

CASE STUDY

Creating a Team-Based Culture in the OR (Integrating Operations, Training, and Coaching)

Pilot Program Moves Key Culture Measures and Supports COVID-19 Response

J3P Solutions:
"Teams at the Heart" Training, and Coaching

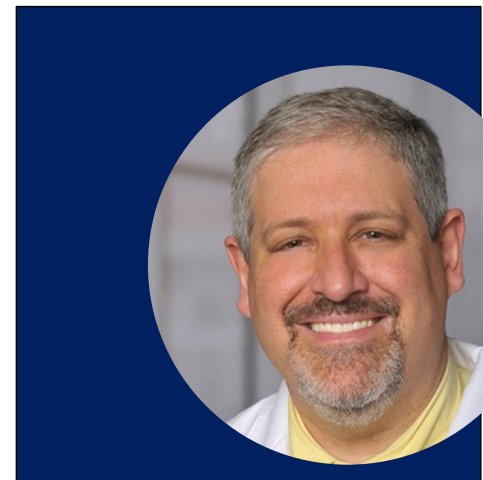


Introduction

Dr. Joel Mayerson assumed the role of Medical Director of Perioperative Services for the Ohio State University Comprehensive Cancer Center (known as "The James") in May, 2018.

The James is the one of the nation's largest Cancer Hospitals. It's medical staff and 2,000 employees see over 15,000 inpatients and 400,000 outpatients, each year, treating some of the most complex, challenging cancers.

The Operating Rooms at the James handle over 12,000 surgeries each year. Dr. Mayerson and his team coordinate the work of nurses, OR techs, anesthesiologists, and surgeons from a variety of sub-specialties. It is, to say the least, a complicated work environment filled with pressure, sometimes challenging interprofessional relationships, and a constant focus on patient safety.



Joel Mayerson, M.D.,
Chief, Orthopaedic Oncology
Medical Director, Perioperative Services
Ohio State University Comprehensive Cancer Center

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A New Leadership Team

About the same time that Dr. Mayerson assumed his new role, the department came under the leadership of a new Surgical Service Line Administrator, Alice Krumm, MS,RN,CNOR,NEA-BC. Shannon Thompson, RN, MS, RN, CNOR, NEA-BC, the Nursing Director of the OR, joined these two shortly thereafter.

This newly formed trio took on the task of re-organizing the department, including establishing a new manager/supervisor-level team of RNs and surgical techs. The new managers were working hard to gel but were getting frustrated. Mayerson, Thompson and Krumm recognized the challenges created by the changes, and saw an opportunity to start building a culture of collaboration and teamwork.

Give Leaders the Skills They Need to Be Successful

The Vision

The James has a special mission. It asks a lot of its staff and physicians. The work can be rewarding, but stressful. The leadership team feared that if they didn't create a positive work culture it would be hard to attract and retain the best staff.

A lack of effective communication and teamwork sometimes hampered the group's efforts. Like many organizations, there was concern about staff emotional wellness and burnout. Dr. Mayerson also wanted to create a positive and productive work environment for physicians.

Dr. Mayerson has significant leadership experience - Section Chief, and President of state and national professional societies. He's taken a pro-active, and on-going approach to developing his leadership skills. He has worked with an executive coach, and completed two Ohio State University College of Medicine Faculty Leadership Development Programs. Understanding the impact of his own work in the areas of self-awareness, leadership, teamwork, and communication, Dr. Mayerson saw wanted to give this team the support they needed to grow and succeed.

Program Goals

In collaboration with **J3P Healthcare Solutions**, Dr. Mayerson and his team designed and deployed a pilot program of training and coaching for a group of twelve. With a small investment of resources and time, the team was not only able to implement significant changes, and improve the department's culture -but were much better prepared to manage the unforeseen crisis of COVID-19.

The leadership team had several goals:

- Ensure team members know that **leadership appreciates the challenges.**
- Demonstrate to physicians and staff, that **they are valued, by investing in their success.**
- **Create an outstanding culture** - built around a unique mission.
- Give leaders **the skills they need** to be successful.
- **Create a rewarding professional experience** for everyone -from physicians to front line staff.
- Improve **provider and staff wellness** by reducing frustration, and keeping them focused on the quality and impact of their work.
- Ultimately, **support all of the metrics that matter** – patient safety, the patient experience, staff retention and engagement, and physician engagement.

A Unique Approach- INTEGRATING Training INTO the Work

Healthcare, as an industry, has a history of failing to invest in the concept of “team.” We often deploy strategic and operational solutions without accounting for the “people” component of improvement.

Frequently, “training” on team and communication skills, is cursory. Not surprisingly, the training rarely changes how leaders lead, or how teams functions.

To be effective, training people to lead, to manage, and to function as a team cannot be something that is done IN ADDITION to the operational work. It needs to be very much, PART of the work. Using a sports analogy, a great football coach does not use practice time to work on skills and techniques, and then have separate teaching sessions about how to function as a team. The work is integrated.

The strategy or operational solutions are not usually the barrier. The challenge is, more often, getting THIS group of individuals to implement and deploy the solutions, successfully.

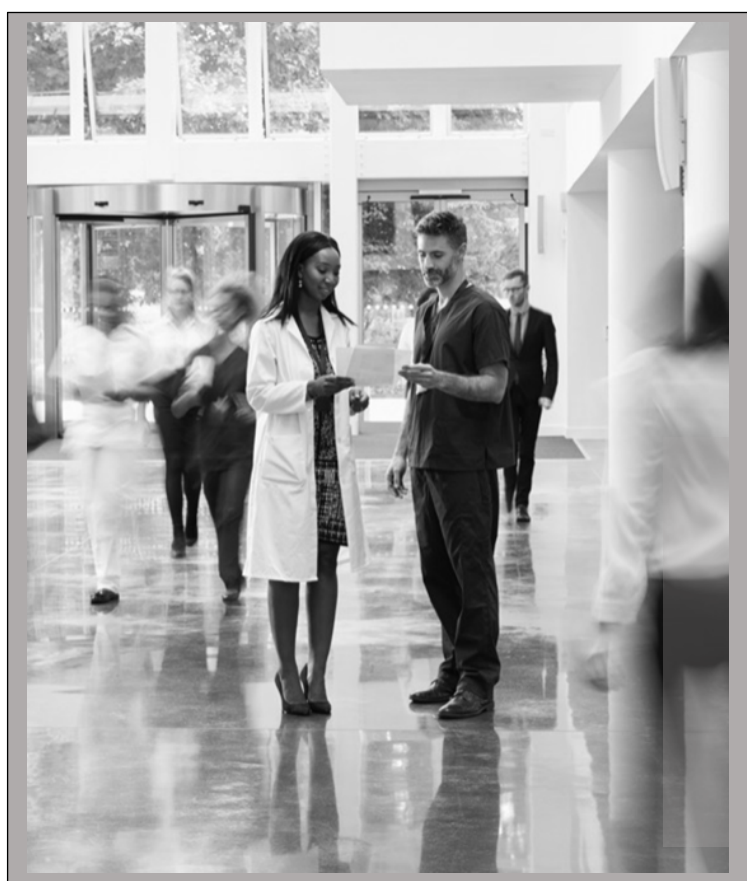
In a relatively short period of time, Dr. Mayerson’s team made significant strides. How much work was involved? Two planning telephone calls, one four-hour intensive workshop, one two-hour training session, and six group coaching calls.

Step 1: Engage the Team in Understanding and Framing the Challenges

This was a facilitated discussion where the group was able to express their goals and frustrations, and explore and understand the barriers to success. This starts by listing the specific operational issues that need to be addressed and then understanding which are within the group’s control.

Then the group, in an open and productive discussion, explored the culture/team/behavior issues that impede progress. The group identified:

- Effective messaging and communication
- Building trust
- Role clarity
- Change resistance
- Creating a sense of accountability
- Communication/relationships
- Conflict management
- Creating a sense of “team”
- Lack of experience developing people
- Delegation skills



Step 2 - A Plan for Operational and Process Issues

The group took responsibility for understanding and addressing the operational and process issues that were within their control. Structures and plans were put in place for each.

Step 3 -Interactive Training – “Team Learning”

Each participant completed the ***J3P Healthcare Professional Success Guide Assessment*** to better understand his or her usual tendencies, motivators and potential derailers under stress. This created enhanced self-awareness that allows improved problem-solving, and team communication.

The training used simulations and real situations that arise in the department. It explored topics including, delegation skills, culture, leadership, the psychology of teams, communication, and change management.

The value of the group work is three-fold:

1. The information, itself – Understanding the basic concepts.
2. Application of the concepts to resolving real operational issues; and
3. “Team-learning” – Which allows the group to practice improved communication and psychological safety, and creates cohesion and team cognition.

The approach forces team members to work through real operational challenges, applying their own, enhanced, self-awareness, and training. Better team skills are modeled, and discussed.

Step 4 - Coaching

The group worked with a specially trained coach who understands operations, and individual, and group, behavioral science. The coach was involved in the entire project so she understood the specific department, group, and individual challenges and dynamics.

After just a few calls, team members learned how to apply the concepts and to effectively work together to resolve issues.

The leadership trio of Mayerson, Thompson and Krumm participated in several group-coaching calls to go through the same process. They learned how to work effectively together, and to solve problems collaboratively.

The coaching work substantially shortens the learning curve for a new group of leaders or managers. Each individual improves his or her own leadership and team skills, and becomes adept at supporting colleagues. It’s a minor investment considering the potential impact of these teams.

Jena Jake, M.A.,
 Vice President, Consulting Programs
 J3P Healthcare Solutions



According to Jena Jake, J3P’s Vice President of Coaching Programs,

“In this case, we were able to give managers, in a scaled-down coaching model, valuable insight into their own tendencies strengths, and challenges. Then we worked with small groups to resolve operational issues that had a group dynamic component.

They’d never had this type of support and quickly learned how to use their new skills to solve problems, and to support their colleagues. Many said it was the first time they’d ever had substantial support in developing and deploying these skills and it changed the way they approach their work.”

Results – Improvements in Key Culture and Communication Skills

The most immediate anecdotal evidence has been the team’s response to the recent COVID-19 pandemic. The leadership team firmly believes that this work, and the cohesion and culture of teamwork that it engendered, was evident in their response to the crisis.

According to Dr. Mayerson, *“ Our perioperative leadership team better understood the strengths of our entire new team through this process. The additional information allowed us to more effectively focus efforts where needed and let our staff operationalize what they had learned into our COVID 19 response.”*

Pilot program participants report significant improvements in their ability to lead, and manage, effectively. **The post-program survey revealed that in each of the following categories, between 80-100% of participants report substantially positive improvements:**

- Effective team communication**
- Team Cohesion**
- Trust among the team**
- Effectively dealing with staffing challenges**

- Building effective teams**
- Conflict resolution**
- Change management**
- Managing people and delegation skills**
- Working collaboratively with physicians**

"I have an improved relationship with the entire staff. The department has been better able to deal with staffing challenges, because of the improved leadership abilities of the team."

One of the survey comments is, particularly, relevant given the challenges raised by COVID-19,

Bryan Warren, President of J3P, Shannon Thompson, Nursing Director, Alan Friedman, J3P CEO, Alice Krumm, Surgical Service Line Administrator, and Dr. Joel Mayerson, Perioperative Medical Director



Expanding the Program

The approach is unique, cost-effective, and impactful on an individual and group level. According to Nursing Director Thompson, *"I've been through a lot of leadership training but nothing like this."*

Plans are in place to expand this approach to more of the perioperative team. The pilot project results support the idea, which would seem to be intuitive – that investing in your team, done the right way, impacts performance, and will improve workforce metrics including retention, career satisfaction, engagement, and emotional wellness.

Other industries, the military, and progressive companies like Google, focus intently on building effective teams because they understand the ROI. The same approach can work in healthcare if it is deployed in a manner that respects the challenges – including understanding the unique needs of physicians.

This work does not need to be overly burdensome. ***To be effective, though, it MUST be, practical, interactive, built on enhanced self-awareness and communication skills, and INTEGRATED into the day-to-day work of the team.*** Our experience has been that leaders, managers, front line staff, and physicians want to succeed, and want the tools to help them to succeed.

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