

ENHANCE PRACTICE EFFECTIVENESS AND EFFICIENCY WITH CONFIDENCE AND AUTONOMY

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INTRODUCTION: WHY CONFIDENCE AND AUTONOMY MATTER

The previous session explored how performance coaching drives clinical and financial outcomes. This lecture builds on those ideas by focusing on the inner drivers of effectiveness and efficiency: confidence and autonomy.

Healthcare practices thrive when their teams are not only competent, but also empowered to take initiative, solve problems, and deliver consistently high-quality patient care without excessive dependence on micromanagement. A self-leading team is agile, resilient, and motivated - and this culture can be built through deliberate coaching practices.

This session will show how confidence and autonomy empower staff to act decisively in patient care, reduce operational bottlenecks and inefficiencies, improve client experience and loyalty, and lead to sustainable professional growth and team retention. We will explore how to do this practically.

COACHING AS A CATALYST FOR CONFIDENCE

Confidence is not just a personality trait - it's a skill that can be developed. In clinical settings, confidence translates to improved decision-making, greater resilience under pressure, and clearer communication with clients and colleagues.

Coaching conversations provide a non-judgmental space to discuss challenges, fostering growth. They provide the safe space for reflection with guidance. By setting small, achievable goals, individuals experience "wins" that build confidence over time. Constructive feedback combined with recognition and reflection strengthens belief in one's capabilities.

Confidence grows when individuals succeed in tasks they previously doubted (Albert Bandura 1977). Coaching provides structure for these progressive successes. For example, a new graduate vet who feels nervous performing bitch spays can, through coaching and reflection, gradually build confidence in all aspects of the surgery, leading to more competent and then more efficient surgical technique. For the quickest rate of improvement it is best to get them to reflect after each procedure on what went well so that recognition can be given for this.

FLOW: THE STATE OF EFFORTLESS EFFECTIVENESS

Mihaly Csikszentmihalyi's Flow Theory describes the optimal state of performance where individuals are fully immersed, focused, and energised by their work. Flow arises when challenges are well-matched to skills - not so easy that they're boring, not so hard that they're overwhelming.

To increase flow: help individuals set goals that stretch but don't paralyse; encourage reflection on when they feel "at their best" and how they can recreate those conditions in new situations; and build confidence by showing from previous examples that challenges can be met with skill and preparation.



Examples of flow in practice could include that busy day where everyone works very hard but finishes the day smiling or a surgeon on their operating day when it goes smoothly. When flow is present, practices achieve higher efficiency, smoother operations, and enhanced patient and client care. Individual flow enhances confidence and this can extend to non-flow activities too.

THE ROLE OF APPRECIATION AND RECOGNITION

Confidence thrives when people feel valued. Studies consistently show that recognition is one of the strongest drivers of employee engagement (Gallup, 2019).

Recognition signals that contributions are noticed and meaningful, reinforces desired behaviours, thereby creating consistency and strengthens autonomy - people are more likely to take initiative when they know their efforts will be appreciated.

Effective recognition uses specific praise ("You handled that client enquiry with clarity and empathy") rather than generic ("Good job"); and links recognition to patient outcomes ("Your clear explanation really helped the client feel reassured and therefore they made the best decision for the pet"). It is also important to encourage peer recognition, not just top-down feedback.

By valuing growth and acknowledging progress, we foster mutual responsibility and confidence within the team.

REFLECTION: BUILDING SELF-AWARENESS AND GROWTH

Confidence grows when individuals understand themselves better. As Jim Rohn often said: "The greatest gift you can give somebody is your own personal development. I used to say, 'If you will take care of me, I will take care of you.' Now I say, 'I will take care of me for you, if you will take care of you for me.'" Reflection allows team members to learn from experiences, recognise strengths, and address areas for improvement.

Encourage staff to record challenges, successes, and learnings. This is a form of journalling and encourages reflection as does conducting short debriefs after procedures or busy days to identify what went well and what can improve. On an individual basis simple questions such as "What did you do well? What would you do differently next time?" work well.

Donald Schön's *The Reflective Practitioner* (1983) emphasises reflection-in-action as key to professional growth. By embedding reflection into the culture, practices cultivate continuous improvement so reducing errors, streamlining processes, and building confidence through learning.

STANDARDS, BOUNDARIES, AND GOALS

Confidence and autonomy flourish within clear boundaries. Without them, autonomy can slip into confusion or inconsistency as it is easy for individuals or teams to unwittingly get things wrong.

Define clinical and operational standards clearly (protocols, communication expectations, service guidelines). These are not meant to be restrictive but are there to create consistency and clarity. Where these are not adhered to questions can be asked about how clear the standards are and what prevented them being followed and so coaching conversations are fundamental here.

Protect staff well-being by clarifying limits (e.g., realistic workloads, respectful communication) and empower autonomy by making expectations transparent.

Locke & Latham's Goal-Setting Theory (2002) shows that specific and challenging goals significantly improve performance. Goals should be SMART (Specific, Measurable, Achievable, Relevant, Timebound). Coaching helps align personal goals with team and practice objectives and helps individuals gain clarity around what they are trying to achieve and why.



For example: A practice sets a goal of reducing client wait times by 15%. Each team member sets personal micro-goals that contribute - the receptionist streamlines scheduling, vets adopt a notetaker, nursing assistants prep more efficiently. Together, the standard is met.

APPRAISALS AND DEVELOPMENT PLANS

Traditional appraisals can feel like box-ticking exercises. When reframed through coaching, they become powerful tools for confidence and autonomy. They become less about past mistakes, more about growth potential. Individuals are empowered to set their own performance goals. Development plans are designed collaboratively to link personal aspirations to practice needs while including skill-building, leadership opportunities, and reflective practice.

Sir John Whitmore (*Coaching for Performance*, 2009) emphasises ongoing coaching conversations over once-a-year appraisals. This approach builds ownership and confidence. It also enhances progress by regularly reviewing, feeding back and adjustment (reflection).

COACHING STYLES AND THE GROW MODEL

Different coaching styles are effective in different contexts. Directive coaching provides guidance and solutions which is useful in urgent clinical situations and when the knowledge needs increasing and non-directive coaching by asking questions and facilitating reflection builds autonomy and confidence. Blending the two, adapting to context is therefore the most effective in leadership.

The GROW Model in Action

As introduced previously, the GROW framework (Whitmore, 2009) is particularly powerful for building confidence and autonomy.

Goal: What do you want to achieve? (e.g., "I want to feel confident handling complex client queries.")

Reality: Where are you now? ("I often defer to the vet or nurse, even when I know the answer.")

Options: What could you do? ("Role-play scenarios, study FAQs, shadow experienced staff.")

Will: What will you commit to? ("I'll practice two role-plays a week and debrief with my manager.")

Over time, this structured approach helps individuals own their development and act with autonomy.

CONFIDENCE, AUTONOMY, AND ORGANISATIONAL EFFECTIVENESS

Research by Deci & Ryan (Self-Determination Theory, 1985) shows that autonomy is one of the three core psychological needs (alongside competence and relatedness) that drive intrinsic motivation. People feel trusted and empowered when given autonomy. They feel capable and confident when competent. When they have relatedness they feel connected and valued.

Coaching directly nurtures all three needs, creating a workplace where staff are engaged, proactive, and efficient. This comes from reduced dependence on micromanagement; faster problem-solving and fewer bottlenecks; higher client satisfaction through consistent, confident service.

CONCLUSION: CONFIDENCE AND AUTONOMY AS CATALYSTS

Confidence and autonomy are not "soft skills" - they are essential drivers of clinical quality, patient experience, and practice efficiency. Through coaching, reflection, recognition, and structured development, practices can cultivate a self-leading team that delivers exceptional outcomes with independence and pride.

Key Takeaways:

Coaching builds confidence through structured reflection, feedback, and achievement.



- How to use flow, recognition, and reflection to for fostering both efficiency and engagement.
- How to set clear standards, boundaries, and goals to provide the framework within which autonomy thrives.
- How to use coaching models like GROW in conversations t0 drive ownership and action.
- A self-leading team enhances patient care, streamlines operations, and creates a culture of continuous improvement.

Confidence breeds autonomy, and autonomy breeds effectiveness. By embedding coaching into the daily rhythm of the practice, leaders can unlock a culture where individuals don't just perform - they lead themselves toward excellence.

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