

BUILDING A CULTURE OF RESPECT TO IMPROVE PATIENT SAFETY, MEDICAL TEAM PERFORMANCE AND PATIENT AND STAFF SATISFACTION

AHA Team Training Monthly Webinar May 8, 2019





RULES OF ENGAGEMENT

- Audio for the webinar can be accessed in two ways:
 - Through the phone (*Please mute your computer speakers)
 - Through your computer
- A Q&A session will be held at the end of the presentation
- Written questions are encouraged throughout the presentation and will be answered during the Q&A session
 - To submit a question, type it into the Chat Area and send it at any time during the presentation





2019 AHA Team Training National Conference

June 12-14 San Antonio aha.org/teamtraining

- Pre-conference workshops
 - TeamSTEPPS Next Steps June 11-12
 - Master Training Course June 11-12
 - 4-hour sessions on June 12
 - Driving Change The Power of Activating and Engaging the Frontline Voice
 - Fostering Resilience to Cultivate Change
 - Lights Cameras Activities: TeamSTEPPS via Active and Immersive Learning
- Learn more and register



CONTACT INFORMATION

Web: <u>www.aha.org/teamtraining</u> Email: <u>TeamTraining@aha.org</u> Phone: 312-422-2609



TODAY'S PRESENTERS



Bettina Siewert, MD Vice Chair for Quality and Safety in Radiology Suzanne Swedeen, RN, MSN Quality Improvement Specialist In Radiology

HARVARD MEDICAL FACULTY PHYSICIANS At Beth Israel Deaconess Medical Center





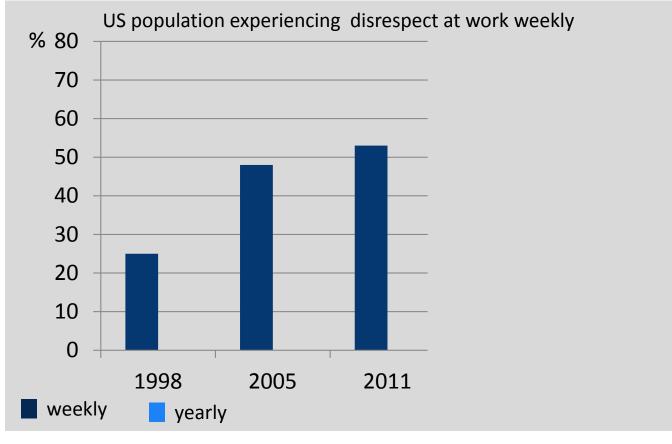


OUTLINE

- Introduction
- Impact of disrespect in health care
- Understanding disrespectful and respectful behaviors
- Building a culture of respect
 - key behaviors, leadership suggestions, further action items
- Advantages of a culture of respect



DISRESPECT IS ON THE RISE





*BIDMC Radiology

Porath C. J Appl Soc Psych 2012;42:E326-57

SOCIETAL REASONS FOR THE RISE OF DISRESPECT

- \uparrow Work load
- Different expectations of behavioral norms
 - 1 awareness
 - \uparrow cultural diversity
- Communication options \uparrow
 - ↑ social media, ↓ interpersonal skills,





DIFFERENT EXPECTATIONS OF BEHAVIORAL NORMS



Treat others the way They Would like to be treated 1.05

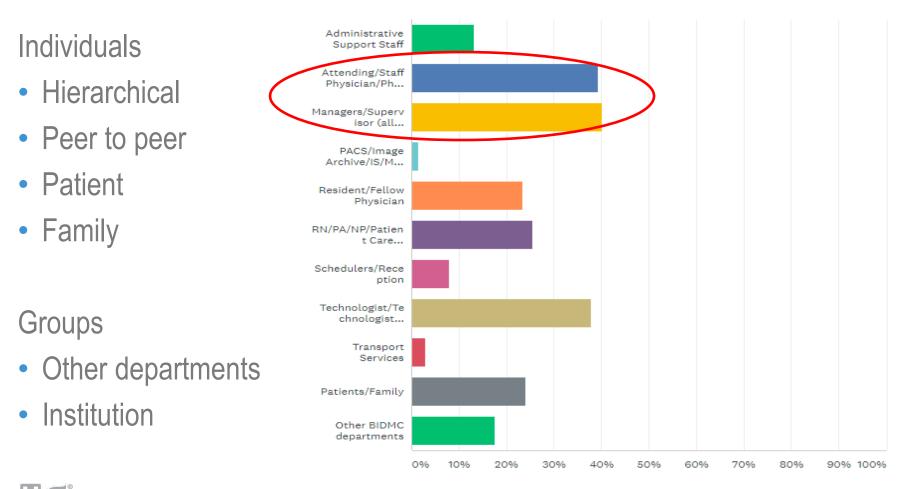


CHALLENGES OF THE PLATINUM RULE

Challenge	Possible Solution
Variability in expectations	- Awareness of personal preference
Perception	 Establishing trust and communication around respect
Implementation	- Building a common language



WHOM DO STAFF EXPERIENCE DISRESPECT FROM?



2. IMPACT OF DISRESPECT IN HEALTH CARE

- Staff performance
- Patient outcomes
- Patient safety
- Staff engagement
- Health care costs



DISRESPECT AND STAFF PERFORMANCE

Individuals

• worsening in diagnostic (52%) and procedural (43%) performance

Teams

• weakens collaborative processes: decrease in information sharing and help seeking



What Happens When Parents Are Rude in the Hospital



Riskin A. Pediatrics 2015;136:487 Riskin A. Pediatrics 2017;139:1



WITNESSED DISRESPECT (THE RIPPLE EFFECT) AND PERFORMANCE

	Performance	Creativity	Willingness to help
Directly experienced disrespect	↓61%	↓ 58%	
Witnessed disrespect	↓ 22%	↓ 28%	↓ 49%

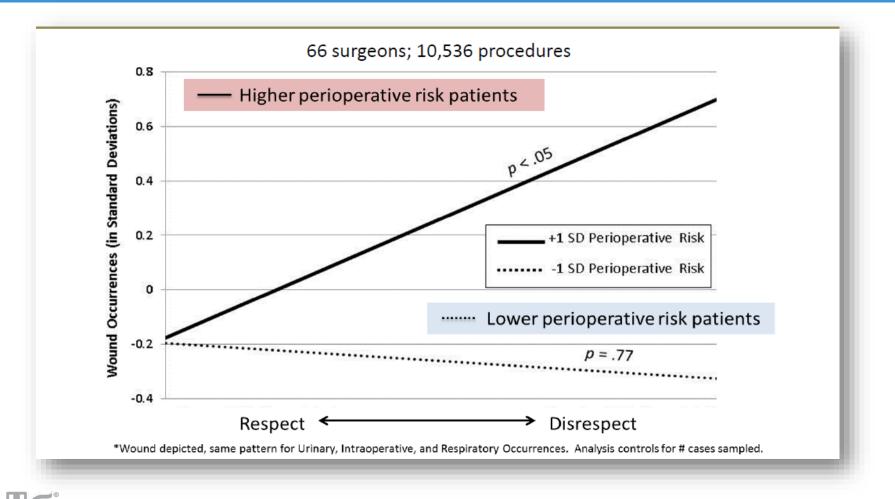


DISRESPECT AND PATIENT SAFETY

- Disrespect tied to 71% of medical errors and 21% of patient deaths¹
- Frequent barrier to safety event reporting²
 - 53% of staff fear disrespect
 - "only" 39% have witnessed disrespect
 - -- 67% of this group will not speak up



DISRESPECT AND PATIENT OUTCOMES



DISRESPECT AND STAFF ENGAGEMENT

800 employees in 17 industries

Decrease in performance 66%

- 48% \downarrow work effort, 38% \downarrow quality of their work

Lost work time 63-80%

- worrying about the incident, avoiding the offender
- Spent less time at work 43%

Commitment to the organization declined 78%

- 12% left their job
- 25% taking their frustration out on customers

AHA Education AHA Team Training

DISRESPECT AND HEALTH CARE COSTS

Decreased performance

malpractice suits

Loss of work satisfaction

Loss of staff engagement

- absenteeism
- retraining new personnel





3. UNDERSTANDING DISRESPECTFUL AND RESPECTFUL BEHAVIORS



DISRESPECTFUL BEHAVIORS

- Addressing somebody by role or not at all
- Avoiding eye contact, eye rolling, sighing, laughing at somebody in public, other non-verbal signals
- Telling somebody to do something
- Not listening/paying attention, i.e., texting or taking a phone call in the middle of a conversation
- Talking over somebody, sarcasm, ignoring a topic being brought up, not responding to email
- Subtle condescending language "I know better than you."
- excluding somebody from discussion/emails/meetings
- blaming somebody in public
- sharing private comments publicly

RESPECTFUL BEHAVIORS

- Addressing someone by their name
- Making eye contact
- Giving someone your undivided attention
- Including everyone in discussions
- Being completely candid
- Seeking someone's opinion
- Referring to someone's opinion and expertise
- Validating someone's opinion and ideas
- Recommending someone to others
- Asking for someone's help

- Offering a verbal compliment or thank you
- Giving public recognition
- Defending someone in front of others
- Sharing one's limited resources
- Making a personal sacrifice for someone
- Showing interest in someone's work & family
- Showing concern for health and well-being
- Supporting someone's work and objectives
- Offering assistance to help someone succeed
- Empathizing with set-back or loss



4. BUILDING A CULTURE OF RESPECT



BUILDING A CULTURE OF RESPECT

Culture¹

"... the characteristic features of everyday existence *shared by people* in a place or time."

Building consensus

- Clarifying expectations of respectful behaviors
 - participation of all: frontlines to leadership \uparrow



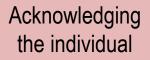
MAJOR THEMES OF A CULTURE OF RESPECT

Employee survey by email, free text entry for description of disrespectful and respectful behaviors, 204 of 648 Radiology employees (31.5%) participated, 612 behaviors, group discussions to develop consensus

- Acknowledge the individual
- Active listening
- Team approach
- Positive work environment
- Expressing appreciation

ACKNOWLEDGE DISRESPECTFUL BEHAVIORS

- Ignoring somebody (53%)
- Not saying "hello" (31%)
- Not addressing somebody by name (16%)



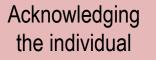
ACKNOWLEDGE RESPECTFUL BEHAVIORS

- Know names of immediate coworkers
 - introduce yourself and others
 - ask others for their name
- Visibly display
 - your name badge
 - team members names on white boards
- Smile and say hello

- 10/5 rule

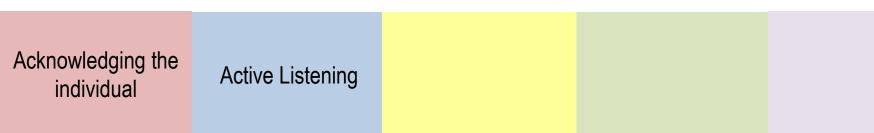
Leadership suggestion

Know something personal about your staff

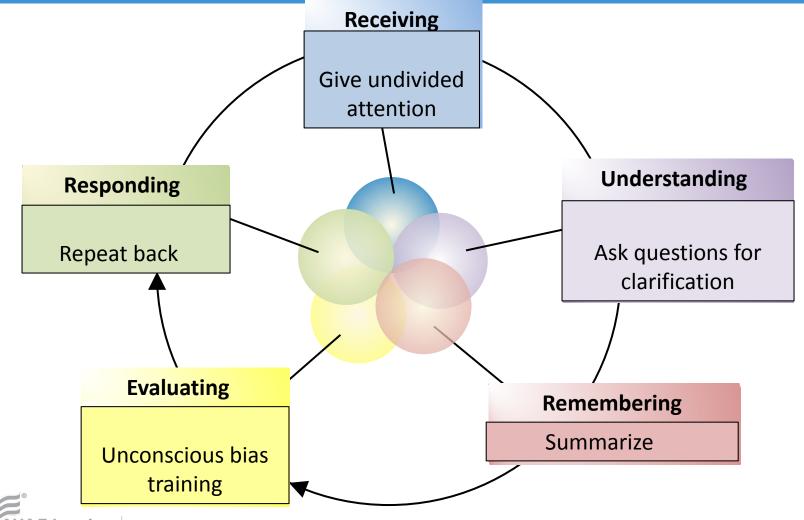


ACTIVE LISTENING DISRESPECTFUL BEHAVIORS

- Not listening to suggestions, no willingness to discuss concerns (67%)
- Not asking for someone's opinion (14%)
- Not correcting an issue, not being responsive (14%)



FIVE-STAGE MODEL OF LISTENING AND BARRIERS



AHA Education AHA Team Training

Joseph A. Devito. Listening in interpersonal communication

ACTIVE LISTENING RESPECTFUL BEHAVIORS

- Giving your undivided attention
 - no phones or laptops at meetings
 - verbal queues, eye contact, shoulders forward
- Acknowledging what was said
 ask questions, summarize

Leadership suggestion

- Seeking someone's opinion
- Validating and valuing everyone's ideas and diversity of thought
 - "Good point!"

Celeste Hadlee. TED talk - conversation

Acknowledging the individual

TEAM APPROACH DISRESPECTFUL BEHAVIORS

- Lack of mutual support (53%) ...outside of job description
- Inequality of team members (22%)
- Being told to do something (14%)

Acknowledging the individual

Active Listening

Team Approach

TEAM APPROACH RESPECTFUL BEHAVIORS

- Volunteer to offer support

 ...outside of job description
 "How can I help?"
- Ask for and accept help
 "May I ask you to help me with X?"
- Give and receive constructive feedback

Team Approach

• Include all members in decisions

Active Listening

Acknowledging

the individual

Leadership suggestion

Provide support in times of need

TEAM APPROACH: FURTHER ACTION ITEMS

- Understanding each others workflow
 - interdisciplinary staff meetings
 - morning huddles
- Recruitment focus for 3 team player traits¹
 - humility
 - commitment
 - emotional intelligence



POSITIVE WORK ENVIRONMENT DISRESPECTFUL BEHAVIORS

- Blaming other, publicly criticizing, generalizations, assumptions, negativity (52%)
- Yelling, cursing, impoliteness, indiscretion, impatience (25%)
- Lack of collegiality, camaraderie (23%)

Acknowledging
the individualActive ListeningTeam ApproachPositive Work
Environment

POSITIVE WORK ENVIRONMENT RESPECTFUL BEHAVIORS

Assuming the best

- including that people want to treat each other respectfully

Positive attitude

Leadership suggestion

• Defending someone in public

• Empathy

Acknowledging the individual

Active Listening

Team Approach

Positive Work Environment

POSITIVE WORK ENVIRONMENT FURTHER ACTION ITEMS

Ladder of inference training

- Actions
- Beliefs
- Conclusions
- Assumptions
- Meanings
- Selected data
- Observable data

- Question your assumptions or conclusion
- Seek contrary data

Leadership suggestion

 Gather more information before forming an opinion or making a decision



LACK OF APPRECIATION DISRESPECTFUL BEHAVIORS

- Not recognizing skill, effort, or work load (43%)
- Not saying "Good job" or "Thank you" (30%)
- No recognition, benefits, bonus (27%)



EXPRESSING APPRECIATION RESPECTFUL BEHAVIORS

- Words of appreciation
- Assistance and help
- Meeting time with supervisor
- Award
- Tangible goods

Acknowledging
the individualActive ListeningTeam ApproachPositive Work
EnvironmentExpressing
Appreciation

WORDS OF APPRECIATION

- Say "Thank you!", "Excellent job!"
 - timely, public, sincere

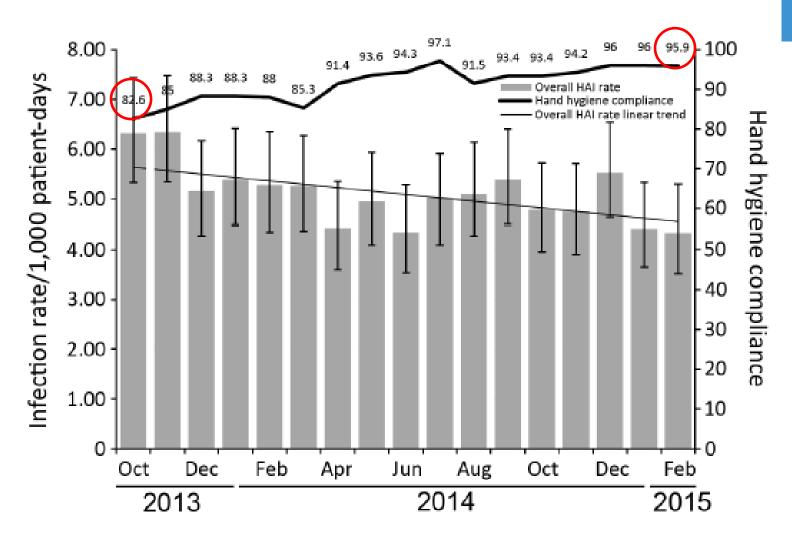
Leadership suggestion

- Recommend someone to others
- Choose day of the week: "Thank you" –Thursday
 - Email
 - Electronic "Thank you" notes
 - Handwritten "Thank you" notes

Daniels AC. Bringing out the best in people

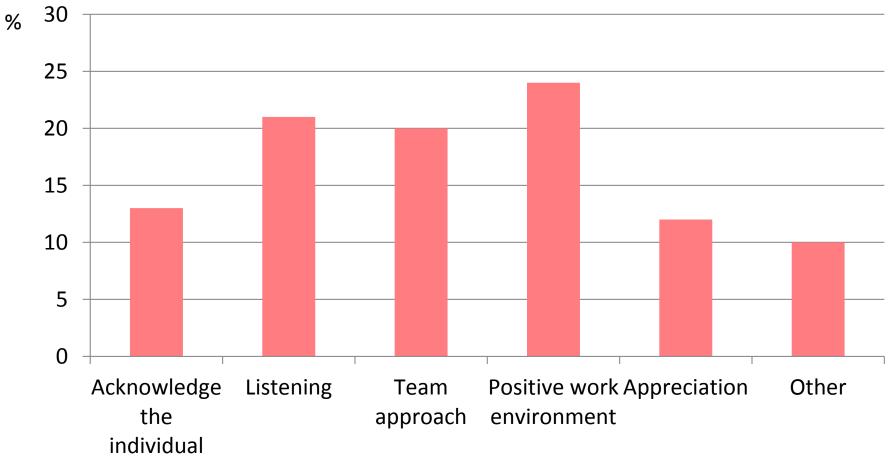


THE POWER OF "THANK YOU!"



AHA Education AHA Team Training

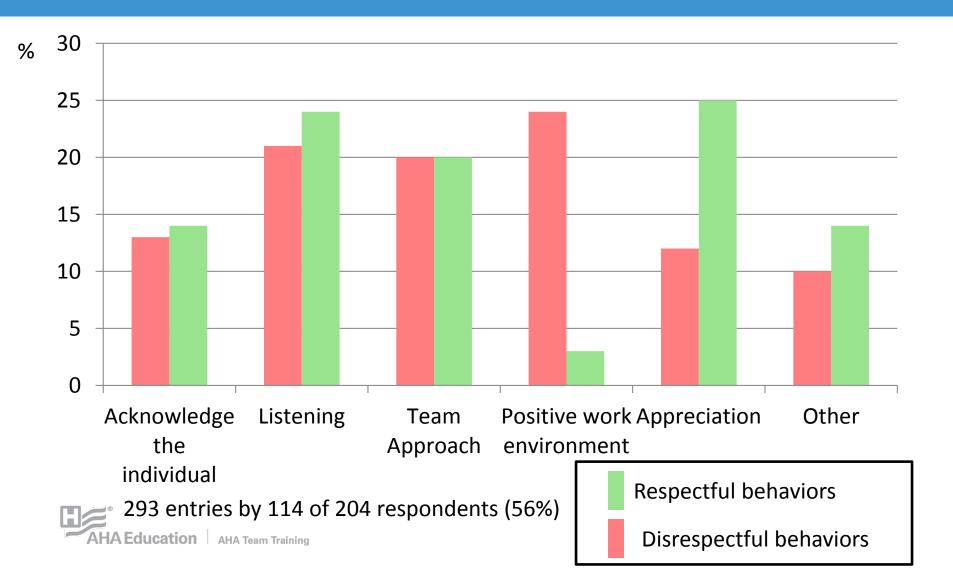
WHAT MAKES YOU FEEL DISRESPECTED? LACK OF ...



AHA Education AHA Team Training

319 entries by 123 of 204 respondents (51%)

WHAT MAKES YOU FEEL RESPECTED?



BUILDING A CULTURE OF RESPECT

Building consensus

- Clarifying expectations of respectful behaviors
 - participation of all: frontlines to leadership

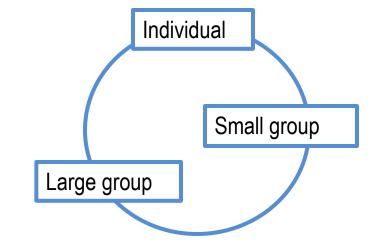
Consecutive skill building

• To learn together and build trust



CONSECUTIVE SKILL BUILDING

- Acknowledge the individual
- Active listening
- Team approach
- Positive work environment
- Expressing appreciation



CREATING A CULTURE OF RESPECT

Building consensus

Consecutive skill building

Implementation \downarrow

- Training leadership
 - all physicians, managers and administrators
 - dedicated workshops
- Frontline staff
 - roll-out over several months
 - -- departmental newsletter, staff meetings
 - -- one behavior/month

AHA Education AHA Team Training

REINFORCING A CULTURE OF RESPECT

Support for addressing individual events

- <u>RespectinRadiology@bidmc.harvard.edu</u>
- Open lines of communication with supervisors

Addressing disruptive behavior

- Professionalism program
- Organizational Institute/Office for Professionalism

Hiring for civility

• Currently a focus in only 11% of US organizations

VIRTUAL DISRESPECT

Acknowledging the individual

Active Listening

Team Approach

Positive Work Environment

Expressing Appreciation • Phone manners

- Not stating name
- Not saying good-bye
- Email etiquette
 - Not answering emails
 - CC-ing
 - not including everybody in emails
 - including too many on sensitive emails

Leadership vulnerability

5. ADVANTAGES OF A CULTURE OF RESPECT



IMPACT OF RESPECT ON THE INDIVIDUAL

Respectful people are

- perceived as warm and competent
- have better outcomes
 - more often sought out for advice
 - seen as leaders
 - performing better



IMPACT OF RESPECT ON PATIENT OUTCOMES

338 care providers, 878 patients from 9 hospitals who underwent total hip and knee arthroplasty

High degree of relational coordination including

- Degree of mutual respect
- Frequency of communication
- Strength of shared goals

Resulted in

- Reduction in post-operative pain
- Improved post-operative functioning
- Decreased length of stay

CONCLUSION

Creating a culture of respect is essential

- improves patient safety, experience and outcomes, staff engagement and healthcare costs
- requires creating a common understanding and mutual trust

"Civility costs nothing and it buys everything." M.W. Montagu





• To our Respect Panelists: Nahum Cazil, Elizabeth Cretel, Kassylyna Depina, Nicole Ford, Sheldene Hope-Spencer, Joseph Keegan, Alexei Kudla, Erica Millen, Shineka Prince, Kerin-Anne Rogers, Anu Shenoy-Bhangle, Moira Murphy

• The Respect Committee:

Olga Augustus, Kelly Hart, Ines Cabral-Gonsales, Bernie Kennedy, Tim Parritt, Jim Rawson, Peter Cousins, Suzanne Swedeen & Aideen Snell

QUESTIONS?

 Stay in touch! Email <u>teamtraining@aha.org</u> or visit <u>www.aha.org/teamtraining</u>



