Changing Perceptions About Safety Event Reporting at Advocate Aurora Health

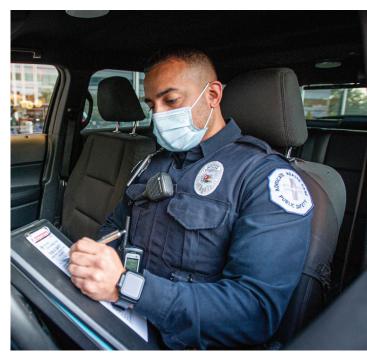
Advocate Aurora Health, dual headquartered in Milwaukee, Wis., and Downers Grove, Ill., made event reporting a top priority by recognizing it as a strategic organizational goal. Staff developed an internal formula to standardize safety event reporting data and compare incident levels (such as the number of reported safety events across business lines, medical groups and more departments) throughout 100-day periods. This framework helped leaders create and follow safety objectives, further enhancing its culture.

To achieve this, staff had to overcome negative perceptions around safety event reporting.

"Event reporting has historically been considered a form of a write-up," said Elsie Lindgren, Advocate Aurora Health safety leader. "Therefore, team members assumed reporting safety events were like tattling."

Advocate Aurora's executive leadership combated this line of thinking by consistently promoting and marketing event reporting as an opportunity to identify latent safety threats.

"Rather than middle management trying to convince executive leaders as well as their direct reports to report and the reasons why, our leaders all went through the training together," Lindgren said. "Therefore, the importance of reporting was made very apparent."



Tony E., public safety officer | Advocate Christ, III.

Mary Beth Kingston, Advocate's chief nursing officer, said the organization's safety culture grew rapidly after leaders began consistently and systematically integrating workforce and patient safety efforts.

A system-wide multidisciplinary team built a workplace violence prevention and mitigation plan, which succeeded partly because of active participation from safety and security personnel.

"Raising awareness through a specific multichannel communication plan was the first step," Kingston said. "Other initial work focused on engagement of team members, consistent risk assessment, reporting and data trending, training, and support for our team members."

Kingston said these steps helped leaders make a strong business case to help procure needed resources for preventing and reducing workplace violence, which leads to costly turnover, increased workers' compensation costs, loss of experience and expertise, decreased engagement, and decreased productivity.

In addition to the team, the organization also hired a workforce safety leader.

"Workforce safety is incorporated into the overall safety program following high-reliability principles," Kingston said. "We continue to build out the program. Increased reporting has certainly helped with data to understand the scope of the problem, but also opens up conversations with front-line staff to hear their views and ideas for improvement."

For more information, contact Elsie Lindgren, system vice president, patient safety and high reliability, at Elsie.lindgren@aah.org, or Chanay Mackey, director, team member safety, at Chanay.mackey@aah.org.



