

Building a Positive Work Environment



The ACT PRIME Study

Infectious Disease Research Collaboration, Uganda.
ACT Consortium, London School of Hygiene & Tropical Medicine, UK.



Infectious Diseases Research Collaboration & ACT Consortium, London School of Hygiene & Tropical Medicine (2011). *The ACT PRIME Study Trainer Manual: Patient Centred Services – Building a positive work environment.*

Table of Contents

TRAINER BRIEF FOR PCS 03	2
Format of this module	2
Rationale for this module.....	2
TRAINING AGENDA	5
INTRODUCTION TO THE MODULE	5
Preparation	6
1. Greetings & Review	7
2. Training rationale and learning outcomes.....	10
TOPIC 1: HEALTH CENTRE MANAGEMENT CHANGES	13
1. Introduction to the topic	13
2. Thinking about the topic.....	14
3. Principles and practice.....	17
4. Discussion and planning	18
TOPIC 2: DEALING WITH STRESS AT WORK.....	21
1. Introduction to the topic	21
2. Thinking about the topic.....	22
3. Principles	24
4. Practice	26
5. Discussion	29
6. Planning	30
HEALTH WORKER SELF-OBSERVATION ACTIVITY #3:.....	33
1. Introduction	33
2. Instructions for Self-Observation Activity	35
CONCLUSION	37

TRAINER BRIEF FOR PCS 03

Format of this module

This module is a little different to other modules. In this module, there are two topics. In the first, in-charges should present their learning from the HCM modules to the other staff, and have a discussion on the implications for the health centre and staff. In the second, you, as trainer, will be taking feedback from participants about their SOA on stress, and building on this to develop strategies for dealing with stress at work. It is essential that all participants, and the trainers, have all completed the SOA in advance of the workshop. This may require reminders from you prior to the workshop.

Rationale for this module

The topic today is 'building a positive work environment.' The rationale for this module comes from our formative research finding that health workers felt unhappy in their work environment, leading to low motivation to work to the best of their ability, as well as absenteeism. Health workers face many challenges in their work. They often work at the health centre alone, without the drugs and other supplies that they need, insufficient equipment, and without the financial and political support of those above them in the health system. These challenges, along with other constraints, can cause stress for health workers, they can have a negative effect on a health workers' ability to deliver the standard of care they would like to deliver to patients, and can negatively affect relationships with communities and with other aspects of the health system. In this situation, health workers may feel the need to seek alternative ways to make money, and to gain respect from others. This can lead to expectations of payments from patients for services or supplies, working shorter days at the health centre, and attempting to demonstrate power in relationships with others.

Today, we want you to give in-charges the opportunity to present changes that they have planned at their health centres and then to give all health workers the opportunity to discuss some of the remaining challenges they face themselves at their health centres. We want you to facilitate discussion about stress, based on feedback from the SOA from PCS 02 and help them to identify and practice skills to deal with this. Throughout this module, it is important to allow participants to have a space to discuss this with colleagues and to help each other to identify what they can and can't change, and make plans together to change the things they can.

Today we want you to focus on two topics:

1. Health Centre Management changes
2. Dealing with stress at work

The **key learning outcomes** for PCS 03 are:

Topic	Learning Outcomes By the end of this module, participants will be able to...
Health Care Management Changes	<ul style="list-style-type: none">• Recognise their challenges at work.• Know about planned Health Centre Management changes.• Know their role in Health Centre Management changes.
Dealing with stress at work	<ul style="list-style-type: none">• Recognise stress by how we feel and behave.• Understand the effect of automatic reactions on us and others.• Know how to 'step back' and stop automatic reactions.• Carry a picture of best practice in dealing with difficult patients and situations.

TRAINING AGENDA

PCS 03 will last 3 hours from start to finish.

Note to Trainer:

- Trainers, please use the table below to complete the start and end times for each training section using the 'Time Allocated' as a guide.
- Keep this agenda visible and as a guide to help you keep track of time.

Today's training will start at ____:____ Today's training will end by ____:____

Topics	Time Allocated	Start time	End time	Total time	Materials
Introduction to the module					
- Greetings & Review	5 minutes	_____	_____	15 minutes	Flip chart Markers Tape
- Training rationale and Learning outcomes	10 minutes	_____	_____		
TOPIC 1: Health Centre Management Changes					
- Introduction to the topic	5 minutes	_____	_____	60 minutes	Flip chart Markers Tape
- Thinking about the topic	15 minutes	_____	_____		
- Principles and Practice	25 minutes	_____	_____		
- Discussion and Planning	15 minutes	_____	_____		
Break				30 minutes	
TOPIC 2: Dealing with stress at work					
- Introduction to the topic	5 minutes	_____	_____	80 minutes	Flip chart Markers Tape
- Thinking about the topic	15 minutes	_____	_____		
- Principles	20 minutes	_____	_____		
- Practice	20 minutes	_____	_____		
- Discussion	20 minutes	_____	_____		
- Planning	10 minutes	_____	_____		
Health worker Self-Observation Activity #3					
- Introduction	20 minutes	_____	_____	20 minutes	Flip chart Markers Tape
- Instructions for Self-Observation # 3	5 minutes	_____	_____		
Conclusion	5 minutes	_____	_____	5 minutes	Flip chart Markers
TOTAL	180 minutes = 3 hours				

INTRODUCTION TO THE MODULE



Time allocated: 15 minutes

Purpose: To welcome and orient the participants to the training and help them to understand what they can expect of the training and what will be expected of them as participants.

Learning Outcomes: By the end of this session, participants will:

- 1) Know the names of co-participants.
- 2) Know the name of the training leader.
- 3) Review a set of ground rules for the training.
- 4) Review the previous module's key learning points.
- 5) Know the learning outcomes and purpose of the module.

Materials required:

- Flip chart
- Markers
- Tape
- Ground rules pre-prepared flip chart

Training methods used:

- Review circles
- Trainer explanation



Page 7

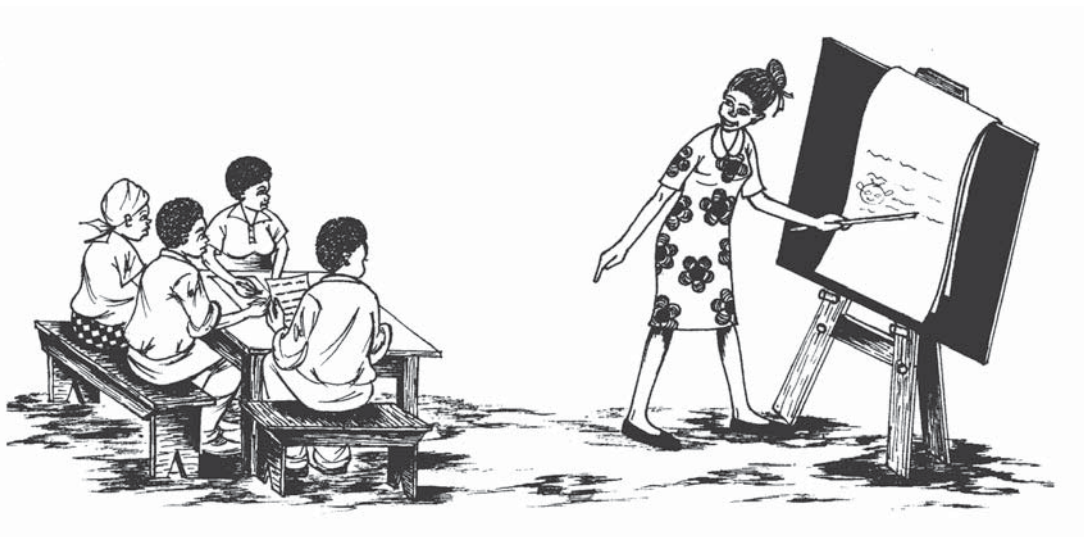
Preparation

To be completed before participants arrive:

- 1) Hang up a flip chart and arrange your manual and supplies.
- 2) Write on the flip chart: the name of the module, your name & the organisation you work with.
- 3) Ensure the room is swept & clean.
- 4) Ensure all the chairs are in a friendly well spaced and there are enough chairs for all the participants you are expecting.
- 5) Set the time you will start the training and complete the 'start' and 'end' times on the Training Agenda for each training section. Write the start and end times on the flip chart.
- 6) Hang up the 'Ground Rules' flip chart from PCS 00. If you do not have the flip chart or the ground rules, you may ask one of the participants to help you create the flip chart when he/she arrives – the participants should have the rules written in their Learner Manual.



Room Set Up



1. Greetings & Review



5 minutes

Training Steps



Step 1: GREET:

With a friendly smile welcome all participants as they arrive. Give each person a name tag, learner manual and any supplies and ask them to take a seat anywhere they like.

Note to Trainer:

- Once all of the participants have arrived, or it is the scheduled time to start the training, begin with introductions as described below.



Step 2: EXPLAIN:

- My name is _____ and I work with the Uganda Malaria Surveillance Project/Infectious Diseases Research Collaboration (IDRC).
- I am going to be leading you today.



Step 3: ASK:

You will remember the ground rules we agreed upon last time – these are noted on the flip chart as a reminder.



Step 4: REVIEW:

- We are going to start with an activity to recall what we covered together in the previous training. Please turn to page 8 of your manuals where there are review circles.



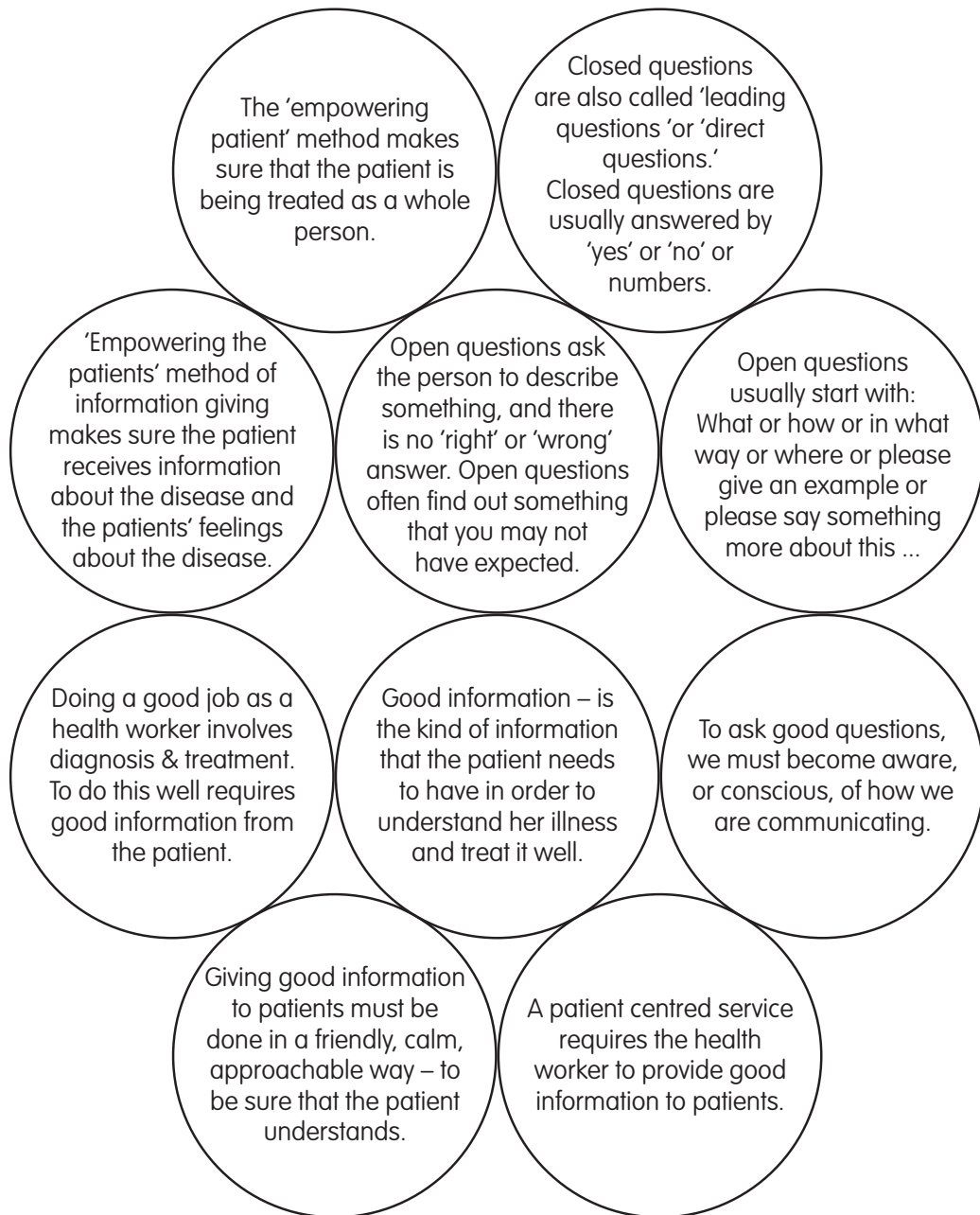
Introduction to the Module

- We will move around the circle. Starting with the first circle, each person will read out one of the statements inside the review circles. You can choose any kind of voice – a deep voice, a singing voice – just be sure that you speak clearly so all can hear you! Please start by greeting the person beside you and saying their name of the person beside you, before reading the statement – this will remind us of each others’ names.

Note to Trainer:

- Start the process by turning to the person beside you and saying her name.
- The process continues until all the review circles have been read.

Review Circles



2. Training rationale and learning outcomes



10 minutes

Training Steps



Step 1: INTRODUCE THE MODULE:

Note to Trainer:

- Use points from the Trainer Brief on page 2 to introduce the module and explain the rationale and purpose of this module. Similar information from the Trainer Brief is also included in the Learner Manual on page 9 for participants to review.



Step 2: EXPLAIN:

This module is a little different to the previous modules. In this module, there are two topics. In the first module, those among you who are in-charges will present your learning from the HCM modules that you have attended for the past 3 weeks to the whole group, and have a discussion about the implications for the health centre and staff. In the second topic, we will refer to the self-observation activity about stress and discuss how we can deal with stress at our health centres.



Step 3: EXPLAIN:

The topics and learning outcomes for the module can be found in your Learner Manuals on page 9 and are as follows:



Topic	Learning Outcomes By the end of this module, participants will be able to...
Health Care Management Changes	<ul style="list-style-type: none"> • Recognise their challenges at work. • Know about planned Health Centre Management changes. • Know their role in Health Centre Management changes.
Dealing with stress at work	<ul style="list-style-type: none"> • Recognise stress by how we feel and behave. • Understand the effect of automatic reactions on us and others. • Know how to 'step back' and stop automatic reactions. • Carry a picture of best practice in dealing with difficult patients and situations.

Step 4: EXPLAIN:



We will work towards these learning outcomes through two topics:

1. *Health Centre Management changes*
2. *Dealing with stress at work*

Step 5: ASK:



Does anyone have any questions?

Note to Trainer:

- Receive any questions.

TOPIC 1: HEALTH CENTRE MANAGEMENT CHANGES



Time allocated: 60 minutes

Purpose: To orient participants to the changes in health care management.

Learning Outcomes: By the end of this session, participants will:

- 1) Recognise challenges at work.
- 2) Know about planned Health Centre Management changes.
- 3) Know their role in Health Centre Management changes.

Materials required:

- Flip chart
- Markers
- Tape

Training methods used:

- Group Discussion
- Lecture



Page 11

1. Introduction to the Topic



5 minutes

Training Steps



Step 1: EXPLAIN:

So far in this PCS training we have focused on building good relationships with patients. We have seen that patients respond best when they are listened to and when the health centre is a friendly environment for them. We have also seen that developing these habits is also good for you, because patients are more open to you when you treat them well. They make your job simpler and more rewarding.

However, we also know that your work is hard as a health worker. Just like patients have their needs, health workers also need to be listened to, and to have a good working environment.

Today, we want all of us to discuss together what we need to do at work to make a supportive working environment.

2. Thinking about the Topic



15 minutes

Training Steps

Step 1

ACTIVITY A – Self-Observation Activity Discussion



Activity Steps

- 1) **IN GROUPS** OF 3-4
- 2) **ASK** participants to look at the table on page 11 of their learner manual.
- 3) **DISCUSS** together what challenges they identified during their self-observation and the consequences of these challenges.

Challenges I face at work	Consequences of these challenges
Eg: Lack of water supply	Eg: Unable to wash hands so may pass infection between patients
Eg: Too many patients	Eg: Feel stressed and unable to do job well

Note to Trainer:

- Move between the groups and encourage them to think about all different aspects of work: physical things, financial things, relationships with others at the health centre, relationships with politicians etc.
- Encourage participants to think carefully about the consequences of the items they list.
- There may be many consequences, and consequences of consequences.



Step 2: EXPLAIN:

Let us feedback to the bigger group on the challenges raised.

Note to Trainer:

- Ask the groups to feedback their ideas.
- List these on flip chart sheets, trying to group problems appropriately. For example, 'gloves' and 'drugs' and 'blankets' would all be grouped under 'equipment.'
- You may need several sheets of flip chart paper.
- Stick these to the wall so that all are visible.



Step 3: EXPLAIN:

We all have different experiences and challenges at work and we share some in common. These challenges shape whether we are able to achieve the objectives we set ourselves at work, and affect how we feel towards our work and towards ourselves as health workers.

Today, we want you to discuss what you can do about these challenges. But, it is important to remember that while some challenges can be tackled by you as individuals or together in groups, others of these difficulties are too big for you to deal with by yourselves.

Topic 1: Health Centre Management Changes

**Step 4: ASK:**

Has anyone heard of the Serenity Prayer?

Note to Trainer:

- Encourage any participants who know the prayer to stand and say it aloud to the group.
- It should be along the lines of the following:

**'God, grant me the serenity to accept the things I cannot change,
the courage to change the things I can,
and the wisdom to know the difference.'**

**Step 5: ASK:**

Do you understand the ideas in this prayer and do you agree with it?

Note to Trainer:

- Receive any answers.

**Step 6: EXPLAIN:**

It does not matter about what religion we are to say this prayer. Would you like to say the prayer together?

Note to Trainer:

- If the group is in agreement, encourage them to stand and read from the learner manual on page 12 if necessary.

**Step 7: EXPLAIN:**

This prayer is used across the world for different scenarios. It is useful as a reminder that although we can change some things, we cannot change everything. It is important to remember this today as we think about the challenges we face at work.

3. Principles and practice



25 minutes

Training Steps



Step 1: ASK:

- *In-charges who attended the HCM training please come up and summarise the main points learned in the three modules.*
- *Please spend 5 minutes on each module. Two or three of you can present on each HCM module for example having a pair of in-charges presenting on each HCM module.*
- *Please present the key learning points and explain the changes you plan to implement at your health centres after each module.*
- *Feel free to use the flip charts to make notes if you wish.*



Other participants please feel free to take notes in the spaces in your learner manuals for writing notes on page 12 and 13 under each HCM module heading:

- *HCM 01 PHC Fund Management*
- *HCM 02 Drug Supply Management*
- *HCM 03 Health Information Management*

Note to Trainer:

- Allow the in-charges to present.
- Encourage a round of applause for each HCM presentation.
- After each presentation, ask the in-charges to form a panel to take questions from participants about relevance for their health centres.



Step 2: EXPLAIN:

Thank you for your presentations. Now please form a panel in front of the group and receive any questions from your colleagues.

Note to Trainer:

- Facilitate the question process.
- At the end ask in-charges to return to their seats.

4. Discussion and planning



15 minutes

Training Steps

Note to Trainer:

- Refer to the original flip charts of 'Challenges I Face At Work.'



Step 1: ASK:

Please can some of you come up, one at a time and tick off one challenge on the flip chart that you hope will be addressed by the changes presented by the in-charges in your health centre.

Note to Trainer:

- For each challenge ticked off, allow some discussion about whether the group feels it is realistic for the challenge to be tackled with the changes suggested by the in-charges. Refer participants to page 15 in their manuals.



Step 2: ASK:

Do you feel it is realistic for these challenges to be tackled with the changes suggested by the in-charges?

Note to Trainer:

- Facilitate the discussion.



Step 3: EXPLAIN:

Several of the big challenges may be addressed with the changes that the in-charges plan to implement. There are still several challenges that remain. Some of these relate to our interactions with other people and how this makes us feel and react. This is what we will discuss in the next topic.



Summary Box – Health Centre Management Changes

For reference for trainers and learners

- Health workers face different experiences and challenges at work. These challenges shape whether we are able to achieve the objectives we set ourselves at work, and affect how we feel towards our work and towards ourselves as health workers.
- Some challenges can be tackled by us as individuals or together in groups, others of these difficulties are too big for us to deal with by ourselves.
- Several of the big challenges may be addressed with the changes that the in-charges plan to implement especially relating to:
 - Drug Supply Management
 - PHC Fund Management
 - Health Information Management
- All health workers can work together towards making changes at the health centre.

TOPIC 2: DEALING WITH STRESS AT WORK



Time allocated: 80 minutes

Purpose: To support participants in their efforts to find ways to respond to work stress.

Learning Outcomes: By the end of this session, participants will:

- 1) Recognise stress by how we feel and behave.
- 2) Understand the effect of automatic reactions on us and others.
- 3) Know how to 'step back' and stop automatic reactions.
- 4) Carry a picture of best practice in dealing with difficult patients and situations.

Materials required:

- Flip chart
- Markers
- Tape

Training methods used:

- Group Discussion
- Lecture
- Role Play

Page 17



1. Introduction to the Topic



5 minutes

Training Steps



Step 1: EXPLAIN:

- *As we saw earlier on the flip charts, some of the challenges we face at work are related to our relationships with others. You also reflected on this in your self-observation activities over the past few weeks when you looked at stress at work.*
- *While some changes require other people to help to make it happen, with stress, we can develop some skills to deal with this ourselves. It is not easy to get these skills, but once we get into the habit of using them, we will find dealing with stress at work, and at home, much easier.*

2. Thinking about the Topic



15 minutes

Training Steps



Step 1: ASK:

- In PCS 02, you were given the self-observation activity to look at stress.
- In the first step, you were asked to make notes about what stress is, and to observe how it feels.
- Can someone tell us, what is stress?
- And, how do you know when you are stressed – what 'symptoms' do you see?

Note to Trainer:

- Receive answers.
- Write notes on the flip chart. Refer participants to page 17.



What is stress?

For example - Stress is a negative reaction that we have to pressures and demands placed on us

What stress 'symptoms' do you see?

Feel very tired

Poor sleep

Feel sad

Depression

Feel pessimistic

Feel irritable, angry

Lose self esteem / confidence

Have negative attitudes

Feel fearful / apprehensive

Feel like drinking alcohol

Feel like crying

Topic 2: Dealing with stress at work

**Step 2: EXPLAIN:**

We all experience stress differently and so there may be different ideas about what it is and how we know we are experiencing it.

We may not even have known that we were experiencing stress before.

However, I hope you have become self-aware over the past few weeks with this self-observation activity and have managed to start to know when you see it?

**Step 3: ASK:**

Can anyone share an incident when they felt stressed and made notes as part of their SOA?

Note to Trainer:

- Take 1-2 examples in the big group.

**Step 4: ASK:**

In your groups at your tables, tell each other about what happened when you did your self-observation activities this week.

Note to Trainer:

- In groups of 3 – 4
- Put up the three questions on the flip chart (learner manual page 18) and ask the groups to listen to each other's experiences and to offer support.
- Give 3 – 4 minutes for discussion
- Ask for an example from 1-2 groups, to share experiences of that incident.



- 1) What do you think made you feel stressed?
- 2) What did you do differently because you were stressed?
- 3) How did this stress affect how you went about your day?

(Probe: how did you communicate when stressed? How did it affect your skills learned in earlier PCS modules? And how did it affect the way others responded to you?)

3. Principles



20 minutes

Training Steps



Step 1: EXPLAIN:

As we can see from your own experience, stress affects all of us and it can make us behave in a way we do not like, and can make us feel negative.

- *We can even start to feel like we are 'burnt out'.*
- *The term 'burn out' is used to describe the situation when we feel so unhappy about work that we do not want to go in, and feel totally demotivated.*
- *Stress and burn out happen a lot to health workers around the world, including here in Uganda. This is probably because of the context of work as a health worker.*
- *You may have experienced burn out yourself but not realised that was what it was.*

So, let's think about why we become stressed, and why this can sometimes lead to burn out.

- *Stress has many different sources, often relating to our environment.*
- *At the health centre, we know that some sources of stress for health workers are stock outs of supplies, financial concerns and lack of information to manage work load. The in-charges presented some of their learning from the past few weeks shortly, related to what they plan to change about these external sources of stress.*
- *Stress can also come from our interactions with other people. Sometimes, when we see patients or colleagues as 'difficult' we can become stressed. For example, people commonly feel the following:*
 - *'She stresses me, she always does X when I come in'*
 - *'Those patients always stress me, I think they do Y just to annoy me'*
 - *'If only Person Z would stop reacting like that, I would not get stressed'*



Step 2: ASK:

When we are stressed with the way someone else is behaving, like in these examples, who do we usually blame?

Note to Trainer:

- Receive responses.



Step 3: ASK:

Who do you think should take responsibility for our stress?

Note to Trainer:

- Receive responses.



Step 4: EXPLAIN:

We often react to stress by blaming others. But, if we expect others to take responsibility for our stress, it is likely that we will carry the stress with us and it will not be reduced.

- *The bad news is – you are the only one who can take action to change your behaviour and reduce your stress. You can't change others.*
- *The good news is – if you change your behaviour, the other person will change, too.*



Step 5: ASK:

So, what can we do about stress?

Note to Trainer:

- Take responses from participants – ask for examples from their SOAs. Refer to Learner Manual page 20.



Step 6: EXPLAIN:

If we respond well to stress, we often 'step back' before we respond.

Note to Trainer:

- In the following explanations, relate what you are teaching to the examples given by participants from their SOAs, of when they gave automatic responses, or when they took a 'step back.'

Topic 2: Dealing with stress at work

**Step 7: EXPLAIN:**

When we are stressed, we often have automatic reactions that are negative.

- We often become angry and irritated with others.
- For example, we may tell the patient to 'stop fussing!' or 'Just do as I say!' or, 'Listen, instead of complaining!'
- These reactions can make the situation worse, making the other person stressed too, and keeping us stressed ourselves.
- When we 'step back,' we stop ourselves from making this automatic reaction. So, instead of saying what you feel like straight away, you:
 - stop yourself
 - stand back from the situation
 - get control of your feelings.
- Then, you can choose how to respond. You might realise that your automatic reaction has prevented you from really seeing the situation, so your response is to really listen to the other person.
 - Often, when patients are being 'difficult' it is simply because they are upset and feel like they are not being heard or understood.
 - You might decide to ask a simple question, like 'please tell me more?'

4. Practice

20 minutes

Training Steps**Step 1: EXPLAIN:****Note to Trainer:**

- The next activity is a role play done in two parts.
 - **Part 1:** Role play of automatic reactions
 - **Part 2:** Role play of stepping back
- Divide the participants at each table into two groups – one group will play the health workers in the first role play and the other group will play the patients.
- The groups will switch roles for the second role play.

ACTIVITY A – Part 1: Role play of automatic reactions



Activity Steps

- **ASK** participants at each table to split into two groups. One group will be the health workers, the other the patients.
- **ASK** the groups at the tables to appoint an actor for each of the roles.
- **ASK** them to carry out the role play, to show the automatic reactions of the health worker and the patient.
- **ALLOW** each table 2-3 minutes to act out the role plays.

Scenario:

Health worker: You have had a drug stock out. You collected drugs from the district yesterday and so were not at the health centre. But, the drugs you collected did not include all those drugs that you needed. You feel frustrated with this situation, and stressed by the number of patients who are waiting to be seen. They do not seem to understand that you are trying to help them by collecting the drugs – they are just judging you for being absent yesterday.

When you see this patient, you can see that she has a Urinary Tract Infection. You do not have the necessary drugs, and you send her to the pharmacy to buy ciprofloxacin.

Patient: You are feeling upset and frustrated with this health worker. You came yesterday and waited but the health worker didn't come to the health centre. Now, you have waited for 2 hours and you have seen other patients move ahead of you in the line. You have heard on the radio that the health workers are taking drugs that should be given for free and they are asking patients to go and buy the drugs from their pharmacy.

When the health worker is telling you that you have to go to the pharmacy, you don't believe her. You think she has the drugs there and should give them to you for free. Argue with the health worker that you want the drugs here at the health centre for free.

Note to Trainer:

- Move around the groups to check they have understood.
- In this role play, you should see the health worker being angry and frustrated, and taking this out on the patient. This behaviour will have a negative reaction in the patient, resulting in an unsuccessful consultation.
- Ask one of the pairs who showed a particularly good example of automatic reactions to demonstrate to the group.

Topic 2: Dealing with stress at work



Step 2: ASK:

What was the impact of the health worker's automatic reaction on the patient, and on the outcome of the consultation?

Note to Trainer:

- Receive feedback from different tables about how this behaviour affected the patient.
- Refer to Learner Manual page 22.



Step 3: ASK:

- *As the health worker: what can you do to avoid this bad outcome of the consultation?*
- *How will you go about 'stepping back' and stopping your automatic response, to really listen to what is upsetting the patient and responding to those concerns?*
- *As the patient: how will you feel, and how will you respond, if the health worker asks about what is really upsetting you?*

Note to Trainer:

- Receive feedback from different tables about how this behaviour affected the patient.

ACTIVITY A – Part 2: Role play of stepping back



Activity Steps

- **ASK** each group at each table to appoint a different person to act in each of the roles.
- **ENCOURAGE** them to pick people who have not had so much chance to do role plays yet.
- **ASK** them to carry out the role play again, but this time, trying to stop the automatic reactions.
- **ALLOW** each table 2-3 minutes to act out the role plays.

Note to Trainer:

- Ask one of the pairs who showed a particularly good example of 'stepping back' to demonstrate their role play to the group.

Topic 2: Dealing with stress at work

**Step 4: ASK:**

How did the health worker 'step back'?

What was the impact of the health worker's stepping back on the patient's response, and on the outcome of the consultation?

**Note to Trainer:**

- Ask for feedback from different tables. Refer to page 23 in the Learner Manual.

5. Discussion

10 minutes

Training Steps**Step 1: ASK:**

What will be the most important things for you to remember when facing 'difficult patients' or difficult situations?

**Note to Trainer:**

- Invite feedback from the groups, ask participants to make notes in their manuals. Refer to page 23 in the Learner Manual.

**Step 2: ASK:**

Can anyone come up and tick off challenges from our flip chart list of 'Challenges I Face At Work' that you hope to address with the skills learned in managing stress?

**Note to Trainer:**

- Facilitate the coming up and ticking challenges.
- Refer to page 15 in the Learner Manuals.

6. Planning



10 minutes

Training Steps



Step 1: ASK:

In your groups at your tables, discuss the following questions:

- *How can you support each other to carry out these plans?*
- *How can you make sure that you continue to use these strategies to address the physical and emotional challenges that you face at work?*

Note to Trainer:

- Move between the groups.
- If they are struggling to answer, ask whether the workshops have been a useful opportunity to meet and discuss, and whether they may want to arrange their own meetings within and/or between health centres to help to support changes and sustain these in the future. Make sure participants are making notes on page 23 in their manuals.



Step 2: EXPLAIN:

There are still challenges that remain on our flip charts. For some of these, you may still be able to think of ways to address them yourself, or with your colleagues.

Perhaps you can start to address some of these if you continue to meet with each other in the future. But, some will be too hard to change.



Let's repeat Serenity Prayer as a reminder of this, you can find it on page 24:

***'God, grant me the serenity to accept the things I cannot change,
the courage to change the things I can,
and the wisdom to know the difference.'***



Summary Box – Dealing with stress at work

For reference for trainers and learners

- Stress and burn out happen a lot to health workers around the world, including here in Uganda, because of the context of work as a health worker.
- When patients are being 'difficult' it maybe because they are upset and feel like they are not being heard or understood.
- When we are stressed, we often have automatic reactions that lead to a bad outcome for us and our patients.
- If we are able to 'step back' and assess the situation before we respond, this can help to stop automatic responses.
- It is important to build self-awareness if we want to learn to 'step back'. We can do this through self-observation and support from our colleagues.

HEALTH WORKER SELF-OBSERVATION ACTIVITY #3: HOW DO YOU INVITE THE PATIENT TO COOPERATE?



Total Time: 20 minutes

Purpose: Review Health Worker Self-Observation Activity #3.

Learning Outcomes: By the end of this session, participants will:

- 1) Understand the Self-Observation Activity.

Materials required:

- Flip Chart
- Markers
- Tape

Training Methods used:

- Trainer Explanation

Page 25



1. Introduction



5 minutes

Training Steps



Step 1: EXPLAIN:

All health workers probably sometimes experience patients as 'difficult' and at other times as very cooperative. This is normal – and it often has to do with how you feel and how well you cope with these feelings. Learning to recognize these feelings and take 'a step back' before you act, will help you maintain good relations with patients and colleagues, even if at first they seem 'difficult'.

Health workers try to see each patient as a person. But, when you are feeling tired and overworked you may 'stop seeing' your patients as 'Mrs Katanga' or 'Mr Kahane', and just see them as 'patients', and often as 'difficult patients'. This is when you need to take 'a step back' and get your feelings in perspective, rather than act out automatically or spontaneously on your (bad) feelings.

Health Worker Self-Observation Activity #3: How do you invite the patient to cooperate?

Over the last three weeks, you have looked at how you listen, how you ask good questions, and how stress affects your communication with colleagues and patients. Maybe you have changed some of your methods to improve your communication. Many people say that the 'instant feedback' you get when you start listening with more attention, is so rewarding that they continue with the new habits. When they are being appreciated for their communication behaviour, it feels good. It then becomes easier to treat the patient well.



2. Cooperating with the patient

Step 2: EXPLAIN:

This week we will focus on putting together the communication skills you have learned over the last few weeks and practice them all with the patient. The goal is that the patient will cooperate well with you and that you establish a good relationship which makes the patient satisfied, well informed about his disease and its treatment, and motivated to follow your advice.

There are 2 steps for this self-observation activity, which you can complete over one week as follows:

Step 1 – Using your communication skills	2-3 days
Step 2 – Keeping your communication skills	2-3 days

The framed pages that follow are your self-observation guide. Remember to take them out of your folder as you go about your self-observation.

Note to Trainer:

- Move carefully through the self-observation pages that follow, reading the steps carefully. Refer participants to page 27 in their manuals.





Instructions for SOA #1

Step 1: Using your communication skills

For the first 2-3 days, pay attention to **how you use the communication skills** you have learned during your PCS training and self-observation activities.

Each time a patient comes to the health centre, pay attention to how you:

- Greet the patient, and make him/her feel comfortable
- Help the patient to find their way around the health centre: where to go and what to do
- Listen to him/her to find out the patient's thoughts and ideas about the disease
- Ask questions
- Give information, advice, and say what action patient should take
- Check to find out if/how the patient has understood your advice, and if he/she has any questions
- Any other action you take

Make your notes in your notebook about what you do that seems to have a **positive effect** on your communication with the patient and on how the patient cooperates with you.

Make your notes in your notebook about what you do that seems to have a **negative effect**.

Ask yourself what could be the cause of your problems:

- Could it be related to your mood (is your mood 'pushing down your antennae')?
- Or to the mood of the patient, and how you react to this (e.g. is the patient scared? Shy? Angry?)
- Did you use non-verbal communication in a way the patient reacted to?
- Or is it about what you say, i.e. clarity of the communication? Did you use medical terms and jargon?
- Or did you use of a language the person does not understand well?
- Are you guessing what the problem is, or did you manage to get at their 'real' concerns?
- Or – anything else?

After 2-3 days, move on to Step 3.



Step 2: Keeping your communication skills

For the rest of the week, look at your overall communication style and interaction with patients.

Try to focus on the following three questions:

Question 1: Do you see a pattern in how you invite the patient to cooperate? What is the pattern? When do you need to take 'a step back'?

Make notes in your notebook of the actions you take to successfully invite the patient to cooperate.

Question 2: Do you have 'a picture in your head' of how you want your patients to see you? How do you behave to achieve this 'picture in your head'?

Make notes in your notebook of the successes and 'failures' of behaving in this way.

Question 3: How can you work with others to improve the patients' visits to the health centre?

Make notes about how you can work with other health centre staff and volunteers to make the patient feel more comfortable and willing to cooperate.

Make notes in your notebooks to discuss with your colleagues at the next PCS training module.

Please bring examples both of what you do, that works well, and examples of problems you have in using your communication skills. In each case, reflect on WHY your approach works (i.e. what exactly is it you do, or don't do), or does not work. When sharing such strategies and challenges, you can learn from each other.

Conclusion

CONCLUSION



Total Time: 5 minutes

Purpose: To close the PCS 03 training and receive any questions or address any questions in the parking lot.

Materials required:

- Flip Chart
- Parking lot questions
- Markers
- Tape

Training Methods used:

- Trainer Explanation

Page 29



1. Introduction



5 minutes

Training Steps

Note to Trainer:

- This is now the end of the session and an opportunity for you as participants to ask any questions and to answer any questions in the parking lot.



Step 1: ASK:



Let's look back at our learning outcomes in our Learner Manual on page 9. Does anyone have any comments or questions about what we have covered today?

Please comment on what you think helped you learn well, and which points may still be unclear.

Note to Trainer:

- Make a note of any suggestions or queries in your Trainer Manual and follow up on these for the next module where possible.
- Address any new questions.
- Answer any questions still waiting in the parking lot.

The ACT PRIME Study

Infectious Disease Research Collaboration, Uganda.
ACT Consortium, London School of Hygiene & Tropical Medicine, UK.

Date of publication: 2011



Technical Support on Manual Development provided by:
WellSense International Public Health Consultants
www.wellsense-iphc.com



Manual designed by: Spot On Design
www.spoton.biz