

## **Relational Meetings**

## Integrating Relational Practices into Daily Work life

For most of us, our human connection with others determines the quality of our lives. This is true at work too. While we may be motivated by the deeper purpose of our helping work, or the mission of our organization, the quality of our work life is largely determined by the quality of our connections with others, on a daily basis. We work in busy, fast-paced settings, where sometimes we don't have time to eat lunch, go to the bathroom or take a break. In this time-impoverished environment, connecting with others is often the first thing that gets pushed aside. We cut short sharing with co-workers over coffee in the morning; forget to text our appreciation to our colleague and hurry past others' offices without saying hello, because we are so busy. Meetings, trainings, and other gatherings often run on this time-scarce schedule too- packing in so many announcements, information, training, handouts, and instructions we leave with our minds swirling, already focused on our next task.

In this way, our work lives mirror our patient care. We are often 'behind' in our schedule, buried in tasks and feeling an urgent sense of hurry when we see patients. We likely feel we have so much information to give them, and so little time to spend connecting with them as humans.

The urge to share as much information as possible, at the expense of connecting talk, is seductive... and it is misleading. When we don't feel connected to the person giving us information at a training, we don't take information in, don't remember information well, and rarely convert that information to meaningful action. The same is true for patients with us.

Setting aside 2 minutes during huddles 5- or 10-minutes during meetings or even 15 or 20 minutes of a training, to structure and support connections to each other is a small, simple (but not easy) step we can take to give ourselves and others time to breath; rest; be present; get to know one another; laugh. In this way, this small step may be more radical that it seems.

The purpose of this document is to share ideas and practical guidance for relational practices and other connecting exercises that can be used in meetings, huddles, trainings, and other peoplegathering activities. All exercises work in-person and virtually. It is our hope that this document encourages the imagination and experimentation of readers, as connecting practices are unlimited!

PRACTICE	PURPOSE	TIME	NOTES		
LOW VULNERABILITY					
2-4 minutes of guided mindful breathing exercises	Opportunity for grounding; invitation to be present; a break	2-4 minutes	Useful at the beginning or end of meetings; at a halfway mark for 90-minute meetings. If virtual, let participants know they can shut their cameras off if they are more comfortable that way. Use invitational language and offer choices, 'I invite you to soften your gaze or to close your eyes'		
2-4 minutes of guided mindful movement, stretching					
2-4 minutes of guided meditation					
Share: - something you are looking forward to - a place you'd like to visit - favorite ice cream flavor	Increase connection between people	under 5 minutes (for groups under 20)	Light, fun check in' activity		
Virtual polling	To activate participants early in a training/webinar; for participants to have a sense of other participants	2-3 minutes to share poll, give people time, share back out	Check in exercise for virtual training/webinars. Consider questions that are deeper, as anonymity keeps vulnerability low, while deeper questions connection people to the larger group		
Jam board/ Mentimeter/other virtual, anonymous sharing tools	To elicit sentiments of participants; to connect participants to their fellow participants; for the facilitator to get a sense of the group's beliefs, etc.	5 minutes; 1 minute to give instructions, 1 minute as people start to post, 3 minutes or so to read out, allow participants to read	Some are great for large webinars where there are many people in one room/screen, as they can use their phones to participate. Consider deeper questions as anonymity keeps vulnerability low.		

MODERATE VULNERABILITY					
5-10 minutes of guided meditation, focused on gratitude, love, loving kindness or other elevated emotion.  3 minutes of a reading on an elevated topic (gratitude, love, connection, etc.) or contemplating a related question; share out on how participants feel (one word) at the end of exercise	Enhance full presence at the meeting; decrease energy drain from multi-tasking; elevate mood; expand thinking for content of the meeting	5-12 minutes	Useful at the beginning or end of longer meetings or trainings/workshops. Best if the focus of the meditation is consistent with the theme of the meeting/workshop. If virtual let participants know they can shut their cameras off if they are more comfortable that way		
Ask participants to check in on how much presence they are bringing to the meeting/workshop	Normalize our attention being pulled in different directions; normalize worries, concerns we carry in our personal lives, at work. Enhance connection to each other as people	depends on how many people; model no more than 2 minutes per person	Check in exercise		
Ask participants, what has helped you be well during the pandemic?	Elicit strengths, positives; connect with each other	model 1 minute per participant	Is worded in the assumptive positive; if people do not feel they are 'well' it may cause them to distance		
Share about an animal companion you are/were connected to.  Share something you are excited about right now; switch	Deeper knowing of each other	Dependent on number of participants; est. 1 minute each	Check-in/connect as full humans		
Paired: paired MI practice; share one thing you are struggling to change in your life; switch	Practice MI skills; increase connection; increase empathy for patients struggles with health behavior changes	15; 2 minutes to set up, 5 minutes for each person to share difficulty/practice M1: 3 minutes to share out	Keep time; tell people when to switch. Large group share out prompt examples: How did that feel for you when you were sharing? When were you practicing MI? How was it for people not to give advice?		

Paired: Ask everyone to get their phones and look through photos for a few seconds to find a photo that brings them joy, or represents something they find joyful. Share with your partner; then switch	Shared positivity; collective elevation; connection to people's lives outside of work	5-6 minutes total; 2-3 minutes for each person	Make sure to time keep and tell people when to switch
for comm		<b>LNERABILITY-</b> ups that have high establis	shed trust
Share 3 words that describe how you feel right now	To normalize feelings in the workplace; enhance connection to others	Depends on size of group; model 1 minute of sharing, estimate 1 minute for each participant	Model sharing 3 words without explanation for a quick check in; model sharing 3 words with brief explanation for longer check in.
Group share or paired/triad sharing if group is over 10: what does resilience mean to you? Consider helpful or harmful dimensions	Normalize positive and negative responses to 'resilience'; learn more about each other; connect with others	15 minutes for under 10 people, in one group  10 minutes if paired or in triads, 3-5 minutes each to share	Keep time if paired or triads. If breaking out, give listeners the task of empathically reflecting, affirming strengths. Caution about not giving advice.
Paired sharing of something that is troubling right now	For listeners to practice empathic reflection, affirming strengths and avoiding advice; enhance connection between people	8 minutes; 2 minutes for instructions/set- up; 3 minutes for each person to share/listen.	Keep time, tell people when to switch. 3-5 minutes each (6-10 minutes total). Important for facilitator to keep time, and to state that participants are in charge of their level of disclosure- give examples of 'surface' disclosures and of deeper disclosures to show range. When giving instructions, emphasize when people are in the listening role, to avoid giving any advice at all.

Paired practice of using screens (ACE/PEARLS/PHQ, etc.). Suggest use of self, not role play	Increase knowledge, comfort, and empathy for patients, before implementation of said screen. Enhance skilled listening and responses	15 minutes; 2 minutes for set up/instructions; 5 minutes for each person to be give the screen/respond. 3 minutes for share out in large group	Keep time, tell people when to switch. Important to suggest use of self ('realplay' vs. 'role-play'), and also to give people the choice of being themselves or a fictional patient when in the role of answering screen.
Paired: share something you feel really good about	Listeners to practice positivity resonance; matching excitement/happiness level of sharer; practice skilled listening	9-11 minutes total: 2 minutes for instructions/set-up; 3-4 minutes for each person, then switch. 1 minute for a short share out if anyone wants to share about their experience (2 people sharing is great)	Keep time, tell people when to switch. Emphasize use of self (real play). Emphasize listeners response is to match mood of sharer; absolutely no advice
Paired: sharing of what you know about yourself, in terms of when you are most likely to feel distress empathy	To enhance insight and awareness into our own projective identification; practice skilled listening; to increase connection between people	10-15 minutes total (10 for paired, 15 for triads): 2 minutes for instructions; 4 minutes for each person to share.	Keep time; tell people when to switch. Emphasize listener role; in set-up, share empathic reflection and affirming for listening skills.
Paired or groups of 3: Share one trait or characteristic you got from your family that you consider negative; share one that you consider positive	Enhance perspective- taking on self; increase connection between people; practice skilled listening		Keep time; tell people when to switch. Important to model this in instructions
Paired or groups of 3: Share one negative bias that you are aware of	For meetings related to health equity, care provision, discrimination, racial justice, etc.  To normalize that we all have biases; normalize sharing about biases in order to mitigate them; practice skilled listening		Keep time; tell people when to switch. An exercise after bias is defined, normalized, and problematized

## TIPS:

- **1. Safety:** when facilitating breathing or meditation exercises virtually, encourage participants to shut off the video if they'd like. Many people feel timid about closing their eyes on video.
- 2. **Normalizing distraction:** when facilitating breathing or mediation exercises, normalize the urge to check phones or emails instead. This can be done just by saying 'most of us, including me, have the urge to instead look for a few minutes at our phones, instead. See if you can give yourself a moment of rest instead. If not, that is okay too!'
- 3. Creating conditions for connection: when participants are paired or in threes, it is important to reiterate a few times that when people are in the 'listener' role, to practice only open-ended questions, empathic reflection (kind, reflective listening), and perhaps appreciations or affirming strengths. In this way, it creates the conditions where connection occurs. Without some guidance around this, sometimes 'listeners will give advice (see below); over relate ('me too! Yesterday I...') reassure ('don't worry!') and otherwise engage in patterns that can obstruct connection.
- 4. Caution against advice giving: when participants are paired or in threes, it bears repeating multiple times: when in the listener role, avoid advice at all costs. Normalizing how hard this is, can be helpful; that we all often have the urge to give advice. It can also be useful to share why it is important to refrain in these exercises: Advice does not typically come across as caring; it stops people from talking; it assumes the person who is sharing has not thought of this, or already tried it; and it can feel a bit insulting to the sharer.
- 5. Caution against participants 'role-playing': sometimes if the gathering is a training of some kind, participants will fall into role-playing, introducing themselves to each other even if they know each other, acting like a patient, etc. While role-play can be useful in some skills practices, since the goal of these exercises are to connect more deeply with others, we want people to be themselves. Sometimes saying this directly ensures participants don't fall into this.
- 6. Time keeping and Modeling: meeting leaders and participants get nervous if they don't feel like someone is managing the time. Once it is decided how much time to take for an exercise, let the group know you will keep time. Make sure the leader(s) model the time limit. For example, if everyone has 1 minute to share 3 words about how they feel now, the facilitator starts, and shares in under 1 minute. Social learning is incredibly strong; if the leader talks for 2 minutes, so will those that follow. If the exercise is intended to be higher vulnerability; model this by sharing something that is in the high-ish vulnerability realm when giving guidance for the exercise. It is important to always state that people should feel free to share only what they are comfortable sharing.
- 7. Co-facilitation: it is not always possible, however having a co-leader or co-facilitator for meetings or longer trainings is ideal. One person can lead the exercise, while the other keeps time, watches participants, manages questions in the chat (virtual)
- 8. **Experimental mindset**: some of these exercises might work well; some fall flat; some we can't tell how they worked! These are only a few ideas, and the possibilities are unlimited. With the spirit of experimentation, try what comes to your mind!

9. Crowd-source ideas: for low vulnerability exercises, often the facilitator can turn to the group-'anyone have an idea about a check in for today?' For regularly occurring meetings, week can also rotate who's turn it is to think of a check in for that meeting.

Many of us have concerns about integrating relational practices in the workplace. Here are a few common ones, and related reflections:

- 1. We feel people will be annoyed we are taking time to do this, or are uncomfortable doing 'woo-woo' exercises like this
- Some people may be annoyed by taking time for exercises like this. Some people might be uncomfortable. It is often less annoying, and less uncomfortable, for less people than we think.
- 2. We think others want to 'cut to the chase' in terms of the reason for our meeting
- Some people do. Most people will hear the content of the meeting with clearer minds, understand and take in more information than they would have without a connecting exercise in the beginning.
- 3. We don't feel comfortable or experienced in leading meditation or breathing exercises
- Many of us relate to this! It is possible to just pick another type of exercise or ask a colleague or co-worker who is comfortable with this, to lead the exercise.
- 4. We won't have enough time for the content of the meeting/training
- This is possible.
   We remind ourselves that even if we didn't get to all the content, we know that when teams
  feel connected to each other they are more resilient, calmer, and more able to take in the
  information they did hear.

