All Aboard!

Getting the Organization on Board with Patient Experience Strategies

Tom Tull
VP, Chief Experience Officer

BY THE END OF THIS SESSION, I WANT TO KNOW............
Objectives

- Define Strategies to Engage Board of Directors in the Patient Experience
- Discuss Communication Methods to Reach Stakeholders
- Review Strategies to Engage Employees Through Accountability
The World Sees........

And the Board Sees......

No one claps when the plane lands.....
The Journey Begins...Defining Your Culture

CREATING OUR FUTURE

“...Is not the result of choices among alternative paths offered by the present, but a place that is created, first in mind, next in will, then in activity. The future is not some place where we are going to, but a place we are creating. The paths are not to be discovered, but made, and the activity of making the future changes both the maker and the destination.”

~John Schaar

MSHA Service Area

- 13 Hospitals, including region’s only children’s hospital
- Urgent Care, SNF, JV Rehab, Home Health and Hospice
- 29-County, 4 State area with 1.1 million residents
- 12,000 team members, physicians and volunteers
- $1.1 billion in revenue
- MSMG with 107 locations, 352 providers (226 Physicians, 126 mid-levels), and 28 specialties
Starts at the Top

Board Education

- Board’s Role
- Quality Committee
- Routine Reporting at Board
- Education (Internal and External)
- Board Presence
- Employee Recognition
Board Education

- Board Approved Targets Based on Past Performance
- Aggressive and Aspirational
- Incentive Compensation
- Committee Participation
Focus on success
Managing for innovation
Management by fact

Organizational learning and agility

Delivering value and results
Ethics and transparency
Societal responsibility and community health
What is an Organization’s Culture?

- An organization's culture is the sum of its shared values, beliefs and norms of behavior.
- Culture can also be defined as the unwritten rules you live by at work.
- An organization's culture defines what gets appreciated, respected and rewarded.

What Is Corporate Culture?

- Corporate culture is an organization’s value system and its collection of guiding principles.
- Values are often seen in conjunction with mission or vision statement.
- Culture is reflected by management policies and actions.
- Culture and values are strongly influenced by the top executive.
Roles: The Players

- **Sponsors**: Senior management leaders - the *driving force* of engagement - must walk the walk.
- **Advocates**: Allies of leaders, deploy the vision - communicate - involve - sell - **MOTIVATE**
- **Agents**: Influence sponsors’ commitment, target resistance, measure readiness, assess existing people/structures
- **Targets**: Everyone in organization - develop, train, reinforce, support

Transmitting Culture

- Socialization
- Stories
- Symbols
- Jargon
- Rituals and Ceremonies
- Statements of Principles
3 Questions to Center Your CULTURE

• What are we doing?

• Why are we doing it? Clarity

• Where do I fit in?

Andy Stanley

Engagement Imperative – What are We Doing?

First Start with Why

Simon Senek

Quint Studer

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22nd Annual NRC Picker Patient-Centered Care Symposium
Marriott Marquis San Diego Marina
San Diego, California
August 28–30, 2016
Storytelling is as old as humankind yet as new – and important – as this morning’s news headlines.

• Stories give us identity

• They weave a fabric of existence that validates who we are and our life experiences

• Stories provide a framework from which to share and to be shared
Stories allow.....

- Sharing respect for **tradition** and **values**
- Information **sharing**
- **Education** benefits
- **Anxiety** reduction
- Interjection of Humor - diversion
- **Emotional** support
- **Involvement**
- **Family centeredness**

The Power of Stories........
Engage Every Team Member  
“Where Do I Fit In?”

- **Embrace** culture or the change needed to create the culture
- **Develop** a vision
- **Communicate** effectively
- **Shake things up** by challenging status quo and encouraging others to do the same
- **Stay Actively Involved** by walking the walk and being visible about it
- **Review Implementation** be in position to notice and coach

Connecting with.......
The Goal is Great Execution

Alignment + Action + Accountability

Who does What by When

Results

Mountain States Health Alliance is committed to Bringing Loving Care to Health Care. We exist to identify and respond to the health care needs of individuals and communities in our region and to assist them in attaining their highest possible level of health.

Mission

Mountain States Health Alliance is committed to Bringing Loving Care to Health Care. We exist to identify and respond to the health care needs of individuals and communities in our region and to assist them in attaining their highest possible level of health.

Vision

We passionately pursue healing of the mind, body and spirit as we create a world-class healthcare system.

Values

Integrity...honesty in everything we do
Service...with caring and compassion
Leadership...with creativity and innovation
Excellence...always pursuing a higher standard
Mountain States Health Alliance team members as caregivers create relationships, environments, and service delivery centered on the patient through a holistic approach to healing that ministers to the mind, body and spirit. MSHA caregivers believe that healing can exist without curing, but healing cannot exist without caring.

PCC Guiding Principles

1. Care is based on continuous healing relationships
2. The patient is the source of control for their care
3. Care is customized and reflects patient needs, values and choices
4. Families and friends of the patient are considered an essential part of the care team
PCC Guiding Principles

5. All Team Members are considered Caregivers

6. Care is provided in a healing environment of comfort, peace and support

7. Knowledge and information are freely shared between and among patients, care partners, physicians, and other Caregivers

8. Transparency is the rule in the care of the patient

9. Patient safety is a visible priority

10. All Caregivers cooperate with one another through a common focus on the best interests and personal goals of the patient
YOU are THE PRODUCERS

• Products are made
• Services are delivered
• Experiences are Staged..... Created..... Envisioned..... Dreamed

Optimize Culture - Alignment

What

How

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22nd Annual NRC Picker Patient-Centered Care Symposium
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Some people **want** it to happen,
Some people **wish** it would happen,
Some people **make** it happen!!

*What Inspires YOU to make it happen?*

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**Optimize Culture - Alignment**

- **people**
- **finance**
- **innovation**
- **growth**
- **service**
- **quality**
Value Summit Priorities

**Process**
- MSMS Aligned Provider Contracts
- Robust Team-Based Care/Navigation/Care Transitions
- Risk-Stratification Tools
- Post Acute Care Strategy
- Subspecialty Scorecard/Peer Review
- Appropriate Utilization
- Reduce Clinical Variation

**People**
- Key Providers (Clinical Pharmacists, Behavior Health Clinicians)
- Key Support (Coders, Coordinated Care Team/Coaches, Mid-Level Providers (MLPs), Population Health Analyst)
- Patient Experience
- Patient Engagement

**IT/Data**
- Internal Data Sharing
- Data Sharing with Payors
- Population Health Platform/Technology at Point of Care
- Telehealth Platform
- Leverage Patient Portals

**Strategies**

- **Nurse Communication**
  - Hourly Rounding – Communication Rounds
  - Bedside Shift Report
  - Nurse Leader Rounding
  - Physician/Nurse Rounding

- **Doctor Communication**
  - Engaging Multiple Groups – CMOs, Hospitalists (high response rates)
  - Focus on Communications and Understanding Training
  - Physician/Nurse Rounding
  - PCCE, PLA Graduates

- **Responsiveness of Staff**
  - Hourly Rounds
  - No-Pass Call Light Zones
Communication about Medications

- Hourly Rounding – Communication Rounds
- Bedside Shift Report
- Involving Pharmacy
- Discharge Instructions (Care Notes, Discharge Booklets)

Discharge Information

- Piloting new Discharge Instruction Booklets
- Creating “No-Surprise” Discharge Process through Case Management
- Discharge Phone Calls – re-evaluating process

Overall

- Raising Awareness
- Re-organizing Orientation
- Establishing Patient Experience Council
- Evaluating all aspects – registration, environment
- Creating Facility-specific plans

But How?

"There is no power for change greater than a community discovering what it cares about."
The Iceberg

Issues & Actions

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Personalities
Emotions
Interests
Needs
Desires
Self-Perceptions
Self-Esteem
Hidden Expectations
Unresolved Issues from Past

Cloke & Goldsmith

Methods for Effective Communications

“Managing Culture”

• Depends On..
  – What’s In It For Me?
  – Am I Changing?
  – Am I Being Changed?
  – Do I Understand The Culture?
  – How much has cultural change affected my life?
    • Change I Invited
    • Change I Did Not

One person’s trivial change is another’s profound change
Engagement Imperative – Instilling Accountability

Clarify Results
Identify Vital Behaviors
Diagnose
Influence

VITAL BEHAVIORS
Don’t leave VB open for interpretation
Not to be confused with:
-results
-character traits
VITAL BEHAVIORS

Vital Behavior

MY BOSS TOLD ME TO CHANGE THE STUPID SIGN SO I DID
“Why Always”

• How Often Do You Want Your Employer to Give You Your Paycheck On-Time?
  • Never
  • Sometimes
  • Usually
  • ALWAYS

• Prior to Preparing Your Food, How Often Do You Want the Chef to Wash His/Her Hands?
  • Never
  • Sometimes
  • Usually
  • ALWAYS

• How Often Do You Want the Pharmacist to Provide You with the Correct Medication When You Present a Prescription from Your Physician?
  • Never
  • Sometimes
  • Usually
  • ALWAYS

• How Often Do You Want to be Treated with Courtesy/Respect?
  • Never
  • Sometimes
  • Usually
  • ALWAYS

“Why Always”

• To be told what test and treatments they will have and how long it will take?
  • Never
  • Sometimes
  • Usually
  • ALWAYS

• To get help with toileting as soon as their call bell is activated?
  • Never
  • Sometimes
  • Usually
  • ALWAYS

• To be given information about their medicine and side effects it may have?
  • Never
  • Sometimes
  • Usually
  • ALWAYS

• To be taught how to care for themselves after they are discharged?
  • Never
  • Sometimes
  • Usually
  • ALWAYS
### Stakeholder Needs and Wants

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#### MSHA Communications Methods

**23 Major Communications Methods**

- Multi-faceted
- Multiple Delivery
- Multiple Mechanisms
- Multiple Mediums
Aligning Practices with Vision

- Patient Centered Care Councils
- Facility Meetings
- Shared Governance – System and Facility
- Departmental Action Plans
- Communication Efforts
- Team member’s Evaluation
- Difference Forms
- Annual Team Member Update
- Mountain States Moment
- Rounding in the Units/Care Areas
  - Nurse/Caregiver Hourly
  - Leadership Rounds (Daily/Weekly)
  - Tools available on Intranet

Face to Face Touchpoints

- RN Retention Committee
- TMAG formed at FWCH
- Quarterly TM and Leadership Focus Groups
- HR Attendance at various Dept Meetings
- Department Rounding – Day and Night
- Town Hall Meetings
- TES Follow Up Meetings
- Low Performing Unit Prescriptive Follow-up
- Dept-specific Interventions
- RN New Grad Follow-up
Pre-Hire
• Pre-Hire Video
• Application Screening
• Profiles PXT
• Interview
• Selection
• Pre-Orientation Video

MSHA Orientation
• Provide a Foundation for Development of Common Culture
• MSHA Mission, Vision, Values
• Build Commitment
• Standards
• Policies
• Team Member Benefits
• Computer Training
• Clinical/Departmental Training
Intro to Patient Centered Care

• Initial Day Long Experiential Event
  – Involves all the senses as we explore MSHA’s PCC Philosophy and Guiding Principles
    • Begins with “How Would you Feel”
    • Patient Testimonies
    • Jacob’s Birth
    • Education
    • Brainstorming
    • Personal Commitment to PCC

Validation
The Big Aha!

- Defining the vision
- Designing the structure for the change process
- Aligning culture and vision
- Identifying processes, policies, operating principles and metrics
- Celebrating wins
- Continuing to evolve as the organization changes

Lessons Learned

- Key executives must be on board for the culture to be supported and fostered. It can occur without them, but it takes a lot longer and is more at risk.

- Your message must be multi-generational. What has meaning to the middle aged employee has no meaning whatsoever to the millennium employee.
Lessons Learned

• Devote resources to communication, reward and recognition. If these things happen as an afterthought, you will slow or even endanger the stability of the culture.

• Connect the dots for volunteers, physicians and employees by coming back to the heart of who you are and what you stand for with all new programs.

Did We Do It?

➢ Define Strategies to Engage Board of Directors in the Patient Experience

➢ Discuss Communication Methods to Reach Stakeholders

➢ Review Strategies to Engage Employees Through Accountability
Questions

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Bibliography


• Kotter, John P.; Rathgeber, Holger, Our Iceberg is Melting, St. Martin’s Press, 2005.

