



CARE DELIVERY



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LEADERSHIP

WHY

is Leadership Critical to Transformation?

As healthcare moves from volume to value-based reimbursement, the business model and care model must connect and support one another. How a leader or governing body uses their position and knowledge to lead people, care delivery systems, and infrastructure is essential to reaching improvements in the Quadruple Aim goals: **improved health outcomes, improved patient and staff experience, and reduced costs**. Leaders who embrace this shift early can advance their organizations to deliver better care with more efficiency, gaining a competitive advantage. This Guide focuses on actions that leaders can take to create the environment, skills, and structure needed to support transformation.

WHAT

is Leadership's Role in Transformation?

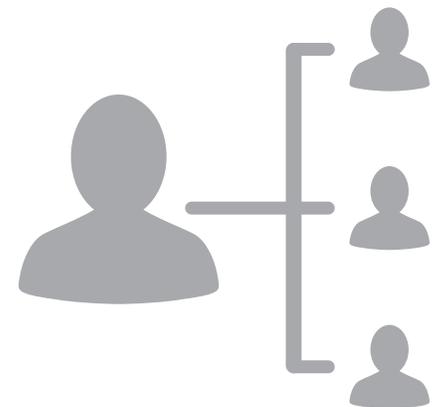
Organizational transformation requires that leaders develop organizational will, identify change ideas that can advance the organization, and then execute those ideas¹. A key role in this process of **Will-Ideas-Execution** is providing the structure that allows for success². Transformation from a volume to value-based health care organization requires leadership attention to the infrastructure, care delivery and people systems. While leadership encompasses such roles as administrators and the Board, this Action Guide is focused on steps that can be taken by the Chief Executive Officer in support of transformation. This begins with establishing a well communicated strategic vision for the organization and then translating that vision into an operational plan, with systems that can evolve as needed with bottom-up and top-down improvements. This requires a relentless focus on achieving Quadruple Aim goals while progressing toward these goals one step at a time. And while "leading" is critical to whole system change, one of the most important elements in this process of transformation is staff engagement and support^{3,4}. **Leaders can drive and inspire change by engaging the entire team and valuing ideas for improvement at all levels⁵.**



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within the Value Transformation

Framework speaks to how a leader or governing body uses their position, responsibility, and knowledge to lead people, care delivery processes and infrastructure to reach transformational goals. This Action Guide defines a discrete set of proven actions leaders can take to provide a foundation for organizational transformation.





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HOW

Can Leadership Support Transformation?

Leaders can design high performing systems that meet patient needs over time through planning, control, and improvement⁶. The goal is to transform the health center to a value-based care delivery system, with a high performance management system.

LEADERSHIP ACTION STEPS:

This Action Guide seeks to offer a small set of actionable leadership activities that can yield substantial results based on research and the experience of high performing practices. In summary, leaders can take these important steps to advance the organization toward the Quadruple Aim.

STEP 1 Create Your Business Imperative: offer a 3-4 sentence business case for transformation.

STEP 2 Institute Structure and Clarity with Psychological Safety: establish care team huddles as an organizational norm; assess and apply strategies for improving psychological safety to achieve the highest level of team-work for quality care.

STEP 3 Invest in QI Training: choose a formal model for quality improvement (QI) and train all staff in QI to improve levels of accountability and performance.

STEP 4 Track Quadruple Aim Progress: select a small set of Quadruple Aim measures; track and report performance to the Board and team leaders.

STEP 1

Create Your Business Imperative. Leaders must present a succinct business case for ‘**why change**’ and ‘**why now**’. This should be a compelling, simple statement of the imperative for transformation and how the future viability of the organization and patient care depend on it. A strong business case provides justification and outlines how resources should be aligned to make the change. Such a statement provides a unified vision and guides next steps forward.



Action item: Create a 3-4 sentence business case for transformation. Present this business imperative to the Board. Share the business case and strategic vision for transformation with staff at formal meetings and through multiple communication channels.



Sample: Rapid changes are underway in the health care landscape, including new systems of reimbursement that reward value rather than volume. To survive and thrive in this new environment, our health center must transform into an organization that can achieve the Quadruple Aim: better health outcomes, better patient and staff experiences, and lower costs. Navigating this transition requires that we make changes to our infrastructure, care delivery, and people systems. This high level of change can be achieved if we create a supportive, structured environment, and work together as a team.



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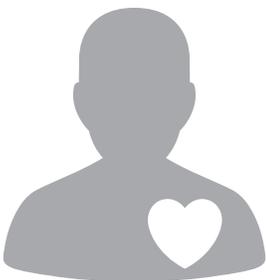
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STEP 2 **Institute Structure and Clarity with Psychological Safety.** The work of transformation requires an environment of clear direction based on trust, dependability, and transparency. Research conducted by Google to understand what drives team performance found that the ways in which team members interact together matters more than each individual's skills or status. In addition to a true 'team-work' approach, what matters is how the team structures their work, and how they view their contributions⁷. The five factors that set successful teams of high achievers apart are: **psychological safety, dependability, structure and clarity, meaning of work and impact of work.**

The concept of "psychological safety" was coined by Harvard Business School professor Amy Edmondson and refers to a feeling that an individual's opinions or innovative ideas are appreciated and welcome, even if they differ from others on the team. When an individual perceives that the team is safe for risk taking (rather than a place where they feel incompetent, ignorant, negative or disruptive), then great ideas arise. Psychological safety is needed when there is a high level of uncertainty and interdependency—as exists in the daily work of health care.



Organizations like Google realize that when team members listen to one another and respect each other's ideas, feelings, and needs, then more is accomplished. Clear communication and trust among team members is foundational to day-to-day operations and overall team effectiveness⁸. One strategy for improving psychological safety at health centers is through the use of clearly defined job descriptions and huddles that incorporate team check-ins⁹. Health centers can draw upon the work of Edmondson and Google regarding effective teams by incorporating a [set of questions to assess team functioning and psychological safety](#). Questions can include the below (rating responses on a scale from low to high levels of agreement):



- If I make a mistake on this team, it is often held against me.
- Members of this team are able to bring up problems and tough issues.
- People on this team sometimes reject others for being different.
- It is safe to take a risk on this team.
- It is difficult to ask other members of this team for help.
- No one on this team would deliberately act in a way that undermines my efforts.
- Working with members of this team, my unique skills and talents are valued and utilized.



Action item: Establish the organizational practice of care team [huddles](#) that take into account psychological safety. Periodically measure team psychological safety.

Ask staff to view a [video](#) by Edmondson on 3 simple things to foster team psychological safety: frame work as a learning problem, not an execution problem; acknowledge fallibility; value curiosity and ask lots of questions. See also the *Care Team Action Guide* on how to construct more formalized and accountable teams.



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STEP 3 Invest in QI training. Organizational transformation requires that leaders invest in quality training and skills for staff. *'A culture of quality starts and ends with engaged leadership...Engaged leaders provide protected time and tools for quality improvement (QI) work and they hold staff accountable for improvement'⁵.* This requires an investment in training staff in a formal model of quality improvement with accessible strategies for managing organizational change. This includes investment in health information technology and metrics that streamline the process of measuring and monitoring the health center's care delivery and reimbursement system.

Action Item: Choose a formal model for quality improvement (QI) and train all staff in QI. If a health center lacks a formal model, health centers can consider the model in frequent use by health care organizations across the country: The Improvement Model, frequently summarized as 'Plan-Do-Study-Act' or PDSA¹⁰. A free introductory course in the Improvement Model is available online through the Institute for Healthcare Improvement (IHI): [An Introduction to the Model for Improvement](#).

Additional free offerings including courses on [Building Skills in Data Collection and Understanding Variation](#) and [Using Run and Control Charts to Understand Variation](#). A more tailored training option is to provide all employees a curriculum of QI classes, along a continuum of expertise, via IHI's Open School. The Open School provides access to more than 30 online courses, a network of learners and educators, and guided experiential learning in improvement, safety, system design and leadership. For approximately \$5,400/year, a health center can offer online QI training through the Open School for up to 100 employees (pricing moves up/down based upon more/less employees). This route allows each employee to tailor training to their level of education and knowledge. Many of the Open School trainings provide continuing education credits for nurses, physicians, and pharmacists. Select courses have also been approved for Maintenance of Certification (MOC) Part 2 activity points. Through this group subscription, a health center can track staff course completions and post-lesson assessment scores.





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STEP 4 Track Quadruple Aim Progress. Ultimately, the effectiveness of any leader is measured by the outcomes achieved. With the transition to value-based models of care, the leader of a health center will be judged against the degree to which their organization delivers on the Quadruple Aim goals. For example, health outcomes can be measured using Uniform Data System (UDS) measures; patient and staff experience can be monitored through periodic surveys or, in the case of staff experience, by attrition/retention statistics; and total cost per patient (per UDS or metrics available internally or through payers), can be monitored over time. Effective leaders create health center systems that achieve improvements, or a high level of performance, in all four of these goals.



Action items: Compile a small set of measures that track progress on the Quadruple Aim (e.g., health outcomes, patient experience, staff experience, and cost); report performance to the Board of Directors on a regular basis (e.g., quarterly). The [Health Center Value Proposition Template](#) is one tool that can be personalized to help communicate organizational progress on the Quadruple Aim (though it requires the addition of a measure for staff experience).

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