

Welcome

- We will be starting soon
- There is no sound until we get started
- Please keep your phones and computers on mute to support a pleasant experience to all
- Use the chat feature for questions

Just in Time Training

Providing Support for Health Care Staff/Frontline Workers

TOPIC: Discovering Joy in Work Part 3



JOY in Work

In a COVID-19 World Part 3

TODAY'S PRESENTERS



Ian Rios

Administrator Funded Project
Office of Care Experience



Nicole McBarnette, RN, MS

Director of Performance Improvement
Office of Quality & Safety

Our focus is on providing compassionate care by increasing workplace engagement and utilizing role model patient-centered behaviors.



Our focus is to connect all employees to the change process and empower facility-driven performance improvement while lending support and structure aligning all improvement activities with the system's strategic goals



TODAY'S AGENDA

Module 1 & 2 Recap and Session Objective

What's at Stake? How do we Rethink Joy?

Quality Improvement Introduction

Plan Do Study Act Cycles

Takeaways



Moment of Gratitude



MODULE 1 + 2

RECAP

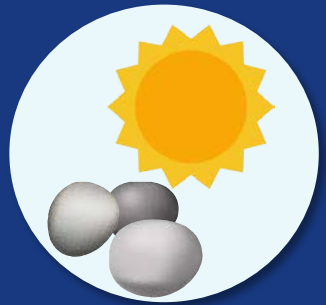
& SESSION OBJECTIVE

MODULE ONE RECAP



Joy in Work Framework

- Shared responsibility
- Emphasis on the things that already work well



'What Matters To You' Conversations

- Deep listening, non-judgment, presence, and silence
- Build rapport, articulate purpose, identify bright spots and pebbles, and strategize

STAIRCASE TO JOY

We Are
Here



4. Use improvement science to test approaches to improving joy in work in your organization

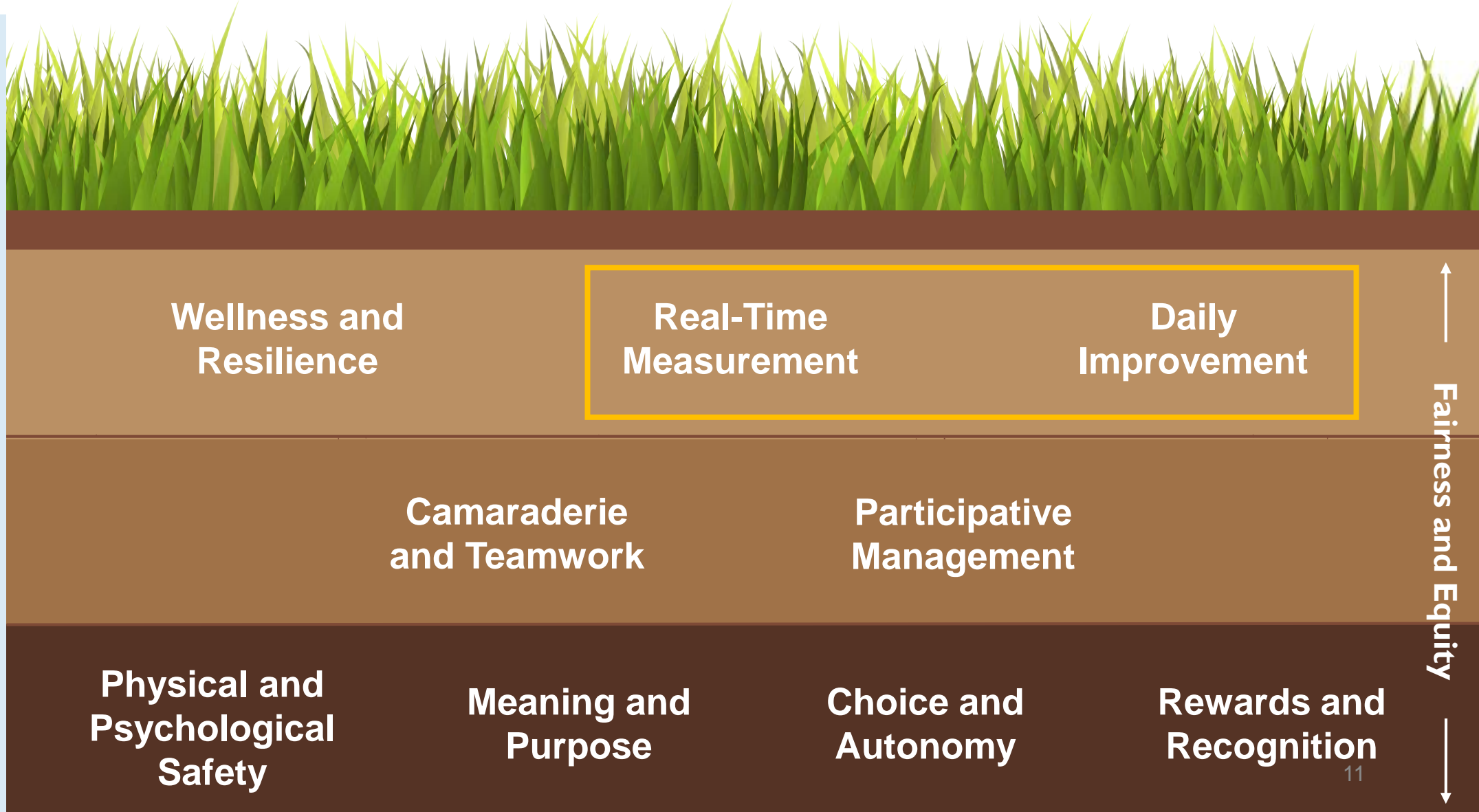
3. To make Joy in Work a reality, we need to commit to taking a shared responsibility at all levels of the organization

2. Identify unique impediments to joy in the local context

1. Ask, "What matters to you?"

We Are
Headed
Here

Nine Components for Joy



WHAT'S AT STAKE?

HOW DO WE RETHINK JOY?

WHAT'S AT STAKE?



COVID-19 is making us feel helpless

- We are feeling overwhelmed by a threat to work as we know it
- We may not see a path towards things getting “better”



Change is hard and emotional

- We're human beings and change creates uncertainty. Uncertainty creates stress.
- Even if a process is bad and we dislike it, there is still a moment of grief that it's gone because it was a familiar part of our experience.

REDEFINING JOY IN WORK

New opportunities to connect



- COVID-19 brought our system together; Joy in Work is about a commitment to the Wellness, Teamwork, Camaraderie, Psychological Safety, and Quality Improvement that will empower our connection to NYC H+H and each other.

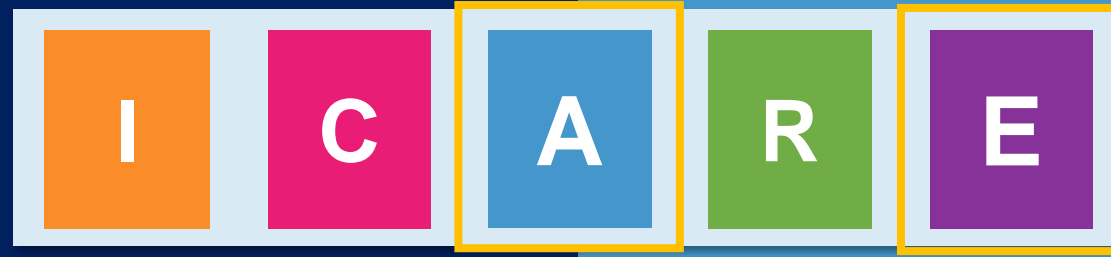
Your voice has never been more needed



- As times change, you have the ability to change the times.
- People are listening. You have the opportunity to share your thoughts on how to make your site/department/team better, because we can't drive improvement without you.

QUALITY IMPROVEMENT

INTRODUCTION



QUALITY IMPROVEMENT



JOY IN WORK



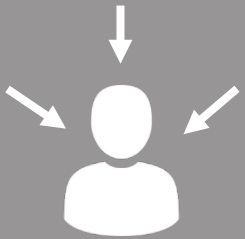



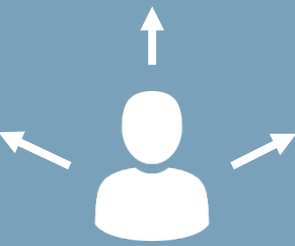



QUALITY IMPROVEMENT DEFINED



Continuously **evaluate**
systems and processes to
deliver the **best care** possible.

WHAT IS THE DIFFERENCE BETWEEN QUALITY ASSURANCE AND QUALITY IMPROVEMENT?

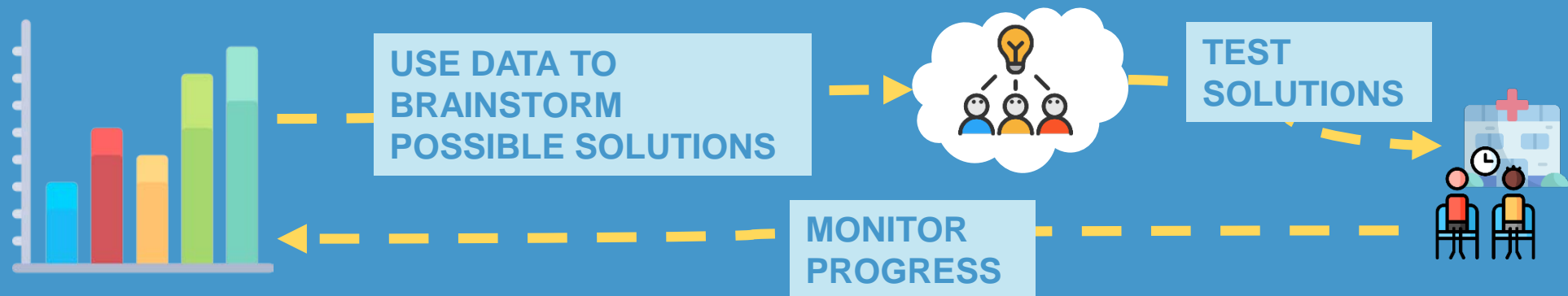
	Motivation	Means	Attitude	Responsibility
Quality Assurance	 COMPLIANCE	 INSPECTION	 REQUIRED, REACTIVE	 FEW
Quality Improvement	 CONTINUOUS IMPROVEMENT	 PREVENTION	 CHOSEN, PROACTIVE	 ALL

WHAT IS THE DIFFERENCE BETWEEN QUALITY ASSURANCE AND QUALITY IMPROVEMENT?

Quality Assurance



Quality Improvement



TRUE OR FALSE?

**Quality Improvement is
only clinically focused.**

TRUE OR **FALSE** ?

Quality Improvement involves doing a thorough assessment of a problem before proposing ideas.

TRUE OR FALSE?

Quality Improvement is supposed to be a challenging and time-intensive process.

QUALITY IMPROVEMENT ROADMAP

DEFINE THE AIM /
EVIDENCE

PLAN / DESIGN A
TEST OF CHANGE

LEARN FROM
THE TEST



IDENTIFY THE
ISSUE

ASSESS THE
CURRENT STATE

ENGAGE IN SMALL
TESTS OF CHANGE

MODIFY AND SCALE
UP THE SOLUTION

PLAN DO STUDY ACT (PDSA)

CYCLES

PLAN-DO-STUDY-ACT (PDSA)



The Plan-Do-Study-Act (PDSA) model is a **repeating four-stage problem solving model** used to perform changes for improvement

The model helps to examine **where you are** (current state) and identify **where you want to go** (aim) while addressing **possible barriers** (gaps) along the way

The model is **data driven** and **requires input from both internal and external participants** to increase **acceptance and buy-in** of the end result

QUALITY IMPROVEMENT ROADMAP

DEFINE THE AIM /
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PLAN / DESIGN A
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LEARN FROM
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IDENTIFY THE
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ASSESS THE
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ENGAGE IN SMALL
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MODIFY AND SCALE
UP THE SOLUTION

SCENARIO

Your unit/clinical area 7R has been heavily impacted by the COVID pandemic.

Now that we are in a post-surge, pre-vaccine phase, you notice your team appears to be disengaged, stressed, and burned out.

There have been increased call outs to take mental health days or due to overall stress/burnout which sometimes make it difficult to work with reduced staff.

You've attended a wellness event and one of the standing debriefs but there were few people there. But you hear staff expressing concerns about a potential second wave and believe they could benefit from attending wellness events or standing debriefs.

SCENARIO

How Can I Help My Team?



IDENTIFY & EVIDENCE THE ISSUE



Identify the issue

Low acceptance to unit based support offerings
Low morale, staff disengagement, call outs due to stress/burnout,
concerns of second wave



Evidence the need for change with baseline data

Of the 4 standing group debriefs conducted on Unit 7R, a total of 8 staff members attended (1 of the meetings had 0 attendance). There are 30 staff members on all tours on 7R.



Think about why this matters to you

You want your fellow staff to be engaged and have their concerns heard and addressed; It is important to you that your team feels connected and can express their thoughts and feelings about the COVID pandemic freely and receive support in the forums provided

SCENARIO

You identify the problem and you have evidence that there truly is a problem and decide you want to do something about it!

okay, but what do you DO?

PRE-PLAN THE TEST



Identify the issue



Evidence the need for change with baseline data



Create an aim statement

S

PECIFIC

M

EASURABLE

A

CHIEVABLE

R

EALISTIC

T

IME-BASED

An aim statement is a clear, specific summary of what your team hopes to achieve over a defined amount of time including what success looks like (NICHQ, 2019)

AIM STATEMENTS

Increase the number of staff on Unit 7R that attending standing group debriefs

Increase the number of staff on Unit 7R that attend at least 1 standing debrief by 50% from 8 to 12 by September 30th, 2020

S

PECIFIC

M

EASURABLE

A

CHIEVABLE

R

EALISTIC

T

IME-BASED

SCENARIO

You've got your problem, evidence, reason for change, and now you have a clear **aim statement/SMART goal** in mind to drive full steam ahead, right?



PRE-PLAN THE TEST



Identify the issue



Evidence the need for change with baseline data



Create an aim statement

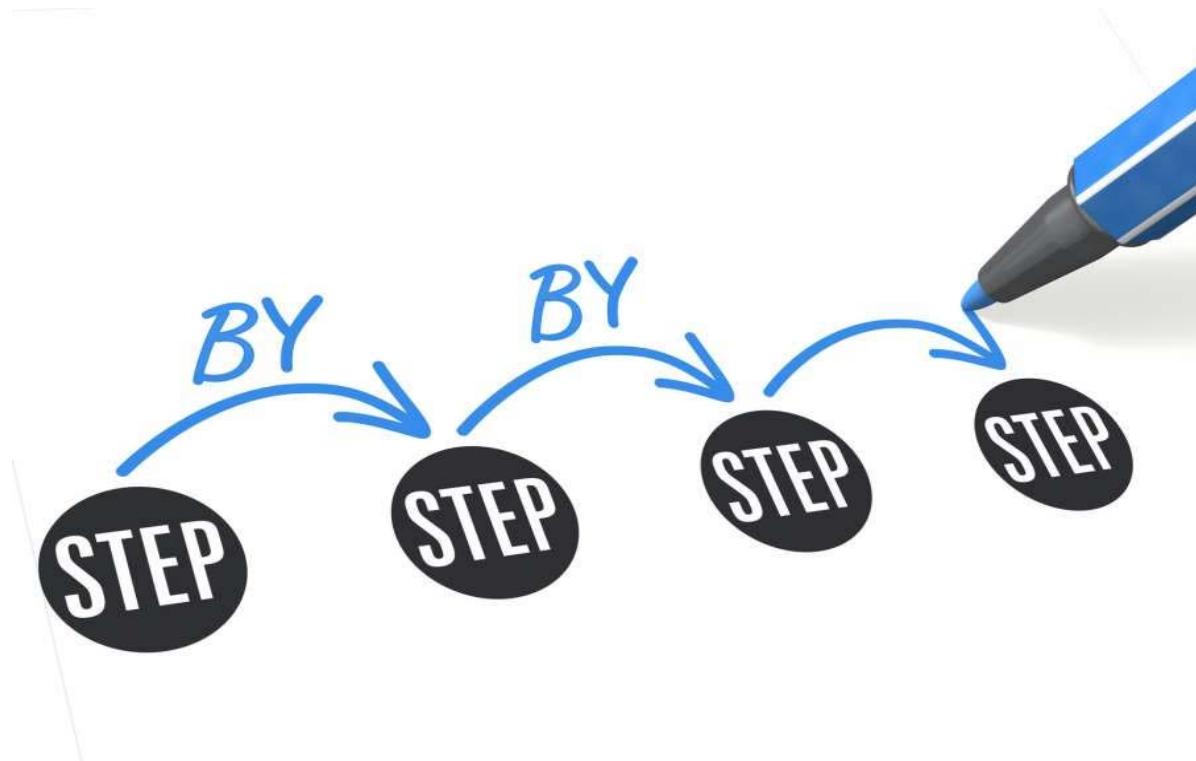


Assess the current state



SCENARIO

As a staff member, you have a unique perspective of how standing debriefs are communicated. You see the emails, you hear the announcements, and have attended a debrief yourself. You list these as steps of the current process. You confirm the steps with your supervisor who schedules and communicates the debriefs if there are any other steps of the process that are missing.



PRE-PLAN THE TEST



Assess the current state

Process Step 1

Process Step 2

Process Step 3

Email sent to all staff for standing group debrief at the beginning of the month

Standing group debrief announced at daily morning huddle

Standing group debrief conducted every Wednesday at 11 am

SCENARIO

So you now have confirmed every step of the current process. You know where you are (**current state**) and know where you want to go (**aim statement**) but how do you get there?

Bridge the GAP



PRE-PLAN THE TEST



Identify the issue



Evidence the need for change with baseline data



Create an aim statement

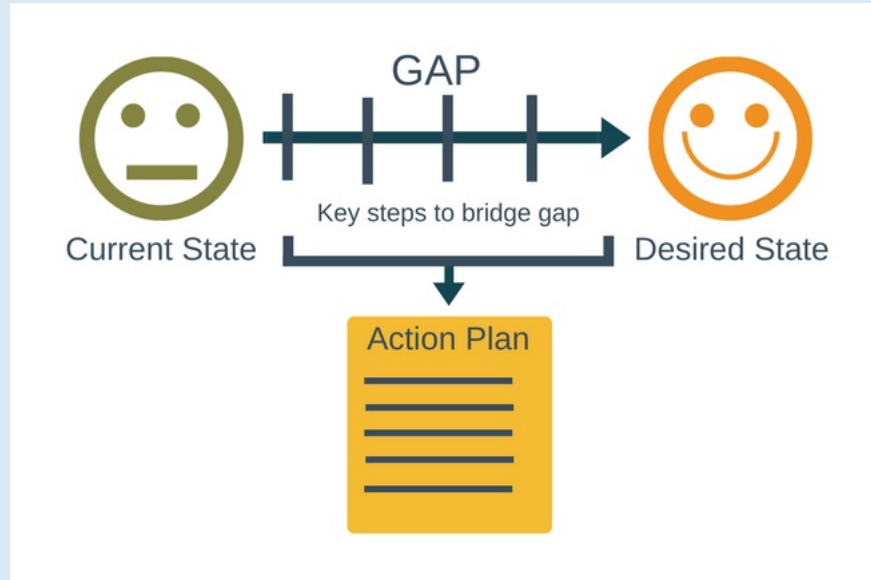


Assess the current state



Identify gaps/barriers contributing to problem

What gaps exist within our current process?



SCENARIO

You have a few conversations with your team during lunch, breaks, or downtime to ask them why they haven't been attending standing debriefs.

You know I can't remember the last time I opened my email

I have no idea what you're talking about

I'm still taking care of patients at 11 am

I don't see the point of it. It's not going to help

You know Wednesdays are so busy for us

I think I lost my password

I get so many emails, I just can't keep up

I never heard about this during our off tour huddles

PRE-PLAN THE TEST



Identify gaps/barriers contributing to problem

A gap is an obstacle or problem that prevents a process from moving smoothly from its current state (where you are) to achieving aim (where you need to be) (Ready Training, 2018).

Standing Debrief Emails

- Not everyone reads their email
- Staff forgot email password
- Emails get lost in inbox

Announcement at Morning Huddles

- Not everyone is present at morning huddles
- Not inclusive of all tours

Standing Group Debriefs every Wednesday at 11 am

- Some staff are still performing duties at 11 am (meds, vitals, appts)
- 11 am isn't a good time for everyone (breaks, floor coverage, etc).

Lack of Knowledge

- Staff don't know what debriefs are for
- Staff don't think it is for them

SCENARIO

Now that you have enlisted the help of your team to identify the gaps and linked them to each step of the current process. You let your team know that you heard their voices/opinions and you want to their help to create a better process to address their gaps.

Time to Brainstorm!



PRE-PLAN THE TEST



Think about why you want to make a change



Evidence the need for change with baseline data



Create an aim statement



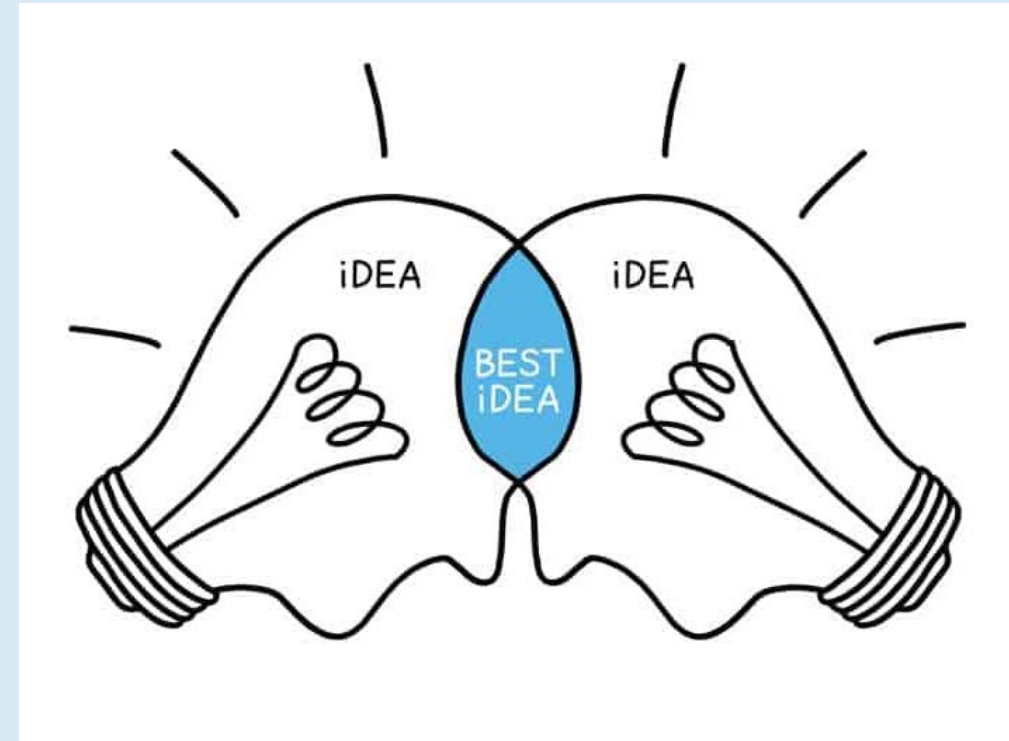
Assess the current state



Identify gaps/challenges contributing to problem



Brainstorm solutions/changes to test



PLAN THE TEST



Make a plan to establish what you will test, for how long



Standing Debrief Emails

- Not everyone reads their email
- Staff forgot email password
- Emails get lost in inbox

Create, Display, Disseminate Flyer/Poster on unit for 2 weeks

Announcement at Morning Huddles

- Not everyone is present at morning huddles
- Not inclusive of all tours

Empower staff/supervisors to discuss standing debriefs during off tour huddles for 2 weeks

Standing Group Debriefs every Wednesday at 11 am

- Some staff are still performing duties at 11 am (meds, vitals, appts)
- 11 am isn't a good time for everyone (breaks, floor coverage, etc).

Create survey to ask staff of preferred date and time to conduct debriefs for 2 weeks

Lack of Knowledge

- Staff don't know what debriefs are for
- Staff don't think it is for them

Speak up at the morning huddle (invite others who have benefited) & explain benefits of debriefs for at least 2 weeks

PLAN THE TEST



Make a plan to establish what you will test, for how long

Create survey to ask staff of preferred date and time to conduct debriefs for 2 weeks



Make a plan to establish measures and how you will collect them



Process

What will you measure to know if your test of change was successful? How will you measure your test of change?

Number of staff that completed time survey

Outcome

What will you measure to know you have been successful at achieving your aim?

Number of staff that attended at least 1 standing debrief by 9/30

Balancing

What can you measure that may also be indirectly or unintentionally affected by your tests of change?

Unit HCAHPS scores

SCENARIO



AIM: Increase the number of staff on Unit 7R that attend at least 1 standing debrief by 50% from 8 to 12 by September 30th, 2020

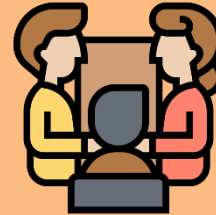
MEASURES



Number of staff that completed time survey



Process



Number of staff who attend standing debriefs in September



Outcome



Quarterly Unit HCAHPS Scores



Balancing

SCENARIO

Now that your team has decided what you will test, how long, and what you will measure to identify success. It's time to **assign roles and responsibilities** for the test of change/experiment.

Let's Get to Work!



PLAN THE TEST



Make a plan to establish what you will test, for how long



Make a plan to establish measures and collect data



Identify roles and responsibilities

Who will do what?



Action Plan		
Task	Who will do it?	By When?
Create Preferred Date/Time Survey	Janice W.	August 7th
Approval of Survey	Team	August 9th
Post Survey on Unit	Mark F.	August 10th
Promote Survey to Unit Staff	Team	August 7 th – August 24th
Pick Up Survey & Tabulate Results	Jen M.	August 27th

SCENARIO

The team has developed their plan and now it's time to take one last look to ask **any relevant questions and make predictions.**



PLAN THE TEST



Make a plan to establish what you will test, for how long



Make a plan to establish measures and collect data



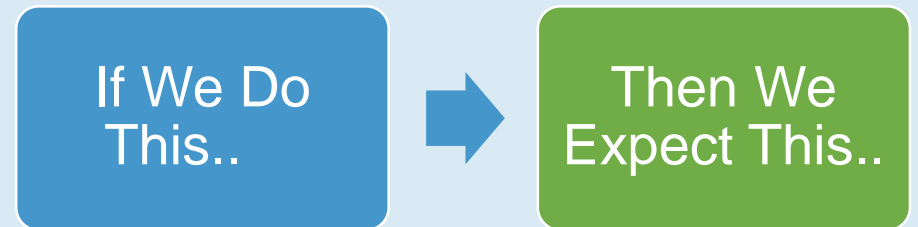
Identify roles and responsibilities



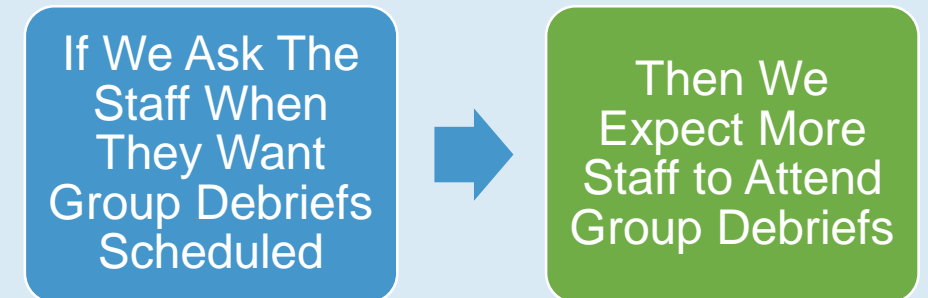
Develop relevant questions and predictions



If-Then Statements



Our Prediction



Relevant Questions
Where will we post the survey? – In the breakroom & near nurse’s station
How will we promote the survey? – Huddle announcements, word of mouth
Who will keep extra copies of the survey? – Mark & Janice

SCENARIO

Your team's plan to perform your **test of change** is complete!

CONGRATS!

Now it's time to put the plan in action!

Let's do this.

We are a team.

We take action.

We are focused.

DO THE TEST



Carry out the test on a small scale

The survey is posted by Mark as scheduled on 8/10 until 8/24, Team announces it during huddles & around the unit



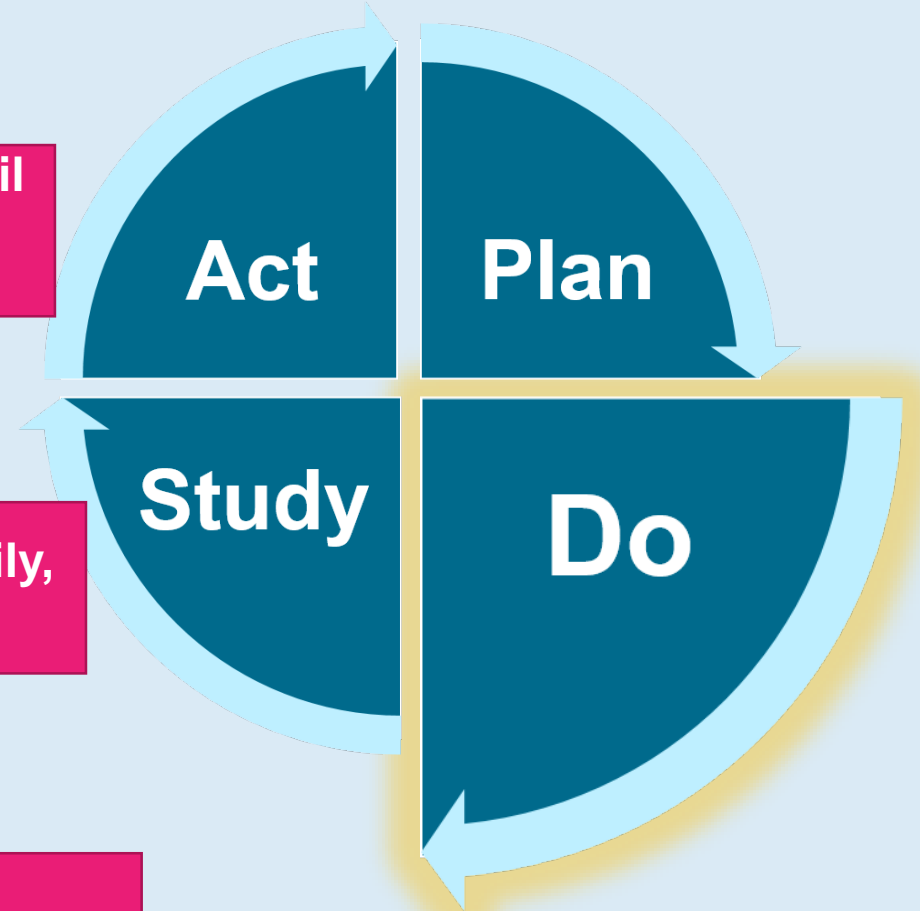
Document problems and unexpected observations

After 4 days, one of the surveys was misplaced. Luckily, Janice had extra copies and posted it again.



Collect and begin to analyze data

Jen picked up the surveys on 8/24 to tabulate the results

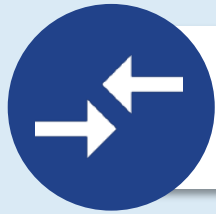


SCENARIO

Your team has just completed their first test of change! HOORAY!
Now it's time **analyze the data and see what we have learned!**



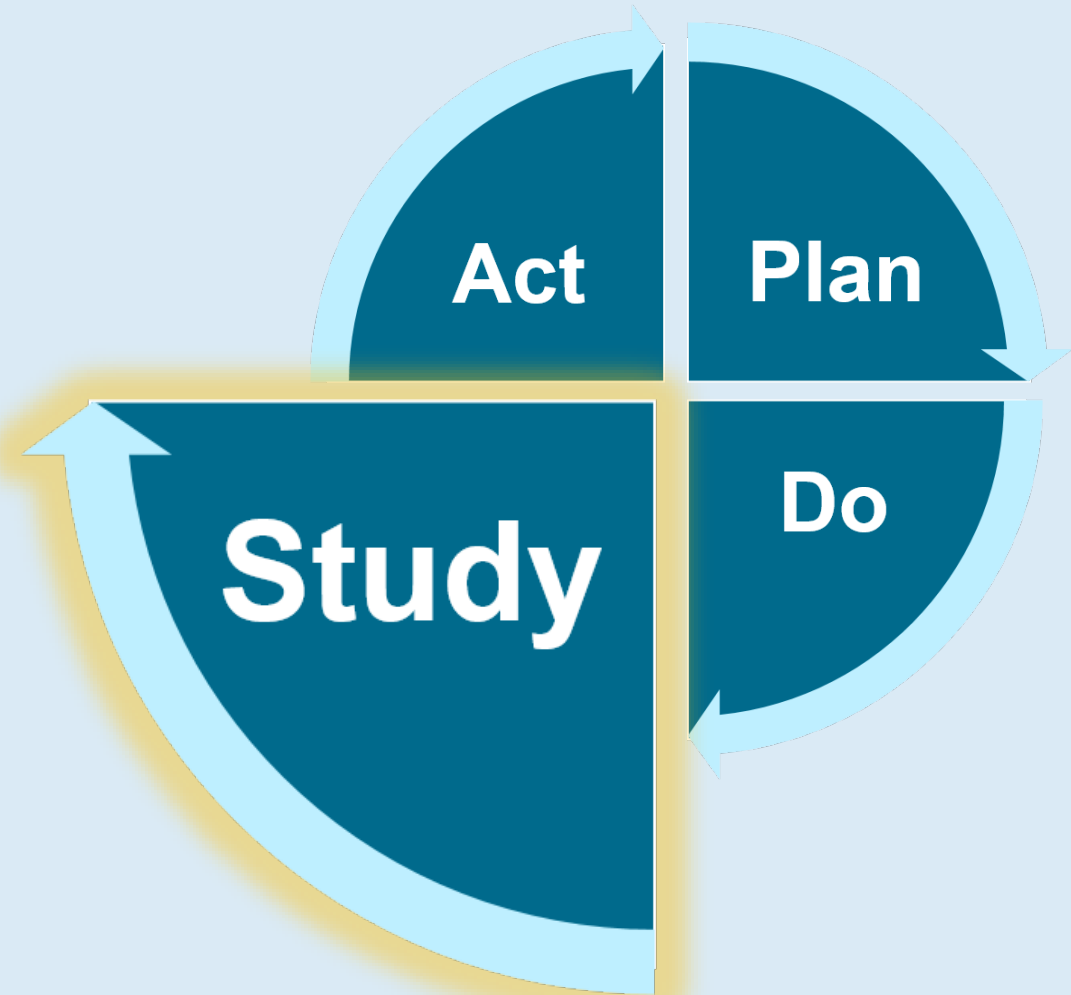
STUDY THE TEST



Compare the collected data to your predictions



Summarize and reflect on what you learned



SCENARIO

Your team has completed their first test of change so **CELEBRATE!**
Now let's review the data the team collected and some observations made.



DATA AND OBSERVATIONS



15

Number of staff that completed survey

6

Number of staff who attend standing debriefs in September

↑ 3

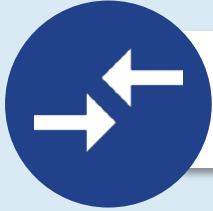
points

Unit (Quarterly) HCAHPS Scores

Observations

- Staff preferred to have group debriefs conducted on Tuesdays between 3 – 4 pm
- Staff had to be reminded where the survey was posted
- Paper surveys can easily be misplaced
- Staff appreciated that their opinions, preferences were being taken into consideration
- Staff are talking to each other more about the debriefs and COVID concerns

SCENARIO



PREDICTIONS VS. RESULTS

PREDICTION

More staff will attend standing group debriefs if we conducted them on the day they preferred

RESULT

6 more staff attended at least 1 standing group debrief by September 30th

SCENARIO

You and your team have officially achieved your aim!
CONGRATULATIONS!



AIM: Increase the number of staff on Unit 7R that attend at least 1 standing debrief by 50% from 8 to 12 by September 30th, 2020

Now your team must decide what to do next!



ACT ON THE TEST



Make a plan for your next step

A

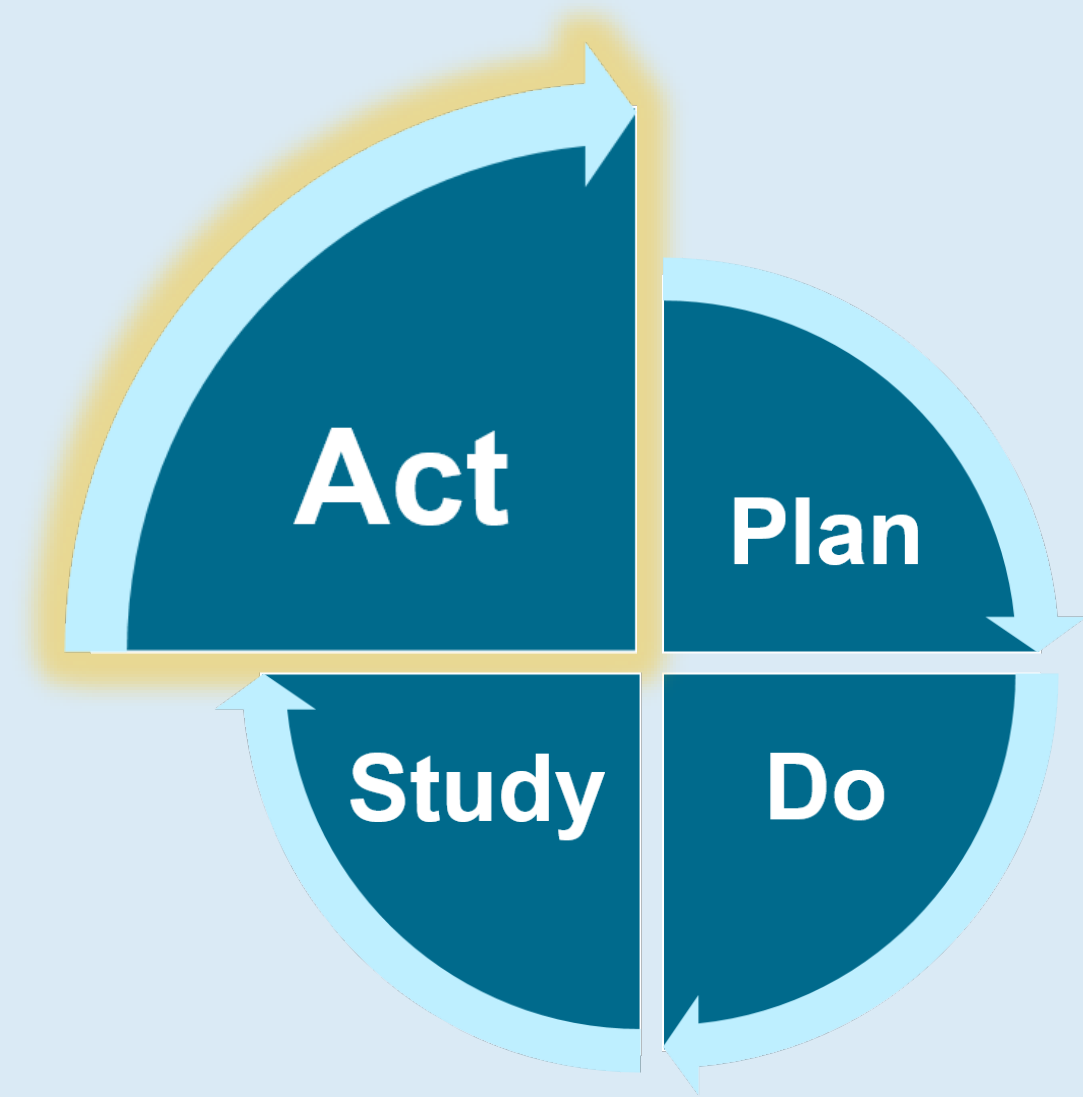
DOPT

A

DAPT

A

BANDON



SCENARIO



ADAPT



Re-visit survey every quarter to see if date/time still works for majority of staff



Perform overhead announcement reminders an hour before standing debrief



Send electronic survey via text or email so papers surveys don't get lost

SCENARIO - CLOSING

Your team has officially completed your first PDSA Cycle!!
YAYYYY!!



But it doesn't stop here! Adapt your first test of change (time survey) and continue to collect data to see if you can get even BETTER! Then, pick another change to test!

Remember: Performance Improvement is about *continuous improvement* and the PDSA cycles keep repeating!

TAKEAWAYS

Takeaways

1. Quality improvement is a collaborative process. You don't have to rely on leaders or managers to drive QI success at work.

2. The “Planning” process is an essential step in PDSA work. Jumping right to “Do” may hinder your goal.

3. Remember your SMART goals! Make sure you build your interventions around hitting those goals.

4. Remember your “What matters to you?” Conversations. Quality Improvement is a way of addressing your answer to this question.