



# **CULTURE EATS STRATEGY FOR LUNCH:**

*UNDERSTANDING A CULTURE OF QUALITY AND SAFETY*

October 29, 2010



## Dimensions of Quality

### Acceptability

- Care that is respectful to patient and family needs, preferences and values.

### Appropriateness

- Care provided is evidence-based and specific to individual clinical needs.

### Accessibility

- Ease with which health services are reached.

### Safety

- Avoiding harm resulting from care.

### Effectiveness

- Care that is known to achieve intended outcomes.

### Efficiency

- Optimal use of resources to yield maximum benefits and results.

### Equity

- Distribution of health care and its benefits fairly according to population need.



## Areas of Care

### Staying Healthy

- Preventing injury, illness and disabilities.

### Getting Better

- Care for acute illness or injury.

### Living With Illness and Disability

- Care and support for chronic illness and/or disability.

### Coping with End of Life

- Planning care and support for life limiting illness and bereavement.







www.bcpsqc.ca

## DIMENSIONS OF QUALITY

### AREAS OF CARE

| ACCEPTABILITY   | APPROPRIATENESS  | ACCESSIBILITY                                | SAFETY                             | EFFECTIVENESS                                    |
|---|--|--|------------------------------------|--|
| Care that is respectful to patient and family needs, preferences, and values. | Care provided is evidence-based and specific to individual clinical needs. | Ease with which health services are reached. | Avoiding harm resulting from care. | Care that is known to achieve intended outcomes. |

|  |   |  |  |   |
|--|---|--|--|---|
| <b>STAYING HEALTHY</b><br>Preventing injuries, illness, and disabilities.                              |   |  |  |  |
| <b>GETTING BETTER</b><br>Care for acute illness or injury.   |   |  |  |   |
| <b>LIVING WITH ILLNESS OR DISABILITY</b><br>Care and support for chronic illness and/or disability.    |   |  |  |   |
| <b>COPING WITH END OF LIFE</b><br>Planning care and support for life-limiting illness and bereavement. |  |  |  |   |

← **EQUITY** Distribution of health care and its benefits fairly according to population need. →

← **EFFICIENCY** Optimal use of resources to yield maximum benefits and results. →

The BC Health Quality Matrix was developed in collaboration with the members of the BC Health Quality Network which include's health authorities, Ministry of Health Services, academic institutions and provincial quality improvement groups and organizations.



## Outline

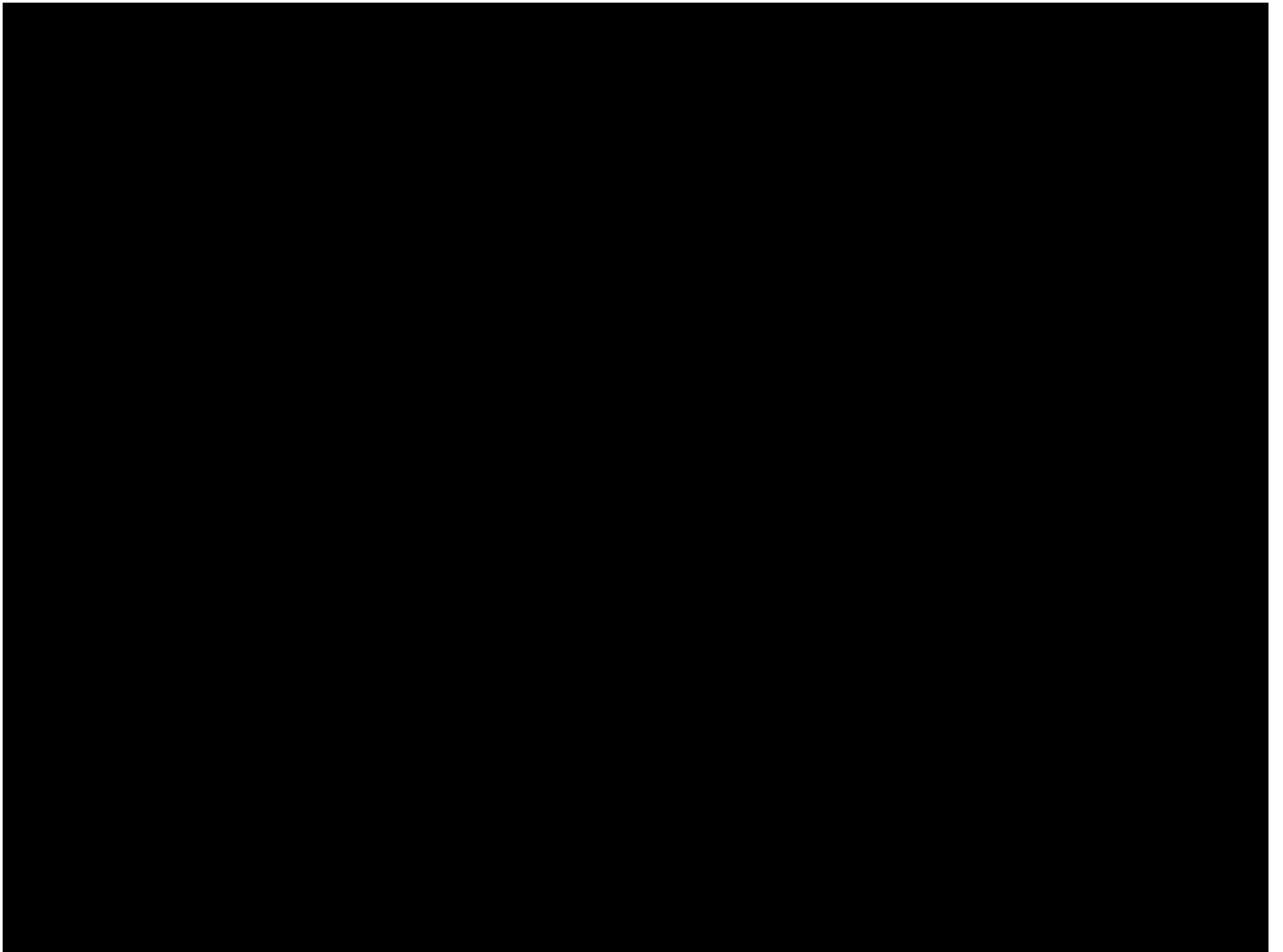
Defining a quality culture

Culture “drivers”

Measurement

Why is culture so important?

Culture in the context of driving change





## Defining a Quality Culture

*“The way we do things around here ...”*

- Organizational culture emerges from that which is shared between colleagues in an organization, including shared beliefs, attitudes, values and norms of behavior
- Reflected by a common way of making sense of the organization that allows people to see situations and events in similar and distinctive ways
- Way things are understood, judged and valued

Davies, Nutley and Mannion, 2000



# Culture in Your Organization

Handout: Culture - Current

Exercise:

Take 5 minutes to read through the list of descriptors, and circle the top 10 current characteristics you see within your system.

# Aspects of Organizational Culture

(Davies et al, 2000)

Attitudes to innovation and risk taking

- Does organization encourage and reward new ways of doing things OR does it value and maintain traditional approaches?

Degree of central direction

- Extent to which objectives and performance expectations are set centrally rather than being devolved.

Patterns of communication

- Degree to which communication, instruction and reporting are restricted to formal hierarchies of authority.

Outcome or process orientation

- Extent to which control and reward mechanisms are focused on tasks compared with the end product.

Internal or external focus

- Is attention directed at external customers and community or is the emphasis on internal organizational issues.

Uniformity or diversity

- Attitudes and expectations within the organization that either value consistency or encourage diversity.

People orientation

- Attitudes towards, support for, and valuations of, the organization's human resources.

Team orientation

- Does organization encourage and reward individualism OR does it foster teamwork?

Aggressiveness/  
Competitiveness

- Does the organization focus on dominating rather than coexisting, cooperating or learning from similar organizations?

Attitudes to change

- Extent to which the organization focuses on internal stability rather than dynamic concerns.

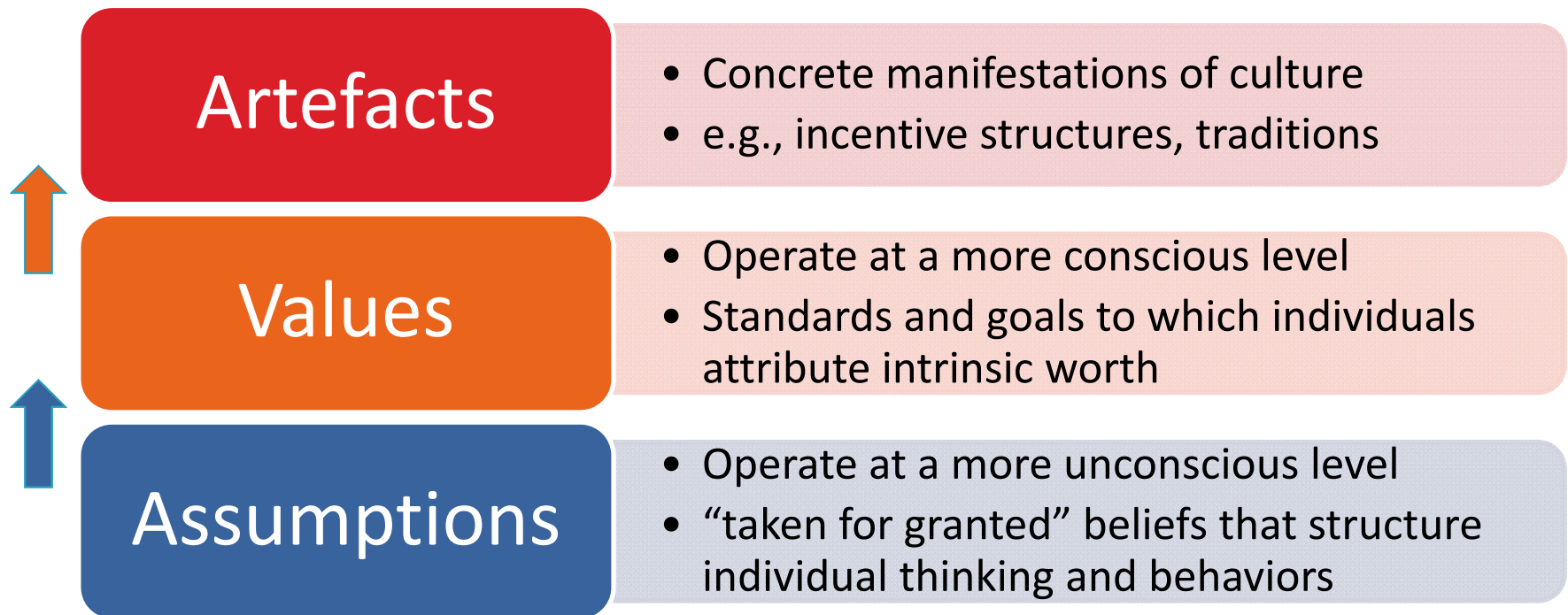


## Role of Culture

- Acts like the “glue”
- Compass
- Common ground
- Sense of order
- Continuity and unity
- Collective commitment
- Social system stability



## Levels within a Culture





## Why is this important?

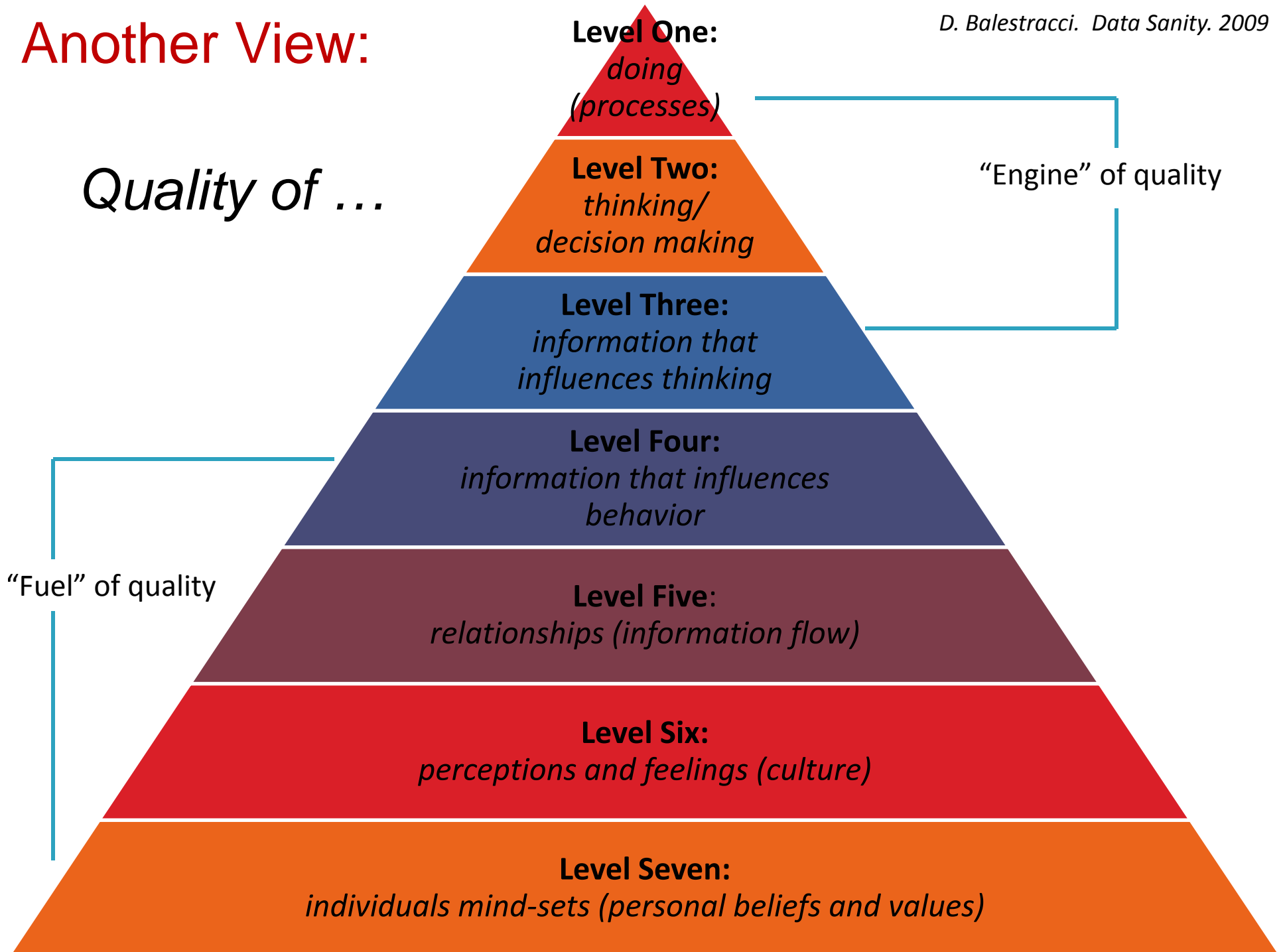
Artefactual elements of culture are more visible and may be more readily changed

Deep-seated beliefs and values may prove to be more resistant to external influences

# Another View:

D. Balestracci. *Data Sanity*. 2009

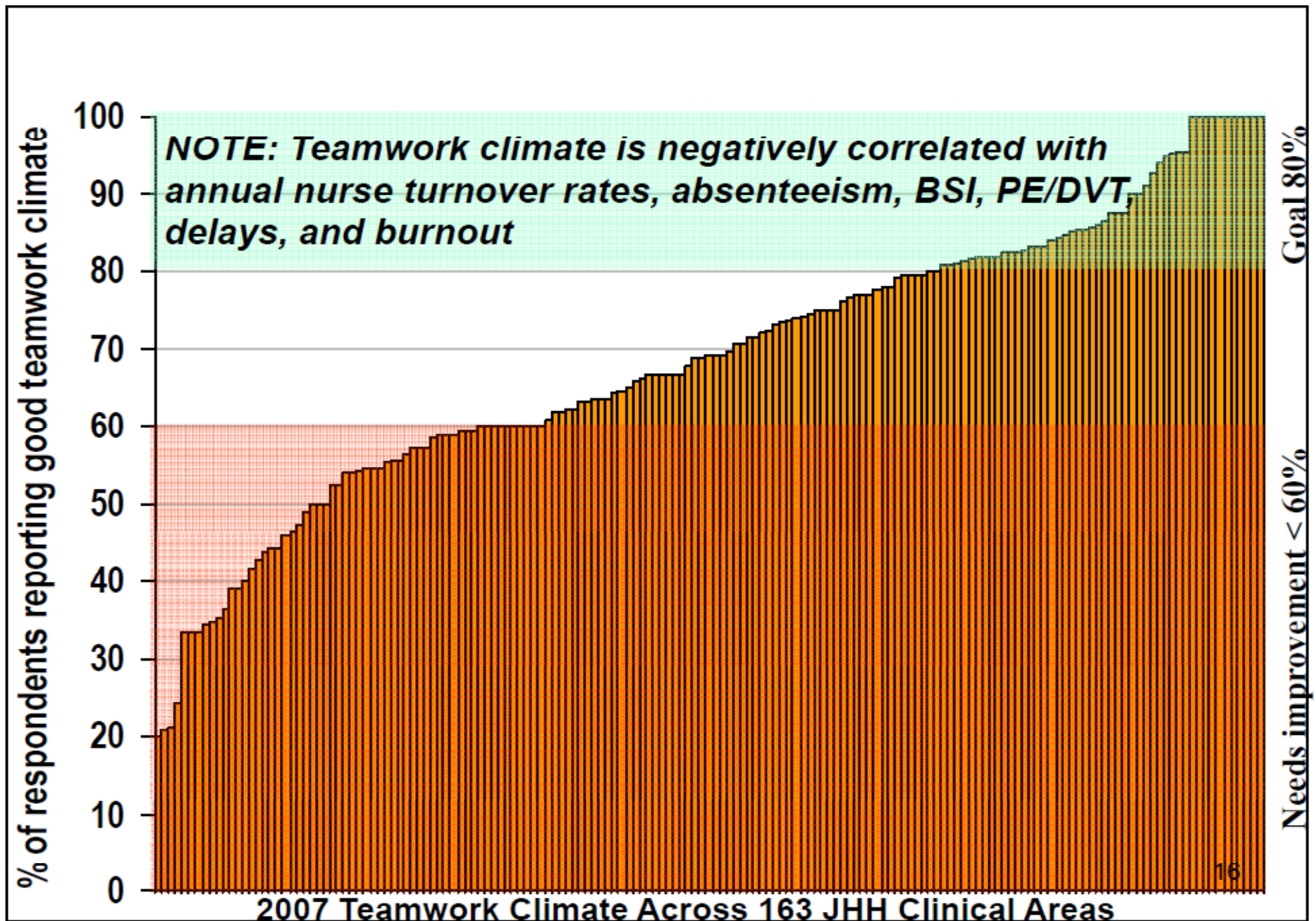
*Quality of ...*





## To add to the complexity ...

- Diversity of cultures between:
  - professional groups
  - “geographic areas” (e.g., ICU, OR, pediatrics)
  - Levels of the organization (e.g., executive vs front-line)
  - Gender, ethnicity, generation
- Rivalry and competition between groups may appear as a key feature of an overall organizational culture (health care’s “tribes”)
- Different “sub-cultures” may be more or less open to change
- Attributes of the sub-cultures may be shared or conflicting or a mix of both
- Outside cultural influences exists, which can be at odds with an internal culture
- Organizational culture can conflict with values and beliefs of organizational members



Source: B. Sexton, Canada's Forum on quality Improvement and Patient Safety, 2009. [www.patientsafetyinstitute.ca](http://www.patientsafetyinstitute.ca)



## Managing Cultural Diversity

Strategies that achieve “cultural fit” between the groups you are working with ...



## Let's go back to the individual ... (Level Seven)

Some points to consider:

- Every member of an organization brings to work processes shaped by the unique experiences of their first 20 years of life
- Regardless of the efforts made at Levels 4 – 6 (the “fuel”), each person is *“perfectly designed, because of his or her personal values and resulting belief system, to exhibit the behavior he or she is exhibiting”*
  - Unconscious, automatic, and unintentional
- Beliefs are changeable by significant emotional events:
  - Personal (*e.g., death, illness, birth, marriage, loss of job*)
  - Societal (*e.g., 9/11, Great Depression, WW II, etc*)
  - Sudden realization through feedback that some behaviors are detrimental to a successful personal life or one's organizational success



## Belief Systems

Need to keep a focus on organizational results to drive cultural change through changing underlying belief systems – both organizational and individual

“Belief windows” drive change (*think of a car windshield*)

- Individual belief windows (made up of the thousands of individual beliefs from one’s own experiences)
- +  
– Organizational or sub-culture’s belief window (made of the thousands of collective beliefs from organizational experiences)

=

Organizational Culture



As John Maynard Keynes once noted .....

*“The hardest thing is not to get people to accept the new ideas, it is to get them to forget the old ones.”*

And thus .....

**When in conflict, Culture will Eat Strategy for Lunch --  
-- EVERYTIME**

*Paraphrased from Mark Bard, MD*



## A Model of Human / Organizational Behaviour



**E1 + B1 + A1 = Culture (C1)**

# Common Dysfunctional Organizational Beliefs (B1) as Barriers to New Results (R2)

*Balestracci, D. Data Sanity, 2009, p. 73*

| From Old Beliefs   | To New Beliefs  |
|--|---|
| There's nothing really wrong; we're still in good shape.                                       | We need to start doing things differently or we may not survive.              |
| Each of us can just do his or her job well and be OK.  | The company must function as a team.  |
| Communication is to be avoided; it's useless anyway.   | We need to talk honestly with one another.                                    |
| Nobody is really accountable for anything.   | People must be and will be accountable for their commitments and performance. |
| The next technological acquisition will fix things.  | Superior customer service is the key to our future.                           |
| We jump from one management "flavor of the month" to the next.                                 | We learn the solid theory behind improvement and focus on what's important.   |
| Senior leadership has lost sight of what really goes on in hospitals and in physician offices. | We need to work as team.  |
| We don't listen to most of what our key employees have to say.                                 | We need to listen more, and more closely.                                     |
| Pointing out a problem and speaking up have negative performance evaluation implications.      | It is OK to disagree.   |



## Role of Leadership in Building Culture

- Culture is the property of the organization, yet it is established largely by its leaders
- Single most important contributor to employee engagement, empowerment and satisfaction is based upon the relationships they have with the leaders of the organization.



# What Kind of Culture?

*Quality Culture*

*Safety Culture*

**Organizational Health**

*Just & Trusting Culture*

**Learning Organization**

*Just Culture*



## Characteristics of a Quality and Safety Culture

- Teamwork
- Collaboration
- Communication
- Shared values of quality and safety
- Trust
- Openness
- Transparency



## Measuring Culture

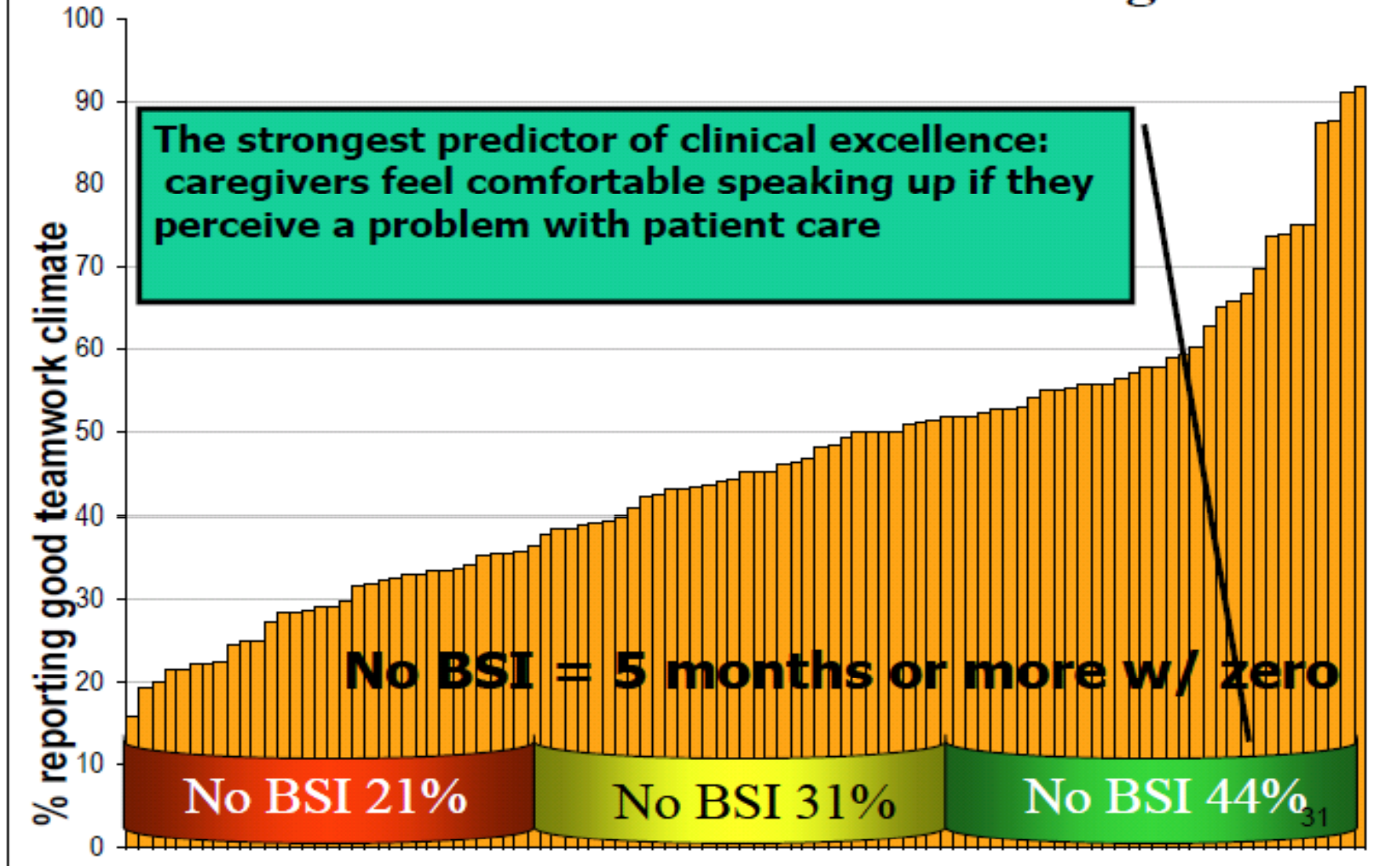
- One person's attitude is an opinion, the attitudes of everyone taken together = an assessment of the climate of a team, unit or organization
- Correlation between staff happiness and satisfaction at work with organizational performance
- Culture survey tools can be used to:
  - Diagnose organizational strengths and weaknesses
  - Evaluate the effects of organizational changes
  - Improve communication with staff
  - Provide context for absenteeism and staff turnover
  - Develop targeted interventions

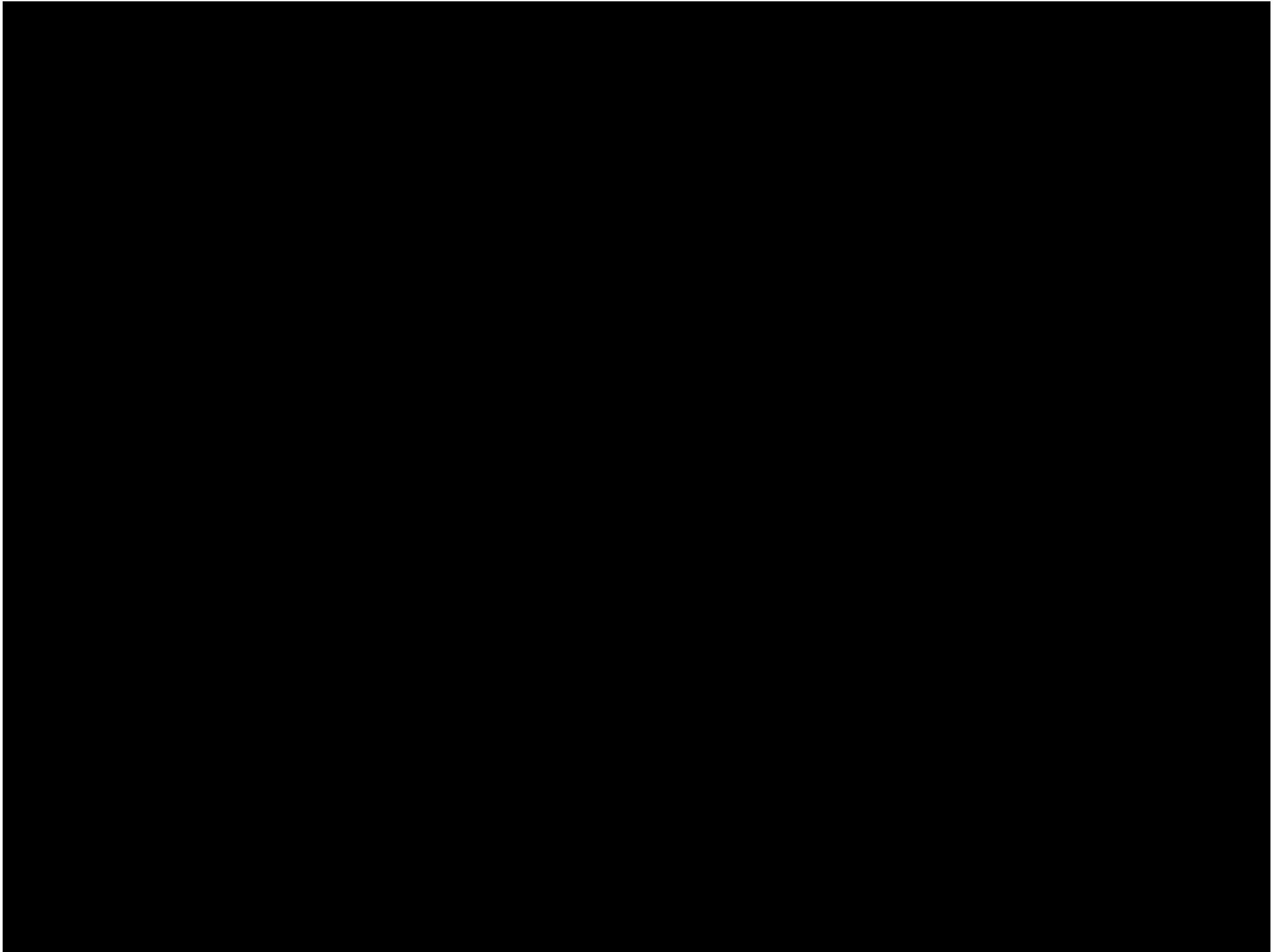


## Benefits of a Quality Culture

- Clinical outcomes
- Performance
- Energy

# 2004 Teamwork Climate Across Michigan ICUs







## Concept of Psychological Safety

- Belief that you will not be punished or humiliated for speaking up with ideas, questions, concerns or mistakes
- A shared sense of psychological safety is a critical element of an effective learning system
- Associated leadership behaviours:
  - Actively invite input
  - Accessible
  - Acknowledge limits of their own knowledge
  - “Go first”, particularly in displays of fallibility

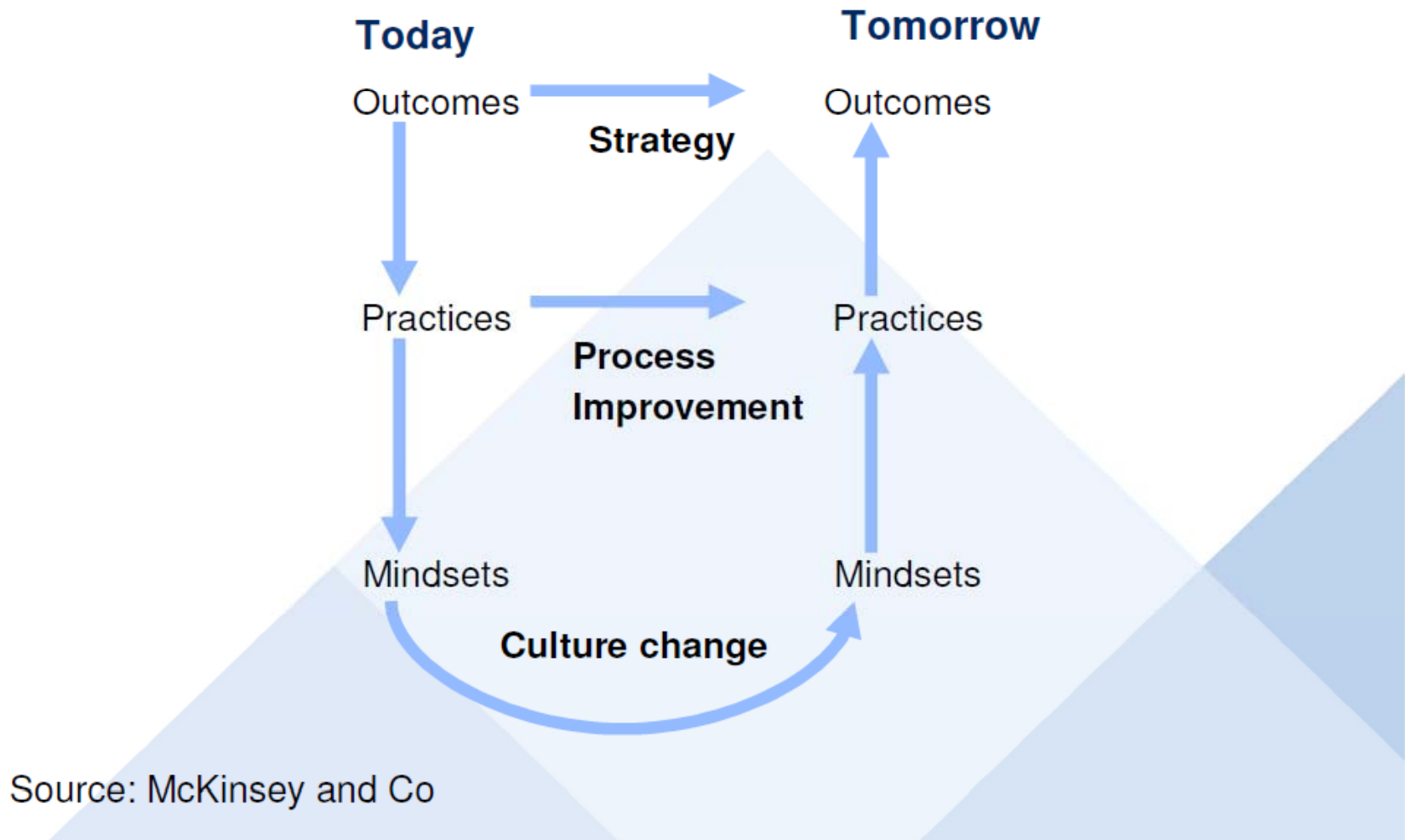
***Lower the psychological costs of voice and  
raise the psychological costs of silence.***



## Performance

- Organizations with positively engaged staff have higher levels of productivity (average 30%), greater profitability, better safety and higher levels of staff retention (Source: Harvard Business Review, May 2005).
- UK employees say they would achieve 30% increase in productivity if they were more motivated and better managed (Source: Hay Group, Oct 2006).
- Survey with 50,000 employees in 59 different organizations worldwide found that employees with lower engagement are 4 times more likely to leave their jobs than those who are highly engaged (Source: Corporate Executive Board).

# The Discovery Process includes strategy, process improvement and culture change



Source: McKinsey and Co



## Five C's of Culture Change

1. **Comprehension:** Understanding the problem
2. **Compassion:** Spirituality and commitment
3. **Collaboration:** Teaming between subcultures and providers
4. **Coordination:** System processes, infrastructure, and ideation
5. **Convergence:** Leadership of local culture with spread and dissemination of new norms in a rapid way.



# Culture in Your Organization

Handout: Culture - Desired

Exercise:

Take 5 minutes to read through the list of descriptors, and circle the top 10 desired characteristics you see within your system.

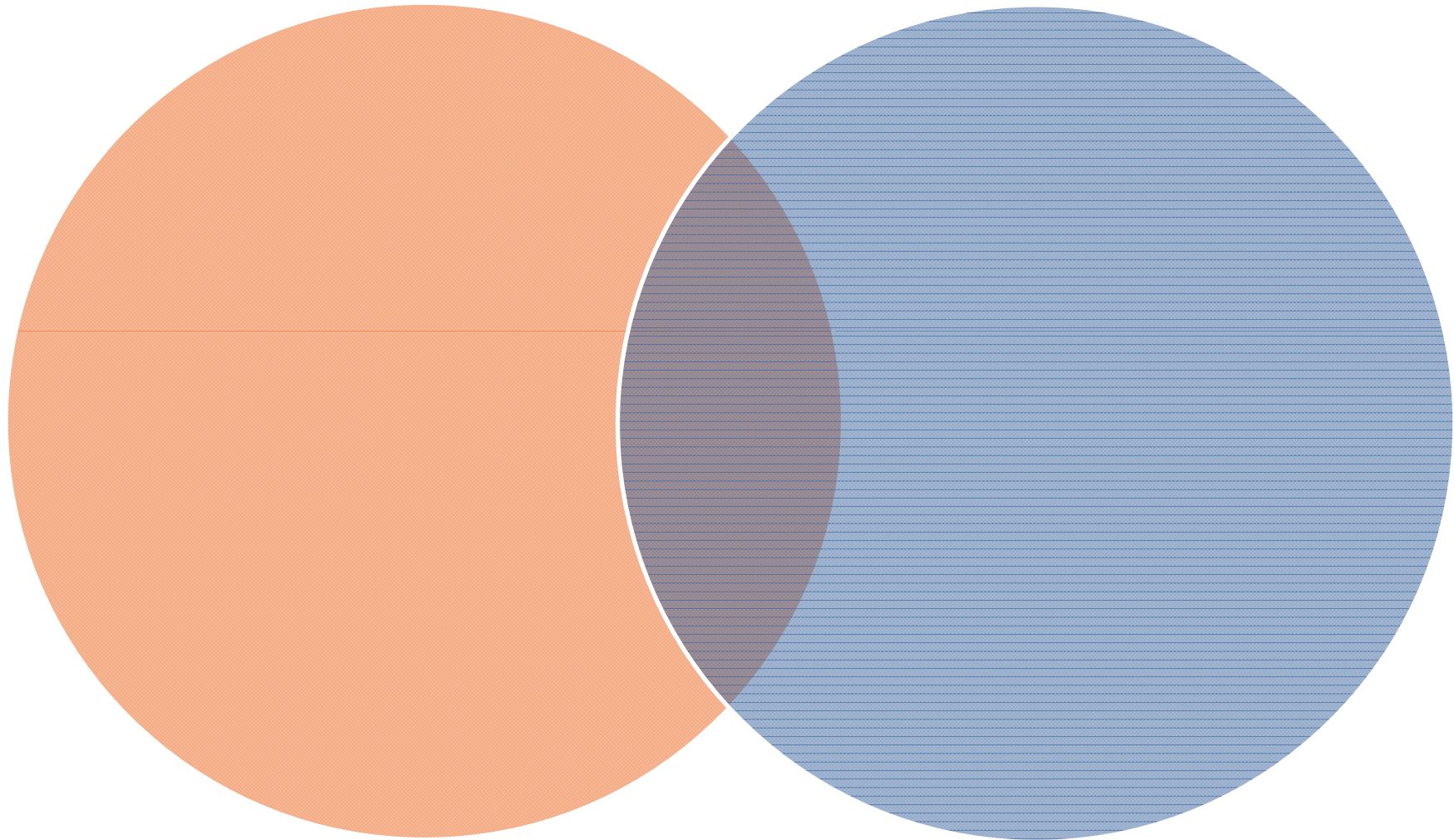
# Is there overlap?



Top 10 Current



Top 10 Desired



*Acknowledge*

*Keep*

*Build*



Source: H. Bevan, Canada's Forum on quality Improvement and Patient Safety, 2009. [www.patientsafetyinstitute.ca](http://www.patientsafetyinstitute.ca)

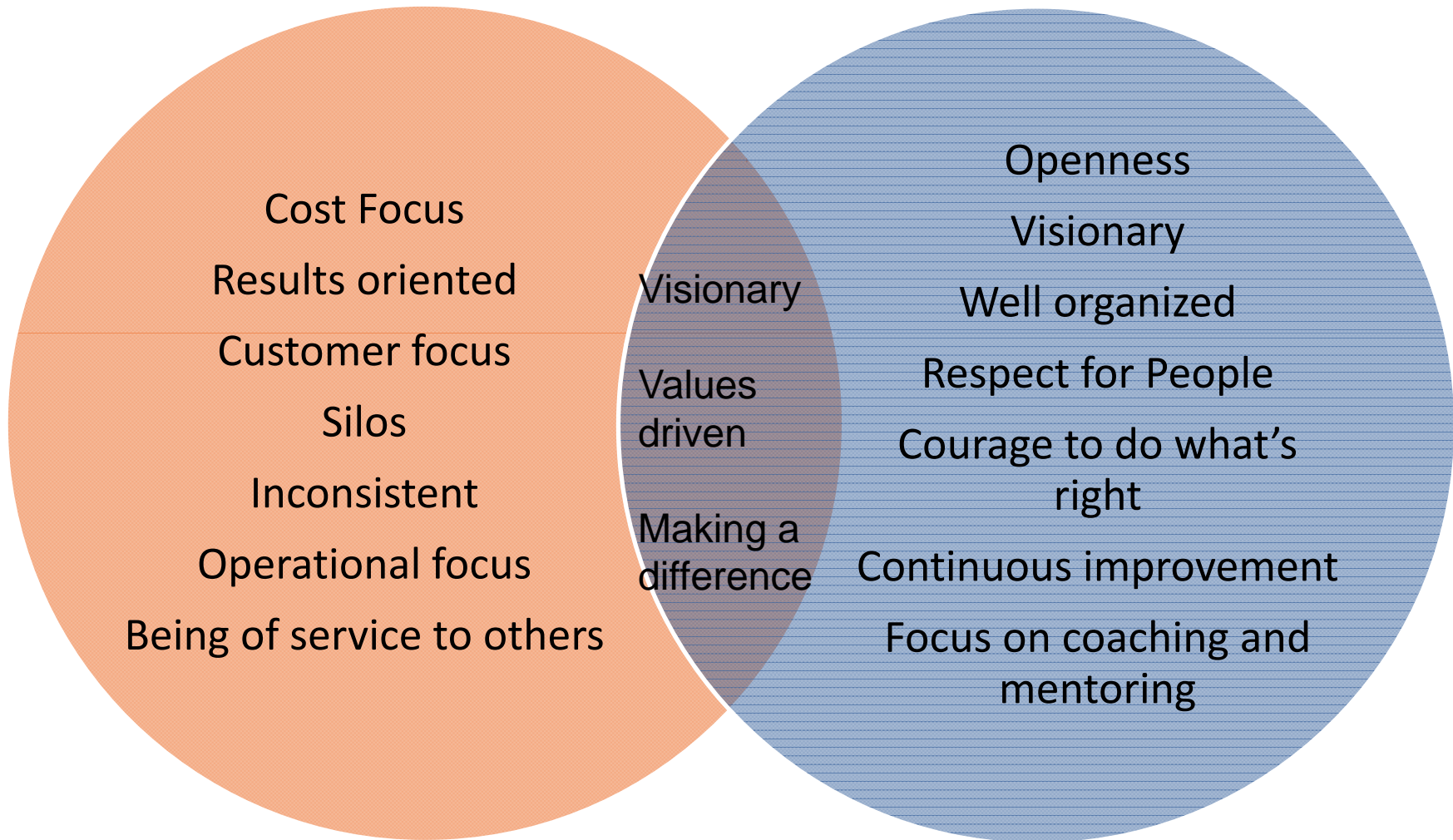
# Is there overlap?



Top 10 Current



Top 10 Desired



*Acknowledge*

*Keep*

*Build*



## Summary

- Every organization has multiple cultures.
- Achieving an optimal culture of quality requires assessment, improvement, and integrating into the fabric of the organization.
- Quality is everybody's job, integrate into your policies, job descriptions, orientation program, your engagement activities.



*Questions?*