

Healthy Work Environment Improves Care at Charles Morris



Management Team Creates Healthy Work Environment. Applying Perfecting PatientSM Care philosophy helps create a healthy workplace. But decisions and commitment begin at the top. At Charles M. Morris Nursing and Rehabilitation Center, managers meet regularly to help improve their skills in facilitating frontline problem solving. The result has been an across-the-board improvement in measures of patient care and family satisfaction. Significantly, when assisted in solving problems, workers are happier, too, as indicated by a dramatic decrease in turnover. **Story begins on Page 2.**

L-R standing: Christine Noel, Janice Diana, Kris Cyr, Randy Crimm, Gertrude Burrell, Marlene McCusker
L-R seated: John Stoller, Barron Taylor, Jerry Pannell

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PRHI 10th Anniversary

Fine Award Recipients Announced

This year, the Pittsburgh Regional Health Initiative celebrates 10 years helping dedicated healthcare partners across Southwestern Pennsylvania find new ways to improve quality and efficiency. Throughout its first decade, PRHI has practiced and taught teamwork as an accelerant to improvement in the frontline of care.

Earlier this year, PRHI's parent organization, the Jewish Healthcare Foundation, with generous

support from The Fine Foundation, teamed up to create the Fine Award to reward those talented healthcare teams who were making measurable strides in improving patient care. Nearly 30 healthcare teams applied for the award and sent in impressive and moving stories of improvement.

On Wednesday, November 19, at Heinz Field, the three winning teams were announced:

Charles Morris/Jewish Association on Aging:

As a Perfecting Patient CareSM(PPC) coach, PRHI's Mimi Falbo, ND, RN, PhD, couldn't help but notice the parallels between the research on healthy work environments and Toyota-based improvements like PPC. Twenty years of research has confirmed that a "healthy work environment" in health care leads to less worker burnout and turnover, and improves the quality of patient care. Employees are less likely to leave a work environment where they feel free to do their best work, which benefits patients and enhances their own lives.

Here are the elements of a healthy work environment:

Gritzer takes the opportunity to read from the mailbag. "I received three letters from family members last week," he says. "They used words like 'loving,' 'caring,' and 'compassionate' to describe the care their loved ones received here. I couldn't be prouder."

1. Employees are treated respectfully and fairly. Concern and value for each person is apparent.
2. A strong sense of trust between employer and employee means that workers are engaged in decision making, risk taking, and personal and professional growth.
3. The organizational culture supports communication and collaboration, views individuals as assets and makes decisions not solely on money but considers the impact on the mission and the members of the organization.
4. A "feeling tone" encourages individuals to feel physically and emotionally safe. A sense of family and evidence of cheer pervade the organization.

Falbo decided to experiment by blending PPC as a transformational method with the tenets of a healthy work environment at the Charles Morris Nursing and Rehabilitation Center, a 159-bed, faith-based, long-term-care facility in Pittsburgh.

Out of the rut and into the groove

Four years ago, the Board of Charles Morris' parent

organization, the Jewish Association on Aging, hired a new CEO, David Gritzer. Within months, the facility's immediate financial challenges were brought under control, and the quality of care improved. But Gritzer and the Board wanted more: they wanted Charles Morris to excel.

In 2005, a grant from the Jewish Healthcare Foundation enabled staff at Charles Morris to begin training in Perfecting Patient CareSM through the Pittsburgh Regional Health Initiative. Despite a promising start (see PRHI Executive Summary, April 2006), the results of the initial projects were not sustained. PPC did not take root

throughout the organization as hoped. The problem: staff turnover threatened the organization's stability. In such an environment, excellence seemed just out of reach. Some staff members began expressing the opinion that the Toyota model

"didn't work."

Falbo, a former psychiatric nurse and hospital CEO herself, believed that applying the research on healthy work environments might help stabilize the work force, which could then help PPC spread throughout the organization. Gritzer concurred that the PPC model needed a boost for it to fulfill the promise of culture change at Charles Morris. It would take twice-weekly teaching and coaching at every level of the organization, and it would need to touch every single person. The training would emphasize team-building in a safe, open and blame-free environment.

"We encourage talk. We encourage teamwork," said Gritzer.

Thus the PPC revitalization began.

The seven-minute meeting

Cultivating a culture of respect meant first of all, respecting people's time. No longer are long meetings the norm. Now, they typically last about seven minutes, cover just the information needed, and are staffed only by essential people, who disseminate information in their areas. Above all, the meetings stress teamwork.

Healthy Work Environment Jump-Starts PPC, cont'd

On the wall of the meeting room, and prominently displayed across the facility, are posters with Charles Morris' Mission and Vision (see sidebar). Posting these ideals, literally front and center, keeps the entire staff focused on the goal of excellence.

A typical Friday morning may go like this:

- At the first meeting, managers quickly go over matters such as census, admissions and discharges, doctor appointments, and activities in each department. This quick overview can help them anticipate potential bottlenecks, enhancing efficiency and safety for residents and reducing frustration for staff.
- The second meeting, involving only clinical and rehabilitation personnel, looks at specific resident needs: Mrs. Jones needs an air mattress; Mr. Smith is showing more confusion; Mrs. Williams needs to use her walker. Covering the issues takes seven minutes, the discussion another three. Meetings are not for problem-solving, but for problem identification and coaching in how to lead the problem-solving session. Problem-solving occurs on the frontline and involves those teams.

Gritzer takes the opportunity to read from the mailbag. "I received three letters from family members last week," he says. "They used words like 'loving,' 'caring,' and 'compassionate' to describe the care their loved ones received here. I couldn't be prouder. One letter was from a rabbi whose father-in-law came here from Florida, and who was pleased with the quality of care."

How do Friday morning meetings differ from before?

"There's a real team effort, real camaraderie," says Manager Jerry Pannell. "And there's even joy and laughter in here."

Training

The respectful tone of staff meetings spills over into other employee interactions. New employees, for example, are given an orientation stressing teamwork. All staff are expected to support the new people and help them be successful.

"This is not a pass/fail system, but one of mentoring and helping," said Gritzer. "And we're very clear, we are 100% PPC. That is our method, and we provide them with the training and coaching. It's not 'trickle down' teaching, but it's done very deliberately, and reinforced very deliberately."



The Jewish Association on Aging

Mission

The Jewish Association on Aging (JAA) offers Pittsburgh's elderly community a comprehensive network of social, residential, rehabilitation, medical and nutritional services that are developed and implemented in accordance with Jewish values. The JAA's continuum of quality care provides the elderly with an opportunity to age in a dignified manner and have a partner that will always advocate for their best interests.

Vision

A community in which the elderly have a suitable place to live, are socially engaged, are well nourished (physically and emotionally), receive the health care they need and are spiritually fulfilled in the Jewish tradition.

Charles Morris/Jewish Association on Aging:

Problem solving

Problem-solving sessions typically go for 15 minutes at a time, out of respect for busy caregivers. Managers go to the floor and help to observe ways to make the work go more smoothly, help workers identify problems and help remove barriers.

For example, observations on one unit over two weeks revealed that lunch times were chaotic. Only two aides

Satisfaction surveys from patients, family members and staff show the highest levels ever measured. Says Gritzer, "The most impressive thing is that almost 100% of the family members surveyed would recommend Charles Morris to friends and family."

were available to feed residents, and the situation left those aides with too much work and too little time. Together, the unit "huddled," and decided to try staggering staff lunch times and training additional staff to feed the residents. The result is that residents are fed quickly; complaints have diminished; and staff expresses satisfaction that they have solved their own problem and know that they have improved their service.

Cultural congruity: Promoting understanding

It's one thing to discuss "culture change" relating to the workplace, getting new ideas to catch fire throughout a diverse work force. But Charles Morris as an institution is a study in diversity: much of the workforce varies culturally from the largely Jewish clientele. And it turns out that understanding Jewish tradition and culture as they relate to healthcare decisions is extremely important to a staff striving to provide the best and most sensitive of care.

Take the case of pain relief. It might seem like an open-

and-shut case that patients in the final throes of a painful disease would want to be pain-free.

Tension arose among staff when certain observant Jewish clients or their family surrogates routinely waved off certain palliative medications, preferring to stay the natural course. Clearly something more was at stake, but staff members were puzzled and hurt to think that they were being prohibited from helping to prevent pain in every way they could.

Enter John Stoller, RN, assistant director of Nursing. Stoller, who practices Orthodox Judaism, held sessions for unit managers using visual aids, discussing life and death as viewed in the Jewish culture.*

In Judaism, the sanctity and promotion of life are central. Preserving life, even for a moment, is supremely important. Caring for the suffering person is a familial obligation that provides comfort and also unifies the family. These teachings can run headlong into conflict with modern thinking on palliative and hospice care, which views the relief of suffering, even at the expense of a certain amount of lifespan, as paramount.

Stoller's explanation of the teachings to staff members, and the conundrum they can represent for Jewish families and their spiritual advisers, alleviated staff frustration, and allowed them to honor the difficult decisions that patients and family members were making. Stoller continues to hold short sessions on the tenets of Judaism as related to health care for appreciative staff members.

Measuring culture change

Researchers agree that it can be difficult to measure a sweeping idea like "culture change" in the workplace. How

*Before death, a patient may fall into the category of being a goses. During this state, no action can be taken that will either hasten or delay death, and so, medically speaking, no treatment may be started to delay death and no treatment may be stopped if it would hasten death. Exactly how this translates into medical care may need to be discussed with the family and a rabbi; dealing with the death of a Jewish patient can be a complex affair. (http://www.myjewishlearning.com/ideas_belief/bioethics/Bioethics_Euthanasia_TO/Bioethics_ModEuthanasia/EndLifelIssues.htm) Barry M. Kinzbrunner. Journal of Palliative Medicine. August 1, 2004, 7(4): 558-573. doi:10.1089/jpm.2004.7.558.

Healthy Work Environment Jump-Starts PPC, cont'd

will you know if your facility has created a healthier work environment? That patients are safer and workers more satisfied? That your processes are working better?

At Charles Morris, when the PPC revitalization began in early 2008, Gritzer, Falbo and members of the management team agreed on these measurements:

Patient outcomes were measured by:

- Patient satisfaction survey results
- Improved clinical indicators regarding:
 - Falls
 - Nursing home-acquired urinary tract infections
 - Call Bell response times

Family outcomes were measured by:

- Family survey satisfaction results

Staff outcomes were measured by:

- Staff satisfaction survey results
- Recruitment and retention rates (lower staff turnover)

The trends were favorable immediately. As of October 2008, the results are as follows:

Says Gritzer, "We have to celebrate how far we have come. Every victory inspires us to try harder and do more to make our residents and staff more satisfied. Perfecting Patient CareSM is definitely working here at Charles Morris."

"You'll hear scuttlebutt in the hallways," says Jerry Pannell. "You'll hear people saying, 'It's different around here now. It's still stressful, but it's a good stressful. People are trying to do their jobs better.'"

STRUCTURE MEASUREMENT	P	N	M	IP	Comments
Changes in meeting schedules	X				Next steps: evaluate and consolidate Resist cancelling Unit Mgr. Team Mtgs.
Changes in meeting content	X				
Changes in organizational Policies and Procedures	X				
PROCESS MEASUREMENT					
Team Function Assessment Scores	X				
Number of PPC Teams active	X				Increase from 0 to 7
Meeting attendance	X				
Completion of "homework assignments" by all team members	X				
OUTCOME MEASUREMENT					
<i>Patient Outcomes</i>					
Patient Satisfaction Survey results (annual)	X				Up from prior surveys; room for improvement on Call Bell times
Falls	X		X		Decreased falls with injury from 8 last year to 0 this year
Urinary tract infections			X		May is the lowest # this year Interventions just starting
Call Bell Response Times	X				Better, still needs improvement
Resident Discharge Survey	X				Results of first survey positive
<i>Family Outcomes</i>					
Family Satisfaction Survey Results	X				Highest ever measured
<i>Staff Outcomes</i>					
Staff Satisfaction Survey Results	X				Highest ever measured
CMNRC CNA Turnover Rates	X				30% decrease YTD, annualized rate

Key: P= Positive Trend; N= Negative Trend; M= Mixed / No Trend;
IP= In Process /Results Not Available

Fine Award Recipients Announced *(continued from page one)*



⇐ FINE AWARD – GOLD “Labor Induction Process Improvement Team,” Magee-Womens Hospital of UPMC. Accepting on behalf of the team (l to r): Dr. Dennis English, Susan Pedaline and Dr. John Fisch, along with Milton Fine, chairman and president, The Fine Foundation, and Karen Wolk Feinstein, president and CEO, PRHI.

Rather than having patients come back time and again for a series of repeat appointments, VA patients have all their needs attended to in a single, hour-long appointment at predictable intervals. Best-practice care is virtually guaranteed, and hospitalizations for

- Magee-Womens Hospital of UPMC, team led by Dr. Dennis English, received the Gold Award and a \$25,000 prize. The team decreased induction births by 40 percent—a figure that includes a 70 percent decrease in elective inductions. In these births, labor is started purposefully, often for the sake of convenience, with medications and other procedures. Induction births can increase the risk of complications, including Cesarean deliveries. The rate of the decrease achieved at Magee significantly lowers the risks.



⇐ FINE AWARD – SILVER “Process Standardization and Continuous Training Leads to the Elimination of Catheter-Related Blood Stream Infections,” Allegheny General Hospital. Accepting on behalf of the team (l to r): Dr. Jerry Granato, along with Stephen Halpern, chairman, JHF Board of Trustees, Milton Fine and Karen Wolk Feinstein.

- Allegheny General Hospital Coronary Care Unit, team led by Dr. Jerome Granato, received the Silver Award and a \$15,000 prize. This team reduced central line-associated bloodstream infections to near-zero and sustained it for over 3 years. The reduction resulted from the application of Perfecting Patient CareSM (Lean) improvements that standardized line placement and care, and from a major investment in mandatory staff training, which includes recurrent training each year.
- VA Pittsburgh Healthcare System, team led by Dr. Harsha Rao, received the Bronze Award and a \$10,000 prize for its team approach to diabetes care. Instead of the fragmented care delivered by most private general practices, the VA clinic concentrated on offering a full range of care to every diabetic patient at every visit.

⇐ FINE AWARD – BRONZE “An Individualized Team-Care Model for Outpatient Diabetes Care Delivery,” VA Pittsburgh Healthcare System. Accepting on behalf of the team (l to r): Dr. Harsha Rao, Jan Beattie, Allison Morell, along with Alan Guttman, chairman, PRHI Board of Directors, Karen Wolk Feinstein and Milton Fine.



complications of diabetes are down at the VA, even as the number of patients seeking care has increased.

“The teams that were honored achieved breakthroughs – in three different healthcare settings – in delivering patient care as safely, efficiently, and effectively as possible,” Karen Wolk Feinstein, president and CEO of the Jewish Healthcare Foundation and the Pittsburgh Regional Health Initiative, said before the ceremony. “They exemplify the importance of teamwork to healthcare quality improvement.”

"...the best training I've ever taken"

Belmont University Lean Healthcare Certificate Program a Success

The verdict is in: the first week-long Lean Healthcare Certificate Program, held in Nashville November 10-14, exceeded expectations. The educational program, held at the Jack C. Massey Graduate School of Business at Belmont University, involved close collaboration between Healthcare Performance Partners (HPP) and The Pittsburgh Regional Health Initiative (PRHI). Here's what some of the students had to say:

"Your staff and faculty were incredible. The open and supporting spirit for training this week was exceptional. It was a very positive learning experience for adult learners."

"This has been a great experience, the best training I have ever taken. I'm recommending it!"

This intense, one-week Lean Healthcare Certificate Program is designed for leaders who want to understand not only the tools, but the management style and philosophy required to expand Lean Healthcare throughout their organizations. Held in Belmont University's state-of-the-art Gordon E. Inman College of Health Sciences and Nursing, the venue allowed participants hands-on learning experiences in applying Lean in a healthcare environment.

PRHI coaches Barbara Jennion and Laura Mahood (photo, top right) joined HPP's Dwayne Keller, Cindy Jimmerson, Richard Tucker, and Dr. David Munch as faculty members. Each teacher has many years of Lean implementation experience.

Among the 24 participants were physicians, nurses, system leaders, quality managers, pharmacy staff, and assisted living administrators.



The emphasis in the Lean Healthcare Certificate Program is on hands-on, real-time learning. Here participants do exercises with Legos and reconstructing a pen. All lessons tie directly to healthcare applications.

More on the Belmont University Lean Healthcare Certificate Program

Additional programs are scheduled at Belmont University in Nashville, Tennessee on February 23-27 and May 4-8, 2009, with additional dates to be arranged.

For more information, call Healthcare Performance Partners at 615-575-5502, or find information online at www.buleancourse.com.

The PRHI Executive Summary is posted on prhi.org. Please direct newsletter inquiries to:
 Contributing Writer/Editor: Naida Grunden, www.naidagrunden.com

Date	Day	Time	Event	Place	Contact	CME	Register
January 12 - 15, 2009	Monday-Thursday	8:30 a.m. - 5:00 p.m.	Perfecting Patient Care sm University	Courtyard Marriott, Monroeville	Barbe Jennion 412-586-6711 bjennion@prhi.org	Yes	www.prh.org
April 20 - 23, 2009	Monday-Thursday	8:30 a.m. - 5:00 p.m.	Perfecting Patient Care sm University	Courtyard Marriott, Monroeville	Barbe Jennion 412-586-6711 bjennion@prhi.org	Yes	www.prh.org
July 13 - 16, 2009	Monday-Thursday	8:30 a.m. - 5:00 p.m.	Perfecting Patient Care sm University	Courtyard Marriott, Monroeville	Barbe Jennion 412-586-6711 bjennion@prhi.org	Yes	www.prh.org

CALENDAR



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