



Your clinical and financial success may depend on work relationships within your practice.

7 Characteristics of Successful Work Relationships

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During the past 10 years, family practices have confronted a host of challenges such as managed care hassles, shrinking reimbursement, a proliferation of clinical guidelines and increasing pressures to improve quality and reduce medical errors. Despite this challenging environment, some practices have endured and even thrived.

To understand why certain practices have succeeded

while others have struggled, our research group analyzed primary care practices across the country in terms of their clinical and financial outcomes. These studies, funded by the National Institutes of Health, the Agency for Healthcare Research and Quality, and the AAFP Center for Research in Family Medicine and Primary Care, have examined quantitative and qualitative data from more than 160 practices in Nebraska, New Jersey, Ohio and

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Pennsylvania and have resulted in more than 100 peer-reviewed publications focusing on practice functioning and quality of care. We've learned that practices are complex adaptive systems that evolve over time and respond to a host of internal and external factors that influence their outcomes.^{1,2} According to our research, one of the key contributors to a practice's success is the presence of functional work relationships. This article is intended to help practices understand seven characteristics of positive work relationships and learn how to foster these characteristics among physicians and staff.

■ Thriving practices can often attribute their success to positive work relationships.

■ When members of a practice trust one another, everyone can perform his or her job more efficiently and effectively.

■ Practices that value diversity and mindfulness are open to new ideas and appreciate people from various backgrounds.

What makes work relationships work?

We have observed seven interdependent characteristics of work relationships in successful practices. (To assess your practice's performance in these areas, use the tool on page 49.)

Trust. This is the foundation for any successful collaboration. People in trusting relationships seek input from one another (and actually use it), and they allow one another to do their jobs without unnecessary oversight. Examples of trust include physicians allowing staff to use standing orders for services such as flu shots and practice managers making decisions based on input from staff. Individuals who trust one another can also openly discuss successes and failures to learn from them.

About the Authors

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Diversity. Diversity can be defined as differences in the way people view the world. Whether it stems from differences in age, race, gender, education or experience, some diversity of thought will occur in any work setting. Successful practices do not merely tolerate diversity of opinions but encourage it. Diversity broadens the number of potential solutions and enables people in the practice to learn from one another.

Mindfulness. In mindful relationships, people are open to new ideas. A mindful practice avoids operating on autopilot, encourages everyone to express their ideas without fear of ridicule, criticism or punishment, and looks for ways to continually learn and improve.

Interrelatedness. This occurs when people are sensitive to the task at hand and understand how their work affects one another. In addition, they are continually aware of how each person contributes to the goals of the practice and the larger community. Practices that demonstrate this characteristic are better able to deal with unexpected events.

Respect. Respectful interactions are considerate, honest and tactful. People who respect one another value each other's opinions and willingly change their minds in response to what others say. Respect is especially important in challenging situations, as it can help individuals focus on problem solving.

Varied interaction. Relationships in practices can be described as social or task related. Social relationships are personal and often based on activities that exist outside of work; task-related relationships are focused on professional issues. Practices should not view social and task-related relationships as mutually exclusive. In successful practices, a mixture of social and task-related relationships is required, and practices should encourage both.

Effective communication. Communication between individuals can be described as rich or lean. Rich channels, such as face-to-face interaction or telephone conversations, are preferred for messages with potentially unclear meanings or emotional content. Lean channels, such as e-mails or memos, are preferred for more routine messages. In successful practices,

individuals understand that both rich and lean communication channels are necessary, and they know when to use each strategy.

How to get there

Fostering these characteristics of positive work relationships in your practice is not

the responsibility of a single person, such as your practice manager. While leadership can play an important role, each member of a practice should be expected to lead by example. Modeling desired behavior is one of the most effective ways to encourage the systemic development of these relationship characteristics. ➤

WORK RELATIONSHIP ASSESSMENT FORM

Plot your practice’s performance in these seven critical areas on the continuum below. You may want your colleagues and staff to assess your practice as well, then compare and discuss your ratings. You can download additional copies of this tool from the online version of this article at <http://www.aafp.org/fpm/20060100/47seve.html>.

Characteristic	What does it look like?	Where is your practice on this continuum?
Trust	<ul style="list-style-type: none"> Seeking input from others. Allowing others to complete their work without unnecessary oversight. Feeling comfortable discussing successes and failures. 	<hr/> <p> Always Sometimes Never </p>
Diversity	<ul style="list-style-type: none"> Including people who have different backgrounds or perspectives. Encouraging those who think differently about important issues to share their opinions. 	<hr/> <p> Always Sometimes Never </p>
Mindfulness	<ul style="list-style-type: none"> Being open to new ideas. Talking freely about what is and isn’t working in the practice. Adjusting routines in response to current situations; not running on autopilot. 	<hr/> <p> Always Sometimes Never </p>
Interrelatedness	<ul style="list-style-type: none"> Being attentive to current tasks as well as larger goals. Being aware of individual roles and how they affect other functions and people in the practice. 	<hr/> <p> Always Sometimes Never </p>
Respect	<ul style="list-style-type: none"> Being considerate, honest and tactful. Valuing others’ opinions. 	<hr/> <p> Always Sometimes Never </p>
Varied interaction	<ul style="list-style-type: none"> Understanding the importance of both social and task-related relationships. Encouraging people to pursue activities outside of work. 	<hr/> <p> Always Sometimes Never </p>
Effective communication	<ul style="list-style-type: none"> Understanding when certain methods of communication are more appropriate and timely than others. Using “rich communication” (e.g., face-to-face meetings) for more sensitive matters. Using “lean communication” (e.g., memos) for routine matters. 	<hr/> <p> Always Sometimes Never </p>

Practices should not view social and task-related relationships as mutually exclusive.

■ Each member of a practice should model these characteristics to encourage their systemic development.

■ Practices should also hold meetings for discussion and reflection to promote understanding and action.

For example, physicians should treat staff with respect and recognize how their actions affect the rest of the practice. They should make an effort to communicate messages effectively and encourage both social and task-related relationships by being social themselves.

Practices also should allow time to meet and discuss important issues. Practices that meet often provide the opportunity for group interaction and reflection, which results in learning, increased understanding and appropriate action.

Finally, practices should pay close attention to other factors that can influence the quality of their work relationships, such as the hierarchical nature of the staff or the physical layout and organization of the practice. Anything

that could potentially hinder the creation of successful work relationships should be examined.

Trust, diversity, mindfulness, interrelatedness, respect, varied interaction and effective communication may seem like simple concepts, but they are critical. When these characteristics are modeled, developed and nurtured, the practice has a better chance of operating successfully. **FPM**

Send comments to fpmedit@aafp.org.

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