Engaging Leaders: From Turf Wars to Appreciative Inquiry

Principles of Leadership for a

Quality and Safety Culture

Harvard Safety Certificate Program 2010

Gwen Sherwood, PhD, RN, FAAN

Gwen Sherwood, PhD, RN, FAAN

Professor and Associate Dean for Academic Affairs
The University of North Carolina at Chapel Hill School of Nursing

Co-Investigator, Quality and Safety Education for Nurses (QSEN)
Co-Editor, *International Textbook of Reflective Practice in Nursing*

gwen.sherwood@unc.edu

Reflection: Acting Purposefully

- What do you want from this time today?

- What did you give up to be here?

- What are you willing to invest to achieve your purpose?
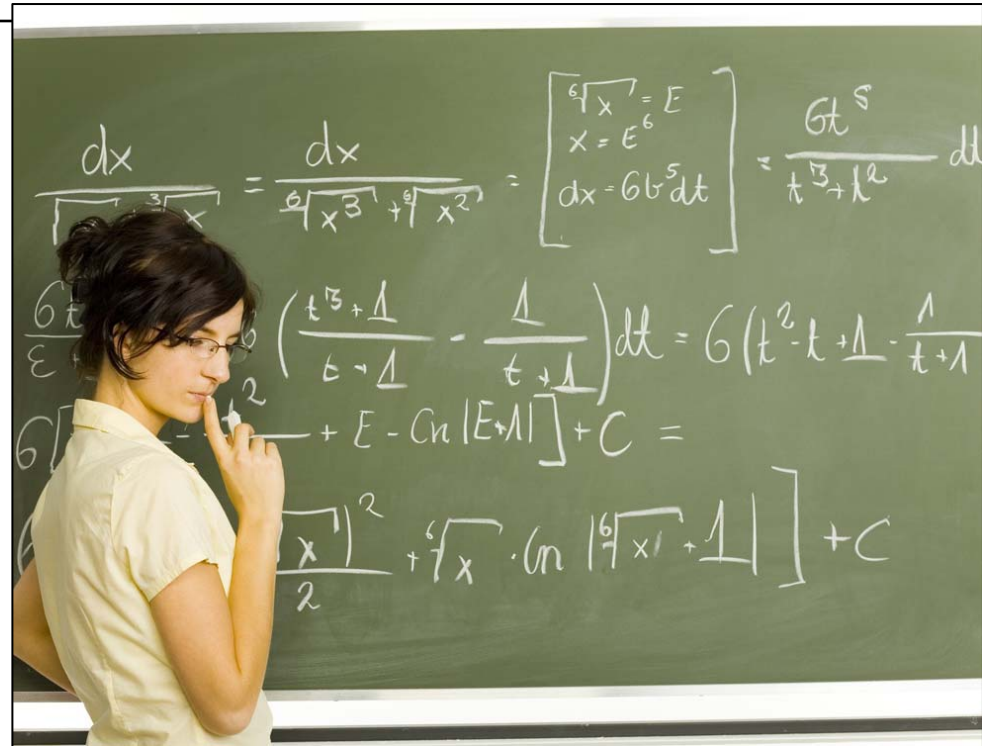
There are some patients whom we cannot help. There are none whom we cannot harm. A. L. Bloomfield

Staggering reports of poor quality from around the world

For example, data shows that in the U.S.:

- In-patients may experience at least one medication error per day on average
- At least 1.5 million preventable adverse drug events occur each year
- Contributes to the loss of trust in the system
  - Identifying and Preventing Medication Errors (IOM, Cronenwett et al 2006)
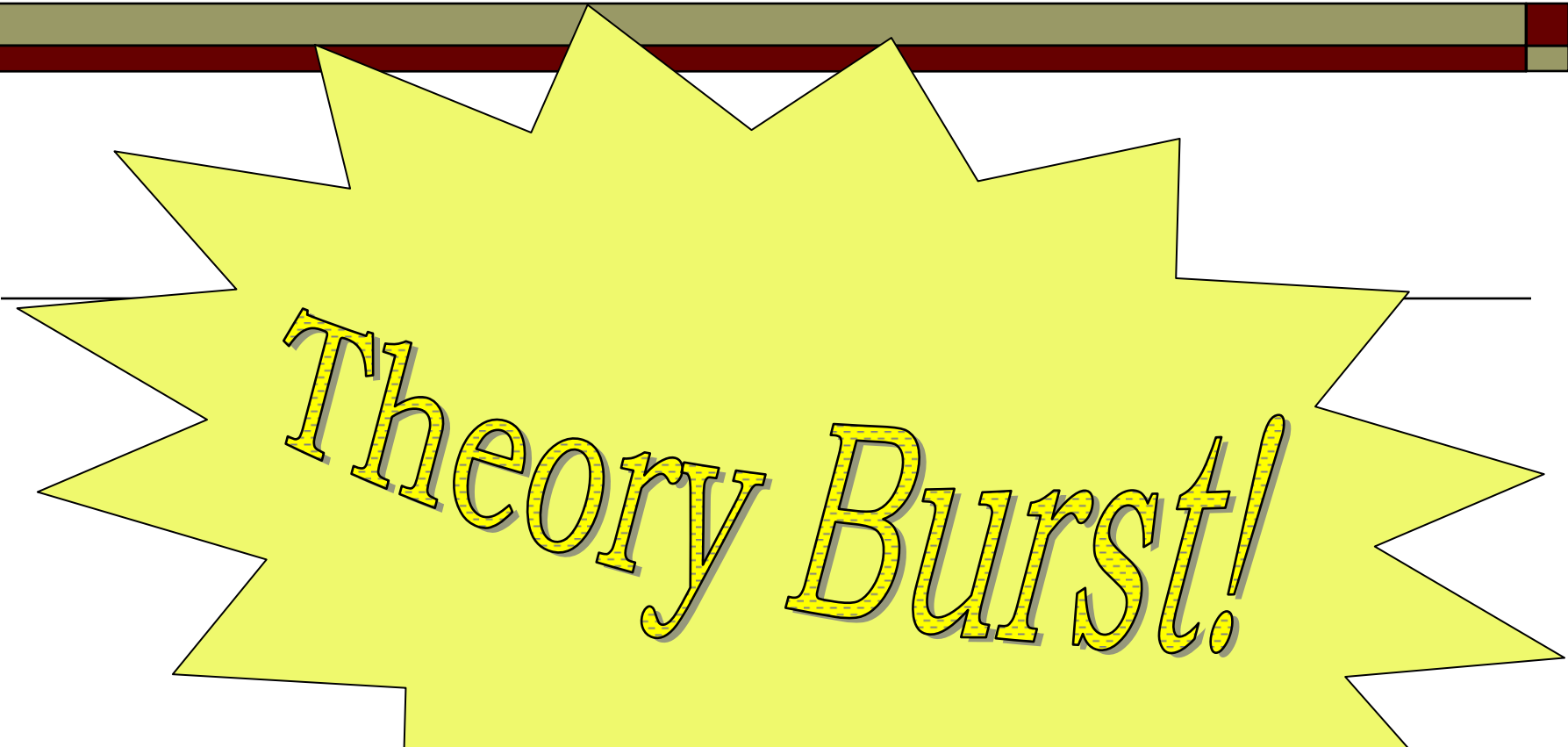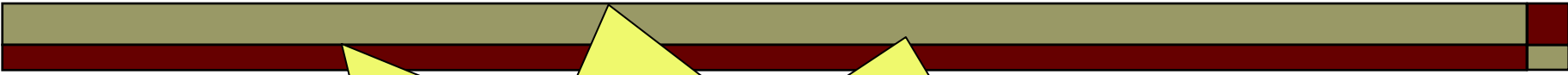
Strategies to Build a safety Culture

- Begins with the knowledge, skills and attitudes of those involved in care delivery

- Builds from the interface of a consistent message between organizational leaders and those on the front lines of care delivery

- Just culture begins with workers who are self aware, emotionally intelligent and given a voice in learning from events

Follow the Leader, 1975

Changing conversations,
Changing minds,
Changing culture
Creating transformation

Theory Burst!

Framing new roles and skills: QSEN

Mindfulness and Reflection for transformation

Emotional Intelligence

Appreciative Inquiry to build culture

Quality and Safety

What are moral, ethical, and economic considerations?

What are work force issues?

How do we lead health care redesign?

Moral imperative

- Health care is value based;

- Safety and Quality are essential value.

- We take pride in doing the right thing, but quality and safety are more than *will*

Requires a mindset of inquiry and the tools to improve the systems in which we work.

The work force economic imperative

- Workers in systems which do not value quality and safety and do not include as part of daily work, report lower satisfaction (Ulrich et al 2008)

- Works against our internal compass, contributes to disengagement and dissatisfaction

- Lower satisfaction contributes to turnover

Workforce: Framing new roles and skills

- Complexity of care means no <u>one</u> discipline can provide care, need to clarify and understand roles

- Partner with patients and families

- New RN graduates need different skills for emerging system redesigns
  - Longer and costly orientations

The new view of health care:

All health professionals should be educated to deliver *patient-centered care* as members of *interdisciplinary teams*, emphasizing *evidence-based practice, quality improvement,* [*safety*]*,* and *informatics.*

Committee on Health Professions Education

Institute of Medicine (2003)

Welcome

Welcome to QSEN, a comprehensive resource for quality and safety education for nurses! Faculty members worldwide are working to help new health professionals gain the knowledge, skills, and attitudes to continuously improve the health care systems in which they work. This website is a place to learn and share ideas about educational strategies that promote quality and safety competency development in nursing.

Faculty Development

Faculty resources on this website include annotated bibliographies and teaching strategies submitted by faculty like you who are attempting to help students develop the knowledge, skills and attitudes essential to the development of quality and safety competencies. Faculty from 15 nursing schools participated in the QSEN Learning Collaborative in Phase II. You can view a list of our pilot schools here.

We invite you to use this website to share with other nursing educators your ideas for improving quality and safety education for nurses. To upload a teaching strategy, please click here.

QSEN
Quality and Safety Education for Nurses

Funded by the Robert Wood Johnson Foundation

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Faculty Amy Bartor

New Phase III QSE
Grant Awarded

Read all News

…To transform nurse identity to include quality and safety as a core part of what they do…
www.qsen.org

Nurses' Role in Quality and Safety

- Quality and Safety Education for Nurses (QSEN)
  - www.qsen.org (funded by RWJ)

- National expert panel defined quality and safety competencies and knowledge, skills and attitudes required for nurses in health care organizations

- Based on IOM competencies for all health professions education

- Adopted by nursing education credentialing agencies

Cronenwett et al, *Nursing Outlook*, May-June 2007 (special topic issue)

- Patient centered care
- Teamwork and collaboration
- Evidence base practice
- Quality
- Safety
- Informatics

New views of familiar concepts translate for all health care workers

- Updates: Nursing Outlook Nov. 2009

Competency	What does it mean?
Patient centered care	Base care decisions on knowledge of patient values and preference; include patient and family as partners in care.
Teamwork and collaboration	Use personal strengths to foster effective team functioning. Integrate quality and safety science; communicate across diverse team members.
Quality improvement	Integrate QI into daily work by employing quality tools, current evidence, patient preferences, and benchmark data to assess practice and design improvement strategies.
Evidence based practice	Ask questions about why we do things. Use technology to identify latest evidence to determine best practices, establish evidence based standards and adapt to patient situation.
Safety	Constantly ask how actions affect patient risk. Where is the next error likely to occur? What actions will prevent near misses?
Informatics	Use technology to improve and manage care. Provide experiences with EHR.

System: High Reliability Organizations

- Succeed in avoiding catastrophe in an environment where normal accidents can be expected due to risk factors and complexity.

- Recognize failure will happen but continually reinvent and adapt quickly and creatively to circumstances

Characteristics of HROs

- Complex, internally dynamic, and, intermittently, intensely interactive

- Perform exacting tasks under considerable time pressure

- High functioning skills of anticipation and resilience through mindful practice.

- Low incident rates and an almost complete absence of catastrophic failures over several years

- Preoccupation with where the next error is likely to occur

HROs focus on safety from a system perspective

- Health care is learning to examine quality and safety from a system perspective to identify the full set of contributing factors

- Just culture focuses on accountability rather than blame.

- Redesign system to prevent future occurrences.

□ How do health professionals apply new views of quality and safety science to redesign how care is delivered, monitored, and improved.

□ How do we address the challenges in leading this change?

Leadership is essential to improvements in the system

□ To change practice calls for transformational leadership to achieve the collective purpose

□ How do we THINK from a safety perspective?

Health Care Redefined

- Continuous quality improvement
  - Encourages a culture of inquiry
  - Welcomes questions
  - Investigates outcomes and critical incidents from a system perspective

Workers who are engaged in their work ask critical questions to continually seek to improve outcomes of care.

Shaping organizational context

- The context in which work takes place influences our responses.

- Culture is the behavior and beliefs/values of the group. It is built from the connecting consequences with behavior, what is valued and rewarded.

- Leaders create and manage culture, and deconstruct when needed to change outcomes.

- How do we recognize and reward safety?

An organization's success is linked with the emotional intelligence of its leaders: Goleman.

- Intellect and cognitive skills are drivers of outstanding performance, but the most important skill is emotional intelligence.

- Major difference of star performers from average performers is the ability to work with people, to connect, understand, and lead them.
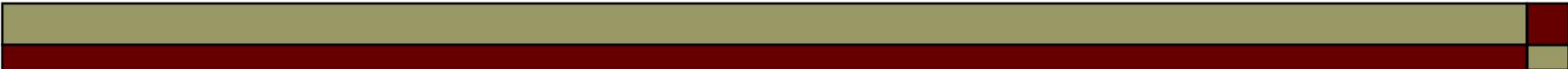
Building the skills to change the culture

- Mindfulness

- Emotional Intelligence

- Reflection

- Appreciative Inquiry

Mindfulness: being purposefully aware in the moment

- Aware of the situation of others

- Operationalized through questions: Does this make sense? How do others think I am doing?

- How do we assess in hiring and evaluation?

Reflection systematically examine events to change future behavior:

- Critically consider beliefs or knowledge in light of supporting evidence.
- Raise awareness about actions to be able to make better choices in the future.
- Bridge actual and ideal practice/actions.
- Mindfully considers reactions to assure actions are intentional, conscious, and deliberate.

Emotional intelligence (EQ or EI)

- Ability to use reflection to monitor feelings and emotions, to discriminate among them, and use the information to guide one's thinking and actions.

- Leadership is about relationships

- Relationships are about emotional intelligence

Emotional Intelligence is more than "IQ".

- Self-awareness: assess own capabilities, base actions on values and goals.

- Self regulation: control emotional reactions for a focused composed, mindful response under pressure.

- Self motivated: strive for excellence and larger mission.

- Empathy: fosters respect, understanding, and sensitivity for others' point of view

- Trust: confidence in relationships, managing conflict. (Goleman)

Applying Reflection and EQ

- [ ] Begins with uncomfortable feeling about something or the way one acts or reacts.

- [ ] Critically reflect on the meaning of what happened from your own perspective as well as others.

- [ ] Consider one's internal compass of what is right.

- [ ] Integrate into context to change perspective for future actions.

Emotional intelligence builds the interconnection of self, others, clients, and systems

Consciousness of context

Consciousness of others

Consciousness of self

Building EQ

# Reflection: express expectations, perceptions and feelings of an experience

Evidence	Domain	Description

Reaction	Affective Domain:
	    examine the evidence
	    examine how you feel	

Relevance	Cognitive domain:
	    how is the evidence related?
	    add your own understanding.
	    give alternative views	

Responsibility	Psychomotor domain
	    how is the knowledge used?
	    clarify remaining questions	

Self-Reflection to build teamwork

- In working with others, do you spend more time thinking about what worked or what did not?

- Reflect on specific examples.

- What feelings arise from working well with others?

- What feelings result from poor working relationships?

Reflection helps see multiple views.
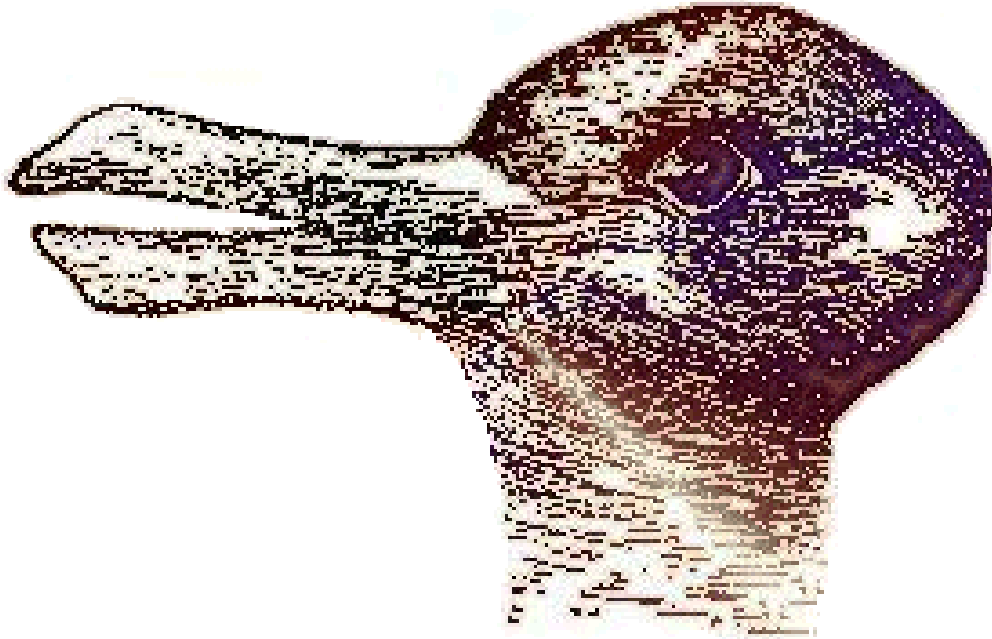
□ It depends on what you are trying to see.

□ How do patients/families see the same event?

Appreciative Inquiry (AI): Positive approach to building safety culture

- Positive, flexible perspective to manage context by engaging workers in recalling moments of success

- Look for what works in an organization: What are stories of helping improve a patient's outcome?

- Energizes people by involving them in building the organization and world they want to live in

- Reflective, generative and life-enriching to discover what gives "life" to the organization

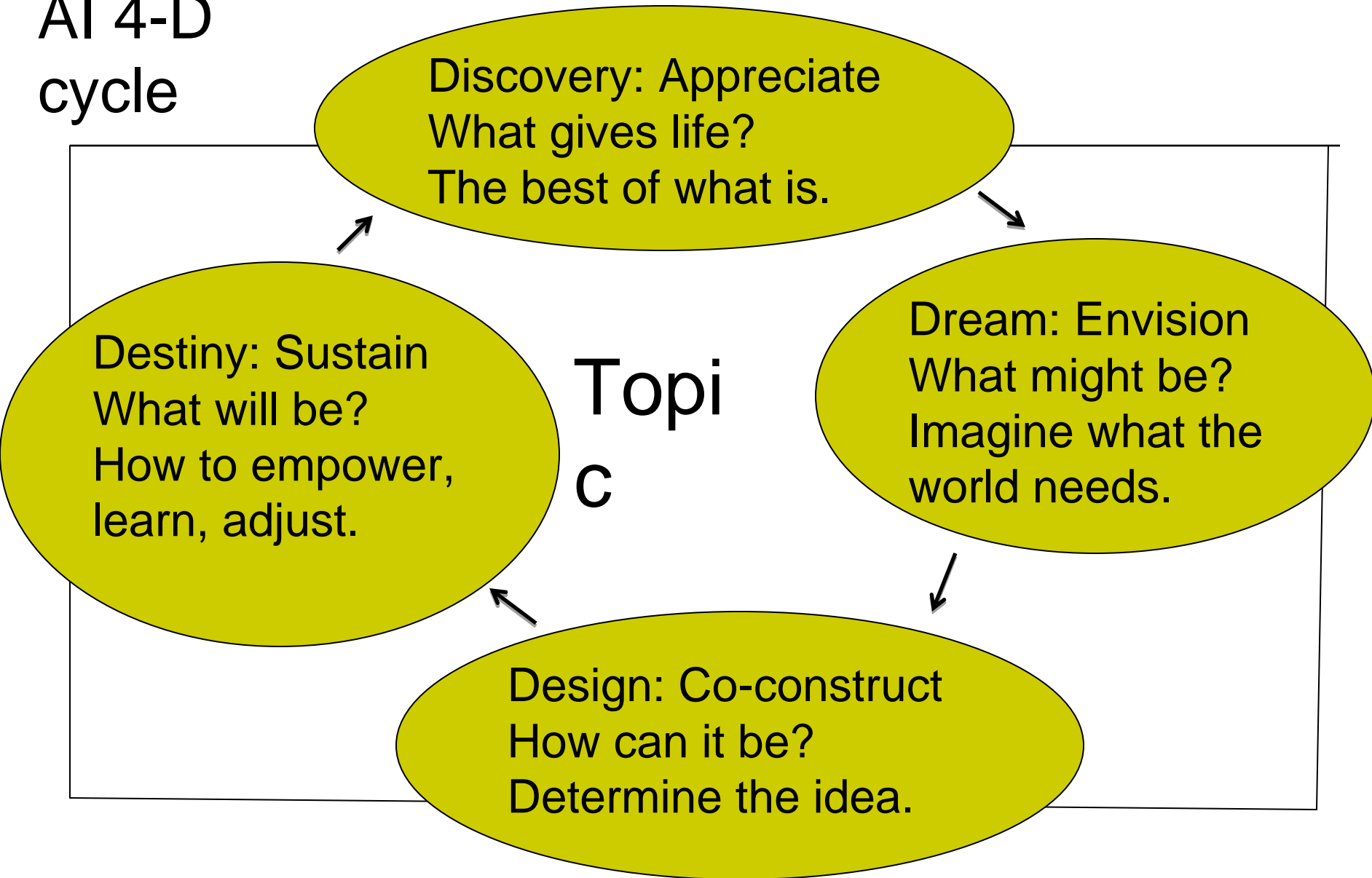| Problem Solving:	Appreciative Inquiry:
See organization as a problem to be solved	Human center of infinite imagination, capacity and potential
Felt need, problem identification	Appreciate and value the best
Analysis of causes	Envision what might be
Analysis of possible solutions	Dialogue what should be
Action planning, treatment	Innovate what will be
Asks what is wrong, seeks solution	Asks what works, seeks transformation

AI: reflective process that energizes through a participative process to build on success

- Questions are the first part of change

- Iterative process to identify themes of success

- Based on common mission that unites the group

- Continuing process

AI 4-D cycle

Discovery: Appreciate
What gives life?
The best of what is.

Dream: Envision
What might be?
Imagine what the world needs.

Destiny: Sustain
What will be?
How to empower, learn, adjust.

Design: Co-construct
How can it be?
Determine the idea.

Topic

❑Discovery: Create meaning by sharing stories that identify and appreciate the best

☐ Dream: Challenge the status quo by envisioning potential results and bottom line contributions to the world

☐ Design: Develop a plan for a transformed approach.

☐ Destiny: Flexibility and awareness to sustain

Reflection for Transformation: Moving to Change

- The conversations we have shape how we see the world, how we behave, and what we see as reality.

- Inquiry is change. The first question drives response.

- We create our reality by the stories we tell.

- We act according to perceptions of our current reality AND what we anticipate/imagine will happen in the future; we move toward the reality we imagine.

Applying AI to build EQ

- Reflect on positive experiences you've had in your work. What makes your work come alive?
  - What was happening?
  - Who was involved and what did they do?
  - What did you do?

- What are the core values and best practices that define your work?

- Appreciate yourself
  - Consider the things you value deeply.
  - What do you value most about yourself?

Building EQ with your team

□ What are exemplars of applying safety science that improved patient outcomes?

- Describe the event.

- Personal growth perspective: what about the event made me feel worthwhile?

- Civic engagement: How did others respond?

- Professional knowledge: What about the event can I adopt as usual behaviors or attitudes?

- How was this different from other events?

- What can I apply in the future?

Building EQ: Reflective Writing

- Building self motivation
- Learning to write or writing to learn?
  - purposeful writing to order thoughts and connect ideas
  - creates a record

- Write for one minute on the most important skill you learned today.

Additional References

- Sherwood & Horton-Deutsch. (2008). Reflective practice: The route to nursing leadership. In Freshwater, D., Taylor, B., & Sherwood, G. *International textbook of reflective practice in nursing*. Oxford, England: Blackwell Publishing & Sigma Theta Tau Press. Pp. 157-176.

- Hammond, S. (1998).*The Thin Book of Appreciative Inquiry*. Bend, OR: The Thin Book Publishing Co.

- Bolman & Deal. (2004). *Leading with Soul*.