

Engaging Clinical Leaders Through Education & Coaching to Improve Professional Practice

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 Kimberly McNally, MN, RN
 McNally & Associates www.mcnally-associ.com
 Ruth Hansten, RN, PhD, FACHE
 Hansten Healthcare PLLC www.hansten.com

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Today's Session

- Business Case... Link to Strategic Agenda
- Relationship & Results-Oriented Philosophy, Principles and Methods
- Organizational Case Studies – Education & Coaching; design, roll-out, sample content & tools
- Results Achieved
- Lessons Learned & Recommendations

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Organizational Case Studies

- Multicare Health System
Driver → Renew care delivery & develop leaders
- Marion General Hospital
Driver → Low Press Ganey scores
- St. Joseph's Mercy Health System
Driver → Design care delivery & build coaching skills
- Harrison Medical Center
Driver → New CEO/CNO "Good to Great"

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Professional Practice

- What is professional practice?
- I am experiencing the following challenges developing & improving professional practice in my organization...



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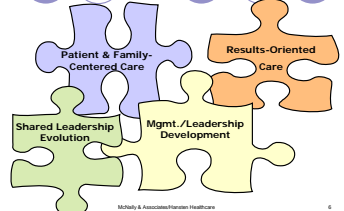
Desired Long Term Results



- Patients are safe, satisfied with care, planned clinical outcomes are achieved
- Patient care providers are satisfied and engaged with their jobs
- Patients receive timely, appropriate, seamless, individualized care across the continuum


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Pieces of Puzzle




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Building Competence in Professional Practice



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What Supports Professional Practice?




- Critical Thinking & Problem Solving: EBP
- Coaching/Mentoring
- Focus on "Back to the Basics" at Bedside
- Leadership Modeling & Measurement
- Emotional Intelligence
- Teamwork & Communication

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Critical Thinking Skills

- Interpretation
- Analysis
- Evaluation
- Inference
- Explanation
- Reflection
- Dispositions



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Dispositions of critical thinking compared to Behavioral & Professional Competencies



- Active
- Knowledgeable about biases, limitations
- Fair minded
- Persistent
- Good communicators
- Open-minded
- Uses rules of logic
- Realistic
- Committed to excellence

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Critical Thinking

Rosalinda Alfaro-LeFevre



- Empathetic
- Independent thinkers
- Curious and insightful
- Humble
- Honest
- Creative
- Proactive
- Organized and systematic
- Flexible
- Team players

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Process for Promoting Professional Practice

Semantic Memory

- Concepts
- Theories or models
- Knowledge

Productive Memory: Basis of Critical Thinking

Episodic Memory

- Personal Experiences
- Increases with number

Whiteside, 1997, DCCN

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Relationship & Results-Oriented Health Care – Back to the Basics




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Relationship & Results-Oriented Healthcare

- Overarching philosophy & method of delivering care that combines patient and family-centered, outcomes-focused communication with high impact team practices to create optimal health.
- When healthcare team members understand the results patients want, they operate from a **common purpose** to create a **shared picture** of success and an effective **interdisciplinary care plan** which clearly outlines the **critical part (role)** of each member of the team.

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Foundation: The 4 P's




- Purpose
- Picture
- Part
- Plan

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The 4Ps in My Life

- Why did I decide to pursue a career in nursing/ education? **Purpose**
- What does successful practice look like? **Picture**
- What can I do differently to get there? Do I know the plan for each day? **Plan**
- What **Part** do I, and others play?



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Three Key Elements


1. Fundamental Relationship with Professional & Patient/Family
2. Critical Thinking & Problem Solving: Emotional Intelligence
3. Transdisciplinary Teamwork: delegation & supervision, accountability



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Brilliant at the Basics - Bedside

1. Make assignments Based on 4Ps
2. Shift Report
3. Plan with Team & Give Initial Direction
4. Initial Rounds
5. Focused Interview at Eye Level
6. Communicate Plan & Patient's 4Ps
7. Interdisciplinary Rounds
8. Checkpoints
9. Feedback & Celebration
10. Plan assignments & Give report based On 4Ps



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Focused Patient Interview



Essential steps:

- Preparation
- Introduction
- Body language
- Touch
- Outcomes-Focus
- Communicate the plan

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At eye level



- Trust
- Respect
- Dignity
- Focus
- Communication
- Relationships
- Results

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Relationship & Results-Oriented Care (RROHC)

Sequence	The Activity or Process	Essential Elements	Rate my Current practice (1 to 10 (Best))	Rate my practice in one week (1-10 Date)
1. Assessments	Critical Thinking and Problem Solving	RNs, Delegate and Supervise, participate/provide (learning level)		
2. Beginning of Shift	Shift Report	Use a 4-6 Object and tag assignments and the big picture of what patient's needs are and the past Time: one minute per patient (goal)		
3. Plan for patient care with team members	Make a Plan for the Day or Care or Assignment	Base the plan on patient/family outcomes Delegate appropriately Set up times for drinks, lunch, (theophylline, paracetamol, antibiotics, for example)		
4. As soon as possible after report	Introductory Rounds	Debrief appropriately Include self clearly with role (quick assessment/feedback)		
5. Either during initial rounds (if possible) OR early in shift	3-5 Minute Focused Interview (day/evening)	Plan in partnership with family or patient, determine new priorities (if need or results patient/family want)		

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Organizational Readiness

ORGANIZATIONAL ACCOUNTABILITY FOR DEVELOPING RROHC SKILLS

ORGANIZATION: Which of the following is true?
If you always do what you did, you're always just what you are! -William

	Low (1)	Med (2)	High (3)	Group Total
1. Our organizational culture encourages empowerment at all levels.				
2. Rapid action on problems is evident.				
3. Our organization measures and celebrates results.				
4. Critical thinking skills and attitudes and positive relationships are exhibited by managerial levels.				
5. On-site coaching and/or mentoring occurs.				
6. Education uses stories, case studies, experiential learning, and guided problem solving.				

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Organizational Readiness


	Low (1)	Med (2)	High (3)	Group Total
7. The organization uses shared step-by-step processes for problem solving or quality improvement.				
8. Preceptors and other mentors or coaches are used for orientation, cross-training, and development activities.				
9. The organization fosters reflection and professional growth.				
10. Interdisciplinary teams work together with open communication to learning & problem solving occurs across disciplines.				
11. Positive, participative management and staff relationships exist.				
12. Mistakes are seen as a chance to grow and learn rather than dwelling on punitive.				
13. Questions, new ideas, and risk-taking are supported.				
14. The values and vision for our organization and for each department are clear.				

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Practice Outcome Measures

What will you measure?

- On-line self-assessment
- Clinical indicators
- On-site assessment
- Link to patient, physician & employee satisfaction



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Evaluation of Practice

RNs discussing patient outcomes for this shift, and long term plans, with the oncoming shift during report. (attend report and note the number of RNs who are describing patient information in terms of short and long term goals)

Staff members introduce themselves at the beginning of the shift, using their names and roles, ask patients early in the shift, or observe teams making introductory rounds and record percentage of those making introductions.

RNs are supervising assistive personnel by giving initial direction, periodic follow-up and evaluation, and giving feedback regarding problems. (interview members of the team and record how many describe the RNs as giving direction and following up on task completion and provide feedback)

RNs are satisfied with the performance of the assistive team members. (interview RNs and record the percentage of positive responses)

Team meetings and checkpoints are planned throughout the shift. (note which teams report having scheduled meetings throughout the shift to review the plan of work)

RNs sit at the bedside of patients and partner with them to determine the projected goals or outcomes for the shift. (interview all RNs on shift for an accounting of the completion of this action)

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Evaluation of Practice

RNs are discussing outcomes with all members of the health care team. (interview therapists, physicians, other team members)

Physicians state they have had discussions of their plans of care with the nurses and patients. (Ask MDs, to reinforce this behavior with them)

Staff are satisfied with the care they are giving this shift. (interview all team members on this shift and ask them to rate their satisfaction)

Patients and/or their families are clear on the planned outcomes (goals, priorities) for each shift and for the hospitalization. (interview at least 5 patients/families to determine their knowledge of the planned goals for the day)

Patients are satisfied with the care they are receiving this shift. (interview at least 5 patients/families and ask them how well they are pleased with the care. Ask "what else could we do?")

Patients are prepared for discharge. (interview at least 3 patients/families being discharged this shift and ask them if they feel prepared to resume their care at home based on instructions received from the health care team.)

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Sample Organizational Results

- RN Retention - 52% improvement
- Improvement in Press Ganey - 18 - 98%
- Gallup: Top Five Most Improved Employee Engagement
- Improved Clinical Outcomes

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What Does it Take?

- Education
- Coaching
- Leadership

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Framework for Building Competency

Relationship & Results Oriented Healthcare
CERTIFICATION PROGRAM

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Educational Programming – Assessment & Design

- Comprehensive on-site assessment
- Practical, skill-based approach to organizing the shift/episode of care
- Customized case studies
- RN and ancillary education sessions conducted
- Professional Practice Committee

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Sample Education Program

Purpose, Picture

- 4 Ps (Purpose, Picture, Plan, Part)
- Critical thinking, clinical judgment, and emotional intelligence
- Research and NPSF, JCAHO, IOM

Plan, Part

- Delegation, supervision, and accountability
- Five Rights of Collaborative Teamwork: Practice Feedback
- Outcomes Based Shift Report and Assignments
- Focused Listening and Healing Moments
- Introduction to Coaching

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The Challenge

- How to ensure sustainability of the model?
- How to maximize the training investment?
- How to avoid “flavor of the month”?
- How to develop and support new managers?

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Coaching is the Solution

Coaching is a **meaningful conversation** that inspires a person or team to see **new possibilities and take new actions.**

Awareness & Action

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Coaching

“Leaders need to balance learning – which by definition means becoming vulnerable – with managing their image as leaders. One good way to do this is to work with an executive coach, a relationship in which it is safe to explore ... and to talk more freely than they may have done with anyone, ever, about their dreams and business challenges.”

-Daniel Goleman

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Coaching Delivery

- 1:1 Coaching
- Group Coaching
- Peer Coaching

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What is Coaching?

- Coaching is based on an agreement (implicit or explicit) to be in a coaching relationship
- A coach does not have “the answer”; a coach helps someone find an answer
- Coaching is a commitment-driven conversation that:
 - Produces new possibilities
 - Results in the enhanced performance of individuals and teams
 - Generates collaborative partnerships

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What is Coaching?

- A coach
 - Shares your commitments
 - Can often see what you can't or won't see
 - Can help you leverage your commitment in a way you can't on your own
- Coaching is always based on an explicit commitment or stand; otherwise it's just "advice"
 - Coaching looks at where actions are or aren't consistent with the individual's or organization's stand

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Coaching Skills

- Presence
- Deep Listening
- Powerful Questions
- Truthful feedback
- Powerful Requests



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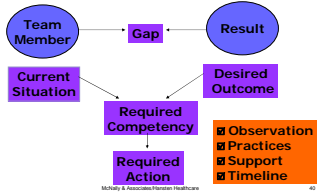
Coaches

Coaches provide

- Dialogue to stimulate new perspectives
- Encouragement & accountability
- Practices to adopt effective habits
- Resources to deepen learning
- "Just-in-time" support

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Coaching Path



- Observation
- Practices
- Support
- Timeline

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Building Self-Awareness

- Know **fundamental values**
- Acknowledge **blind spots** & "hot buttons"
- **Question decisions** & commit to reflection . . . values, priorities & purpose
- **Accept self** for who and what you are
- Face the future with resolution & **clear sense of purpose and direction**

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Understanding Team Member

- Immediate concerns
- Possibilities
- Aspirations
- Beliefs
- History
- Background
- Foreground



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Developing New Practices

- New Behaviors
- Habits
- Rituals
- Embodiment



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Coaching Conversation

Assessment - *Where is team member now?*

What's Possible - *Where does team member want to go?*

What's Missing - *Remove Obstacles to Success - How does team member get there?*

Action Plan - *What is team member going to do and by when?*

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Coaching


"I think a lot of coaching is aimed at trying to help people develop skills and actions that are different from what they grew up with."

-John Kotter

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1:1 Coaching

- Assessment
- Intake session
- Written program
- Coaching Conversations
- Job Shadowing
- E-mail



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Group Coaching

- Reinforce learning points
- Build Learning Community
- Hear new perspectives
- Gain accountability



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Peer Coaching

- Meet with designated peer regularly
- Practice coaching skills
- Support each other



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Impact of Coaching

- Anecdotal reports indicate success
- Manchester Study – coaching \$6:1 ROI
- Turnover at 1.5x



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Impact of Coaching

- Training vs. Training + Coaching
- Public sector municipal study - Olivero
- While training improved productivity by 22%, training plus coaching increased productivity by 88%!

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CompassPoint Evaluation

- Leadership & Management
- Personal Life
- Organization
- Job Satisfaction
- Attitudes & Beliefs
- Tenure & Turnover

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CompassPoint Evaluation

- 24 Executive Directors received leadership coaching
- Harder & Company conducted project evaluation – mixed methods
- High level of satisfaction & impact – six main areas

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Multicare Coaching Program

- 12 directors/managers coached by external coach
- Second and third cohorts (54 leaders) coached by internal and external professional coach in partnership
- Group sessions co-facilitated
- Customization for service line needs

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Structure & Format

- Outcomes-based & time-limited
- Intake & customized program
- Face-to-face & phone sessions
- Exercises & practices b/w sessions
- Strict confidentiality guidelines

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Coaching Program Delivery

- ½ day orientation
- Customized intake assessment
- 1:1 sessions 1-2 times/month for 6 months
- 2 hr. monthly group sessions for 6 months
- 64 clinical leaders received coaching

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Assessment

- Self-Assessment
- Enneagram
- Values Exercise
- 360-degree feedback
- Domains of Life
- Other Instruments

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Sample Coaching Program

PURPOSE

- You want to increase your competence in coaching your staff. You want to increase your capacity to work with the medical director. You want to establish a regular exercise program.

OUTCOMES

- You will feel more competent in using a coaching style with your staff as they develop their professional practice.
- You will feel more confident in working with the medical director, as measured by self-assessment.
- You will develop an exercise habit and sustain it over the long term evidenced by an improved level of fitness and energy.

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Sample Coaching Program

PURPOSE

- You want to be more effective in building relationships at work to help you lead your team, manage performance and work with colleagues across the system. You want to make a decision about returning to school.

OUTCOMES

- You will increase your emotional intelligence, as measured by your self-assessment and feedback from others.
- You will make a decision about school and have a plan for the enrollment process.

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Sample Coaching Program

PURPOSE

- You want to build a stronger leadership presence and political acumen to position yourself for promotion. You want to understand the role of self-judgment in your life. You want to improve your organizational and delegation skills so that you can concentrate on improving professional practice.

OUTCOMES

- You will be more effective and feel more confident relating to others at work.
- You will become more skillful in working with self-judgments.
- You will develop stronger organizational and delegation skills.

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Sample Group Coaching Agenda

AGENDA

1. Reflection
2. Check-in
3. 360 Feedback Update
4. PPM Discussion – Questions for Discussion

- What opportunities have you taken to demonstrate your commitment towards the PPM?
- What is the gap between where you are and where you want to be?
- How would you assess the impact you are having on your team?
- What do you want to learn as a result of the PPM implementation?

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Anecdotal Leader Feedback

- "Continue to encourage me and ask me the tough questions, like what is success and what is failure. I then use these conversations we have to reflect on my work and the work of our department. We have also been discussing the implementation of the PPM, and how we can make that a part of our culture."
- "I have been keeping a personal diary that I write in during my evenings. I am beginning to see a pattern of certain people or incidents that routinely push my buttons. I am using the new approach I learned regarding placing more emphasis on the fence sitters vs. the "hell no I won't go" group."
- "I'm able to ask for what I want and have difficult conversations."
- "Coaching has given me courage...to advocate for my staff...to ask for better performance at the bedside...to negotiate with physicians. I think I can actually do this job now!"

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Anecdotal Leader Feedback

- "I have discovered that the staff wants feedback and they want to see follow through on the issues that they bring to the attention of management. I am working on becoming a leader that can work through the issues with the staff and not just the one to give direction."
- "Besides putting into action several ideas that came out of our group and individual discussions, it has had a positive affect on how I view problems and my interactions with others. It has taught me to set boundaries and let staff know what I can and can't do. I can now say no without guilt. I have learned that I have difficulty with conflict and am looking at ways to help me handle conflict more effectively. It has changed how I present problems to the staff and solicit their input, which has been very positive."
- "I just wanted to say that I have worked at my current facility for 20 years and have never felt so positive and supported before."

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Outcomes Realized

- Survey of participants showed:
 - Majority stated coaching experience met & frequently exceeded expectations
 - 100% stated they were more competent and confident as leaders
 - Perceived more value from 1:1 vs. group coaching
- More than 50% stated they were more likely to stay in their current position
- Four expressed they would have quit but chose to stay in position directly attributing the coaching experience

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Cost of Turnover

Assumption: Average director salary at \$90,000

- "Finders" fee \$30,000
- 6 months to fill position \$45,000
- Achieve competency \$90,000

\$165,000/position
x 4 = \$660,000 savings


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Outcomes Realized

- Provided personalized, safe environment for learning how to manage change
- Strengthened self confidence
- Helped individuals internalize elements of reflective practice as a key leadership competency
- Increased awareness of support within organization
- Increased personal well being
- Provided foundation for developing a coaching culture within organization

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Peer Coaches – Marion General



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Peer Coaches – Marion General

- Linked clinical behaviors to customer service
- Coaching Day – reviewed assignments, looked for 4P's, observed team meetings, coached focused interviews
- Conducted audits



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Sample Coaching Questions to Develop Professional Practice

- Tell me what you're thinking when you . . . " (assess pattern of thinking)
- What do you find hard about. . . ?
- What first steps do you see?
- What's missing. . . ?
- What would make this an effective shift for you?
- What would happen if you did nothing?
- How will you know you've reached your goal?
- What action would be a stretch for you?
- How do you think yesterday went? (assess disconnect)
 - What I thought was . . . here's what you could do differently next time . . .

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Peer Coaches – St. Joseph's

Remarkable Patient Experience by an Engaged Health Care Team



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Peer Coaches – St. Joseph's

- Understand the purpose and benefits of a coaching approach.
- Increase awareness about personal strengths & developmental areas as a coach.
- Learn the steps in the coaching process & the flow of coaching conversations.
- Discuss competencies & interpersonal qualities required to coach others.

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Peer Coaches – St. Joseph's

- Review principles of adult learning and novice-to-expert continuum.
- Discuss a framework for building commitment.
- Identify opportunities for enrolling others in coaching.
- Learn fundamental coaching skills: deep listening, asking powerful questions, giving truthful feedback, making requests.
- Practice coaching skills using a variety of scenarios.

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Sample Coaching Practice

You are a nurse educator. Maggie is a new graduate on your unit. Her preceptor Karen stops you after report wanting to talk. Yesterday, she was working with Maggie on how to set up and monitor various infusion devices. Although Maggie appeared to follow Karen's demonstration, she "froze" when setting up the device on a patient. When Karen suggested Maggie work with this patient again today, she pleaded with her to give her a different assignment. Karen is frustrated because she wants to get this item checked off the skills list so you they can move on to something else.

At break, the charge nurse mentions to you that one of the physicians complained about Maggie's lack of preparation when calling for new orders. She was "disorganized. . . tentative. . . kept me on the phone too long." On the other hand, you overheard Maggie doing a great job debriefing the shift with a PCT and evaluating the progress of a challenging patient. She articulated the purpose of RROHC clearly and with ease.

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Sample Coaching Practice

You're scheduled to meet with the nurse coordinator Joan today to review Maggie's progress. Joan's communication style is laid back, she usually wants you to "take care" of these training issues yourself, but you're concerned and want to partner with Joan and Karen to ensure Maggie's success. You are committed to developing excellent preceptors and Karen appears receptive to feedback. You decide to pursue the coaching opening with her from this morning.

- Engage Karen in a coaching conversation.
Presence... Deep Listening... Powerful Questions... Truthful feedback... Powerful Requests
- Assessment - Where is team member now?
 - What's Possible - Where does team member want to go?
 - Remove Obstacles to Success - How does team member get there?
 - Action Plan - What is team member going to do and by when?

Coaching for Leaders - Harrison

Reflection:

- What is my commitment towards professional practice?
- Am I willing to fully engage now?
- If not, what choice am I making? What is the possible consequence?
- What do I need to say "no" to and "yes" to honor that commitment?
- How will I demonstrate my commitment?
- What can I do to take a stronger stand?
- How did I build commitment today?
- What action or conversation brought this about?
- What effect will this have on me? My unit?
- What action will I take tomorrow from what I observed today?

Recommendations

- Take a Stand
- Ensure Alignment
- Provide Targeted Education
- Establish Accountability & Responsibility
- Enroll People into a New Possibility
- Acknowledge Accomplishment & Results
- Coordinate Actions Through Coaching Conversations
- Measure...measure...measure
- "Hardwire" behaviors and expectations

Today...

- Insights & Observations
- Things to Think About
- Actions to Take

A moment's insight is sometimes worth a life's experience.
Oliver Wendell Holmes

For more information...

- "Leadership Development: External/Internal Coaching Partnership", Kimberly McNally and Rosemary Wickman, *Journal of Nursing Administration*, March 2006
- "Improving Organizational and Individual Performance through Coaching", Liz Cunningham and Kimberly McNally, *Nurse Leader*, Nov/Dec 2003
- "Preparing Tomorrow's Leaders Through Succession Planning From the Provider Perspective", Betty Noyes, Kimberly McNally, Sharon Tourville and Patti Robinson, *Seminars for Nurse Managers*, December 2002
- "Relationship & Results Oriented Healthcare: Evaluate the Basics", Ruth Hansten, *Journal of Nursing Administration*, December 2005.
- "Relationship and Results", Ruth Hansten, *Healthcare Executive*, July/August 2005.
- *Clinical Delegation Skills: A Handbook for Professional Practice, 3rd Edition, 2004*. Ruth Hansten and Marilyn Jackson, Jones and Bartlett.

Contact us

Kimberly McNally
kamcnally@att.net
www.mcnally-assoc.com

Ruth Hansten
ruth@hansten.com
www.hansten.com or www.rrohc.com