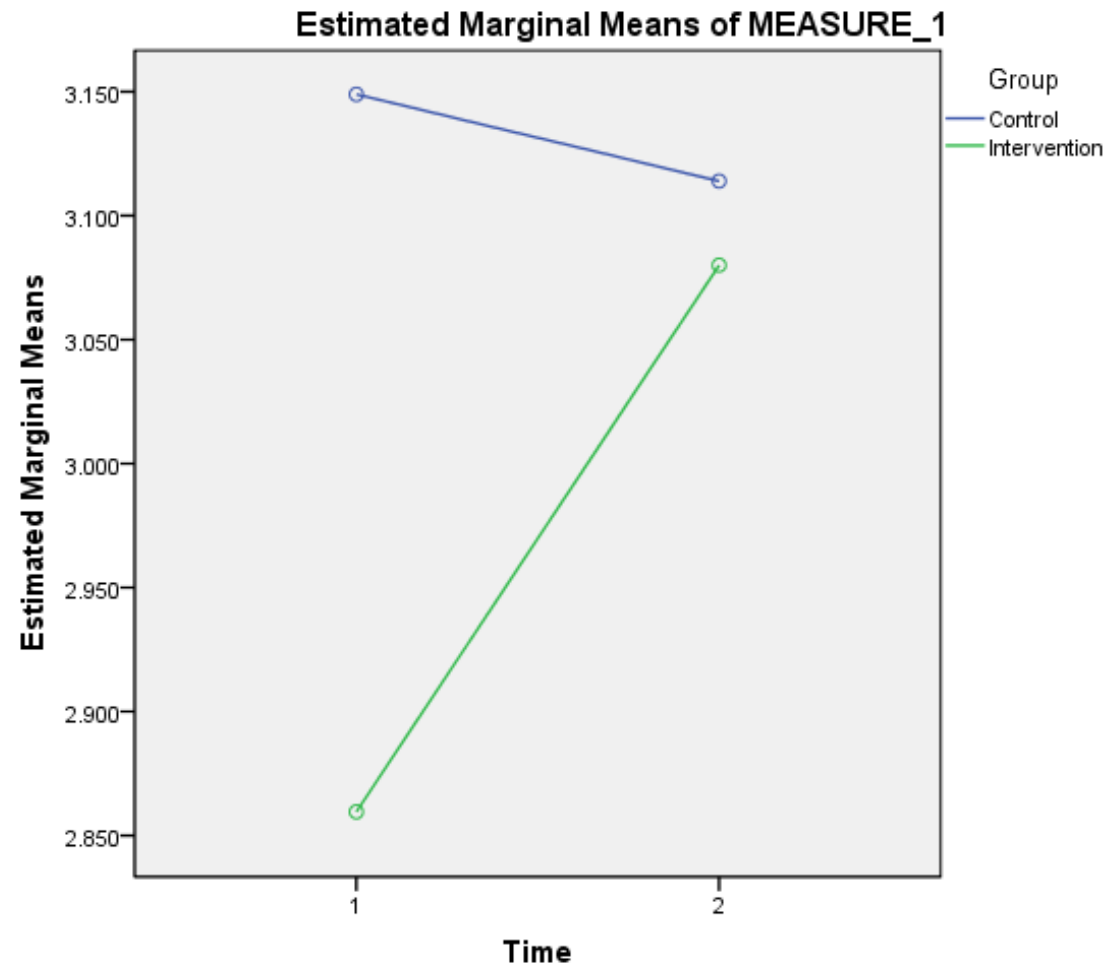
# What I've done to answer that question:

- **The Responsive Leadership Intervention:** A formal system implemented to support oral information exchange within and between members of care teams in LTC facilities.
- Three components:
  - A one-day workshop focused on responsive leadership
  - Implementing care-team huddles into the daily care practice
  - A team-leader support system

# Participants and Data Collection

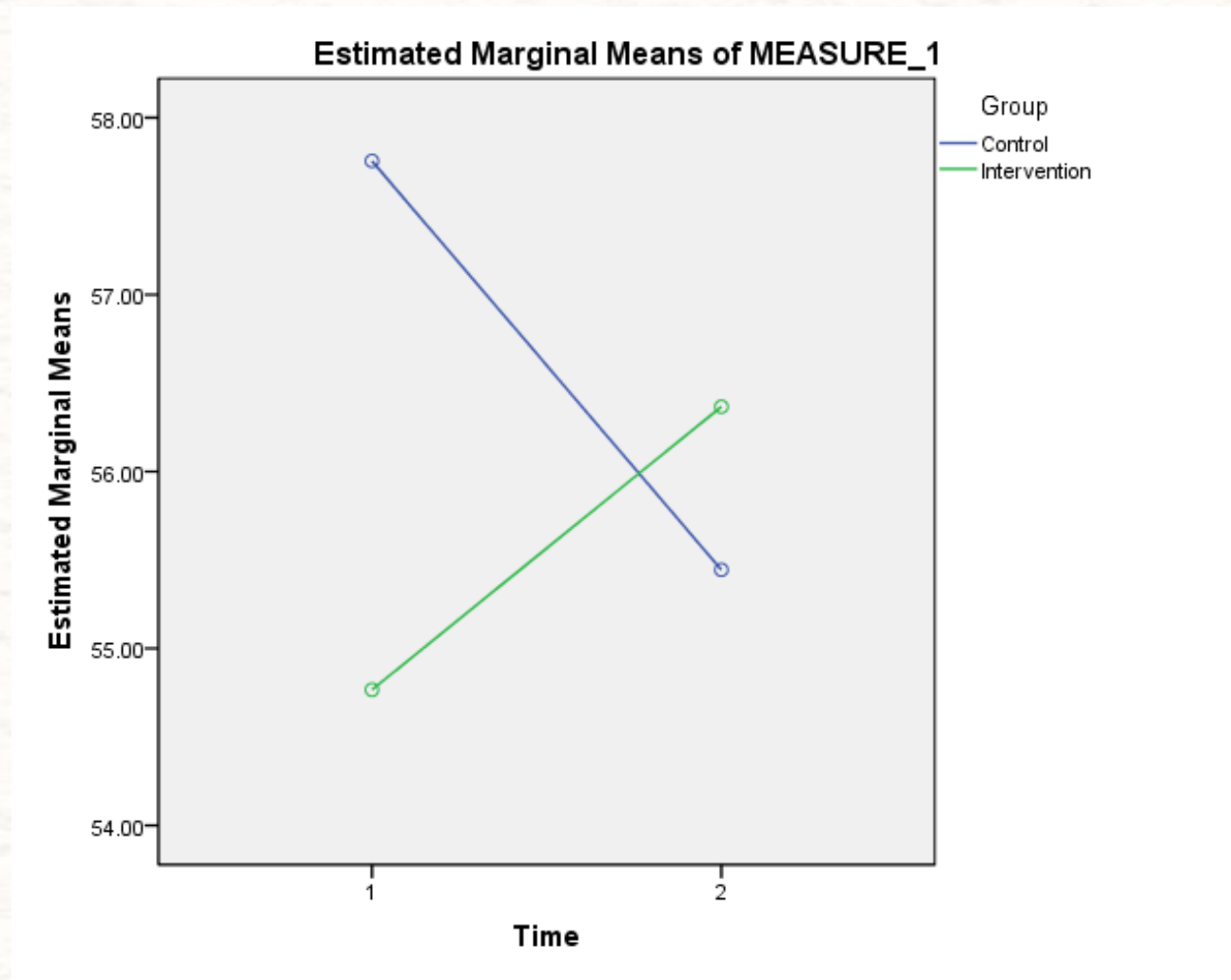
- Four facilities
  - Two Intervention facilities (22 team leaders, 56 HCAs)
  - Two Control facilities (74 HCAs)
- Four points of data collection
  - Baseline
  - 1-month post intervention
  - 3-months post intervention
  - 6-months post intervention

# Resident Autonomy



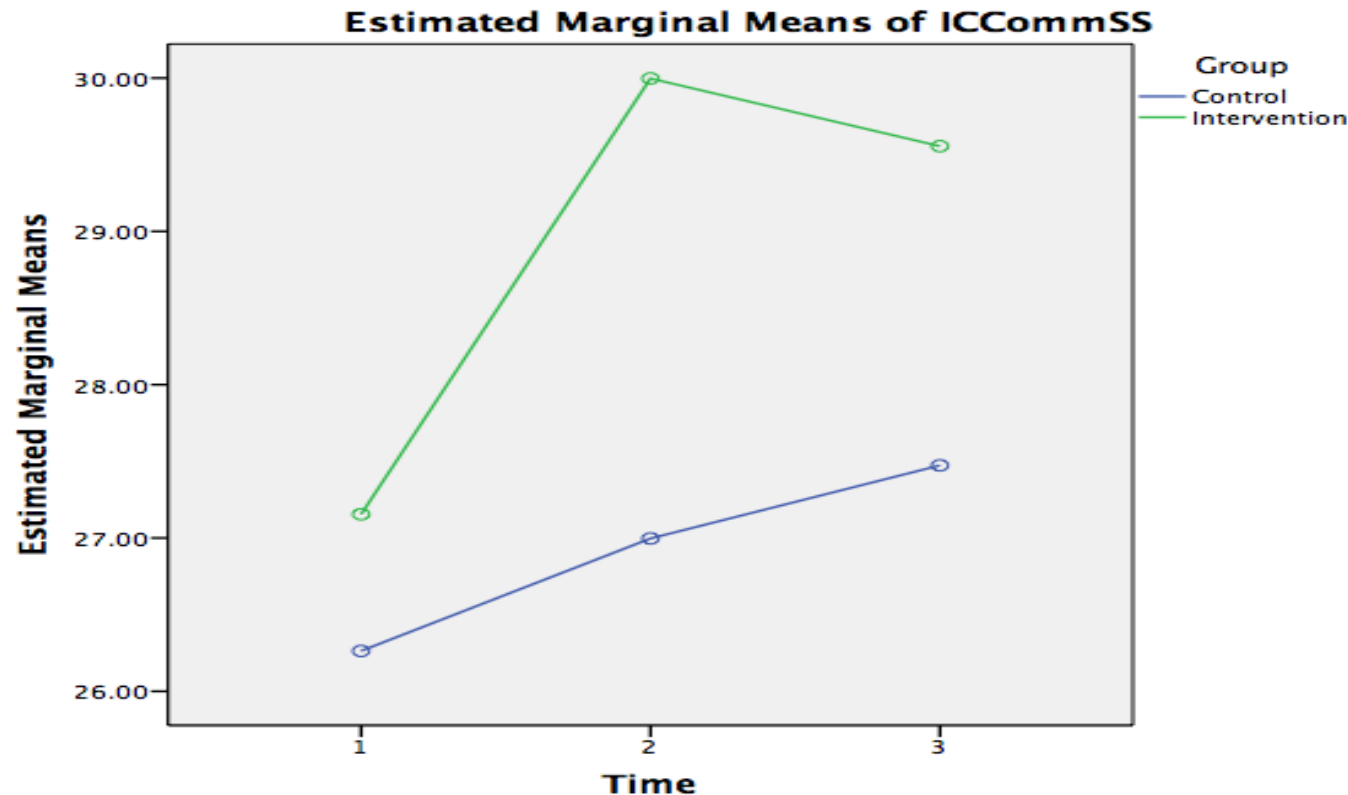


# Supervisory Support



# Findings: 3 months post intervention

- At 3-months post-intervention, the intervention group retained 32% of the greater increase in individualized care, and 47% of the greater increase in supportive supervision



# What the HCAs said about Care Team Huddles

- *Better communication! No one really shared or talked about what we were charting but now we are talking to one another and sharing important information we didn't always hear before.*
- *We rarely received feedback from RN/LPN's about charting but now because we are doing huddles most shifts we hear back about our questions or concerns.*
- *Definitely improving problem solving. We had one resident that was expressing very difficult behaviors and after a huddle discussion we came up with a better way to approach the resident which worked much better.*



# Conclusion

- It works!
- I'm hoping that you may be able to achieve the same (or even better) outcomes!

# What will you get out of this?

- By the end of today's workshop you will learn (and be able to put into practice!) the necessary skills required to actively participate in productive and effective care team meetings or huddles.
- I believe this will help you to....
  - Develop cohesive teams that trust
  - Increase effective communication within the team
  - Improve your ability to care for the residents
  - Improve your day-to-day experiences at work



# Five Key Leadership Skills

1. Mindfulness
  - Enabling your insights and intuition to assist you
2. Self-Compassion
3. Open-ended Inquiry
  - Thought provoking questions
4. Reflection
  - Connecting others to their own insights/thoughts
5. Collaboration through Autonomy  
Supportive Statements and Actions

Each of these skills  
will enable you to  
effectively create  
and lead GREAT  
teams!

TEAM

---

T

TOGETHER

E

EVERYONE

A

ACHIEVES

M

MORE



Best experience  
of a leader?

- Share an example of a leader, supervisor, or mentor you've had that had a **positive** impact on you.
- Share an example of a leader or supervisor you've had that wasn't helpful to you.
- What did you notice about these relationships?

**To be an effective leader you MUST connect!**

*“I define connection as the energy that exists between people when they feel seen, heard, and valued; when they can give and receive without judgment; and when they derive sustenance and strength from the relationship.”*

*– Brene Brown*

*The Gifts of Imperfection*



# The art of asking GREAT questions

- Closed-ended questions can be answered with a short, precise and factual response...often it is a one word answer. “Yes”  
“No”
- Closed-ended questions do not produce openings for connection, insight, or collaboration.

# Open-ended Questions

- Open-ended questions begin with words such as: *what, why, how, & describe*.
- Open-ended questions support continued conversation, connection, and collaboration.
- Open-ended questions:
  - ask the respondent to *think* and reflect.
  - encourage the respondent to give you *opinions* and *feelings*.
  - hand control of the conversation to the *respondent*.



# Open or Closed?

- What is the best part of your job?
- Do you like your job?
- Is your supervisor supportive of you?
- How does your supervisor make you feel supported?
- Why did you become a nurse?

# Reflections: Discovering the Art of Active Listening!

- **Simple:** Repeating back exactly what the person said. Might sound like 'parroting back.' You use the person's words/language so they can hear themselves.
- *So that I think is the worst part of the job, that I don't feel valued by management, but when you see the difference you can make with a resident, that is where the value comes in. Sorry. [begins to cry].*
- *"The worst part of the job is that you don't feel valued by management, but when you see the difference you can make with a resident, that is when you feel valued."*



1. Breathe and be here now!
2. Be self-compassionate

## Your Turn!

\*If the leader asks a closed-ended question you MUST answer with ONLY a one-word answer.

- In pairs of two
  - One will be the leader and the other will be the team member.
- Begin the discussion with this question:  
*Tell me about something that you would like to see done differently at work*
- Following this, you can ONLY ask open-ended questions or use reflections
- You each have 5 minutes

Getting to the  
heart of the  
problem

PEOPLE DON'T  
CARE WHAT  
YOU KNOW  
UNTIL THEY  
KNOW THAT  
YOU CARE!



# Responsive Leadership for Improved Self-Determination

- We support the development of self-determination of our team members when:
  - We listen to understand and name feelings and needs
  - We help them to focus the problem and co-create a solution
  - We help to build their intrinsic motivation & self-responsibility
  - We express gratitude by highlighting and celebrating their strengths
  - We respond to and follow-up to their concerns

# Responsive Leadership for Self-Determination Cycle

- **Engaging** - engaging includes expressing empathy and reinforcing the person's autonomy (i.e., freedom-of-choice).
  - TOOLS: *Mindfulness, Active listening and reflections, Self-compassion*
- **Focusing** - includes asking clarification questions regarding the person's reasons for wanting a change.
  - TOOLS: *Mindfulness, Open ended questions, Self-compassion*
- **Planning** - involves collaboration and a commitment to an action plan that promotes self-determination.
  - TOOLS: *Mindfulness, Open ended questions, and a **Commitment to action***
    - Adapted from Motivational Interviewing (*Miller & Rollnick, 2012*)



# Responsive Leadership for Self-Determination Cycle:

1. Set and state your intention
2. Breathe and be here now
3. Ask an opening question
4. Listen, Reflect and ask Open-ended Questions
  - Repeat as necessary!
5. Collaborate for Solutions
6. Commit to Action
7. Affirm the team member's strengths!
8. Be self-compassionate

# Important Questions for Collaboration and Self Determination

## Clarify the Focus

- What outcome would you like to have?
- What will happen if this doesn't occur?
- If that outcome were to succeed what would it look like?

## Collaborate for Success

- What has worked before?
- What haven't you tried?
- What might get in the way?

## Planning with Clear Action

- How can you overcome these barriers?
- What resources do you need?
- What are the next steps to accomplish this?
- What are you and I going to commit to?



Putting it  
all  
together



# Daily Care Team Huddle

- It is a short (5 to 15 minute) meeting conducted mid way through your shift.
- Purpose is for information sharing and problem solving. It is a time to think out loud, share ideas, and figure out solutions as a team.
- It brings together those care providers who are closest to the situation to shape the solution to problems or concerns.



# What is the difference between a care team huddle and report?

## Report

- Aim is providing resident-care information and direction
- Clear hierarchy
- Team leader does most of the talking
- Care aides do most of the listening
- Information primarily flows in one direction
- Content is driven by team leader

## Team Huddle

- Aim is sharing resident-care information and collaboration
- Collapsed hierarchy
- Care aides do most of the talking
- Team leader does most of the listening
- Information flows in all directions
- Content is driven by care aides



Shared Vision  
Statement for the care  
team huddles



# How to Run a Team Huddle

1. Mindfulness : Be Here Now
2. Start on time! Honour the team members who arrive on time by beginning with whoever shows up. Others can participate as they arrive.
3. Begin with stating the vision statement for the huddles — this is your introduction to the meeting.
4. Follow-up on items/concerns brought forward during the previous huddles...get notes if it wasn't you! \*Use the KISS method: Keep it simple! AND celebrate successes!
5. Provide every team member an opportunity to express concerns, ask questions, or share information.

# How to Run a Team Huddle (Cont.)

6. If a concern is brought forward, engage in the Responsive Leadership Cycle: **Listen, Reflect, and Ask Open-Ended Questions (repeat as necessary), Collaborate for Solutions, Commit to Action**
7. Before closing, ask the open ended question: *Is there anything else you'd like to talk about?*
8. If a concern is brought forward engage in the Responsive Leadership Cycle: **Listen, Reflect and Ask Open-Ended Questions (repeat as necessary), Collaborate for Solutions, Commit to Action**
9. Close the meeting with gratitude and celebrate successes **\*Team huddle goal achievement!**
10. Engage in Self-compassion



*Treat Employees Like They  
Make A Difference And  
They Will*

-Jim Goodnight

Always Close with  
Gratitude.....



Thank you!!