



Central West LHIN Governance and Leadership Forum  
**Creating a Culture of High Performance**

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Summary - Table Discussions... the **5** pillars

April 2016

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# BACKGROUND

When it comes to creating cultures of high performance, improving the patient experience has emerged as an important health care priority, provincially and in the Central West LHIN. But what does this mean in a contemporary healthcare setting?

How are improvements defined and measured; how can patient-centred care be delivered consistently, within individual organizations and across the broader health care system; what is the relationship between patient experience and other priority mandates such as quality improvement, staff engagement, and financial performance?

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*“Patient-centred care, patient engagement, and improving the patient experience are not new concepts. What is new, is that we are learning how the time-tested basics of engaging... respecting... understanding... and caring for patients can also be critical ingredients in the success and sustainability of contemporary health systems. Organizations that are improving the patient experience are also making strides in other critical areas such as quality, safety, efficiency, productivity, and financial results.”*

*Back to the Future: Patient experience and the link to quality, safety, and financial performance*

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These questions were the subject of consideration and discussion at the Central West LHIN’s April 2016 Governance and Leadership Forum.

Specifically, participants were provided with an overview of Studer Group Canada’s Evidence-Based Leadership Framework and the focus it places on five pillars to guide the creation of high performing cultures.

Table discussions ensued; a knowledge sharing exercise for participants to share improvement strategies and approaches being used within their organisations that impact upon each of the five pillars. “Elevator pitches” presented by each table, encapsulated notable highlights of each pillar discussion.

What follows is a summary of these discussions. It is a reference from which organizations can draw upon to leverage ideas as they contemplate ways to continuously develop cultures of high performance.

# the 5 pillars

Evidence-Based Leadership uses a “five pillar” framework to help health care organizations build high-performing, sustainable cultures, to help them promote accountability... foster innovation... and deliver high-quality patient experiences and outcomes over time.

## **PEOPLE**

Employee and Physician Engagement

## **SERVICE QUALITY**

Patient Experience

## **CLINICAL QUALITY**

Patient Outcomes

## **EFFICIENCY**

Resource utilization/financials

## **GROWTH**

Growing demand for services

# FEEDBACK

Participants were asked to share improvement strategies and approaches being used within their organisations that impact upon each of the five pillars.

Specifically, participants were asked the following questions...

## PEOPLE

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **improved employee and/or physician engagement**.

## SERVICE QUALITY

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **an improved patient experience**.

## CLINICAL QUALITY

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **improved patient outcomes**.

## EFFICIENCY

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **improved resource utilization/financial performance**.

## GROWTH

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **improving upon the demand for service**.

Across all five pillars, as it relates to creating cultures of high-performance, participants were also asked to consider any strengths, challenges and opportunities they believed to be associated with each.

# PEOPLE

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **improved employee and/or physician engagement**.

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## Strategies

### Knowledge/Information Exchange

- Brainstorming sessions, for all staff, such as roundtables and, lunch and learns
- Engage doctors in their preferred style
- Develop cross sector networks to share information
- Facilitate care between partners and physicians
- Additional monetary incentives for recruitment of specialists i.e., Psychiatrists.
- “Book Club” for patients and professionals to knowledge share.

### Employee/Volunteer Engagement

- Enable all staff to contribute to strategy and policy development
- Regular staff (employee satisfaction) surveys... publish results and/or metrics to ensure there is transparency with respect to employee satisfaction, and the success of employee engagement activities/initiatives
- Additional social events outside of the office/work setting (x2/yr?)
- Internal Updates/Newsletters on organizational activities
- Obtaining understanding and “buy in” from staff, but especially volunteers, is critical to change management.

### Professional Development

- Strong and effective whistle-blowing policy... employees need to speak free from fear of repercussion
- Promote employee accreditation where applicable
- Manage performance... low, medium, high performers.

### Communication

- Ensure all employees share a common knowledge base to ensure better quality and reduced dissemination of inconsistent or incorrect information.
- Consistent and accurate data is essential to the decision making process
- Communication enhanced to facilitate exchange/share perspectives with employees and community partners i.e. forums, logs, online questionnaires
- Staff appreciation – training and development, thank you notes, monthly staff meetings.

## Strengths

- Knowledge sharing
- Diverse perspectives, with varying needs and competing priorities
- Smaller teams make change management and improvement initiatives easier.

## Challenges

- Diverse perspectives, with varying needs and competing priorities
- Resource allocation
- Divergence of outcomes versus patient experience and what a shared vision of quality means
- Engaging volunteers
- Outliers who may be barriers to change- move up or move out
- Identifying the scarcity of specialized care
- Multiple offices in different areas
- Retirement of psychiatrists/ physicians can result in “abandoned patients”... lack of continuity of care.

## Opportunities

- Listen/understand each employee’s needs - what resonates with employees:
  - Being Valued
  - Who you recommend to work
  - Trust
  - Communication
  - Connection and being heard
- Ask for points of view , then action them
- Small teams provide a unique opportunities to develop effective communication between all parties
- Diverse perspectives, with varying needs and competing priorities... this is a strength and area of opportunity to leverage further.

## SERVICE QUALITY

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **an improved patient experience**.

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### Strategies

#### Specific Partner Examples

- **Friends and Advocates:** Have integrated a report card that is completed by their members/clients, from which a report of findings is prepared and sent to their Board of Directors
- **Holland Christian Homes (HCC):** Board is engaged with management and as an example have been involving management in their redevelopment. In addition, HCC conducts resident surveys every 6 months ... management are accountable for conducting the surveys, and reports of findings are then presented to the Board.
- **India Rainbow :** Engage with family members to ensure a holistic approach to service delivery
- **Punjabi Community Health Services:** Conducts employee and client surveys. Questions are consistent from year-over-year to measure and identify trends and progress
- **William Osler Health System:** Found it difficult to reach clients – by phone - in the North Etobicoke catchment area following service delivery/discharge from the Mental Health and Addictions unit. A one page paper survey was developed as an alternative, to be used pre-discharge.

#### Tools

- Use of AIDET tool (Acknowledge, Introduce, Duration, Explanation, Thank-you) as a standard approach to patient interactions
- Use of 5 & 10 rule for all staff/patient interactions, and generally throughout organization for employee to employee interaction... make eye contact 10 feet away, smile 5 feet away and say “hello” 1 foot away.
- Use the Ontario Perceptions of Care (OPOC) Survey.

#### Communication

- Ensure two-way communication with active listening (training for staff on communication strategies)
- End every patient interaction with the question... “Is there anything else I (we) can do for you today?”

#### Boards, Committees and Councils

- Consider the development of a program advisory committee that deals specifically with patient opinions, complaints and concerns
- Patient/family member representation on Board of Directors

- Patient/Client advisory council.

### **General Comments/Feedback**

- Develop an ethical framework that applies a diversity lens across the organization... in measuring patient experience it is also important to measure whether or not services are culturally appropriate and/or safe
- Patient experiences can be different depending on “when and how” measured. Navigating the mental health system remains a difficulty for many, if not most, residents which results in a poor experience at the onset. However, once in the system, many report a favorable experience.
- Organizations also need to account for service level expectations and delivery in the shaping of the patient’s experience. Receiving clinically valid and/or necessary services may still result in a poor patient experience.
- Understand patient/client individual needs... get to know families... empower and engage patients/clients to be part of their care... respect the extent to which they want to be involved.
- Actively track metrics around “overall satisfaction with visit” and “would you recommend our facility?”
- Consider employing a patient experience officer who acts as a coach and resource for other staff in all things related to patient experience.

### **Strengths**

- Receiving feedback directly from patients influences change within the organization, including the patient experience
- Now able to extract, monitor and trend good and relevant patient experience data
- Staff are now comfortable asking the patient about their experience and receiving non-judgemental input.

### **Challenges**

- Time: how do you correctly balance patient experience versus patient care?
- Moving beyond the “robotic” operation of standardized tools, to maintain flexibility when adapting to unique/individual situations and/or circumstances
- Ensuring staff understand that something is not being “imposed”, but rather should be “embraced” as a cultural change within the organization
- Federally funded programs/organizations are not permitted to have patient representation on their Boards of Directors
- Resource allocation is not aligned with support for improving the patient experience...it is driven by clinical metrics and volume.
- Accountability falls entirely on the provider, not the patient
- Patients disputing diagnosis or treatment plans based upon what they see online.
- Retirement of psychiatrists/ physicians can result in “abandoned patients”... lack of continuity of care.

## Opportunities

- Listen/understand each employee's needs - what resonates with employees:
  - Being Valued
  - Who you recommend to work
  - Trust
  - Communication
  - Connection and being heard
- Ask for points of view , then action them
- Small teams provide a unique opportunities to develop effective communication between all parties
- Diverse perspectives, with varying needs and competing priorities... this is a strength and area of opportunity to leverage further.

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **improved patient outcomes**.

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## Strategies

### Patient Engagement

- Involve the patient and their families/primary caregivers... ask them “What works for you?”
- When conducting surveys, ask respondents (patients/caregivers) about their perceptions regarding the quality of care received, and solicit their input for improvements moving forward
- Involve patients and families by asking for feedback an input on what is important to them and by developing an action plans with them that identify metrics, goals and outcomes that are meaningful to the patient.

### Staff (Team) / Partner (Cross-sector) Engagement

- Review survey results with staff, and develop action plans to address concerns/gaps
- Leverage cross-sector partners to identify and understand alternative service models
- Need employee input to achieve and deliver improved quality outcomes and patient/client satisfaction
- Get all staff in the same room so they are on the same page... cross-functional conversations creates camaraderie... discussions place the client/patient at the centre of care.

### Tools

- Quality circles: group of interdisciplinary team members who meets to discuss/ investigate issues across 4 areas including client focused care, effectiveness, integrated care and safety
- Daily huddles with staff
- Performance boards and strategic plans visible to all... issues identified by spotlight
- Rounding by manager and senior team
- Use of patient order sets for common procedures... engages the whole team e.g. physician, pharmacist, frontline etc. Use checklist to implement the order
- Regular quality meetings between frontline staff and managers
- Employ a “Patient Experience Officer”
- RNAO best practice guidelines for end-of-life and pain management... use of patient workbook by clients to determine advanced care planning
- Hospital to Home improves alignment of services as patient discharged home for a specific condition, same care coordinator throughout patient journey
- Health Links connects community services with primary care
- Common referral form where patient tells story once.

## Training and development

- Need support and training for non-professional primary care givers, volunteers and first responders related to dealing with unexpected and/or potential emergency situations
- Accreditation helps to identify strengths and gaps... provides a baseline, and informs the quality plan
- Cross-training so staff can assist other program areas.

## Strengths

- Multi-disciplinary, consensus-based and evidence-based approaches to care
- Small number of Health-Service Providers across the Central West LHIN makes us able to more easily leverage ideas, different approaches and best practices
- Effective staff/team engagement.

## Challenges

- Measurement tools and metrics need to be further standardized... need one place to go to obtain quality and performance information/data for all of Ontario
- Access to survey local, regional and provincial survey information for planning purposes
- Difficult to balance standardized care and individualized care
- RNAO wants more generalized guidelines
- Time-consuming for staff to complete referral for, but not doing means patients/clients must tell their story multiple times
- Further uptake of EMR esp. as it relates to the expansion of HealthLinks, and those involved with existing HealthLink patients
- Quotas drive the need to report, but reporting is slow... not real time
- Too many IT/IM EMR systems don't talk to each other
- Readiness for transparency i.e. using appropriate data and sharing it.

## Opportunities

- Develop and share data and metrics from across the health care system
- Improved partnerships to further plan cross-sector service delivery at the system level
- Continued promotion and adoption of IT/IM to improve patient outcomes
- It is critical to involve patients and family in identifying quality initiatives that improve outcomes
- Continue to train and develop human resources... staff, volunteers, students, and primary caregivers (family)
- Clinical quality initiatives must be multi-disciplinary across the frontline... they must be evidence-based and measurable, reflect accountability and transparency, and involve clinical champions that coordinate care for the patient.

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **improved resource utilization/financial performance**.

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## Strategies

### Communication and Knowledge/Information Exchange

- Education, coaching and mentorship.

### Quality/Performance Improvements

- Timely discharge planning to reduce return visits/admissions, and improve overall wait times in emergency departments
- Streamline the transfer process from paramedics to the ED
- Hospital example...new funding model and Quality-Based Procedures provide financial incentives to follow best practices and achieve best outcomes
- Focus on best practices... look for evidence-based practices to bring into the organization, and ensure they are relevant.

### Tools

- Hospice Palliative Care Ontario has online training for volunteers across Ontario
- Speak Out Ontario is a Website that provides information on care planning, helping to prepare people for advance care planning based on the laws of Ontario
- Engage staff using “Soapbox” to harness ideas , drive value, and improve efficiencies
- “Active Offer-Active Demand” approach to increase awareness and utilization of services in French
- Use of “huddles” and a team approach to patient/client care
- IT/IM... the further integration of technology as an enabler of care
- “Choosing Wisely” campaign... testing done based on patient need Example...“Rapid Response” – to transition patients from acute care to another care setting; the hospital discharging physician calls the family physician with a report on the patient; nursing contacts community providers to ensure follow-up.

### Integration

- Collaborate with similar organizations to reduce overhead costs through better utilization of shared staff resources, services and programs

## Strengths

- Collaboration with community partners... development and use community crisis plans for paediatric mental health patients, stay and travel with patients... the plan allowed for interventions among all providers, keeping children out of the hospital.
- Soapbox... equal opportunity for staff to share ideas for improving value
- Standardized training is always available on line
- Meet the needs and demands of clients to share services and support, avoid duplication of services
- Engagement processes...help everyone to understand where efficiencies can be applied
- Rounding with “staff”... “Do you have what you need to do your job?” is a simple question that has resulted in better awareness among staff of organizational fiscal challenge, while improving awareness among senior managers of frontline challenges.
- Interprofessional/Integrated care teams... more collaborative
- A single care plan that travels with the patient... provides for transparent documentation and the patient only has to tell their story to providers once
- Centralization of processes among 5 LTC homes within the Region of Peel has been done with the goal of achieving efficiencies.

## Challenges

- Paramedics...adequate resources for /EMS to respond to calls from the community in a timely manner
- Need to spend time understand the perspectives of the frontline workers, the processes and the problem
- Monitoring and sustaining change...in particular in the Mississauga area
- Adequate communication
- Collaboration with similar organizations... organizations need to be:
  - open to sharing of information
  - more flexible and transparent
  - more open to change
- French Language Services
  - Not all organizations are aware that services can be offered in French
  - Not all citizens are aware that they can also receive services in French
- Improved communication at transitional points of care.

## Opportunities

- Improved transparency relating to hospitals and physicians performance, e.g. readily accessible and timely information on high-end imaging, referral to specialists, 30 days readmission etc.
- Common data base and sharing of information
- Back office integration is an example of improving efficiency that can be spread... focus on human resources and decreasing duplication of effort

- Expanded use of IT/IM to further support care integration and communication among the team
- Improved information sharing at transitional points of care
- Consistent use of business cases to introduce new practices or models that outline the business proposition
- Introduce new programs that are evidence-based and aligned to organizational goals
- Streamline EMS transfer of patients to the ED
- Community engagement to enhance awareness of French Language services in the community and collaboration with other similar organizations to share costs, resources, services, and reduce duplications.
- “Active offer-active demand”...there are Francophone professionals in healthcare who could provide Francophone homecare services

## GROWTH

Based on the pre-reading material provided, what you have heard here this evening, and on your current and past experience please identify the most effective strategies employed by your organization that contribute to **improving upon the demand for service**.

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### Strategies

- Create a vision
- Recruit human resources
- Establish leadership
- Partner with other related programs
- Integrated services...internal between diagnostic and surgery
- Attract donors
- Enhance and ensure quality
- Integrate across specialties... family medicine/urology etc.

### Strengths

- Build on collaborations already in place
- Volunteers are supportive of growth in areas where resources are scarce
- Build on knowledge of those who are on the ground working with patients
- Harness passion as a requirement for growth.

### Challenges

- Identifying areas ready for growth is difficult... not always clear how to determine or rank need
- Resources are limited and may have to be withdrawn from existing services in order to grow new ones
- Growth cannot be separated from the other pillars... People, Service Quality, Clinical and Efficiency
- How to determine the cost benefit of new services as compared to existing services.

### Opportunities

- Growth is related to integrating service and collaborating with health care professionals to create a seamless service
- Development of strong vision and passion, combined with “on the ground” knowledge of local demand
- Enhanced volunteer and peer supports build community capacity
- An accurate cost benefit analysis of new services will growth of the right services.