

Case Study: Healthcare

CLIENT PROFILE:

Healthcare Center

INDUSTRY:

Healthcare: Facilities

LOCATION:

Northern California

TEAM TYPE:

Nursing Leadership

TEAM SIZE:

14

SITUATION:

- One third of team members were new to their roles, and everyone was learning how to lead in the new organization.
- > Silos and lack of understanding existed among the team's departments that impeded the desired level of coordinated patient care and organizational cohesiveness/collaboration.
- Constant firefighting prevented team from developing stronger and more effective relationships.
- Lack of trust resulted in ineffective communication and inability to raise important issues.

Business Improvements

★ +21% Productivity★ +23% Positivity

SYNOPSIS:

Many members of this leadership team had stepped into their new roles five months prior to the team development program. In addition, new hospital leadership had emerged, many broad-reaching organizational changes had occurred and the team needed to prepare for multiple regulatory surveys. As a result, there had not been time to focus on their development as a team.

The team was excited about improving their trust, understanding and communication with each other. Most importantly, they wanted to break down the silos among their departments, in order to fully work together as one collaborative nursing body to best serve their patients.

Using the Team Diagnostic™, the team's strengths and challenges were revealed. Through the process of team coaching, the team shifted from individual silos to a unified front with team members who now seek out opportunities to collaborate with and support each other.

The great work and collaboration by this team positively impacted all of the other hospital department managers. The entire hospital received one of the best scores they have ever received from a Joint Commission survey — the Joint Commission National Quality Gold Seal Approval for Safe and Quality Patient Care.





Team Coaching INTERNATIONAL** GoalsInSight Connecting Team & Leadership Excellence

APPROACH:

- > The program lasted six months.
- > Pre- and post-measure was the Team Diagnostic™ 14 Productivity and Positivity factors.
- > Baseline results were reviewed during the retreat, followed by four monthly team coaching sessions for additional insight, alignment and accountability.
- Team coaching sessions focused on building collaborative relationships and trust, breaking down silos and implementing team agreements.
- > Business metrics impacted: successful passing of hospital-wide regulatory surveys.

RESULTS THE TEAM REPORTED:

- > We've become great communicators.
- We have grown as a team of new leaders and have garnered the trust and respect of our peers.
- > There is a strong sense of collaboration and teamwork. There has been an increase in open communication and a willingness to help each other, regardless of work load.
- > We are more trusting of one another and easily come together to brainstorm solutions for the good of the organization. Barriers have been lifted.
- > This team has truly come together as one.

QUALITY RESULTS FROM THE JOINT COMMISSION (TJC):

- > 96% compliance rate for meeting or exceeding over 275 standards resulting in "best practices"
- 100% compliance with TJC's unannounced follow-up Clinical Laboratory and Point of Care Testing survey
- One of the top 33% to achieve TJC's 2012 Top Performers on Key Quality Measures

PATIENT SAFETY RESULTS:

- > "A" Hospital Safety Score by the Leapfrog Group
- Significantly reduced two or more hospital acquired infections for a full year; achieved Patient Safety First Top Performer rating from the Hospital Quality Institute

For more information on achieving an *average 20% improvement* in Productivity & Positivity conditions using the Team Diagnostic™ please contact:

Highlights

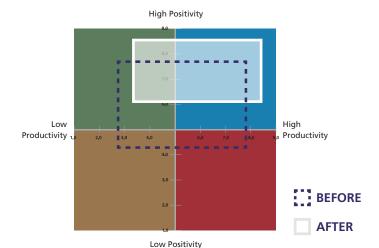
+21% Productivity

Team Leadership +27% Goals & Strategies +22%

+23% Positivity

Trust +28%
Communication +26%

Benchmarks



Trust 9

Respect
9

Camaraderie

Resources

Communication

Accountability

Optimism

BEFORE

After

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