

Creating the Environment – Healing an Unhappy Team: A Process Improvement Initiative

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Wildfire Strategies, LLC; NYC Health + Hospitals / Kings County

BACKGROUND

“This is not a happy place”

- *Press Ganey (2015) referring to NYC Health + Hospitals Kings County OB/GYN Department*

Longstanding conflict between physicians and nurses in the OB/GYN Labor and Delivery unit (L&D) of NYC H+H/Kings County were affecting patient experience and outcomes. Kings County, a 180-year-old, 627-bed, Level I Trauma center in central Brooklyn, engaged Wildfire Strategies in 2015 for a Process Improvement Initiative to understand and address these longstanding conflicts.

OBJECTIVES and DESIGN

The objective of this initiative was to understand and address longstanding conflict between physicians and nurses, in alignment with NYC Health + Hospitals strategic goals: Keep Patients First. Within this framework, every nurse and doctor is accountable to:



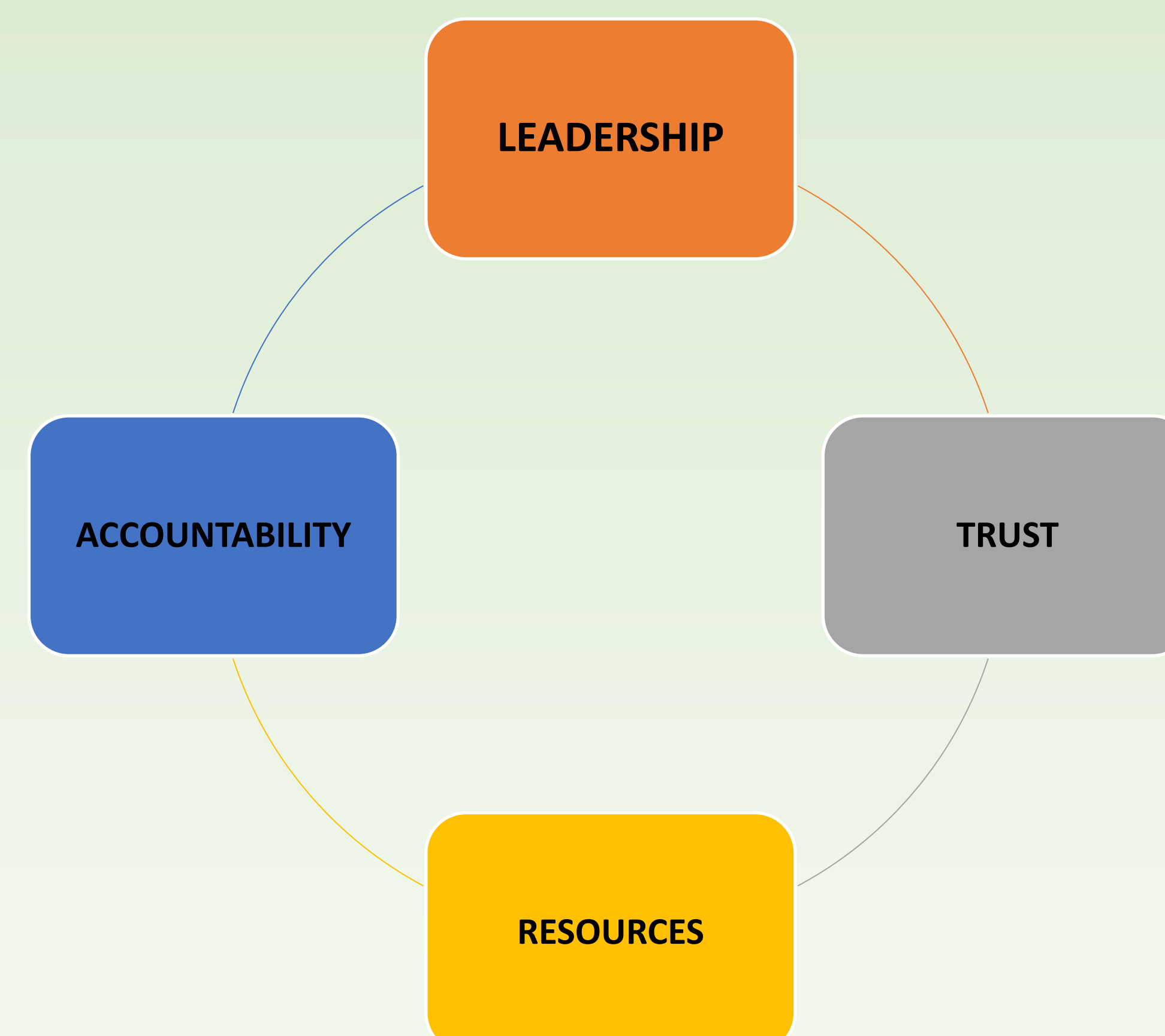
There are three phases of work:

1. Needs Assessment (complete)
2. Performance Improvement Interventions (nearly complete)
3. Program Evaluation (underway)

METHODOLOGIES

Phase 1: Needs Assessment (2015)

Assessed interpersonal relationships among L&D doctors, nurses and staff using 30+ live 1-1 interviews and an online survey of 86 staff. Data showed **Four Department Voids** that drove further phases of work:



Phase 2: Performance Improvement Interventions (2016-2018)

- Established department **leadership team** to build department stability
- **Executive coaching** for department chair and nursing leader to support their leadership
- **Team coaching** for doctors/nurses/staff to vent frustrations, clarify shared values, and establish new protocols for effective collaboration

METHODOLOGIES (cont.)

Phase 3: Program Evaluation (ongoing)

- Evaluation of decision-making, problem-solving and conflict resolution
- Comparison of 2014/5 and 2017 patient and residency program satisfaction data for Kings OB/GYN
- Post-intervention surveys with staff groups originally interviewed /surveyed.

RESULTS

Qualitative (based on observation and interviews)

- **Communication improved** between doctors and nurses
- **Significant reduction in verbal attacks** on leaders and colleagues
- **Increases in respect and trust** across the department
- **Nurses more confident**, taking responsibility for their roles
- **Improved Resident experience**
- **L&D director and Nursing leader collaborate** on problem solving

Quantitative (based on survey data)

- Patient Safety Scores improved
- Employee Engagement increased
- Resident Satisfaction increased

EMERGING THEMES

- The assessment process itself improves relationships
- Basic teaming structures are essential
- Leaders own culture – and need to name it
- Process *and* behavior exist in tandem

NEXT STEPS

- Continue to coach department leadership
- Rolling out this process improvement initiative model to other departments
- Further program evaluation
- Ongoing research on topic of Team Healing

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