Leading Cultural Change

(Psst – it doesn't have to be so hard!)

Colonel Korky von Kessel

LifeWINGS®

Better Teams. Better Systems. Better Care.

Objectives

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- **Identify goals/measures for improvement**
- **Determine barriers w/in current culture**
- **Strategize how to overcome barriers**
- **Practice articulating the game plan**

The "Structure" behind leading change

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Where do Processes come from?:

- Safety Tools
- Rapid Cycle Improvement
- HEN
- Lean
- QIO
- ACOG

Process or Evidence-based Practice

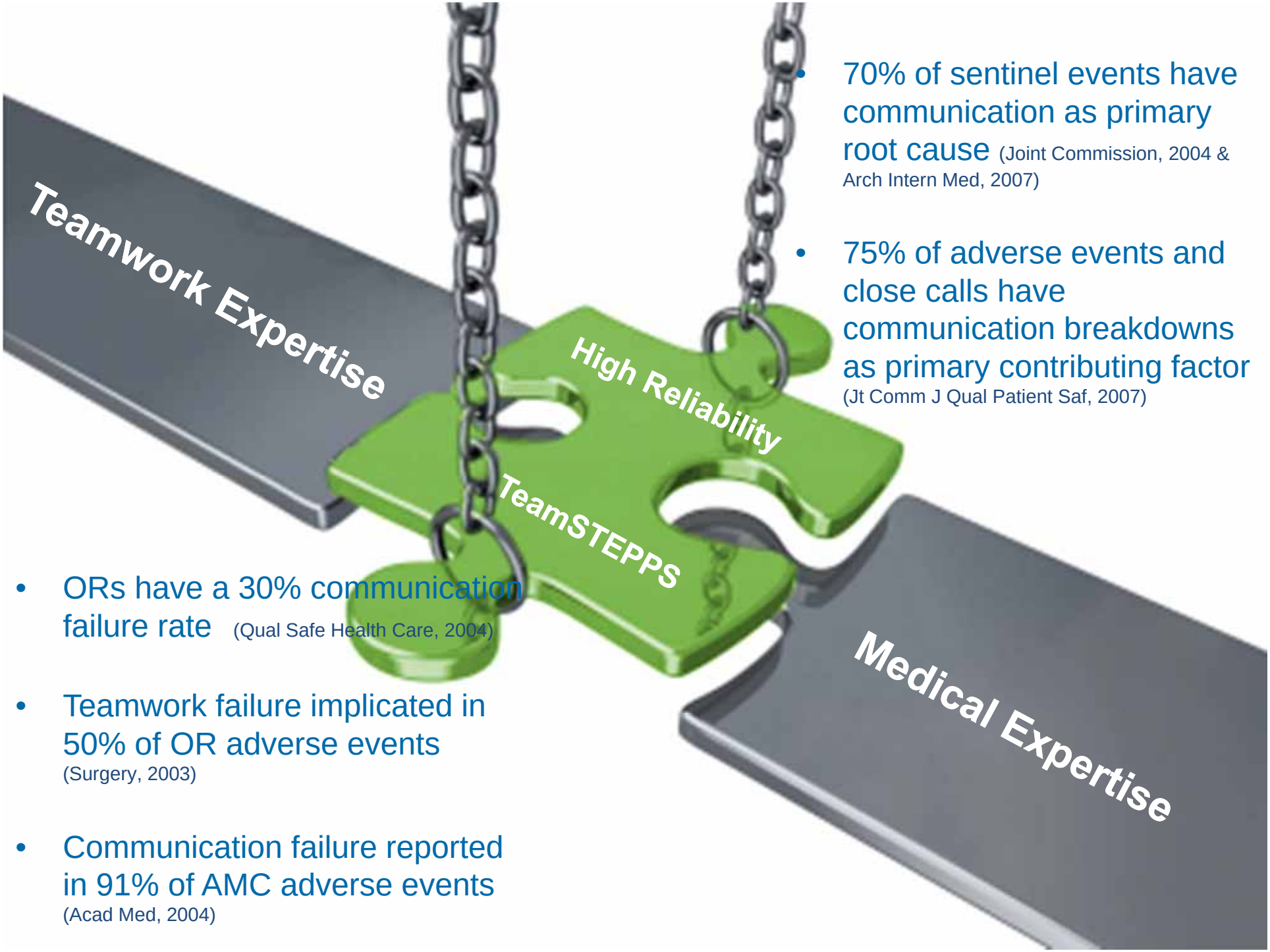
Examples:

- CLABSI bundles
- VAP protocol
- Time Out checklist
- Bedside patient handoff
- Eliminating C-sections prior to 39 weeks
- “Stop-the-Line” script

Are evidenced based processes used correctly?

No matter how effective the Evidence-Based Practice, human beings make errors. Reliability depends on a culture of accountability.

Are staff members cross-checking one another using "stop-the-line" language with senior and experienced physicians?



- 70% of sentinel events have communication as primary root cause (Joint Commission, 2004 & Arch Intern Med, 2007)
- 75% of adverse events and close calls have communication breakdowns as primary contributing factor (Jt Comm J Qual Patient Saf, 2007)
- ORs have a 30% communication failure rate (Qual Safe Health Care, 2004)
- Teamwork failure implicated in 50% of OR adverse events (Surgery, 2003)
- Communication failure reported in 91% of AMC adverse events (Acad Med, 2004)

Aviation vs. Health Care

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Attitudes in Aviation & Healthcare: A Survey of 31,033 Pilots, Surgeons, Nurse & Residents

Questions	Pilots Who Answered Yes	Surgeons, Nurses, & Residents Who Answered Yes
Does fatigue negatively impact your performance?	74%	30%
Do you reject advice from juniors?	3%	45%
Is error analysis system-wide?	100%	30%
Do you think you make mistakes?	100%	30%
Easy to discuss / report errors?	100%	56%

Nurses and physicians perceive their work environment differently

Source: Siedlecki, S., Hixson, E.Online Journal of Issues in Nursing Vol-20-2015/No3-Sept-2015/

Nurses report less levels of nurse-physician collaboration than do physicians

Source: Clark & Greenawald, 2013; Tang et al., 2013

Physicians often report having better communication in general with nurses than nurses report having with physicians

Source: Manojlovich, 2013

Are you transparently sharing your metrics, and can your frontline staff answer the questions?

- "What is our number one goal for 2019?"
- "What is the most important thing you can do to reach that goal?


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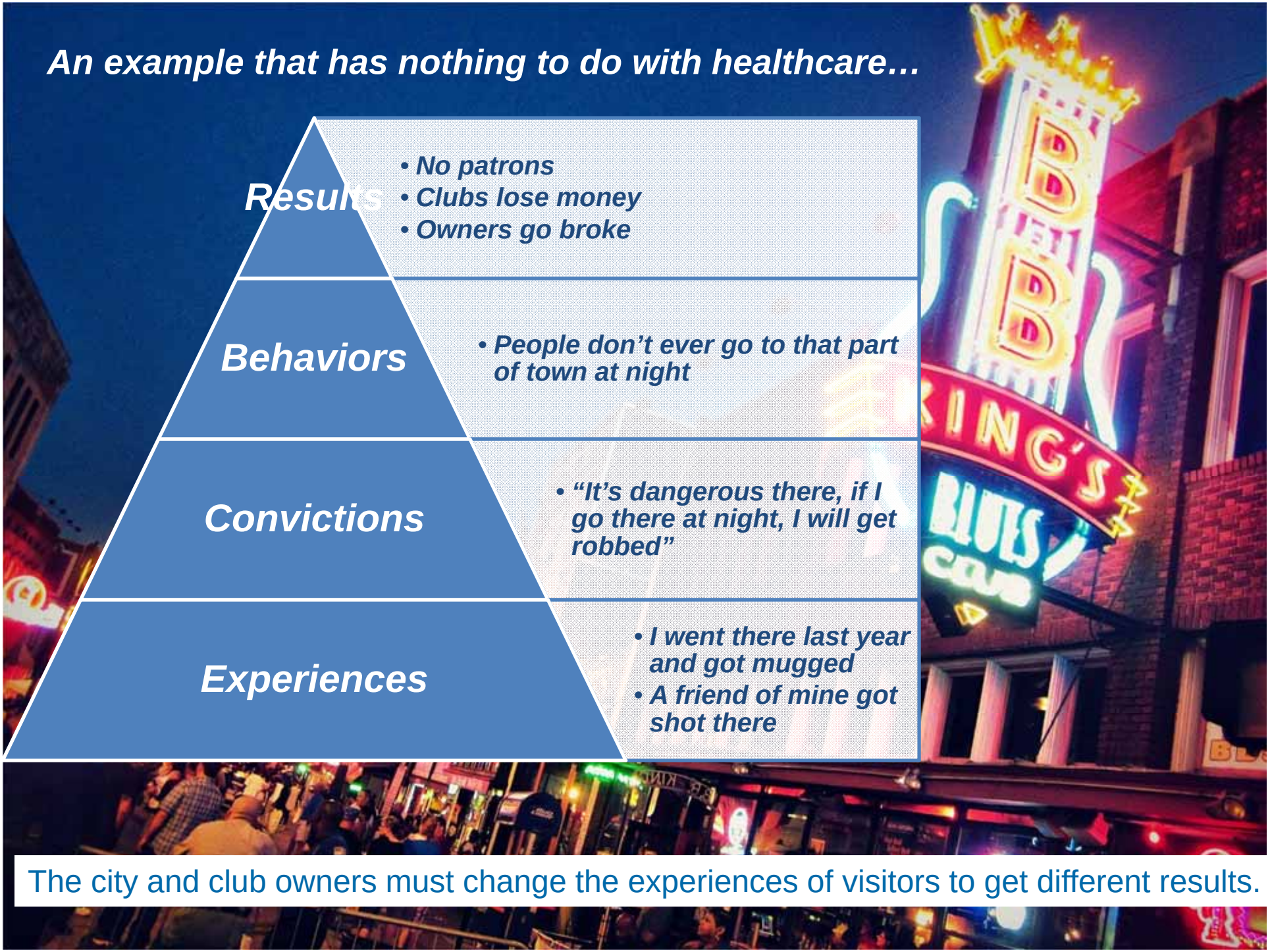
Evidence-
based
Measurement
Leadership
Can the Leadership team create the experiences that will change the way staff act?
Share Data?
Revise P&P?
Revise Credentials Process?
Coach?
Impose consequences?
Round?
Debrief?
Celebrate Success?

The experiences the leadership team create must change the belief system (convictions) of the staff. When beliefs change, behaviors change. When daily behaviors change, results will change.

An example that has nothing to do with healthcare…



The city and club owners must change the experiences of visitors to get different results.

A common mistake…

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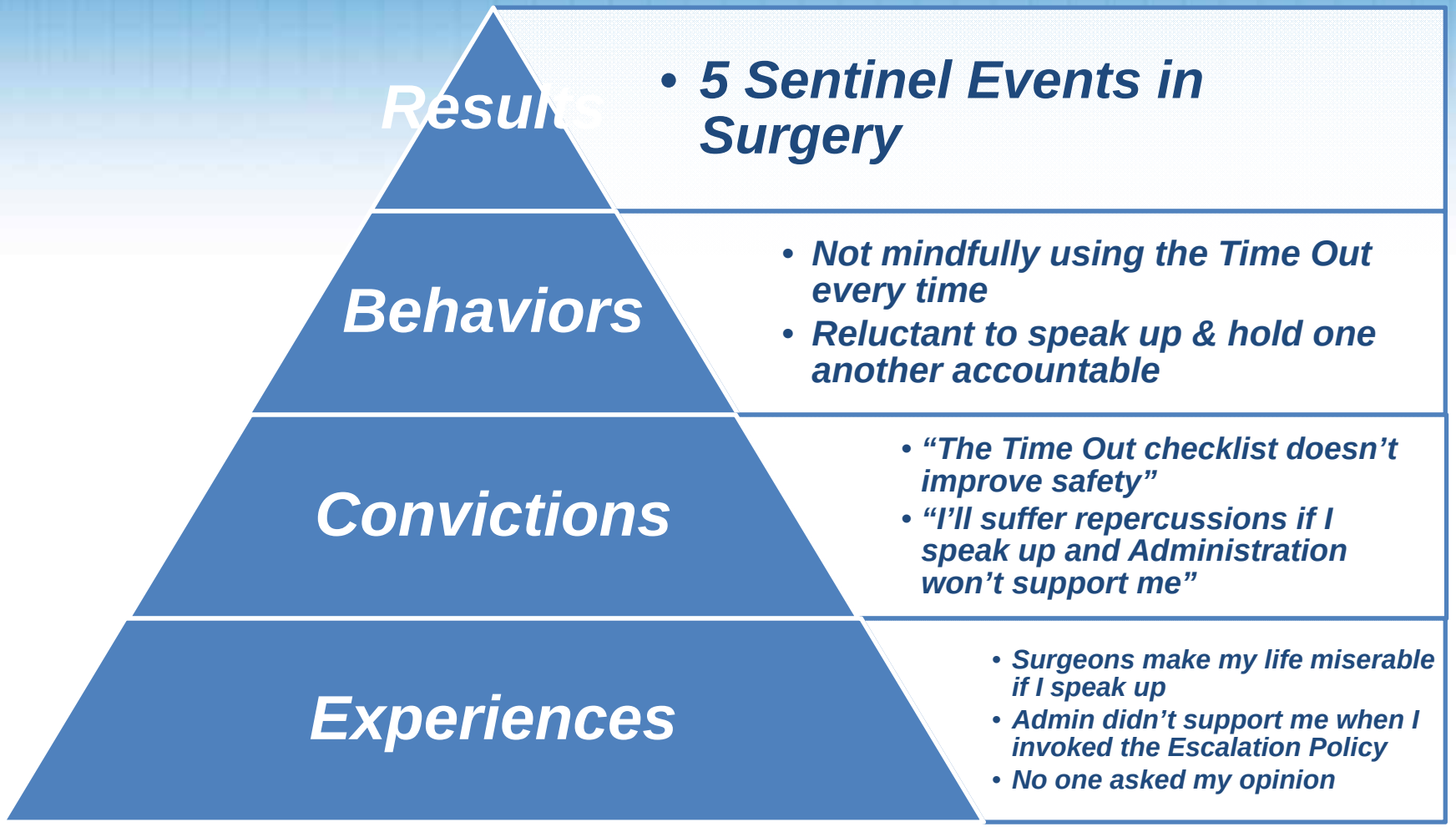
…working with only the top half of the pyramid

An example of the impact of Experiences created by the Leadership team



To get different results, equip the leadership to change the experiences that changed the beliefs, that changed the daily actions…

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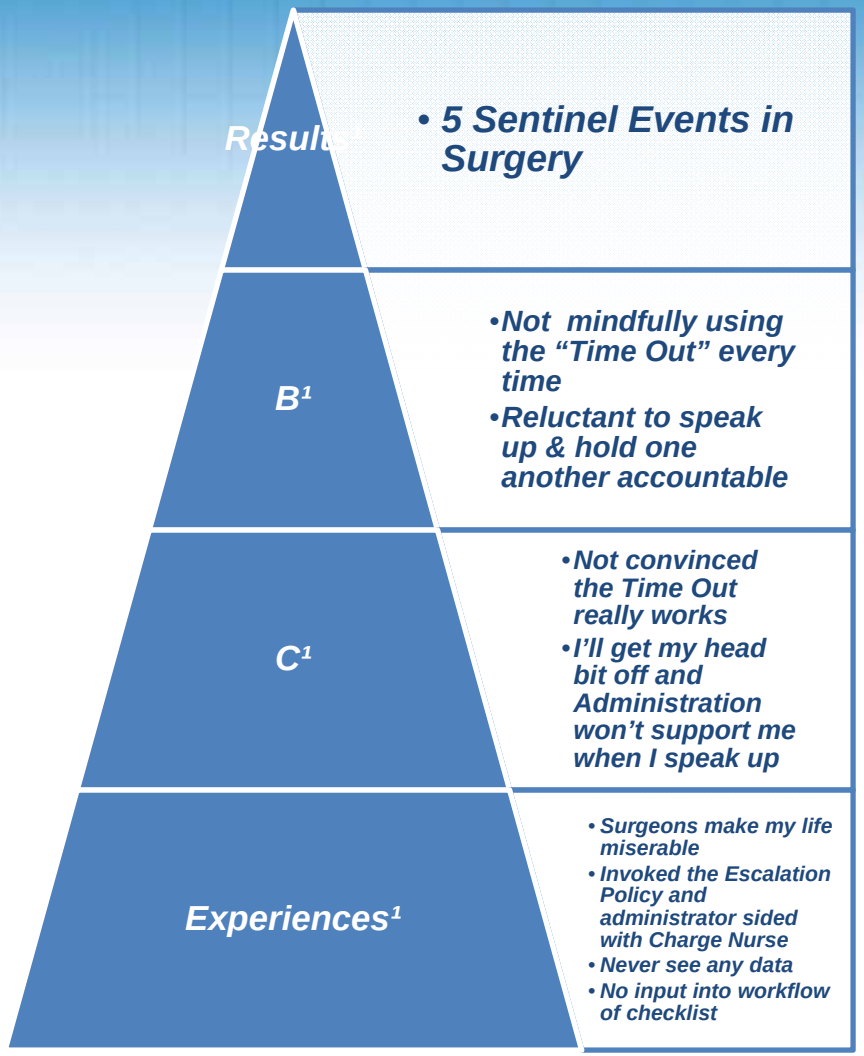

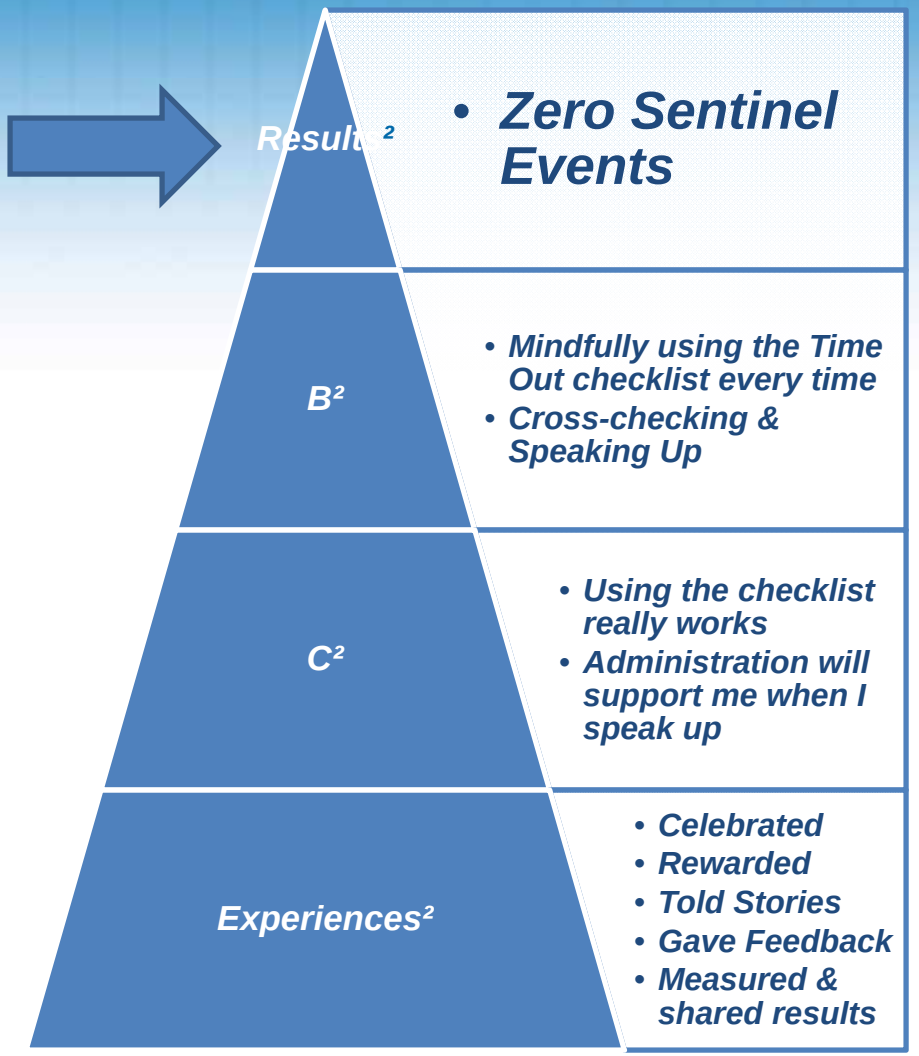

$$E^2 + C^2 + B^2 = R^2$$

Practical Exercise

(Pair up with a wingman)

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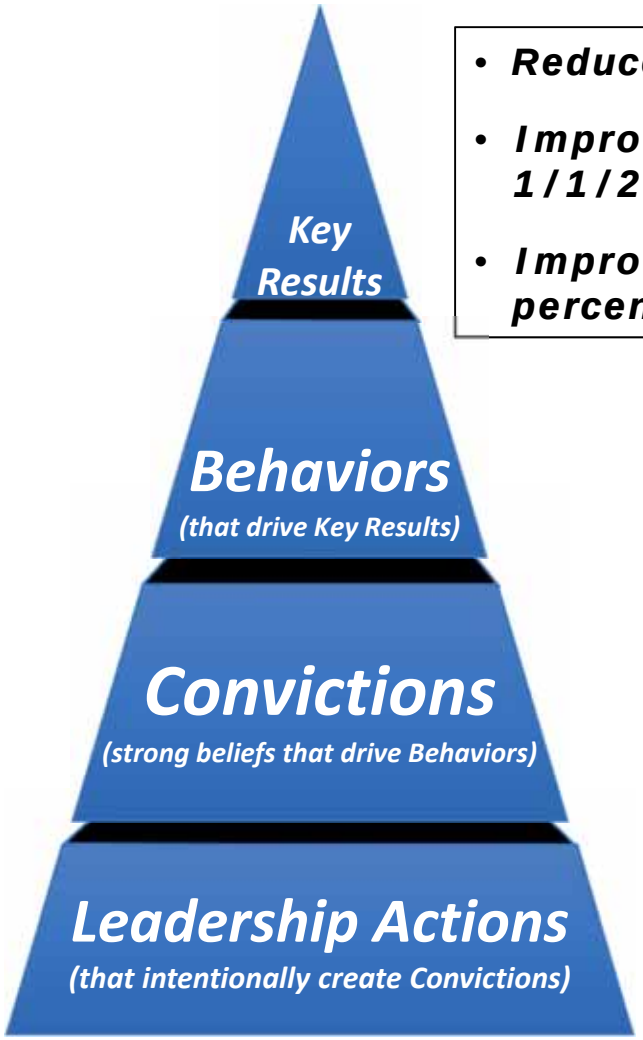
- **Pick one measure you want to improve (R^1)**
- **Determine current E^1, C^1, B^1, R^1**
- **Focus on transition from E^1 to E^2**
- **Brief your wingman on E^2, C^2, B^2, R^2**

WIIFY

Our Key Results



These are the 3 common measures from both groups

- **Reduce HAC from 150 to 75 by 1/1/2018**
- **Improve adjusted retention rate from 89% to 92% by 1/1/2018**
- **Improve "Willingness to Recommend" from 17th percentile to 50th by 1/1/2018**

These are the other measures discussed by both groups

Others:
Reduce medication errors from 8/wk to 1/wk by ____
Reduce readmissions from ____to ____by ____
Improve employee engagement from 3.85 to 3.9 by 10/2016
Improve pt. satisfaction from 24th percentile to 85th by 1/1/2018
Improve RN responsiveness score from 58 to 75 by 1/1/2018

The roadmap to different results…

1. *Reliably use our processes*
2. *Cross check each other and speak up as needed*
3. *Use teamwork & communication skills with each other*
4. *Use Studer tools of AIDET & Manage Up*
5. *Participate in process improvement*

The roadmap to different results…

1. *Using processes provide the best outcomes for our patients*
2. *I am personally responsible to speak up because I truly care for my patients*
3. *I treat my patients the way I want to be treated*
4. *My teamwork skills, with my patients and my team mates, are equal in importance to my technical skills*

The roadmap to different results…

See the Experiences Table

Experiences Table - Initial Action Plan to Drive Convictions

"The reason we are _____ is because it is important for you to believe_____"

Belief	Leadership Action	Leadership Action	Leadership Action	Leadership Action	Leadership Action
#1: Using processes provides the best outcome for our patients	Complete Focused recognition Cards on using processes & posted on unit board	Conduct leader rounding by name, by date, by schedule & repository of findings and follow-ups & review at VP meetings	Make the status of updating the P&P Manual an agenda item at appropriate meetings	Post process compliance & outcomes metrics (unit based)	Model a revised version of debriefing, to include a question about processes.
#2: I am personally responsible to speak up because I truly care about my patients	Cover a case study/role play about speaking up at every dept. meeting	Systematic recognition of speaking up & develop/use case study in meetings (build repository of stories) Maintained by LifeWings manager	Post HAC metrics appropriate to that unit in the unit and post speaking up case study/story that is connected to the metric	Train all staff in giving and receiving Assertive Statements	We use and model "speaking up" behaviors.
#3: I treat my patients the way I want to be treated	Appropriate leaders round on patients (with staff) to model patient experience behaviors (scheduled)	Focused recognition on customer service stories captured from Ask Me program – share in appropriate venues	Model caring behaviors of greeting, smiling, and eye contact	Provide coaching conversations (focused feedback) when non-caring behaviors are seen	
#4: My teamwork skills, with my patients and my team mates, are equal in importance to my technical skills	Provide Focused Recognition for demonstrated teamwork behaviors Where/When TBD	Debrief every sr. leader meeting	Focused Recognition at Department meetings and provide feedback on teamwork skills in 1 on 1 meetings (Quarterly rounding)	Follow up on all rounding info & "thank you"	Set an "Acknowledgment Policy" – model the behavior

Summary

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What Questions do you have about…

- **The “structure” behind the culture?**
- **What are your current E^1, C^1, B^1, R^1?**
- **What “process” will you use to lead?**
- **How will you produce E^2, C^2, B^2, R^2?**

Debrief

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Well	Improve