

Work Environment NEWS

GULF COAST HEALTH SERVICES STEERING COMMITTEE

FEBRUARY 2004

Strengthening Professional Relationships

Building a culture of professionalism influences all facets of an organization. Collegial relationships lead to improved communication among all staff, which in turn influences patient safety and patient outcomes. A work environment that is supportive and collaborative positively affects turnover and ultimately financial performance. Enhanced teamwork and coordination that is visible to the patient improves satisfaction scores. Most healthcare leaders acknowledge the importance of professionalism in the workplace, and the detrimental effects a negative work environment can bring to an organization. Developing a strategic approach to professionalism that aligns hospital and medical staff leaders is critical.

Texas Children's Hospital (TCH) has focused its attention on improving the work environment through enhancing professional relationships among all its healthcare professionals.

TCH initially approached the issue of professionalism by searching for an elusive definition. While much has been written on this topic, a common definition has yet to emerge in the literature. Thus, TCH began its own approach of delineating attributes that comprise a culture of professionalism. As TCH developed its strategic approach to professionalism, senior leaders felt it was important for the highest level of the organization to demonstrate their commitment to this issue. In 2002, these attributes were formalized

in a resolution by the Board of Trustees signed by the Chairman of the Board, President of the Board, Chief Executive Officer, and Physician-in-Chief. A copy was distributed to every employee in the organization and posted throughout the hospital, sending a strong signal within the organization that enhancing professionalism in relationships was a priority.

The next step towards understanding the internal needs and developing a strategic approach necessitated the assembly of an interdisciplinary team. Thus began the Professionalism Council, chaired by the Chief Nursing Officer. The Council consisted of representatives from all levels and all key departments, from staff nurse to

senior executive, from physician to allied health professional, and from human resources staff to unit leader.

The Council has four committees that meet regularly and develop the initiatives. One sub-committee has focused on the "model" including a systematic approach for handling breaches of professionalism that involves the appropriate level of leadership, peer review, and human resources. In this academic medical center, a strong collaboration with Baylor College of Medicine is paramount to ensuring success. Clearly established, appropriate review processes and consequences must be available for both

See **Strengthening Professional** on page 2



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PAGE 2
Strengthening Professional...continued

The Foundation of the Ideal Work Environment PROJECT

PAGE 3 AND 4
The Foundation...continued

PAGE 4
Grant UPDATE

Work Environment NEWS

GULF COAST HEALTH SERVICES STEERING COMMITTEE

Strengthening Professional...continued from page 1

hospital and medical staff.

Other subcommittees include Education, Recognition, and Metrics. Thus, the strategic approach that Texas Children's has employed includes developing a mechanism to ensure a consistent approach to professionalism, as well as efforts to formally educate, recognize, and measure attributes of professionalism.

Finally, there are high stress departments that need immediate support for building relationships. At Texas Children's, the Pediatric Intensive Care Unit has served as a pilot unit for a formalized approach to strengthening professionalism. The PICU has established a unit-based professionalism council composed of staff, fellows, and attending physicians who are charged with developing relationships in a less pressured environment. The group is currently developing vignettes that demonstrate the influence of positive and negative relationships on the same clinical case. A varied group of staff reviews the vignettes together and then discusses what went well and how the situation could have been improved. In addition to building relationships through dialogue and collaboration in less stressful environments, an additional goal of this training is to foster respect and gain the perspective of peers.

Texas Children's is committed to strengthening professional relationships among all of its staff and physicians, and continues developing organization and unit-based tools to achieve this. For more information and resources on professionalism, please visit the Texas Children's Hospital website at www.texaschildrenshospital.org/professionalism.



The Foundation of the Ideal Work Environment PROJECT

Through the Work Environment Project, the Gulf Coast Health Services Steering Committee has taken on the challenge of making regional hospitals the employers of choice for nurses and other allied health staff. Steering Committee leaders realize that there will not be lasting solutions to the healthcare staff shortage unless they create work environments that attract new staff and increase the retention of existing staff. The 2002 Advisory Board study of nurse turnover reports that the primary reason nurses leave hospital environments is that their current working environment is less attractive than alternatives available to them, which may be in other hospitals or in non-hospital settings. These regional hospital leaders have adopted a charge to become instruments of change to encourage and support each other in transforming their work environments and thereby the hospital industry in the Gulf Coast region.



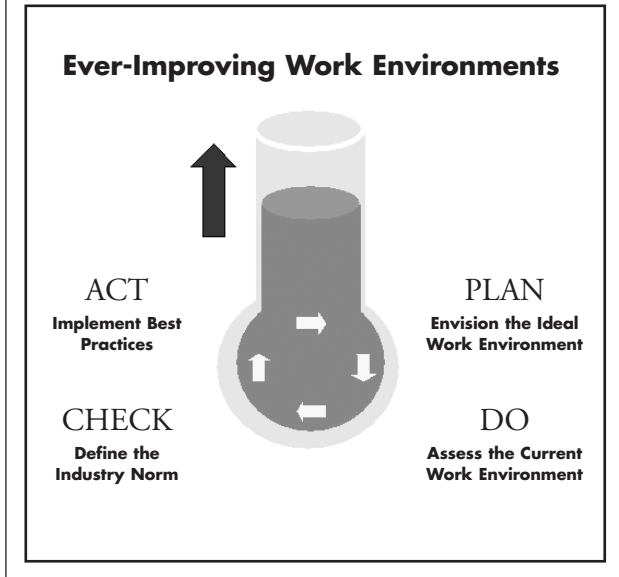
In pursuit of this goal, the Work Environment workgroup developed an industry model for improving the work environment, rather than an individual organization approach. This model creates a shared vision of the ideal hospital work environment and measures progress toward this ideal. It encourages and supports participating hospitals and offers best practices to those interested in making improvements. The "how's," such as which practices to modify as first priorities, are left up to the individual hospitals so that they may customize their improvement plan according to their needs. The model is dynamic. Annual surveys accommodate adjustments to the vision of the ideal and to current industry norms as participating hospitals make improvements. Because it uses individual hospitals as the basic units of analysis, the model enables hospitals to measure themselves against both the norm and the ideal and mark their progress toward the ideal. The model can also be aggregated to hospital system and industry, so it also establishes a mechanism for individual and collective accountability.

See **The Foundation** on page 3

Please send any questions regarding the project to Donde Batten, the Project Coordinator, by email at dbatten1@houston.rr.com or by phone at (713) 665-4382.

The Foundation....continued from page 2

THIS MODEL USES A CONTINUOUS QUALITY IMPROVEMENT METHODOLOGY.



participation and innovative best practices. Special events are held to bring the community together in learning about factors that affect the work environment and ways to improve the work environment.

The model's primary strategy is to establish best practices that change the work environments in hospitals consistent with the Ideal Work Environment Model. These types of activities will enhance collaboration and communication among nurses and other health professionals, including physicians with hospital privileges, as well as promoting the full involvement of nursing professionals in the organizational and clinical decision-making.

The Ideal Work Environment Model includes:

- **Professionalism:** Best practices include the dissemination of professional behaviors standards to all employees and the modeling of professional behavior by executives, to the extent that part of executive pay is contingent on professionalism.
- **Interpersonal Communications and Teamwork:** Best practices include the creation of an open environment that supports the free sharing of information, as evidenced by listening behaviors, so that all providers contribute their expertise and participate in decision making without being belittled or ridiculed by staff with more power and greater status, and without fear of retaliation. These competencies are established on a multidisciplinary basis and are related to patient care outcomes, not to the preferences, needs, or desires of the patient care professional, ensuring the at the system is patient-driven, not provider-driven.
- **Staff training and development:** Best practices are exemplified by a strong commitment to lifelong learning for all staff, including financial support, career counseling, mentoring, leadership and management training, cross-cultural skills training, and methods that encompass collaboration with institutions of higher education and utilize cutting-edge technology.
- **Environmental factors:** Best practices include staff participation in strategic and operational decision-making, efforts to ensure a safe work environment, and scheduling and workload decision making that is data-driven and supports the principles of balanced work and family life. In addition, work designs that are meaningful and rewarding and that accommodate older patient care professionals are included.
- **Economic considerations:** Best practices include setting salaries so that point of service professionals are compensated well and in a way that is superior to those available in less stressful work environments within and outside of hospitals. Compensation and the work environment create positive career options, thus increasing retention. Finally, compensation is based on demonstrated core competencies.

The model incorporates four steps:

1. **Envisioning the Ideal Work Environment.** The Gulf Coast Health Services Steering Committee participating hospitals have identified the key components of the ideal hospital work environment and set the highest standards of performance possible. These ideal statements contain definitions, standards, example best practices, and measures of effectiveness on five categories of components (*see below*).
2. **Assessing the Current Work Environment.** Each participating hospital shares measurement data and examples of best practices in return for a customized report, comparing that hospital's performance to the industry norm and the ideal. Individual comparative data is only given to the hospital owner of the data. Other reports are anonymous.
3. **Defining the Industry Norm.** The industry norm or standard is established by determining the median performance of all participating hospitals on each measure.
4. **Recognizing Outstanding Performance and Sharing Best Practices.** A best practice clearinghouse is developed to encourage and facilitate the sharing of best practices. Annually, a forum will be held to recognize outstanding

See **The Foundation** on page 4

The Foundation.....continued from page 3

The Gulf Coast Health Services Steering Committee believes that by successfully implementing best practices from the many participating hospitals in this project, all hospitals can improve their work environments, job satisfaction, and patient care. These strategies are similar to characteristics examined in Magnet Hospitals. In addition, creating a positive work environment will increase the attractiveness of the healthcare professions, especially nursing, to the diverse array of potential employees in the region, so the nursing workforce reflects the population diversity more closely. This will increase the cultural competency of the healthcare staff and improve the care of patients.



Grant UPDATE

Our first report to HRSA was due on January 20 and included the following information:

All hospitals in the region were invited to participate in the project in November 2003. To date, 53 of the region's hospitals (58%) have indicated that they will participate in the project by completing the first year's survey. Our goal was to have at least 30 hospitals participating in Year 1.

Those 53 hospitals account for 76% of the total hospital beds in the region. The 18 Disproportionate Share Hospitals (DSH) that indicated that they would participate in Year 1 account for 81% of the DSH hospital beds in the region. Our goal was that participating hospitals account for 50% of total hospitals beds in the region in Year 1 and participating DSH hospitals account for 50% of the total DSH hospital beds in the region in Year 1.

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