The Five Fundamentals of Civility for Physicians

#2: Be Aware

by Michael Kaufmann, MD OMA Physician Health Program

We don't see things as they are, we see things as we are.

Anais Nin1



MAGINE YOU'RE A DOCTOR JUST ARRIVING AT THE HOSPITAL TO CONDUCT ROUNDS ON YOUR PATIENTS.

IT'S A BUSY MORNING AND YOU'RE REVIEWING THE STATUS OF SEVERAL OF YOUR PATIENTS WHEN A NURSE APPROACHES SAYING: "GOOD MORNING, DOCTOR. MR. SMITH HAS HAD A BAD NIGHT AND HIS SON IS HERE. HE HAS SOME QUESTIONS FOR YOU. YOU SHOULD SPEAK TO HIM."

It turns out that Mr. Smith was admitted overnight and you have yet to catch up to the details of the case. Irritated by her tone, and frustrated, you turn to the nurse, someone you don't recognize, and snap: "How do you expect me to talk to the family when I don't even know the case?" Then, unheeding of the nurse's look of hurt and dismay, you add: "And who are you, anyway? Another temp? And haven't you spoken to his son?" The nurse turns and leaves in a huff of indignation. To your surprise and consternation, you learn a couple of days later that the nurse has filed a Code of Conduct complaint against you.

This nurse probably doesn't know that this kind of behaviour is really uncharacteristic of you. Of course, she has no way of knowing that you had trouble sleeping the night before due to a recurrence of back pain that you feared would never go away, along with your ongoing concerns about

how your teenage son is struggling in school. And it didn't help that you and your spouse don't agree on how that problem should be managed. Further, sleeping in, you left home in a hurry, skipping breakfast. In the moment, under all of these stresses at the nursing station, even you weren't aware of how these many things were affecting you. Neither were you aware of the impact of your behaviour upon the nurse, or how she might be feeling as someone new on the job.

You immediately regret the manner and tone you used with the nurse. But it was too late — primed and challenged, you "shot the first thing that moved," an act of incivility that might have been avoided. Worse, the nurse, now leary of you, lodged a complaint. And she might go on to behave in ways that are uncivil or unwanted (such as critical comments about you to others), beginning a "dance of incivility" never intended.

Mindlessness

Reflection and self-awareness practices help doctors examine many aspects of themselves that contribute to their thoughts, moods and actions. Without this awareness, we can be said to be functioning "mindlessly." That's fine when considering mechanical skills, such as driving a car, considering how often this action has been successfully performed in the past, resulting in the desired level of unconscious competence. But mindless interactions with colleagues and co-workers can sometimes lead to uncivil behaviour, chosen indiscriminately. In fact, mindlessness accounts for many deviations from professionalism, which seem to occur more often when doctors find themselves in pressured, emotionally charged situations.²

Considering our example, there is plenty that requires attention in order to be truly self-aware: your physical state (back pain, hunger, fatigue), emotional state (frustration, worry, anger), temperament and personality style (rational, controlling), communication style (there's something about the tone of voice used when upset that others hear as "yelling"), attitudes and cognitive distortions (perfectionism, self-criticism what have I done wrong as a parent?), assumptions (a nurse unrecognized is a temporary worker), biases (administration saves money by hiring junior nurses part time — quality patient care doesn't matter to them), knowledge gaps (I really don't know what drives hospital decision-making, or all of its aspects), personal values (patients matter more than hospital budgets!), and so much more. Everything we experience is perceived through these filters shaping our thoughts, reactions and deeds.

Mindlessness can catch us up into negative emotional, cognitive and behavioural patterns without our being able to intervene. A colleague once said that this was like automatically heeding the "Committee of Idiots" in our head! Mindlessness also prompts shifting of blame and avoidance of personal responsibility. In short, if we are not mindful, or sufficiently self-aware, and just allow our attention and actions to be engaged in these negative loops, choosing civil behaviour would be difficult at the least; we might even do harm to ourselves and others.³

Mindful Self-Awareness

Hence we see the connection of mindful self-awareness to civility, if not our general well-being. Gilbert describes this form of awareness as accepting, nonstriving, contented well-being. He says that mindfulness practice puts people into the "being mode" rather than the "doing mode." Another description of mindfulness is a state of "could be," welcoming uncertainty rather than trying to avoid it.²

Self-awareness is the moment-tomoment, non-judgmental recognition of what's happening within us. The goals of mindful self-awareness include enhanced expression of core values, such as empathy and compassion, the courage and ability to see the world more as it is rather than as one would have it be, and the humility to recognize, tolerate and embrace one's "blind spots" - areas of weakness - while leveraging our strengths.^{2,4} Awareness practices also open the door on sensitivity to others. We might wonder about how they are interpreting their circumstances and understand that they might not react in the same way as us, even in the same situation. We can respect their feelings without taking them on to ourselves, or automatically reacting emotionally to them. It is easier to understand how another might be challenged to behave in a civil manner as we accept the same is often true for ourselves.

Cultural Awareness

If the simple definition of culture is "the way things are done around here," then we need to pay attention to that as well. Our behavioural choices are influenced broadly by external norms and expectations just as they are by our internal status and the behaviours of others. Unlike the fish that pay no heed to the water in which they swim, civility is easier to choose if one is aware of the cultural influ-

ences, positive and negative, all around us. Kindness is good, meanness is not. Directive communication is acceptable under certain circumstances, profanity is not. Teaching by asking tough questions is fine, shaming is not. Humour is fun, sexist jokes are not.

Ultimately, one by one, when able to identify these influences, we are able to make civil choices (should that be our desire) that have the power to transform the very culture that guides and nourishes us.

Barriers To Awareness

Barriers to self-awareness are numerous in medical training and practice.² Fatigue, dogmatism, emphasis upon an overly "algorithmic" and literalminded approach to clinical choices and behaviours (rather than on conscious, non-judgmental awareness and reflection) close the mind to relevant feelings and options. These practices in senior physicians can be emulated by learners and junior colleagues who then become unconsciously incompetent with respect to self-awareness, even as they develop exquisite competencies (also ultimately largely unconscious)

with respect to the clinical knowledge and skills of their specialties. Worse, "soft" skills, such as critical reflection, may even be scorned by clinical teachers. Even worse — learners are trained to behave in an uncivil manner.

I once met a young doctor who was referred to me for help regarding his intolerant and belittling behaviour toward his co-workers. Insightful and self-aware, he described his behaviours as inconsistent with his values and the person and professional he really wanted to be. But, as a resident, he was often loudly criticized by senior and very successful teachers and mentors. He often felt shamed and embarrassed by their comments about him. That was the culture of the university department where he had trained. He found himself copying their styles and he was disappointed with himself. He readily accepted a referral for counselling and coaching. Later, I heard from his chief of staff that he was doing very well - a model of civility.

I smiled wryly, inwardly, when I first met him, because I knew some of his mentors in training. One had even been referred to me as well! But unwilling or unable, insight did not come so readily to that individual, and change came slowly, at considerable cost.

So, to the doctor in our opening example: if you had sufficient awareness, you might have chosen a different response to the nurse in the first instance. Perhaps her abrupt manner with you reflected her concern about the patient and her inability to reassure his son, rather than a lazy passing of the problem over to you as it might have seemed. Being mindful of your own irritability, you might have paused to consider your response to her. And even if not, noticing how your words hurt her, wondering what it might be like for her to be new on the job and already challenged by a doctor, you might have been able to interrupt your verbal attack and offer an apology instead, likely preventing her from lodging a complaint and stopping the "dance of incivility" before it ever began.

Self-Awareness Strategies

Here are a few recommendations designed to help improve self-awareness:

- Keep a journal of reflective writing. Record thoughts and ideas, without censorship or judgment, about your reactions to events of the day, reflecting upon what went well, or not, and how your personal realities influenced your choices.
- Learn and practice meditative techniques. Mindfulness courses are readily available, including mindfulness training specifically for physicians. Self-study and practice is available as well in a variety of formats.
- Seek out trusted friends and peers with whom you can discuss your thoughts, feelings, behavioural choices and reactions. Invite their honest feedback. Offer the same to them.
- Seek behavioural feedback at work.
 This may come in the form of regular supervision (perhaps from a department chief or other physician leader) or by using a "360" multi-rater survey tool specifically designed for this purpose.
- Seek out opportunities for group education and discussion that focuses upon relevant leadership, problem-solving and ethical practice knowledge and skills.
- Mentor and be mentored by others who value self-awareness practices.
- Employ the services of a suitable professional coach. Coaching is an increasingly available and utilized tool to help define one's personal and professional goals, enhance motivation, and reinforce positive choices to help attain those goals.
- Sometimes, professional counselling is a good way to enhance selfawareness in a more clinical and in-depth way.

In The Heat Of The Moment

I often ask medical audiences if it's acceptable, as a physician, to be uncivil toward colleagues or co-workers in an urgent, even crisis situation. Invariably there is someone in the group who believes that it is OK to be uncivil, especially if the doctor is in charge of the patient's care in a "life and death" situation. The speaker is usually referring to a communication style that is firm, even forceful. Few condone the use

of profanity in that situation, however. Perhaps taking an assertive, directive, yet respectful stance is in keeping with civility in such a situation, designed to bring out the best and right action from a co-worker on behalf of a patient in dire need, yet still leaving that co-worker feeling intact.

Nonetheless, crisis is a moment of high tension that can place civility at risk. Imagine, now, that you are attending a critically ill patient in the ER or ICU, about to insert a chest tube, or perhaps a central line, and your progress is impeded because the nurse or other co-worker helping you is inexperienced in some way. How do you handle your frustration or even anger?

The Physician Health Program has developed a short strategy that incorporates awareness techniques to help in these moments. We borrowed the ABC (airway, breathing, circulation) approach already familiar to those who work in critical care, and modified it:

 A stands for Awareness — learn to recognize one's own reactions to critical situations as an early warning sign. Perhaps there is tightness in the neck or shoulders? A churning feeling in the gut? Other? It would be helpful to notice how others are reacting as well.

- B stands for Breathe learn how to pause, even if very briefly, to reflect on the situation. If there is time, a short breathing meditation may help. (An example can be found here: http://php.oma.org/Mindfulness.html). Even three or four calming breaths can create space for a moment of critical appraisal and reflection regarding what comes next.
- C stands for Choose a Civil form of Communication — effective communication is the third Fundamental of Civility, which we will explore in the next article.

The goal of awareness, certainly as it pertains to civility, is to render informed and conscious behavioural choice readily available. Those who achieve the highest level of self-awareness obtain a useful and functional insight. Such individuals are able to recognize the roots of their behaviours, solve problems and overcome challenges by being present in the moment, able to feel and express compassion while developing new attitudes and the freedom to make civil choices. An interesting thing can happen: while any one of us accesses civility, others seem to do the same!

Awareness is at the heart of a caring and civilized profession. Choose civility. ■

The introduction to the series, "The Five Fundamentals of Civility for Physicians" (published in the March 2014 OMR), and "Fundamental #1: Respect Others and Yourself" (published in the May 2014 OMR), are available on the Physician Health Program website (http://php.oma.org).

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References

- Goodreads [Internet]. San Francisco, CA: Goodreads:c2014. Anais Nin quotes [author quotes]. Available from: https://www.goodreads.com/author/ quotes/7190.Ana_s_Nin. Accessed: 2014 Aug 26.
- Epstein RM. Mindful practice. *JAMA*. 1999 Sep 1;282(9):833-9.
- Gilbert P. The origins and nature of compassion focused therapy. Br J Clin Psychol. 2014 Mar;53(1):6-41.
- Leiter M. Analyzing and Theorizing the Dynamics of the Workplace Incivility Crisis. New York, NY: Springer; 2013. p. 48.

The Five Fundamentals Of Civility



Respect Others and Yourself

Treat everyone in the workplace, regardless of role, with respect — even those we barely know, disagree with, or dislike. Respect for others requires inclusivity while observing healthy boundaries. Self-respect is key.



Be Aware

Civility is a deliberate endeavour, requiring conscious awareness of oneself and others. Mindfulness and reflective practice enhance awareness.



Communicate Effectively

Civil communication is more about how we say it as much as what we say. Or do. Effective communication is critical at times of tension or when the stakes are high.



Take Good Care of Yourself

It's hard to be civil when personally stressed, distressed, or ill.



Be Responsible

Understand and accept personal accountability. Avoid shifting blame for uncivil behavioural choices. Intervene when it's the right thing to do.