# Complimentary Webinar





# High Reliability Essentials for Healthcare Organizations

Dawn Allbee, MA, CCMP Executive Director, High Reliability Services Joint Commission Resources (JCR)





# Today's Agenda:

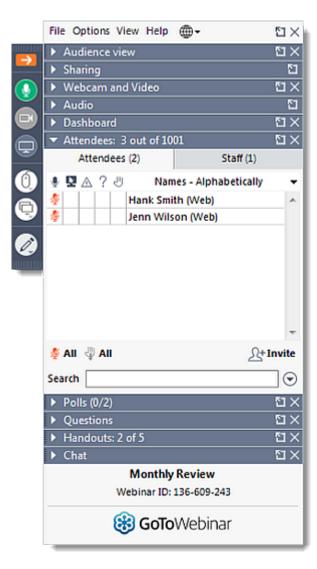
- Webinar instructions
- Presenter introduction
- "High Reliability Essentials for Healthcare Organizations"
- Question and answer period
- Closing





#### **Control Panel**

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### Changing the Display Language







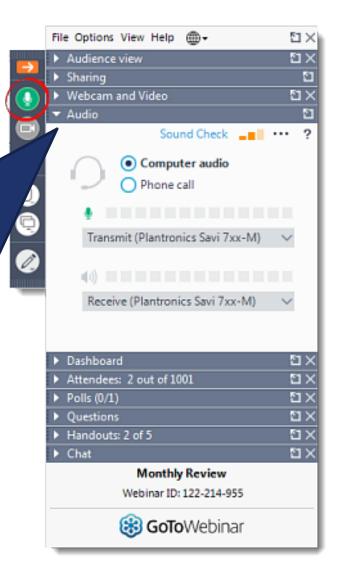
#### **Audio Controls**

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Choose "Mic & Speakers" to use your computer speakers.

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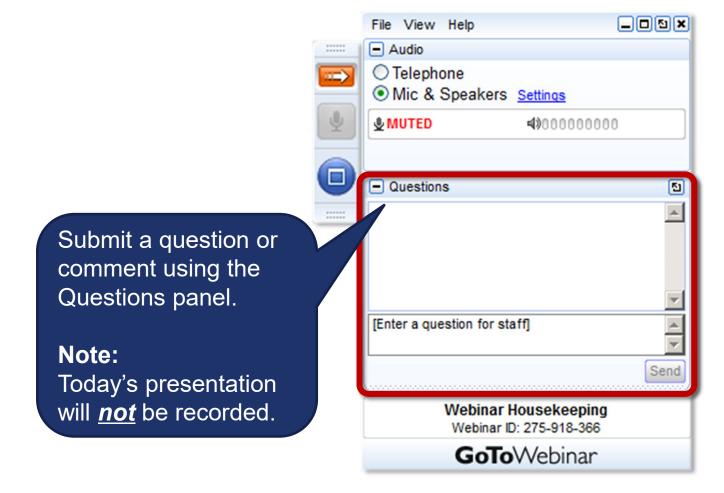
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# Asking A Question







#### Our Presenter

# Dawn Allbee **Executive Director, High Reliability Services**



- ✓ Joint Commission Resources High Reliability Services leader
- Certified Master Change Agent and Certified Green Belt
- ✓ More than 15 years of experience collaborating with all levels of staff in change management, leadership commitment, and support
- Develops performance improvement training programs for healthcare organizations
- Coaches and mentors senior leadership teams in HRO and safety culture





#### Objectives

- ✓ Define High Reliability
- ✓ Translate High Reliability Principles to Healthcare
- ✓ Understand the High Reliability Maturity Model for Healthcare







# Imagine this scenario:

- You are the patient in a healthcare organization.
- What does high reliability look like to you?



#### **High Reliability Organizations**

Perform at consistently high levels of quality and safety despite the potential for large scale harm

- Environment of "collective mindfulness"
- Prize the identification of errors for the lessons they provide
- Lessons are used to strengthen systems and prevent future errors



## The Actions of High Reliability Organizing





Sense making



Situational awareness



Storytelling



Organizational learning



Constant improvement



Mindful organizing





#### What Can Healthcare Learn From High Reliability Science?

#### In health care today, routine processes fail regularly

 Hand hygiene compliance at 50%, medical administration, patient identification, communication errors during transitions of care

#### We see uncommon, preventable adverse events

Wrong side/site surgeries, inpatient suicides, retained foreign objects,
 operating room fire, infant abductions

#### **How Can Healthcare Achieve Zero Harm?**





#### Translating High Reliability for Healthcare

#### **Key Points:**

- Despite efforts to improve the quality of care, patients are still suffering from harm
- Improvement is hard to sustain or spread, and "project fatigue" is rampant
- Consistent excellence is still evasive
- High-reliability science offers insights from other industries
- Those insights can be adapted and applied to health care to enable hospitals to reach comparable levels of safety and quality



High-Reliability Health Care: Getting There from Here

MARK R. CHASSIN and JEROD M. LOEB

The Joint Commission

Context: Despite serious and widespread efforts to improve the quality of health care, many patients still suffer preventable harm every day. Hospitals find improvement difficult to sustain, and they suffer "project fatigue" because so many problems need attention. No hospitals or health systems have achieved consistent excellence throughout their institutions. High-reliability science is

Milbank Q 2013;91(3):459-90





High reliability in healthcare is "maintaining consistently high levels of safety and quality over time and across all healthcare services and settings"



#### What Does Zero Harm Mean?







# Poll Question #1

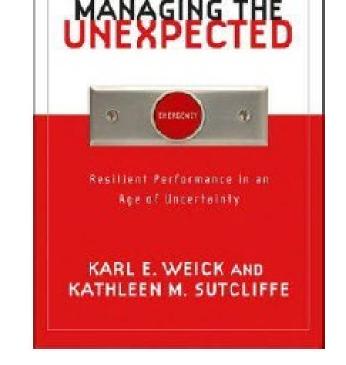




### Five Principles of High Reliability Organizations

# Anticipation – "Stay out of trouble"

- 1. Preoccupation with failure
- 2. Reluctance to simplify
- 3. Sensitivity to operationsContainment "Get out of trouble"
- 4. Commitment to resilience
- 5. Deference to expertise



SECOND SELTIEN





### Principle 1: Preoccupation with Failure

- High reliability organizations are constantly focused on failure prevention, never satisfied that they have not had accidents for extended periods of time
- They are constantly vigilant about emerging safety threats
- No gradual drift towards complacency

In healthcare, we tend to accept failure(s) as an inevitable element of daily work





## Principle 2: Reluctance to Simplify

- High reliability organizations successfully resist pressures to simplify complex processes in their design, operation, and critical review
- Greater detail allows more accurate assessment of root causes on what is causing something unexpected
- They recognize the ongoing challenge of cognitive laziness

In healthcare, we tend to embrace one-size-fits-all best practices for almost everything





### Principle 3: Sensitivity to Operations

- In high reliability organizations (HROs), anomalies are recognized and isolated quickly so that they can be dealt with
- HROs seek to understand what is actually happening regardless of plans or intentions
- They depend on highly effective communication mechanisms

In healthcare, we tend to be desensitized to unsafe conditions, practices and behaviors





#### Principle 4: Commitment to Resilience

- High reliability organizations (HROs) possess an inherent ability to maintain or regain a dynamically stable state
- HROs are not disabled by errors and are constantly diligent about immediate remediation

In healthcare, many of our colleagues (of all levels and professions) are reluctant or afraid to report or speak up





## Principle 5: Deference to Expertise

- High reliability organizations (HROs) cultivate diversity of perspective as it allows for better adaptation to complex environments
- HROs tend to push decision making down and around an organization

In healthcare, our disciplines and hierarchies often keep us from listening to or hearing from those closest to the patient





## Zero Harm: Build the Need for Change

	Threats if we do nothing	Opportunities with success
Short Term		
Long Term		





# Poll Question #2





# The High-Reliability Healthcare Maturity Model



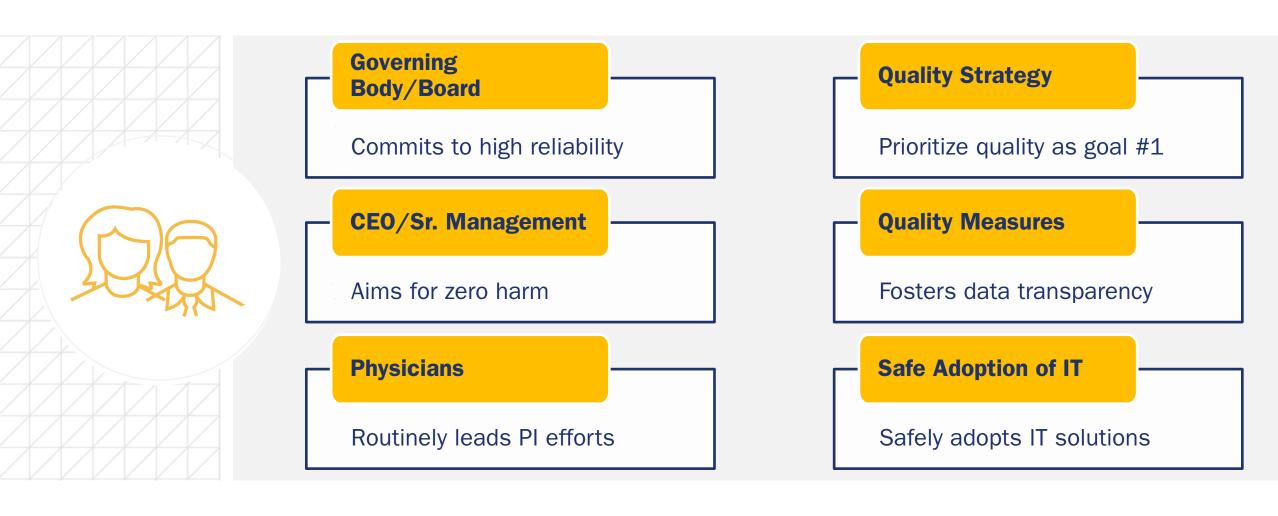
# High Reliability in Healthcare: 3 Domains of Change







## Domain 1: Leadership Characteristics







### Domain 2: Safety Culture Characteristics



#### **Trust**

Fosters high levels of trust

#### **Accountability**

Balances learning with accountability

#### **ID Unsafe Conditions**

Recognizes & reports unsafe conditions and close calls

#### **Strengthen Systems**

Proactively assesses & repairs systems

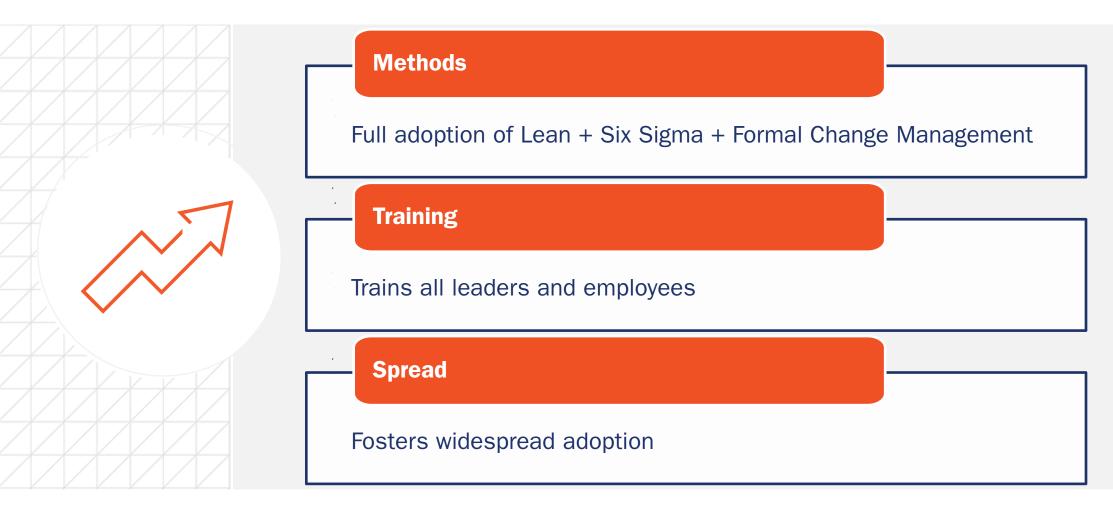
#### **Assessment**

Measures & improves safety culture





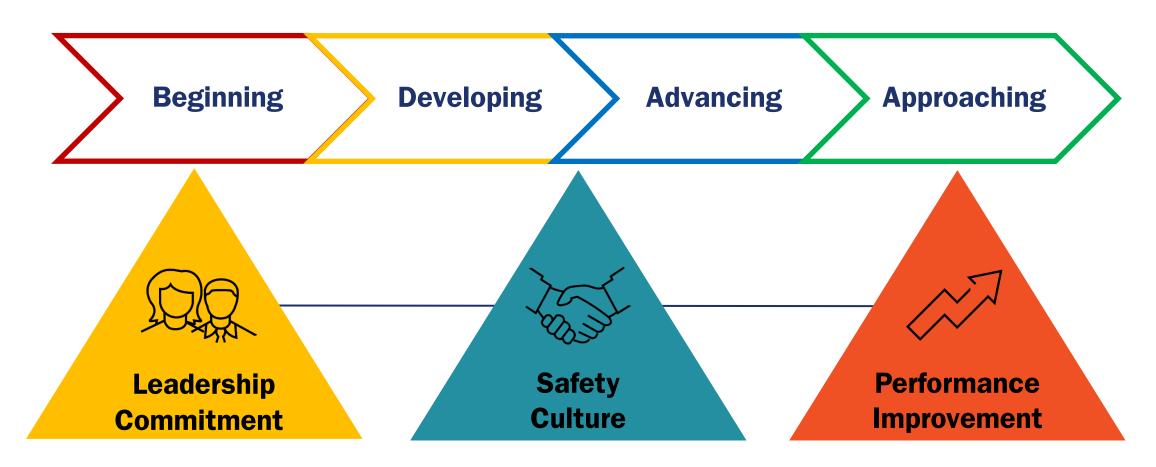
### Domain 3: Performance Improvement Characteristics







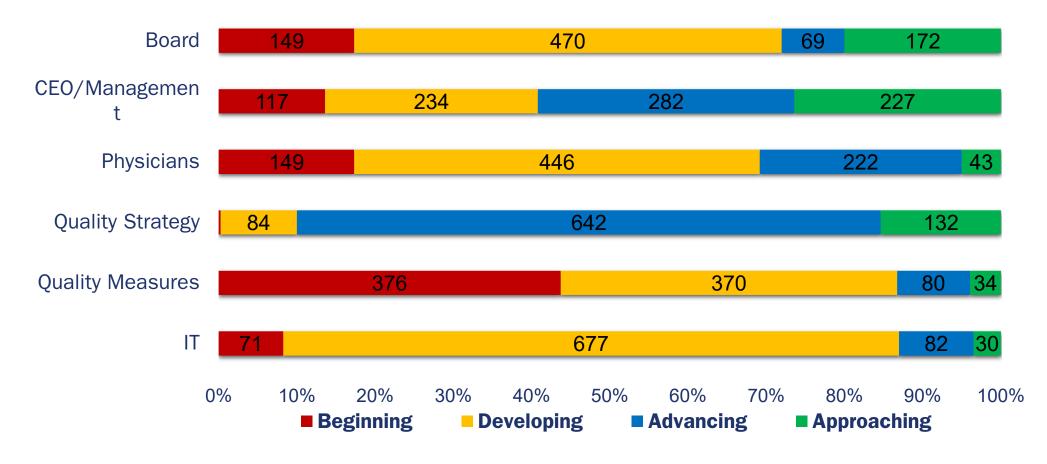
# High Reliability Maturity Model







## Oro® 2.0 Assessment Results (Leadership Domain Sample)





## Where do Hospitals Struggle?

- Board focus on quality, safety and high reliability
- Widespread availability/transparency of quality measures
- Physician involvement in improvement
- Safe implementation of information technology
- Proactive assessment of safety systems
- Widespread training and use of Robust Process Improvement methods





# Summary





## Leadership is Key

# Leadership commitment and action are the first steps before other necessary changes can take place

- Transformation to high reliability is a multi-year endeavor that will require focus and resources
- Need to strengthen and build systems and structures, skills and practices
- Set the tone for values, behaviors, priorities

Based on a recent survey 77% of healthcare professionals cited lack of leadership as a barrier to healthcare excellence





# Questions?





## **Upcoming Events**

#### **Emergency Management Conference**

In-person learning experience

(20-22 June 2023) | Rosemont, Illinois | USA



#### To register, please visit: www.jcrinc.com





# Thank You



