

Full Episode Transcript

With Your Host Heather Branscombe

Episode 41, Candid Client Communication: The Art of the Hard Conversation.

Welcome to *Clinicians Creating Impact*, a show for physical therapists, occupational therapists, and speech-language pathologists looking to take the next step in their careers and make a real difference in the lives of their clients. If you're looking to improve the lives of neurodiverse children and families with neurological-based challenges, grow your own business, or simply show up to help clients, this is the show for you.

I'm Heather Branscombe, Therapist, Certified Coach, Clinical Director, and Owner of Abilities Neurological Rehabilitation. I have over 25 years of experience in both the public and private sectors, and I'm here to help you become the therapist you want to be, supporting people to work towards their dreams and live their best lives. You ready to dive in? Let's go.

Hi there, friend. Happy fall, if you're listening to this when it was first recorded. I want to share with you that October is one of my favorite months of the year because of the days that we're actually having today as I'm actually recording this. It's kind of mid-October today, it's sunny, the leaves are changing outside, it's cooler but it's not actually cold out. And I don't know about you, but I'm just in this new routine that fall often brings.

And for those of us that work at Abilities, which is where I have founded and work as the clinical director and the CEO, it includes offering this ongoing education and support for our staff. Now that we're over the summer we're back into the new routine. One of my favorite things that we do is something that we call a collaboration meeting. And while the format of this meeting can change, the idea is that we share challenges as a team as well as resources and support on how to think, feel and act, basically to improve our biggest work challenges.

Now, I know I'm biased but I think that I work with some of the smartest, most kind and caring people that I know. And yes, I do know that we don't own the corner market on this, but I always really love to see what we can come up with together. I love the diversity that we have, and that extends to diversity in age, experience, education, gender, the roles we have in the company and the lived

experience, both professionally and personally. It really does lend itself to a true collaborative experience.

So this week we met for our collaboration meeting and we started to talk about having hard conversations with clients. And I think it was so helpful, first, we're going to be continuing to discuss it at our next meeting, and I thought that this information is so important that I would share a small part of it and what we talked about this week with you as well on the podcast episode today.

Now, I want to pause here for a moment and say if this kind of support and collaboration sounds as awesome to you as it is for us to do it, you might just be a great fit for Abilities. So if you're ready to take the next step in your career, I'd invite you to visit our website and explore our current job opportunities. Your ideal job may just be a click away. I don't want you to miss out on this chance to join our dynamic team and really to make a positive impact on a bigger and a deeper level.

So you can head to our website, which will be in our show notes, or you can just look up Abilities Rehabilitation, all one word, .com to see our openings. And then you can reach out to me for your confidential and completely casual 30 minute call to talk more about the possibilities.

Now, with that let's talk more about having hard conversations with clients. Now I want to start out by saying hard, the word hard really is subjective. And so when I'm talking about hard I want to talk about whatever feels hard for you today. So I'd like you to think about that. What is something that is hard to have a conversation about with a client?

So some of the examples that we came up with are issues maybe around hygiene, around attendance, around contradicting another clinician's advice and things like collecting payment. So one of those might feel personal to you and might feel hard, but I'd really offer you to choose something like this or something else that is really happening right now so you can use this work that we're doing today.

What we're going to do in the episode is talk about why some of these issues are hard and how to decide if it's time to have a conversation. And then I want to offer you a framework to have a conversation if you decide to move forward.

So let's talk about what hard means to you. When I think about the buckets of what hard can look like, I can usually put it into one of three buckets. One, primarily we're worried about the feelings of the other person. Two, it might be just that I am less practiced or you are less practiced at doing it. Or, three, we could be worried about our own feelings as well.

And often when there is some kind of hard conversation, it's often around some kind of conflict. And really, conflict really comes down to a difference of expectations. And the other person in that potential conflict, one, they might not know that there's an expectation. They might not understand that they're not holding up to the expectation. Or even if they know that there's an expectation and they understand that they're not meeting their end of the bargain, they might not understand the true impact of that expectation and not meeting it.

Well, I know that handbooks and policies and procedures are not fun, they're not sexy. But really, when we're working either on our own or within an organization, having policies and procedures that we can go back to help us to kind of think about the expectations that we have for ourselves and for other people. Now, while we might have that for yourself, whether we're working on our own or within an organization, our clients often don't know our policies and procedures.

And even without that, we often will have the societal expectations that aren't actually always clear. As we become more diverse as a society via that being cultural, gendered, cognitive differences or trauma, it really does make sense that those societal expectations that we just thought everybody would understand a few years ago, aren't things that we're all going to necessarily understand moving forward.

So the first thing that I want to offer you is there is an opportunity for you to do some kind of prep work to help you understand your feelings, why you have them and then if you want to move forward, to have a framework to bring it all

up. So if you decide to do some prep work, here are some things that you can do to decide if and when you actually want to have a conversation.

So, first, I like to think about just letting that situation and thinking about the story that I have created from that, really thinking about just letting that all out. Sometimes I haven't even decided what I actually think about something. And so you can do that in a variety of ways.

I don't know about you, but I'm actually often a verbal processor. So sometimes talking to other people helps me to kind of process verbally what I'm actually thinking and feeling. So that can be a helpful way for you to understand what is your story about what's happening right now. Another nice way to do it is to journal about it or to even just write some bullet points about that situation.

So, ideally, what you want to do is to think about and to be really clear about this given situation that feels hard from your own perspective. Before we even think about the client, we want to think about ourselves. And then once you have that story down in whatever form works best for you, what I invite you to do is to separate the facts from the thoughts in that situation.

Now, again, if you have a difficult time understanding how to separate facts from thoughts, episode one and two of this podcast are amazing resources to learn more. But basically you want to look at what are the things that everybody would agree on? And then the thoughts are, what are the objective things that everybody would agree about, what is my brain making that mean? Those are the thoughts.

So you want to be able to separate them out, not from a place of judgment at the beginning. And again, not from thinking about the client's point of view, but just to be able to objectively see what are the facts and what are the thoughts

And then, next I would think about what a positive outcome would look like for you. Often when I talk about this with other people, our brains like to go to, I know my brain likes to go to something that the client would do what you want

them to do. And while that sounds awesome, we know that we actually can't control what other people do.

So instead of thinking about a positive outcome being that the client is going to do what you want to do, I would invite you that a positive outcome could look like something where there is as much autonomy and as much choice for both sides in the situation, for all sides in the situation. So in order to think about that, again, you want to start and think about yourself. Where is your autonomy and where is your choice in this situation?

And then you can think about where is the autonomy and where is the choice that you can offer the other person, in this case the client in this situation. When you're thinking about what works for you and what options you can give to the client, this is a really important time to think about your own boundaries as a clinician. And what I want to offer is that boundaries are best made from a place, not from a reaction, not from anger, but actually from a place of care and concern for all people. That includes yourself.

So by going through this kind of prep work of really trying to understand where you are coming from and then seeing where you can find the autonomy and choice from both sides, that will allow your nervous system to ground a little bit more. Which will help you to think about the boundaries that work for you, and that could potentially work for your client as well. Again, the boundaries are really about you, but we want to make sure that they can work for you and for the client.

Finally, I think when we talk about things like having a hard conversation, sometimes there's this underlying current that conversations always need to be had. And I just want to say that sometimes a conversation actually doesn't have to be had. Sometimes doing your own prep work is enough for you to feel good moving forward.

We don't always actually have to share boundaries with other people. Sometimes we do but we don't always have to do that. So I like asking the

question, what are the upsides of having a conversation? And then alternatively, what are the downsides of having a conversation?

The reason that I like asking both of those is that when we are trying to problem solve, our brain likes to be very efficient and it likes to go very binary or black and white. And so by showing what the upsides of having a conversation, as well as the downsides of the conversation helps you to give a bigger perspective and, again, from a more grounded place, help you to decide how you want to move forward.

And then even if you do decide that you should have a conversation, you also have the opportunity to decide in advance what form should that conversation look like. Again, it isn't always ideal to be verbal, face to face with another person and to have a conversation, especially if it feels hard. There is the opportunity to do it in a written form, either in an email or a letter or whatever kind of communication is appropriate for the setting that you're in.

There's also the opportunity to think about times where giving the conversation or giving the options in writing may help the other person feel better and feel like they have more time to process the information and actually make a choice than if we're actually standing right in front of them.

Finally, if you're doing some kind of conversation or having a hard conversation, doing it in a written form can give you that written documentation that you actually may need going forward if you do need to move forward and to hold a boundary that you've decided is important for you.

So, all that being said, if you do decide to have a conversation, here's a framework that I like to use that you can borrow to help you to confidently move forward in that conversation. And again, this can work whether it's in a written conversation or a written communication or verbally.

I like to always ask for consent, especially if it's verbally, but to ask for consent to discuss the situation. And if you're doing something in an email, that is asking for consent because you're giving the other person the choice to decide when

and where they actually want to open that email. But if you're not doing it in a written form, actually asking them in advance when and where would be a good time for them to have a conversation with you is always a good place to start.

Next, you want to ask for their perspective in the situation. So especially if you've done the preparation work, you know what your story is and what your brain is making the facts in this situation mean, you really want to give them the full opportunity to listen to their story.

And one way that I like to do that, and to stop myself from trying to defend myself in a situation, is to actively listen for the facts and the thoughts in their situation. This is a point where you are not trying to defend yourself, you're really trying to listen to understand with curiosity to see what is happening.

And then once you understand, you have started the conversation by talking about what you want to talk about, you've heard their perspective, it's a really great next step to start from a place of agreement. And that place of agreement is most often coming from the facts.

So, for example, it could be, hey, what I've noticed is you have come three times out of the last 10 times you were booked to come and see me. So that's a place of agreement. Would you agree with that? Yes, I would. Or I've noticed that the time you are coming, your session time is at 4 pm and I've noticed that you've been arriving at 4:15 or 4:30. Do you agree with that? Those are the kinds of things where you're going to start with that place of agreement.

And this is where I really like to use the model to be able to help to create this framework of how their brain is interpreting the same set of facts. My brain is making it mean this thing and it sounds like your brain is making it mean something else.

Now, I wouldn't necessarily use the term, "your brain is making it mean." I might use something like, oh, you are coming three out of 10, I was making that mean that you might not value therapy. And it sounds like you're making it mean that

whatever was happening, whatever story they have for why they weren't going was more important than arriving on a consistent basis.

So this is where you understanding what your thoughts are and what their thoughts are and using the model, then you can see why there is a difference. You have the commonality of the facts, but you have one set of thoughts that are coming up, and most likely, because you're having a hard conversation, your client is having a different set of thoughts.

And then from that place, you really want to be open to pausing at that point. Because as you start to notice that there is this difference, you want to check in with yourself to make sure you see how you are feeling, as well as noticing how the other person feels. Because if either of you are really activated, if your nervous system is really activated, and you may know for yourself if that's activated. If you feel like you're being very defensive or you feel like the other person is being very reactive or defensive, then that might be just the beginning of the conversation.

We need to be open to the possibility that there won't be a conclusion, meaning an action plan, at the end of this. But just starting to share both sides and giving both sides, including yourself, the time and the space to process that would be really important in order to make sure that we give, again, both sides, if we're thinking about the positive outcome that we're looking for, if the goal is autonomy and choice for both sides, we want to make sure that we're both doing that from a grounded place.

And then, again, from that prep work if you both feel like you're at a place where you can move forward, that's where you can offer that autonomy and choice whenever possible. And you might need to seek support when you need it. And depending on where you are, there are going to be different support options.

You also want to be ready to support your own boundary if needed. And again, if you need support to help you to support your boundary in that, you need to seek that support in order to move forward to give both you and your client autonomy and choice in that situation.

So let me give you a really concrete example of this that was actually shared in our collaboration meeting earlier this week. There was a speech pathologist that was having difficulty with attendance from two separate families. And so the speech pathologist decided to email the families to give them time to process, as well as to document that he was reaching out to talk about the attendance that these clients were having in their sessions.

So what he did first in that preparation, he found out his facts and he found out his thoughts. The facts were that the clients, each of them individually, had attended X out of the last 10 sessions, and he was able to share that.

So for this clinician, it was important for him to communicate with the families because the impact of the families not coming on what he felt like was a consistent basis meant that his brain was making that mean that he was not able to offer his services to as many families and he wasn't being valued as a service provider. And so he wanted to be able to consistently provide service at a time that he considered a prime time for the families that he's looking to serve to deliver those services.

So after mentioning that the client had missed X out of the last 10 sessions, he became curious and basically shared, I'm wondering if this is a good appointment time for you moving forward. If it isn't, we would be more than happy for you to change the time so that it's more appropriate. Or if you do think that it's a good time and you're having a difficult time attending on a consistent basis, then the boundary is that that client would not be able to have that same appointment spot moving forward because it wasn't fair to the other families who were actively waiting for consistent service at that time.

And so he sent that similar email to two separate clients. One then decided to move to a different spot and the other decided to keep that spot. But what the therapist noticed is that when they had to cancel, they were much more communicative in terms of telling them that they had to cancel, even if it was last minute. And then they would reschedule that missed appointment right away.

So for this speech therapist, he was able to maintain his boundaries and he felt empowered to feel like his services were valued. And the client was also given choices and the autonomy to choose within the clinician's own boundaries. This speech pathologist was able to keep himself grounded and empowered as he empowered his client to make a choice that worked for them.

Now, did I make this sound easy? Let me be clear, having hard conversations is a skill. And so because it's a skill, it's going to take time and it's not always going to come easily. So, as I mentioned in the framework, reaching out for support is critical. And you can consider me as one of your support people. So give it a try and let me know how it goes. I can't wait to see the impact that you create with this skill, not only for yourself, but for your clients as well.

Now, if you liked this episode, don't forget to follow and rate this podcast so that other clinicians can find it just like you did. Have a great week and I will talk to you soon. Take care.

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