

## NAHQ NEXT 2018

Last November, Deb Widmer, Heather Bloomfield, and Linda Johnson attended NAHQ's national education conference, NAHQ Next. The conference was held in chilly and somewhat snowy Minneapolis, but inside the convention center, it warmed up very quickly with the excitement and enthusiasm of the more than 3,000 in person and virtual attendees.

Between the three of us we covered as many sessions as possible, or that we hoped would provide us with new tools for the trade that we could share with our teams and our fellow healthcare quality professionals. We learned to be strategic, engaged, and fearless; that it isn't change we fear, it's really loss; that we need a culture of safety, not a safety culture; and that you've got to have them but remember, metrics can be manipulated. We learned the concept of a whole concept, quick, consistent elevator speech that will convince people to want what you're selling. Not so easy to do, but effective. We also learned that cohesive and engaged teams get noticed, and that we shouldn't hang out under the bridge with our trolls (in the office). And probably most important, that we need to create a fun space and we need to find the funny in change.

Here are a few of the many highlights from the conference. Look for pieces on **Shallow Cause Analysis** and **Great Meetings** in our regular newsletter, coming out later this month.

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## **Keynote Speaker: Carla Harris Offers Carla's Pearls**



**Carla Harris** is Vice Chairman of Wealth Management and Senior Client Advisor at Morgan Stanley. She was Chair of the Morgan Stanley Foundation from 2005 to 2014 and sits on the boards of several community organizations. In August 2013, Carla was appointed by President Barack Obama to chair the National Women's Business Council. She is a gospel recording artist and a popular public speaker who gives impactful career guidance to corporate audiences based on her book, "Expect to Win." Carla joined Morgan Stanley in 1987 after completing an AB in economics from Harvard University and an MBA from Harvard Business School.

https://www.morganstanley.com/profiles/carla-harris-vice-chairman-of-wealth-management

### Pearl 1: Perception is co-pilot to reality

How people perceive you is key. To be a leader, it's not enough to have knowledge and experience. You can, and must, train people to see you by the adjectives that describe you. Pick three that you authentically are and three that are valued in your organization. Behave and speak consistently around those adjectives so that you are recognized.

### Pearl 2: Be comfortable taking risks

To be a 21<sup>st</sup> Century leader, you must be comfortable taking risks. This sends the message that you are comfortable with change. Don't keep your head down when things get touch. Keep your head up and offer what you can do to help. Always be in the conversation. Fear has no place in your success equation. Will this new thing give you new skills or opportunities? Expose you to people or relationships? Add new branches to your decision tree?

### **Pearl 3: Be authentic**

Authenticity is at the heart of power. People will gravitate to those who are comfortable in their own skin. Your comfort will motivate others to bring their true selves to the table. Trust is at the heart of any successful relationship.

### Pearl 4: Currency = Performance + Relationship

Deliver what's asked of you plus a little more. It will get you noticed, you'll get paid and promoted, and you'll attract sponsors. Put your work in context through people. Your success is dependent on someone else's judgement, judgement that will be based on relationships.

### Pearl 5: Expect you will succeed

Background, experience, and network are most important. Put yourself is someone else's way. Use your intellect on your network.

Want to know more about the Five Pearls? Check out Carla's website <u>https://carlaspearls.com</u> or her book, *Expect to Win: 10 Proven Strategies for Thriving in the Workplace* available on <u>Amazon</u>.

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## You Have a Seat at the Table: Now What?

We can almost immediately apply Carla's Pearls when we have a seat at the table and want to employ the three components of successfully using that seat to further our quality agenda. We have to go in expecting to succeed (Pearl #5). In order to succeed, we will have to be authentic (Pearl #3), deliver a little more than what's asked (Pearl #4), and be willing to take a risk (Pearl #2). There are three components to being an effective team member at the table:



Perspective Leverage your ability

to see the big picture



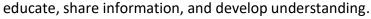
Pace

Drive change at a sustainable rate



**Priority** Optimize your capacity for chaos

Leverage your ability to see the big picture. In this case, it's the cost part of the value equation. Partner with your finance people and quantify the value of quality to the organization (Yes, this will take some pre-work). Don't wait to be asked. That's akin to hanging out under the bridge. Take the opportunity to





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Perspective Leverage your a to see the big pic

> Drive change at a sustainable rate. Have a desired outcome and strategic goals but create multiple finish lines or value milestones along the way. In the words of Michael Leavitt, our former governor, "Healthcare is a little more than 2 years into a 40 year-long transformation from fee for service to

value-based payment." Don't forget to take time to celebrate the successes.



Prioritize through chaos. Use the four quadrant method to determine what is important and what is within your control. Then, take action and take a break!



## **Top Ten Patient Safety Concerns**

With the move to more fully transparent data, we have to look not externally, but internally, at our cultural barriers to improving patient safety. Looking at the evolution of the top safety concerns over time as shown below, and given continuing expectations to do more with less, it is important to choose wisely where we will commit resources.

The <u>ECRI Institute</u> is a nonprofit organization that studies how to improve patient care. According to the <u>Advisory Board</u>, the institute compiled its list by assessing more than two million patient safety events in the institute's patient safety organization database, as well as by considering opinions from a panel of internal and external patient safety experts. ECRI in their report recommends that the list serve "as a catalyst for discussion about the top patient safety issues faced by your organization," saying that the "list is not meant to dictate which issues provider organizations should address."

ECRI also explained in the report that, "The list does not necessarily represent the issues that occur most frequently or are most severe." They added, "Most organizations already know what their high-frequency, high-severity challenges are. Rather, this list identifies concerns that might be high priorities for other reasons, such as new risks, existing concerns that are changing because of new technology or care delivery models, and persistent issues that need focused attention or pose new opportunities for intervention."

	2016	2017		2018
1.	HIT configuration and workflow	1. Information management in EHRs	1.	Diagnostic errors
2.	Management of behavioral health issues in non-behavioral health settings	<ol> <li>Unrecognized patient deterioration</li> <li>Implementation and use of</li> </ol>	2.	Opioid safety across the continuum of care Internal care coordination
3.	Patient identification issues	<ol> <li>Implementation and use of clinical decision support</li> </ol>	з. 4.	Workarounds
4.	Inadequate cleaning and disinfection of flexible	<ol> <li>Test result reporting and follow up</li> </ol>	5.	Incorporating health IT into patient safety programs
5.	endoscopes Inadequate test result reporting and follow up	<ol> <li>Antimicrobial stewardship</li> <li>Patient identification</li> <li>Opioid administration monitoring</li> </ol>	6.	Management of behavioral health needs in an acute care setting
6.	Inadequate monitoring for respiratory depression in patients prescribed opioids	<ul><li>in acute care</li><li>8. Behavioral health issues in non-</li></ul>	7.	All hazards emergency preparedness
7.	Unintentionally retained objects despite correct count	<ul><li>behavioral health settings</li><li>9. Management of new oral anticoagulants</li></ul>	8. 9.	Device cleaning, disinfection, and sterilization Patient engagement and health
8.	Medication errors related to pounds and kilograms	10. Inadequate organizational systems or processes to improve		literacy Leadership engagement in
9.	Inadequate antimicrobial stewardship	safety and quality	10.	patient safety
10.	. Failure to embrace a culture of safety			

Visit <u>Top Ten Executive Briefing</u> for more details on the 2018 Top Ten.

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### Jan McInnis Helps Us Find the Funny in Change



Comedy was always on my mind. When I was about 10 years old, I declared to my parents that once I turned 16, I was going to "buy a motorcycle, ride cross-country to Los Angeles and become a comedian." My parents didn't quite share my "vision" so I ended up graduating from Virginia Tech and having a marketing career for over a decade before getting on stage. Today, 20+ years into my comedy and keynote speaking career, I have presented my humor keynotes and comedy shows to thousands of groups. Oh, yes, I did finally make it cross-country to Los Angeles, where I currently reside, *AND* I just bought a motorcycle!

Why humor? It introduces you, makes you approachable, and connects you to others. It helps diffuse tense situations by getting the big elephant out on the table. For instance, it's pretty easy to tell when people don't really want to be in a meeting. Put yourself in their shoes and say what their sarcastic voice is thinking. Example: Quick survey: How many people think.... Good news/bad news. Top lists, e.g., top things you'd rather be doing; top signs we need this meeting; top reasons we're here. You get the idea. Just be sure it's a tense, not hostile, situation and that you're not angry. And, it doesn't have to be belly laugh funny.

Humor breaks the ice on tough topics and gives you a short-term mental win. Use it to pull out the irony in situations. Find contradictions and inconsistencies between things, e.g., location, activities, agenda, company name, room set up, time of year, people. Humor makes you more creative, allowing for extreme solutions: How would I solve this if I could solve it any way I want? Use it to generate fresh ideas. How could you be proactive in stopping falls? How about...

Putting all the beds on the floor.

Cover the floors in wall to wall cushions and mattresses.

- During admission send all the people who admit to having a fall to your rival facility.
- Announce the new policy that each employee has to carry a patient on their back in a papoose.
- New Policy everybody gets a catheter regardless patient, nurse, visitor. Get rid of all the bathrooms.

Finally, humor is healthy! Your internal emotions affect your external energy. Maybe if we spent a few more minutes laughing, we'd have less stress and pain, and fewer health problems. Are you ready to destress with a little humor? Watch <u>Finding the Funny in Change</u> and chill for ten minutes. It could make you more productive for the rest of the day – or even longer! Find more from Jan at <u>https://theworklady.com</u>

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### NAHQ 2019

Enjoy a <u>short video</u> that captures some of the highlights from NAHQ Next 2018! NAHQ 2019 will be held in Phoenix, AZ September 16 – 18, 2019. Registration will open in spring.

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