CULTURE OF SAFETY IN A HEALTHCARE ORGANIZATION

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Providence St. Peter Hospital
Why do some organizations do well with safety initiatives while others do poorly or fail?

- The most important factor in predicting success is the quality of leadership and the organizational culture.
- Organizations highly successful in safety are also generally successful in operational performance.
LEADERSHIP ATTRIBUTES

- Behaviors - particularly leadership
- Engagement at all levels of the organization
- Understand crucial aspects of human performance
- To continuously improve performance and achieve superior results the organizational culture must change - meaning behavioral change
- They address and align the behaviors of everyone

- Krause - Leading with Safety 2005
CULTURE OF SAFETY

- Through Quality Communication
- Peer Review and Self Reflection
- Living the Mission and Core Values
Culture of Safety

Strategies for Changing an Organizational Culture of Safety
### STRATEGY AND SYSTEM MEASURES

- Message organizational values
- Monitor clinical risk and safety culture
- Support an environment of appropriate accountability, transparency, and open disclosure
- Nurture a collaborative care culture based on effective teamwork
- Ensure patient centered care that takes into account the whole patient - their desires and needs

### CULTURE OF SAFETY

- Team based practice
- Fair and just and appropriate accountability
- Patient and family involvement
- Disclosure policies

### CONTINUOUS LEARNING SYSTEMS

(At Organization & Unit Levels)

- Transparency, analysis, actions, feedback
- On-going risk assessment
- Informatics surveillance system
- Swift responses to risk

### STRUCTURE AND RESOURCES

- Build governance oversight and responsible reporting relationships
- Methodically implement cultural metrics and risk evaluations
- Implement and vigorously support fair and just culture, adverse event algorithms, and disclosure to patients
- Teach and support teamwork and leadership training
- Implement patient and family advisory councils.

### IMPROVEMENT METHOD

- Reliable design
- Application of evidence based care
- Predictive tools
- Human factors science
  Pascal Metrics Training - 2009
CULTURE OF SAFETY THROUGH ENGAGEMENT, TRAINING, AND MEASUREMENT

- Leadership Engagement
- Team Training
- Observation Training
- Measurement
ENGAGING THE RIGHT PEOPLE

- Leadership -
  - Executive, Director, and Manager
- Physician Champion
- Physician Participants
- Quality Department Staff
- Direct Patient Care Providers
- Educators
- Librarian
SUCCESS FACTORS

- Engaged and supportive Leadership
- Staff trained and participated together on making changes that address patient safety
- Transparency
- Accountability for safety is owned by everyone
- Implementation of a Glitch Book
  - (format for staff to express ideas and concerns)
- Consistent follow-up on suggestions by staff: fix problems or explain why not fixed
- STAY FOCUSED
- Make it FUN
- CELEBRATE small wins along the way!
# Safety Attitudes Questionnaire:
**Items are grouped into six domains**

<table>
<thead>
<tr>
<th>Factor:</th>
<th>Definition</th>
<th>Example Items</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Job Satisfaction:</strong></td>
<td>Positivity about the work experience</td>
<td>I like my job</td>
</tr>
<tr>
<td></td>
<td></td>
<td>This hospital is a good place to work</td>
</tr>
<tr>
<td><strong>Teamwork Climate:</strong></td>
<td>Perceived quality of collaboration between personnel</td>
<td>Disagreements in this clinical area are appropriately resolved (i.e., what is best for the patient)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Our doctors and nurses work together as a well coordinated team</td>
</tr>
<tr>
<td><strong>Safety Climate:</strong></td>
<td>Perceptions of a strong and proactive organizational commitment to safety</td>
<td>I would feel safe being treated in this clinical area</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Medical errors are handled appropriately in this clinical area</td>
</tr>
<tr>
<td><strong>Perceptions of Management:</strong></td>
<td>Approval of managerial action</td>
<td>Hospital management supports my daily efforts in this clinical area</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hospital management does not knowingly compromise the safety of patients</td>
</tr>
<tr>
<td><strong>Stress Recognition:</strong></td>
<td>Acknowledgement of how performance is influenced by stressors</td>
<td>I am less effective at work when fatigued</td>
</tr>
<tr>
<td></td>
<td></td>
<td>When my workload becomes excessive, my performance is impaired</td>
</tr>
<tr>
<td><strong>Working Conditions:</strong></td>
<td>Perceived quality of the work environment and logistical support (staffing, training, etc.)</td>
<td>Trainees in my discipline are adequately supervised</td>
</tr>
<tr>
<td></td>
<td></td>
<td>This hospital deals constructively with problem personnel</td>
</tr>
</tbody>
</table>
SAFETY ATTITUDES QUESTIONNAIRE (SAQ) JUNE 2009 / JANUARY 2011

**Legend**

TC = Teamwork Climate*
SC = Safety Climate
JS = Job Satisfaction*
SR = Stress Recognition
WC = Working Conditions

PFM = Perception of Facility Management
PLM = Perception of Local Management*

*Meets goal of >80% Agreement
Culture of Safety

WAYS TO ENHANCE STAFF COMMUNICATION
PROFESSIONAL DEVELOPMENT

- Continuing Competency Program
- Magnet
  - (It’s a culture not just an award!)
- Peer Review & Self Reflection Pilot
- Shared Governance
- Consistent Leadership
# Continuing Competency Program

http://www.doh.wa.gov/hsqa/Professions/Nursing/continuecomp.htm

## Nursing Care Quality Assurance Commission

### License Renewals

<table>
<thead>
<tr>
<th>Continuing Competency Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients, families, and communities expect safe, competent, and compassionate nursing care. The Nursing Care Quality Assurance Commission adopted rules for a self-directed continuing competency program. The rules include:</td>
</tr>
</tbody>
</table>

- Participation in active practice. 531 hours every three years. |
- Self-assessment and reflection. |
- Continuing nursing education. 45 hours every three years. |

The rules apply to registered nurses and licensed practical nurses. The rules are a tool to help keep patients safe and improve nursing practice. |

Developing a continuing competency tool is required by statute. The Nursing Commission researched this topic for the last ten years. The rules were based on numerous rules writing workshops and meetings with nurses. Following are some documents that may be of assistance in recording your active practice and continuing nursing education. |

### Resources

- Sample active practice log (PDF 64KB) |
- Sample continuing education log (PDF 39KB) |
- Training materials for the continuing competency program (PDF 37KB) |
- Continuing competency log (PDF 35KB) |
- Continuing competency frequently asked questions printable brochure (PDF 40KB) |
- Continuing competency frequently asked questions |

### Tools and Links to other resources

- [http://www.waurn.org/Education](http://www.waurn.org/Education) (Washington State Nurses Association Educational Offerings)
“As the professional association for nursing, ANA has a responsibility to the public and its members to facilitate the development of a quality assurance system including peer review.”

“Peer review implies that the nursing care delivered by the group of nurses or an individual nurse is evaluated by individuals of the same rank or standing according to established standards of practice.”
A collegial, systematic, and periodic process by which registered nurses are held accountable for practice which fosters the refinement of one’s knowledge, skills, and decision-making at all levels and in all areas of practice.”
<table>
<thead>
<tr>
<th>Nursing Practice</th>
<th>Meets</th>
<th>Proficient</th>
<th>Model/Mentor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ Applies the nursing process in the delivery of care to non-complex patients</td>
<td>□ Meets all standards for Competent Level 1 plus: □ Applies the nursing process in the delivery of patient care to all patients, including those with complex pathophysiological needs and or psychosocial needs</td>
<td>□ Meets all standards for Competent Levels 1 and 2 plus: □ Demonstrates accountability for patient care outcomes</td>
</tr>
<tr>
<td></td>
<td>□ Develops an individualized plan of care for each non-complex patient based on admission assessment and disease process</td>
<td>□ Appropriately updates the patient plan of care reflecting changes in the patient’s condition.</td>
<td>□ Synthesizes and interprets multiple sources of data when developing the patient care plan.</td>
</tr>
<tr>
<td></td>
<td>□ Demonstrates the ability to prioritize the activities for patient care delivery</td>
<td>□ Uses clinical judgment based on knowledge and previous experience.</td>
<td>□ Uses past experience to anticipate and solve problems.</td>
</tr>
<tr>
<td></td>
<td>□ Incorporates standards of care in the delivery of patient care</td>
<td>□ Guided by experience as well as policy and procedures</td>
<td>□ Contributes information to the development of policies and procedures</td>
</tr>
<tr>
<td></td>
<td>□ Follows policies and procedures specific to PSPH</td>
<td>□ Supports unit performance improvement projects</td>
<td>□ Contributes knowledge and judgment in the development and implementation of performance improvement projects</td>
</tr>
<tr>
<td></td>
<td>□ Consistently attends staff meetings.</td>
<td>□ Recognizes clinically significant opportunities for practice improvement</td>
<td>□ Participates in performance improvement team</td>
</tr>
<tr>
<td></td>
<td>□ Aware of hospital and unit based performance improvement projects.</td>
<td>□ Utilizes information from professional journals and literature and incorporates principles into practice.</td>
<td>□ Evaluates current practice based on patient outcomes, review of literature and research.</td>
</tr>
<tr>
<td></td>
<td>□ Takes responsibility for continuous knowledge seeking in reference to new material</td>
<td>□ Working toward national nursing certification</td>
<td>□ Recognized as a proponent and mentor for Evidenced Based Practice</td>
</tr>
<tr>
<td></td>
<td>□ Performs chart and observational audits as required by unit</td>
<td></td>
<td>□ Holds a national nursing certification</td>
</tr>
</tbody>
</table>

Knowledge, Decision Making, and Evidence Based Practice
## Phases of Professional Development for Self Reflection or for Peer Review Process

<table>
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<tr>
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<th>Model/Mentor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Collaboration, Teamwork, and Leadership</strong></td>
<td>□ Maintains a positive working relationship with team members</td>
<td>□ Meets all standards for Competent Level 1 plus:</td>
<td>□ Meets all standards for Competent Levels 1 and 2 plus:</td>
</tr>
<tr>
<td></td>
<td>□ Practices the Standards of Behavior</td>
<td>□ Identifies communication barriers and adapts communication to build health care team</td>
<td>□ Establishes an environment that fosters positive interpersonal relationships</td>
</tr>
<tr>
<td></td>
<td>□ Understands the role of other disciplines and departments in the care of the patient</td>
<td>□ Recognizes clinically significant data and communicates appropriately to other disciplines and departments</td>
<td>□ Role model in demonstration of caring behaviors to peers and other professional providers</td>
</tr>
<tr>
<td></td>
<td>□ Recognizes need for professional growth and seeks appropriate resources</td>
<td>□ Demonstrates accountability for professional growth</td>
<td>□ Consistently recognizes team dynamics and responds appropriately</td>
</tr>
<tr>
<td></td>
<td>□ Understands principles of delegation</td>
<td>□ Delegates appropriately</td>
<td>□ Implements change to achieve identified team goals</td>
</tr>
<tr>
<td></td>
<td>□ Exhibits professional and personal accountability and responsibility</td>
<td>□ Uses critical thinking to help solve unit problems</td>
<td></td>
</tr>
</tbody>
</table>

- **Maintains a positive working relationship with team members**
- **Practices the Standards of Behavior**
- **Identifies communication barriers and adapts communication to build health care team**
- **Recognizes clinically significant data and communicates appropriately to other disciplines and departments**
- **Demonstrates accountability for professional growth**
- **Delegates appropriately**
- **Uses critical thinking to help solve unit problems**
- **Establishes an environment that fosters positive interpersonal relationships**
- **Role model in demonstration of caring behaviors to peers and other professional providers**
- **Consistently recognizes team dynamics and responds appropriately**
- **Implements change to achieve identified team goals**
### PHASES OF PROFESSIONAL DEVELOPMENT FOR SELF REFLECTION OR FOR PEER REVIEW PROCESS

<table>
<thead>
<tr>
<th>Nursing Practice</th>
<th>Meets</th>
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<th>Model/Mentor</th>
</tr>
</thead>
</table>
| Nurse and Patient Relationship | - Demonstrates knowledge of the PHS Mission and Core Values  
- Uses appropriate and positive communication with patients and family  
- Incorporates Patient Centered Care Standards into daily practice:  
  a. AIDET  
  b. Hourly Rounding  
  c. Individualized Care  
  d. Noise Reduction  
  e. Bedside Handoff  
- Develops a trusting relationship with patient and family by appropriate follow through in keeping promises and meeting commitments  
- Develops and implements a teaching plan for patient and family  
- Aware of diversity needs of patients and seeks appropriate resources | - Meets all standards for Competent Level 1 plus:  
  - Incorporates and Core Values into patient care  
  - Responds to subtle changes in patient and family demeanor or reactions  
  - Coordinates communication of teaching plan across continuum of care from admission to discharge  
  - Applies appropriate principles of teaching and learning to patient and family learning needs  
  - Knows and uses resources for meeting the diversity needs of patients | - Meets all standards for Competent Levels 1 and 2 plus:  
  - Mission and Core Values are an integral part of nursing practice  
  - Anticipates needs of patient and family based on experience and intuition  
  - Demonstrates and mentors others in accountability and leadership as an individual and team member in anticipating and meeting patient/family needs  
  - Functions as a resource to the team for meeting diversity needs of patients and families |
# Self Reflection and Peer Review

**Nursing Practice Categories**

<table>
<thead>
<tr>
<th>Knowledge, Decision Making, and Evidence Based Practice</th>
<th>Provide Examples/Comments: This is a time for celebration and goal identification! Peers: Be generous with positive reinforcement and specific examples!</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competency Level based on the Phases of Professional Development:</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td>Meets</td>
<td>Proficient</td>
</tr>
<tr>
<td>Assessment and ongoing monitoring of patient condition, initiation of appropriate, evidence-based nursing response, and documentation. Care Delivery Model Components:</td>
<td>Utilize Nursing Process, Facilitates Continuity of Care, Ensures Patient Safety, Utilizes Evidence Based Practice</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Collaboration, Teamwork, and Leadership</th>
<th>Please provide specific Examples:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competency Level based on the Phases of Professional Development:</td>
<td>Please provide ideas/recommendations to grow and/or expand practice in this area:</td>
</tr>
<tr>
<td>Meets</td>
<td>Proficient</td>
</tr>
<tr>
<td>Maintaining positive, constructive interpersonal relationships, and understands and practices the principles of effective teamwork. Demonstrates effective leadership in team processes. Care Delivery Model Components:</td>
<td>Communicates Plan of Care, Coordinates Interdisciplinary Team, Utilizes Community Resources</td>
</tr>
</tbody>
</table>

*PSPH Standards of Nursing Practice for Self Reflection and Peer Review*  
Self Reflection and Peer Review are not part of your permanent Employee Record.
**PSPH Standards of Nursing Practice**

**For Self Reflection and Peer Review**

*Self Reflection and Peer Review are not part of your permanent employee record*

<table>
<thead>
<tr>
<th>Self Reflection and Peer Review:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nurse and Patient Relationship</strong></td>
<td><strong>Please provide specific Examples:</strong></td>
</tr>
<tr>
<td>Competency Level based on the Phases of Professional Development: ☐ Meets ☐ Proficient ☐ Model/Mentor</td>
<td>Please provide ideas/recommendations to grow and/or expand practice in this area:</td>
</tr>
<tr>
<td>Attention to the individual person and family as patient, listening to the patient’s story and adapting care accordingly. Implements Patient Centered Care Standards. AIDET, Hourly Rounding, Individualized Care, Noise Reduction</td>
<td></td>
</tr>
<tr>
<td><strong>Care Delivery Model Component:</strong></td>
<td></td>
</tr>
<tr>
<td>Know me, Care for me, Ease my way</td>
<td></td>
</tr>
<tr>
<td><strong>Age Specific Care</strong> <em>(Check all that apply):</em></td>
<td><strong>Provide Comments: This is a time for celebration and goal identification!</strong></td>
</tr>
<tr>
<td>☐ N/A ☐ Neonates (newborns to 1 mo)</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td>☐ N/A ☐ Pediatrics (1 mo – 12 yrs)</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td>☐ N/A ☐ Adolescents (12-18)</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td>☐ N/A ☐ Adult (19-65)</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td>☐ N/A ☐ Older Adult (66+)</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td><strong>Self-Reflection Only (Not for Peer Review):</strong></td>
<td><strong>Provide Examples/Comments: Celebrate and Create Goals!</strong></td>
</tr>
<tr>
<td>Thinking about your work performance, give two or three examples of what you have done well. What accomplishments—such as classes taken, customer/patient feedback, coworker trained, etc—are you proud of accomplishing?</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td>Still thinking about your work performance, describe what you would like to improve or learn during the next year.</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td>Please provide one or two examples of how your work and what you do to demonstrates the Providence Core Values of Compassion, Excellence, Justice, Respect, and Stewardship in your daily activities.</td>
<td>Please provide specific Examples:</td>
</tr>
<tr>
<td>Survey Question</td>
<td>Pre-implementation Survey (% selected 3 or 4)</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>1. To what degree do you self-reflect on your nursing practice?</td>
<td>92%</td>
</tr>
<tr>
<td>1. How valuable is the Customer Feedback you receive in helping you to grow your nursing practice?</td>
<td>92%</td>
</tr>
<tr>
<td>1. To what degree do you actively seek feedback from your peers regarding your professional practice?</td>
<td>75%</td>
</tr>
<tr>
<td>1. To what degree have you purposefully incorporated the Professional Practice Model and the Care Delivery Model into your practice?</td>
<td>82%</td>
</tr>
<tr>
<td>1. Overall, how valuable is your annual performance evaluation</td>
<td>91%</td>
</tr>
</tbody>
</table>
The new evaluation process made me feel valued as a team member.

I feel that I constantly self-reflect, so I can better myself as a nurse. However my annual performance evaluation is not my first concern behind my self-reflection: It helps with team building and makes me see ways I can improve. It helps me see ways I can improve in the coming year and helps me feel like a valued member of the team.

Streamlined process which was meaningful. Helps to set goals for self in career choices. I like the new process. It makes people accountable for development and growth as a nurse.

It was helpful to hear the feedback my peers had. It’s a good idea because you get more feed-back than from just your manager and it’s from people who work beside you. Your peers are the ones who are able to see your job performance from day to day. These new forms are great because they go into more depth, and you were able to hear the comments first hand.

I like talking directly with co-workers - helpful.
Culture of Safety

Connection Between Organizational Core Values and Changing a Culture of Safety
The Providence Commitment

Mission
As People of Providence, we reveal God's love for all, especially the poor and vulnerable, through our compassionate service.

Core Values

Respect
All people have been created in the image of God. Genesis 1:27
We welcome the uniqueness and honor the dignity of every person
We communicate openly and we act with integrity
We develop the talents and abilities of one another

Compassion
Jesus taught and healed with compassion for all. Matthew 4:24
We reach out to people in need and give comfort as Jesus did
We nurture the spiritual, physical and emotional well-being of one another and those we serve
We embrace those who are suffering

Justice
This is what the Lord requires of you: act with justice, love with kindness and walk humbly with your God. Micah 6:8
We believe everyone has a right to the basic goods of the earth
We strive to remove the causes of oppression
We join with others to work for the common good and to advocate for social justice

Excellence
Much will be expected of those who are entrusted with much. Luke 12:48
We set the highest standards for ourselves and for our ministry
We strive to transform conditions for a better tomorrow while serving the needs of today
We celebrate and encourage the contributions of one another

Stewardship
The earth is the Lord's and all that is in it. Psalm 24:1
We believe that everything entrusted to us is for the common good
We strive to care wisely for our people, our resources and our earth
We seek simplicity in our lives and in our work
Culture of Safety in a Healthcare Organization

QUESTIONS?

THANK YOU!

PROVIDENCE
St. Peter Hospital