

Embedding Quality Improvement into Organizational Culture

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Stratis Health

- Independent, nonprofit, Minnesota-based organization founded in 1971
 - Lead collaboration and innovation in health care quality, safety, and equity, and serve as a trusted expert in facilitating improvement for people and communities
- Work at intersection of research, policy, and practice
- Long history of working with rural providers, CAHs, and the Flex Program



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Rural Quality Improvement Technical Assistance (RQITA)

- In September 2015, Stratis Health was awarded a cooperative agreement from the Health Resources and Services Administration Federal Office of Rural Health Policy (HRSA FORHP).
- The agreement is geared towards improving quality and health outcomes in rural communities through technical assistance for FORHP quality initiatives
 - Flex/MBQIP
 - Small Health Care Provider Quality Improvement Grantees (SCHPQI)
- There is also focus on quality reporting and improvement



Rural Quality Improvement Technical Assistance

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Objectives

- Identify characteristics of a culture of quality
- Assess current state of organizational culture as it relates to quality and identify short- and long-term opportunities for improvement
- Describe strategies for embedding quality improvement into organizational culture



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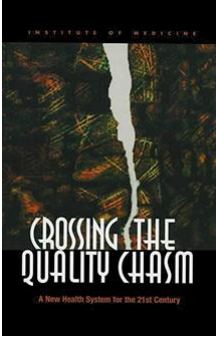
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Health Care Quality Defined

“The degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.”

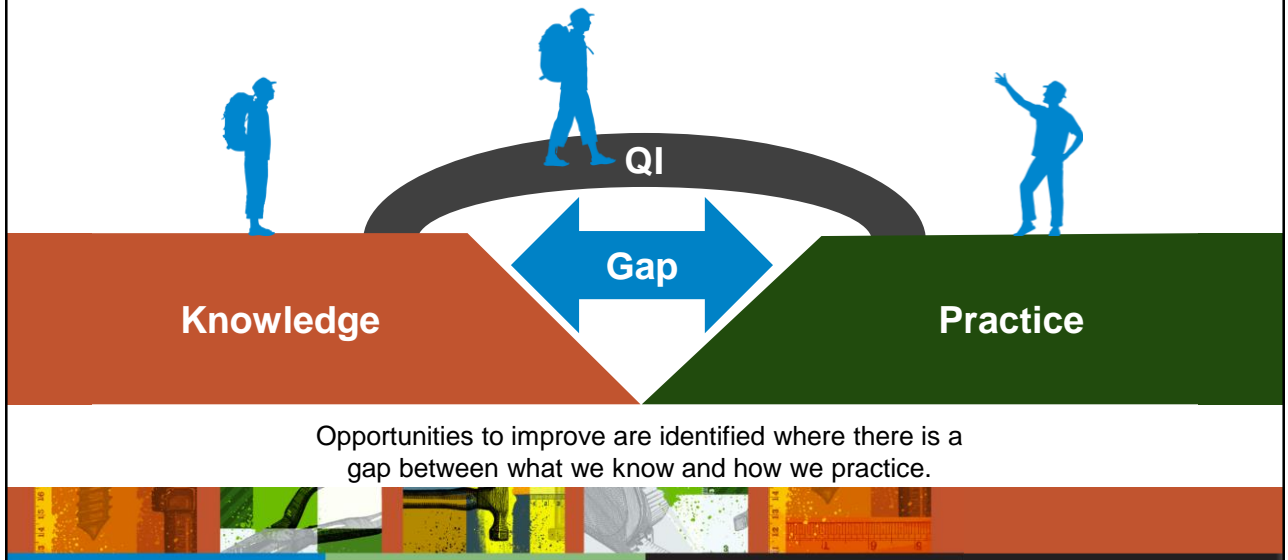
- Six dimensions of health care quality
 - Safe
 - Timely
 - Effective
 - Efficient
 - Equitable
 - Patient-centered



Crossing the Quality Chasm: A New Health System for the 21st Century

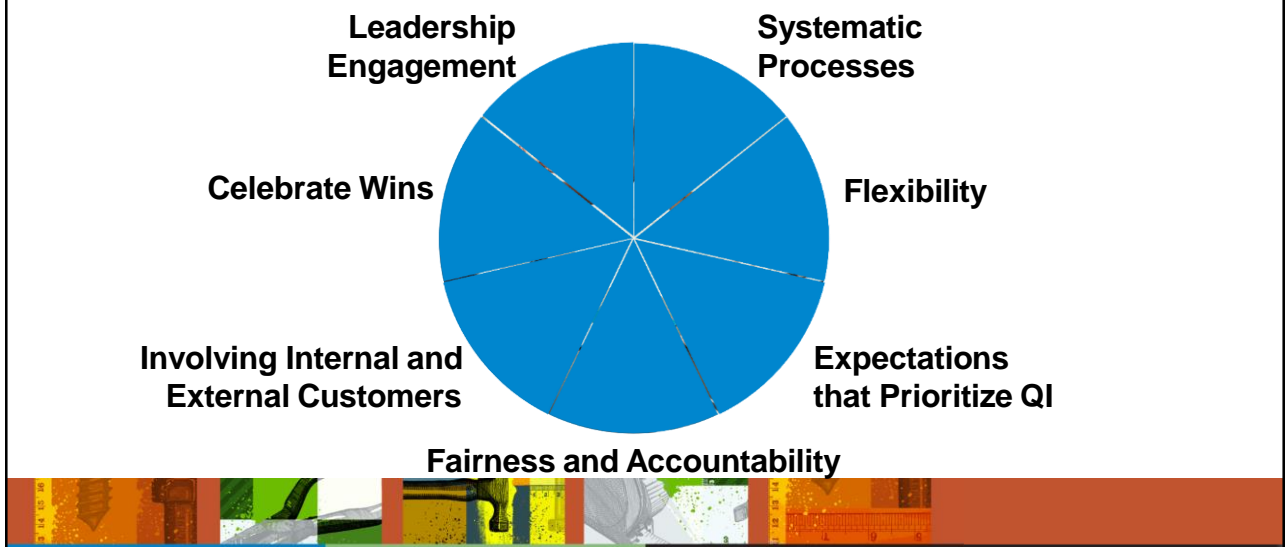


QI Helps Bridge the Gap



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Culture of Quality Success Factors



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Leadership Engagement

- Visible commitment to quality
- System and process lens
- Allocation of resources
 - Time
 - Training
- Accountability

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Systematic Process for QI

- Common language and approach to improvement
- Templates can be effective tools to organize multiple projects
- Flow of information is critical

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Flexibility

- Be creative in how you allocate the work – there is no perfect way
- Allow flexibility and engagement of wide variety of staff in project planning and implementation
- Do what makes sense based on your needs and staff capability

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Expectations that Prioritize Quality

- Distributed leadership – quality is everyone's role and responsibility
- Resist temptation to allow direct patient care activities prevent QI work – “Too busy chopping wood to sharpen the axe”
- A commitment to health equity – you can't have quality without equity.

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Fairness and Accountability

- Everyone in the organization feels safe to share mistakes, complaints, concerns, or potential risks
- Why? Because we learn from our mistakes. Mistakes are often a tipoff to something wrong in the way the work is structured
- Need to balance fairness and accountability
- Embrace a Just Culture

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What is 'Just Culture'?

- Reflects what we know of:
 - Socio-technological system design
 - Human free will
 - Human fallibility
- We can:
 - Design safe systems that accommodate humans
 - Manage human choices and behaviors within the system

Sources: The Just Culture Company - <https://www.justculture.com/>
[Why Accountability Sharing in Health Care Organizational Cultures Means Patients Are Probably Safer | Journal of Ethics | American Medical Association](#)
[A Framework for Safe, Reliable, and Effective Care | IHI - Institute for Healthcare Improvement](#)

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Just Culture – Five Behaviors

Human Error	At-risk Behavior	Reckless	Knowledge	Purpose
Unintended conduct: inadvertently doing other than what was intended: a slip, lapse, or mistake	A choice where risk is not recognized, or is mistakenly believed to be justified	Conscious disregard of a substantial and unjustifiable risk of harm	Knowingly causing harm (sometimes justified)	A purpose to cause harm (never justified)
ACCEPT	COACH	DISCIPLINARY SANCTION	DISCIPLINARY SANCTION	DISCIPLINARY SANCTION
Evaluate All Independent of the Actual Outcome				

Source: The Just Culture Company - <https://www.justculture.com/>

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Involving Internal and External Customers

- Know who your customers are
 - Patients, families, community
 - Payers or other funders
 - Other care providers
 - Staff, coworkers, contract staff
- Involve them in your QI efforts

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Celebrate Wins

- Recognize progress (small steps or lessons learned) and celebrate accomplishments
- Ensure people feel that their QI efforts and results are appreciated
- Keep teams engaged in the work going forward
- Can be simple, but also an opportunity to be creative and have fun

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In Summary

- Organizations committed to quality embed a culture of quality throughout the organization.
- Key factors that drive a successful quality culture include:
 - Leadership engagement
 - Systemic processes for QI
 - Flexibility
 - Expectations that prioritize QI
 - Fairness and accountability
 - Meaningfully involving customers
 - Celebrating wins
- A Just Culture creates an environment of psychological safety by placing high importance on accountability, while recognizing the reality of human fallibility.

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Assessing Your Organization

Self-Assessment

- Staff training
- Resource allocation
- Expectations
- Methods
- Organizational mindset
- Leadership Support



Self-Assessment: Culture of Quality Improvement (QI)

Rate how closely each statement fits your organization.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
Training is available for all staff regarding QI methods and tools.					
There is a process for ensuring time is available for staff who are asked to work on QI teams.					
QI is an integral component of new staff orientation and training. (For example, their role in identifying opportunities for improvement and expectation that they will be active participants on QI teams.)					
We have consistent expectations for all staff to be involved in QI activities, from C-suite to front line.					
Staff are recognized for engagement in QI efforts and teams are provided opportunities to celebrate progress					
We have identified sources of data and information relevant to use for QI. (For example, data that reflects measures of clinical care; other data that reflects the services provided by our organization; input from patients, families, clinicians, staff, other stakeholders.)					
We use a consistent, structured method for implementation of QI efforts. (ex. TPSA, Lean, etc.)					
There are strategies and processes in place to ensure QI efforts are broadly communicated and discussed across all levels of the organization.					
When addressing QI opportunities, our organization focuses on making changes to systems and processes rather than on addressing individual behaviors.					
QI is utilized as a method for approaching decision making and problem solving, rather than considered as a distinct or separate program.					
Our board of directors governing body is engaged in and supportive of the QI work being done in our organization. (For example, it would be evident from board meeting minutes that QI is a regular topic of discussion.)					



Discussion/Reflection – Embedding a Culture of QI

- Identify recent examples of how your organization has celebrated quality improvement wins. Can you name three from the past year?
- If someone from outside your organization was visiting, what easily identifiable artifacts would they see that reflect your organization’s commitment to quality improvement?
- What structured method for implementation of quality improvement efforts does your organization use? How do you know it’s used consistently?
- How is accountability for quality improvement distributed at your organization? Who is responsible for quality?



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Strategies to Embed QI into Organizational Culture

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QI: Expectations vs. Reality

Ideal

- Prioritize areas to improve
- Analyze the problem, understand the current process and the root causes of problems
- Measure current performance against goals
- Choose option to implement
- Plan the change
- Implement & test changes (for example using PDSA cycles)
- Evaluate results

What often happens

- Pick any thing to work on
- Think of an option
- Implement
- Hit system barriers
- Fail



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Change Management

Change Management is a structured approach to transitioning individuals, teams, and organizations from a current state to a desired future state. It is an organizational process aimed at empowering employees to accept and embrace changes in their current environment.

Source: HIMSS 2011 Annual Conference; Healthcare's Change Management Toolkit:
EHR Implementation Success Starts Here (himsstime.com)



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Organizational Culture

- The values and behaviors that contribute to the unique social and psychological environment of an organization
- How we do our work and behave and interact with each other.
- Reflects shared values, patterns of belief and expectations that guide behavior
 - The assumptions of “how we get things done around here”
- Each facility or department will have its own culture

Helmreich, R. L. & Merritt, A.C. (1998). Culture at work in aviation and medicine: National, organizational and professional influences. Aldershot, England: Ashgate

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Change vs. Culture

- Change brings both anticipation and opportunity
- Need to assimilate at several levels
- “Culture eats strategy for breakfast”

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Assessing Change Readiness

- Staff involvement, feedback and reinforcement are crucial to buy-in
- Sometimes the only way to change culture is to change key people
- Individuals in leadership positions need to be on board
- New approaches sink in after success has been proven
- Most alterations in norms and shared values come at the end of the transformation process



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Managing Change

“There can be any number of changes, but unless there are transitions, nothing will be different when the dust settles.”

From *Managing Transitions* by William Bridges



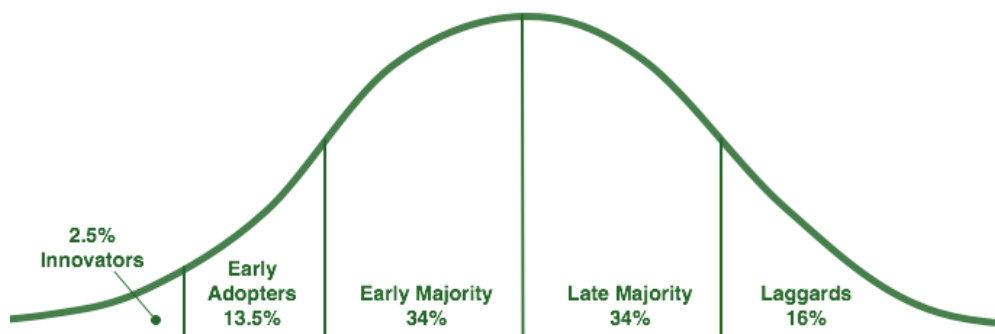
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Change Management Success Factors

- Leadership commitment
- Shared focus on goals and understanding of the "why" behind change efforts
- Attend to the technical and personal aspects of change
- Recognize individual adaptation approaches



Individuals as Adopters of Change



Source: Rogers, Everett M. (1962). *Diffusion of Innovations*

Source: Everett Rogers Diffusion of innovations model

"Faced with the choice between changing one's mind and proving that there is no need to do so, almost everybody gets busy on the proof."

- John Kenneth Galbraith



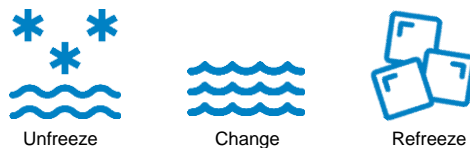
In Summary

- Effective **change management**, a structured approach to transitioning individuals, teams and organizations from a current state to a desired future state, is directly affected by **organizational culture**, the shared values, patterns of belief, and expectations that guide behaviors of individuals in an organization.
- Culture eats strategy for breakfast!
- Assessing for readiness, demonstrable leadership commitment, and a shared understanding of the why will help support change initiatives.

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Equilibrium Model: Phases of Change

- Kurt Lewin adapted a change model from engineering (1950s)
- Organizations maintain equilibrium
- To change, organizations and individuals within must go through a cycle:



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Equilibrium Model: Phases of Change



Beginning (*Unfreeze*)

- All change begins with an ending
- Transition is recognition of loss, letting go, and grieving
- Ask: Why are we doing this? What is expected of me?



Middle (*Change*)

- Disorienting possibilities
- Excitement with apprehension
- Trust building



End (*Re-freeze*)

- Need safety net to prevent slipping back
- Maintain motivation
- Communicate and celebrate!



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SWITCH Model for Change

Critical components to generate change:



Knowledge

- Data/facts, best practices, models



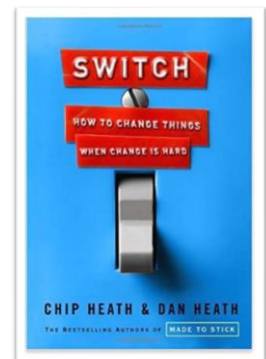
Feelings

- Stories, connections, meaningful goals



Skills

- Workflow, processes, tools, training



From: <https://heathbrothers.com/books/switch/>



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Major Lessons from SWITCH

- There are three surprises about change
 1. People problem → Situation problem
 2. Lack of productivity → Exhaustion
 3. Resistance → Lack of clarity and understanding
- Change often fails because our emotional and rational sides can't cooperate long enough for the desired change to occur
- Change can also fail due to the surrounding environment
- Change isn't easy, but with the right framework, it becomes easier



Change Management Models Review

- Engaging teams in change efforts requires involving them through all phases:
 - Beginning/Unfreeze: Explain the why
 - Middle/Change: What's it for me
 - End/Refreeze: Celebrate and monitor
- A force field analysis considers the forces driving and restraining the change you wish to accomplish change
- Garnering support for change requires appealing to knowledge (head), feelings (heart), and skills (hands)



What's my role?

- Be the leader you would want to follow
- Put QI on the agenda
- Consistently focus on systems and processes
- Encourage and welcome ideas for improvement
- Show respect for the perspective and experience of others
- Highlight and communicate successes and engagement whenever possible across all levels of the organization

In Summary

- Change takes time
- Communication is essential
- Celebrate wins
- Even when the work is done, the work continues



Adapting to Change

“It is not the strongest of the species that survives, nor the most intelligent, but the one most responsive to change.”

- *Charles Darwin*



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Quality Improvement Basics Course

<https://stratishealth.org/quality-improvement-basics/>

- Didactic modules including videos, slides, and transcripts
- Templates and tools
- Facilitator Guide and Sample Syllabus also available



Quality Improvement Implementation Guide & Toolkit for CAHs

<https://www.ruralcenter.org/resource-library/quality-improvement-implementation-guide-and-toolkit-for-cahs>

- QI Implementation Guide
- QI Measure Summaries
- Brainstorming Tool
- Internal Quality Monitoring Tool
- Project Action Plan Template
- Meeting Agenda Template
- Rapid Tests of Change Tool
- Prioritization Tool
- Internal Quality Monitoring Tool
- 10-Step QI Project Documentation Template

MBQIP Monthly

<https://www.ruralcenter.org/tasc/mbqip/mbqip-monthly>

- CAHs Can!
- Data: CAHs Measure Up
- Tip: Robyn Quips
- Tools and Resources



RQITA Request: Please send link to the resource rather than attaching as a PDF.



Questions?

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