

**FIND a Process to Improve** *(What is the opportunity or problem statement?)*

UW Health encourages improvement work in many areas in response to data but as an organization has been siloed. Given the synergy between staff satisfaction, the culture of safety and patient experience, a cross-functional work group is needed to improve all three areas. When nursing work environment improves (RN Satisfaction Survey Practice Environment Scale(PES-NWI)), there are higher grades in patient safety, lower nurse burnout, patient experience, shorter lengths of stay, fewer readmissions, same as with physician engagement.

**ORGANIZE a Team** *(Who are the key players impacting the process or impacted by it?)*

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**CLARIFY Current State** *(What information can help define the current state of the process?)*

- RN Satisfaction Data:
  - Number of units with 5 or greater Magnet categories above benchmark dropped from 28 to 8
  - Clinics perform worse in staffing and resource adequacy than inpatient units
- Culture of Safety Data
  - From 2016 to 2018 there was a decrease in composites in the hospital and medical office composites of the Culture of Safety Survey completed by employees and staff of UW Health
- Patient Satisfaction Data
  - From FY18 to FY19 data submitted per patient satisfaction surveys showed a decrease in all areas with responses

**SPECIFIC AIM STATEMENT:** Will increase A3's completed with small tests of change through coaching support from 0-250 A3s submitted by December 2019.

**UNDERSTAND Variation** *(What are the most common causes of variation that contribute to the problem?)*

- No time to do improvement work
- Lack of improvement work training
- Multiple group working on similar improvement
- Too large of scope of project/change plan
- No central location for presentation of work
- Many competing priorities
- Perceived as additional work
- Lack of ownership

**SELECT the Improvement** *(What change ideas would have the biggest impact on the common causes?)*

COMMON CAUSES	BEST PRACTICE(S)	CHANGE IDEA(S)
No central location for presentation of work	Sharing of improvement work	Develop one location for current/past improvement A3's
Lack of improvement work training	Train improvement work methodologies	Education/Coaching of area leaders on A3 thinking and tools Develop cross functional team
Many competing priorities, perceived as additional work, no time to do improvement work	Incorporate process improvement into standard work	Use real time management tools
Too large of scope of project/change plan	Small test of change	Incorporate small tests and frequent checks of results

**PLAN and DO the Improvement** *(How will the changes be carried out and evaluated?)*

CHANGE IDEA(S)	MEASURE(S)/OUTCOME(S)
Develop a cross functional team	Include: Nursing Quality, Patient Safety, Patient Experience, Employee Health Measurement: meetings and tools
Develop one location for current and past A3's	Post improvement A3's to U-Connect Measurement: Sharing hub location
Educate and coach leaders at all levels on A3 thinking and tools	Training sessions on A3 thinking and tools, presentations at leadership meetings Measurement: number of training sessions, presentations, coaching opportunities and senior leader huddles

**CHECK the Results** *(What data will show if the process is improving?)*

- Cross functional team met weekly until November 2019, then moved to 2 times per month
- Sharing hub has been set up on our organizational wide intranet where all employees/staff can view improvement A3's
- 10-A3 training presentations
  - 173 of leaders trained in A3 thinking
  - 55 of front line staff trained in A3 thinking
- Over 250 A3's were submitted by December 2019 that completed left and right hand side of the A3
  - Coaching and feedback provided for both left and right side of all A3's
- Senior leader status meetings: 4

**ACT and Determine Next Steps** *(What are the next steps based on what was learned?)*

- Include WaggI data/pulses in process improvement
- Complete Round 2 of A3's coaching, with plan to hand off coaching to the Director level
- Determine if Round 3 of A3 coaching is needed
- Review Culture of Safety Survey scores after completion of survey in May-hospital and September-Ambulatory
- Continue to monitor patient experience data
- Develop a plan for promotion of the sharing hub
- Support and increase leader visibility to frontline staff through process improvement work