

Creating an Environment for Learning, Innovation and Successful Implementation in Organizations

Lessons from Management Research

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Outline

- Core propositions
- Challenges to organizational learning
- Strategies for implementation success
 1. Frame as a learning challenge
 2. Create learning opportunities for staff
 3. Involve frontline staff
 4. Leadership that facilitates
 5. Measure and reward effort
- Conclusion: A question for researchers

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Core Propositions

- Organizations that **learn** (adapt, improve, innovate, implement) **perform well** in complex, dynamic environments

- Organizations **learn through team learning** -- learning that takes place in interdependent work groups.

- Organizational **learning is difficult**; it does not happen naturally.

Sources: Argote 1999; Argyris & Schön 1978; Fiol & Lyles 1985; Garvin 2000; Huber 1991; Levitt & March 1988; March & Simon 1958; Schein 1993; Senge 1990; Gardiner & Whiting 1997; Egan et al. 2004; Utterback 1996; Arthur et al. 2001.

Challenges to organizational learning

- **Staff resistance**
 - Preference for known work routines
 - Norms emphasize performance not learning
... it's difficult to embrace learning because it involves uncertainty

- **Intergroup relations**
 - Professional (status) hierarchies
 - Different mental models and systems
... it's difficult to create collaboration and teamwork for learning efforts when a history of division exists

- **Leader-workforce interactions**
 - Transactional not transformational
 - Perceived conflict of goals between leaders and staff
... it's often difficult to adopt the leader/organizational goal when the past has built suspicion

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More challenges

- Performance measurement and control systems
 - Often under-developed and under-utilized
 - Does not reward learning and implementation efforts
 - ... it's difficult to dedicate one's self to learning when metrics do not align and effort is unrewarded*

- The nature of knowledge
 - Abundant and dynamic
 - Tacit and context dependent
 - ... it's often difficult to describe the process... let alone to implement and improve it!*

- Resource constraints
 - Staff shortages
 - Financial demands and limitations
 - ... it's difficult to embrace learning new things when already feeling pressed to accomplish the old things*

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Strategies for Success

1. Frame as a learning challenge
2. Create learning opportunities
3. Involve frontline staff
4. Leadership that facilitates
5. Measure and reward effort

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1. Performance v. Learning Frames

We employ performance frames by default and force of habit...

Project Dimension	Performance Frame
View of project purpose	Defensive <i>e.g., ensuring we keep our position</i>
View of situation created by project	Same as, or not that different from existing situation
Tacit goal	Get the job done
Individual's role in project	Knows what to do, self-sufficient
Others' role in project	Co-actors or subordinates

- more risk aversion
 - less experimentation
 - disengage sooner
 - preserve current interpersonal routines
- poor performance in new situations

1. Aligning the Frame with the Learning Cycle

Stage of Implementation	Framing the Challenge	Effects
Enrollment	Significantly changes the way people work. Others play an important role.	Participants have a shared sense of purpose and motivation
Preparation	We need to learn to work together and anticipate problems.	Willingness to take interpersonal risks
Trial	Early actions are experiments. It's not about getting it right the first time.	Every action is an opportunity to learn; people pay attention for improvements
Reflection	We want to learn from past trials.	Participants discuss what happens, brain storm alternatives

Questions: Which is the more effective frame for HAIs? Does it vary by HAI? Different frame for HAIs?

2. Create Learning Opportunities: Learn-how

Overcome resistance to participation in the implementation of new practices through:

- Solicitation of ideas from staff
- Dry-runs (offline practice)
- Limited-time pilot runs
- Problem-solving cycles (PDSA)
- Education sessions with staff
- Project team meetings
- Collect staff feedback before full implementation of new practice

Learn-how

($\alpha = .88$)

Question: Are these activities effective for implementing HAI-related practices?

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2. Why learn-how works?

- Learn-how activities create shared understanding of practices and allows all staff to engage in hands-on learning -- -- while adapting work practices to fit the organizational context

Adaptation

"We made our best guess using the [existing bits and pieces of] evidence to figure out how we could implement it in a way that was reasonable for our people. . . . We used the isolation room and a rubber ball to simulate a neonate, and we tried everything. We conducted dry-runs to see what it would be like to try this and that... We tried lots and lots of ways, practicing."

Learning (via experimentation)

Staff involvement

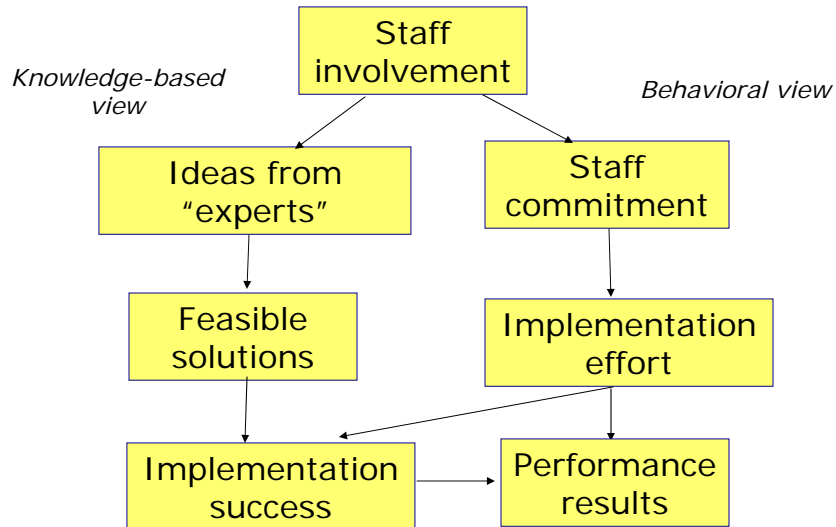
"We use this procedure in the delivery room 100% of the time. Even now, every once in awhile, someone will say, 'What if we did this?' And they suggest a little bit of a modification."

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Neonatologist Hosp 3

3. Involving frontline staff

... is critical for achieving performance goals



3. Involving frontline staff: a question

- What percentage of problems encountered by nurses do nurses report to managers and/or take action to systematically address?

- a) 54%
- b) 34%
- c) 14%
- d) 4%

Tucker, A. L. and A. C. Edmondson. 2003. Why Hospitals Don't Learn from Failures: Organizational and Psychological Dynamics That Inhibit System Change. *California Management Review* 45(2):1-18.

3. When do staff engage?

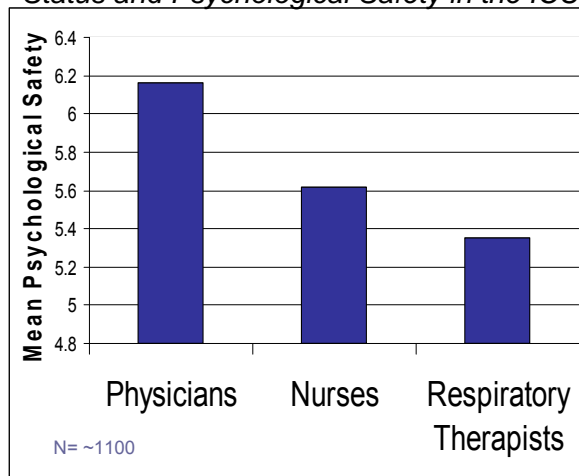
When it is psychologically safe!

- ❑ Psychological safety is a belief that one will not be punished or humiliated for speaking up with ideas, questions, concerns, or mistakes.
- ❑ A shared sense of psychological safety is a critical input to team learning and performance improvement

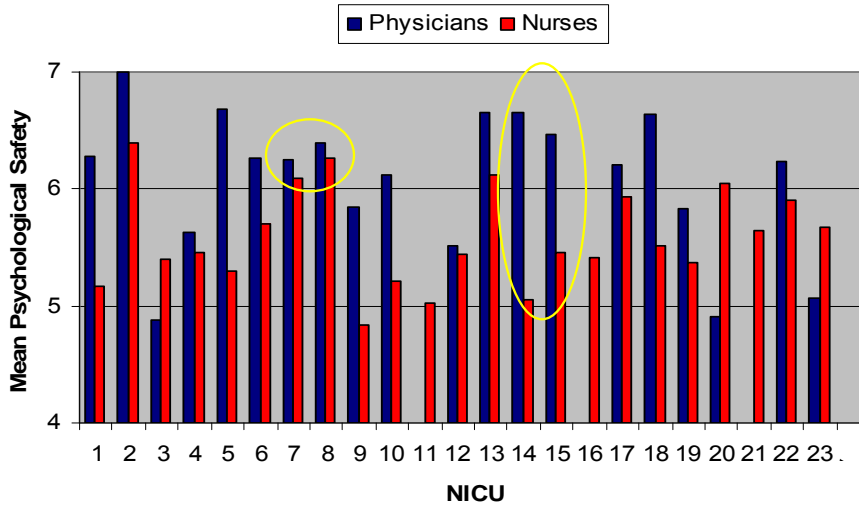
3. Psychological Safety in HCOs

Role-based Status explains differences in self-reported Psychological Safety

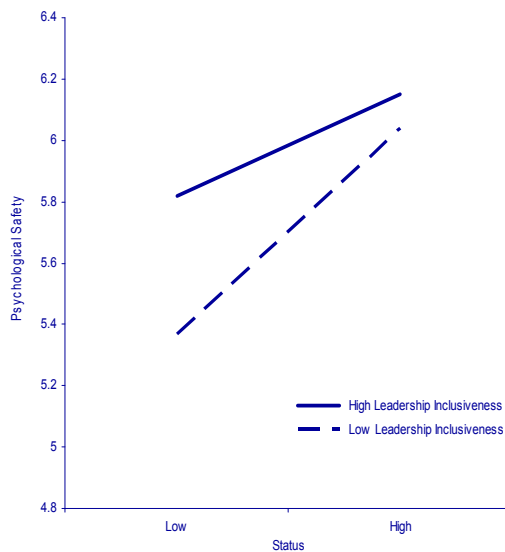
Status and Psychological Safety in the ICU



3. Effect of status differences varies by unit



4. Explaining the differences: Leader behavior



□ Psychological safety depends on leaders' (inclusive) behavior:

- Accessibility
- Input-seeking
- Appreciation of others' input
- Admission of own fallibility

Inclusive leaders lower the psychological costs of voice and raise the psychological costs of silence

4. Leadership that facilitates

- The role of leaders: Help employees take the focus off of *self* and onto a compelling *collective* purpose (e.g. reducing HAIs)
 - Taking action to balance the asymmetry
 - Increase rewards of voice: personal recognition, attentive listening, positive responses, share in gains
 - Decrease risks: surface and dispel myths, surface and challenge whether implicit theories apply locally, train managers to respond productively
 - Facilitate staff accomplishment: provided necessary resources and information, remove institutional barriers, provide education
 - Increase costs of silence: through targeted, genuine inquiry, through not promoting people who don't speak up

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4. It all starts with leadership



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5. Measure and Reward

- ▣ Key principle: Rewards should reflect the nature of the work
- ▣ For example: For work with high task interdependence, increasingly common



Group-level incentives

Individual level incentives for independent components

Hybrid incentives

- group incentives for individual work
- individual incentives for group work

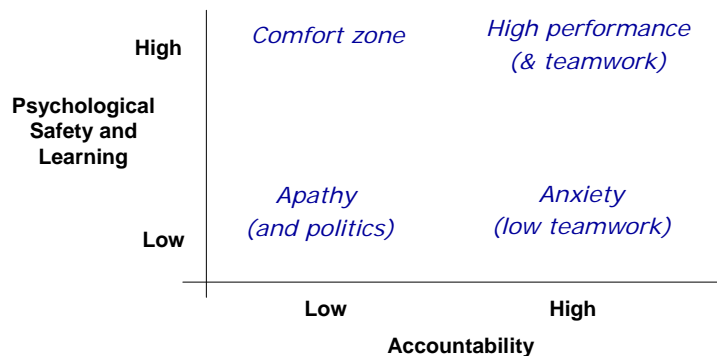
5. Measure and Reward

Framework for a "Score Card" (Pronovost et al. 2006)

Domain	Definition	Example
How often do we harm patients?	Measures of HAIs using standardized definitions and measurement techniques	Catheter-associated blood stream infections
How often do we provide interventions that patients should receive?	Measure the percent of patients that receive evidence-based interventions using validated measures or validated methodology to develop measures	Percent of mechanically ventilated patients receiving elevation of head-of-bed and prophylaxis for peptic ulcers and DVT
How do we know we learned from defects?	What percent of months does each patient care area learn from mistakes	Percent of months in which at least 1 sentinel event was reviewed, policy was created, staff made aware
How well have we created a culture of safety?	Annual assessment of safety culture at the unit level	Percent of patient care areas in which 80% of staff report positive safety and teamwork climate

Learning at the Expense of Accountability?

Consider what it's like to work in each quadrant:



Learning at the Expense of Accountability?

- Leaders must achieve a delicate balance between stimulating learning and maintaining accountability
 - You can't simply choose to stress learning or accountability; organizations need both
 - However, balancing the tension between two is difficult
 - Managing the tension requires close attention to critical managerial processes
 - Performance management system
 - Budgeting process
 - Monitoring and control process
 - Hiring process
 - Management development programs

Conclusion:

Organizational Strategies for Success w/ HAIs

1. Leadership that facilitates
2. Frame as a learning challenge
3. Create learning opportunities
4. Involve frontline staff
5. Measure and reward effort

Question for researchers: What does each of these look like in the context of improvement of HAIs?

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Thank you!

Selected References

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