

# Trends in Medicine

## Four Strategies Health Care Leaders Can Use to Improve Safety and Quality in Their Organizations

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Health care leaders today face more challenges on the job than ever before—from staffing and supply shortages to tighter budgets and tougher regulations, along with increased demand on an already overburdened medical system. This makes it essential that doctors, nurses, administrative leaders, policy makers, researchers and other industry professionals have strong and effective skill sets to draw on to navigate the roadblocks they face every day, according to Katherine Santos, MBA, chief strategy officer of Legacy Lifecare. Santos also serves as the lead program director for Harvard Medical School's Safety, Quality, Informatics and Leadership Program, a one-year Postgraduate Medical Education certificate program designed to equip leaders with the tools and knowledge they need to implement meaningful change in their organizations.

### Taking a Comprehensive Approach to Creating Change

Santos points out that the most successful health care professionals share some common strategies they practice regularly as part of their commitment to integrate safety and quality into their organizations' efforts. Here are four approaches that can lead to improved performance and outcomes on many levels:

#### 1. Engage patients and families in your quality improvement work to achieve better outcomes.

Many health care leaders recognize that the people they serve should be at the center of all their efforts, Santos stresses. That's why having a patient and family advisory group or council in place is an effective way to allow people to weigh in on a variety of timely issues. Advisory groups provide insights into where health care processes and communications can be improved. In many settings, they have been essential in redesigning new spaces, creating patient education materials, and training new staff.

"It's important to make sure that the patients and families who participate in your advisory groups represent your patient population and are committed to helping you improve your system," Santos says.

In addition to involving patients to find out their needs and preferences to guide your work, you can also ask them lots of questions to help you understand their preferred patient-reported outcome measures.

For instance, following orthopedic surgery on a knee, a patient isn't apt to measure success through clinical measures such as how far the knee bends or the extent of the swelling. "Rather, patients really care how quickly they can get back to participating in their normal activities," Santos says. By gaining a better understanding of your patients' motivations and what will improve their satisfaction levels, it will be easy to find a common language and ensure everyone is on the same page.

Another example Santos shares is the importance of involving patients in determining how best to communicate an Emergency Department's (ED) extended wait times. For example, in one health system, long wait times in the ED were a source of stress and frustration for patients who felt like their time was being disrespected. But when the hospital staff sat down and began talking to the people impacted, it quickly became clear that it wasn't the length of the wait itself that patients really were upset about. Rather, they just wanted more regular communication from the hospital staff about what to expect and how long it would take for them to be seen. Such a simple change in improving communication helped patients feel like a much more important part of the equation.

While in other parts of the world, patients and families are not as routinely solicited for input on hospital practices as they are in the United States, Santos points out that all health care organizations, regardless of where they are located, can benefit from finding new ways to include patients' and families' perspectives in their decision-making processes and efforts.

#### 2. Build a continuous learning system and test ideas in the smallest possible way to refine them before you scale them.

Highly successful leaders often look to the iterative design cycle called Plan-Do-Study-Act (PDSA). This is a simple way to plan a change, try it on a small scale, observe the results, and make any needed changes as you go along before you launch it more broadly, Santos explains.

"What is the minimum viable product that you can make as a prototype so you can go out and test it?" she asks. Once you determine the smallest place to start testing a change, you can try it with one patient to see how it works. For instance, Santos shares an example of a unit that wanted to improve its communication using a whiteboard to communicate key information with patients. But first, it was important to determine what details needed to be conveyed.

"We had to decide: What are the different sections on the board? What information should be included? Who will fill it out and when? By mocking up our first design attempt of the board on flipchart paper and testing it with one patient to get feedback, we quickly realized which information was missing and which details could be eliminated. We redid the board to incorporate those changes and tested it again with another patient," Santos says. The board was refined and tested several times on a small scale until the team was confident about the content and process to fill it out. The team then purchased customized whiteboards to implement the change more broadly on the unit.

The PDSA method also makes it easy to adapt an idea or even abandon it completely without investing a lot of time or effort. "You can test the viability of an idea quickly and easily, get feedback, and switch gears if needed," she stresses.

#### 3. Use data and evidence-based learnings to guide all of your efforts.

When making any change, Santos says that it is very important to think about how you will know that the change is an improvement. "Whenever you are experimenting with a new idea or process changes, you need to think about three types of measures in order to understand the impact of your intervention," she says.

- **Outcome Measures:** These are the high-level clinical and operational metrics that are important to an organization. They answer the question: What are you trying to achieve with your improvement? Think about how the system impacts the patient's health and well-being. Examples of outcome measures include reducing hospital-acquired infections, decreasing waits and delays, and increasing patient satisfaction.
- **Process Measures:** These measures are the specific steps in a process that lead either positively or negatively to a particular outcome metric. In quality improvement, these measures typically relate to how reliably an intervention is being followed. For instance, to reduce high hospital readmission rates, one intervention is to ensure that the patient has a scheduled follow-up appointment with their doctor before they leave the hospital. Because you may not see a change in hospital readmission rates immediately, you will want to track the percentage of patients who leave with a follow-up appointment to understand how consistent the organization is with following the new process. Santos says that the hope is that improvements in your process measures will lead to improvements in your outcome measure.
- **Balancing Measures:** With every change, there is a risk of unintended consequences. Balancing measures are used to monitor that the improvement in one area doesn't negatively impact another. For example, Santos points out that if you are making changes to the discharge process to decrease the length of stay (LOS), you will want to monitor readmission rates to ensure that you aren't pushing patients to leave before they are clinically ready for discharge.

"Only by studying the data can you determine if your change is an improvement and that your work has the full impact you intend," she says.

#### 4. Find the intersection of your personal strengths, passions, and your professional role to maximize your impact.

Ikigai is a Japanese concept that means "reason for being" and is a way for you to look at what you are doing with your life and determine if it sparks your passion and gives you joy. There are four questions in ikigai you can ask yourself periodically to make sure you are in the right job at the right time.

- Are you doing what you love?
- Are you good at what you do?
- Are you offering what the world needs from you?
- Are you being paid enough to do the work?

If you answer yes to all the questions above, you can feel confident you are living your life's purpose in your current role.

Santos stresses that this can be an important way to check yourself and make sure you are enjoying your work and getting the satisfaction from it that you desire. When you are in the right role, you are more likely to give it your all and have the most impact in the process.

"Ikigai can be used as a diagnostic tool. For instance, if you are doing something you are good at, paid to do, and the world needs, but it is not your passion, you are not living your purpose and won't be fully satisfied. Therefore, you should look for other ways you can be better fulfilled while contributing to the world," she explains. She also notes that how you feel about your career choice can change over time, so it's a good idea for leaders to revisit the questions periodically. Leaders can then be assured that they are giving and getting the most out of their jobs—contributing to their own life, as well as for the good of their organization, in the most meaningful way.

### Building Skills for Success

"Leaders who continue to build their skills in these areas, such as through Harvard Medical School's Safety, Quality, Informatics and Leadership Program, will have a strong foundation from which to grow professionally and guide their organizations to success on so many levels," Santos adds.

Written by Lisa D. Ellis.

## References

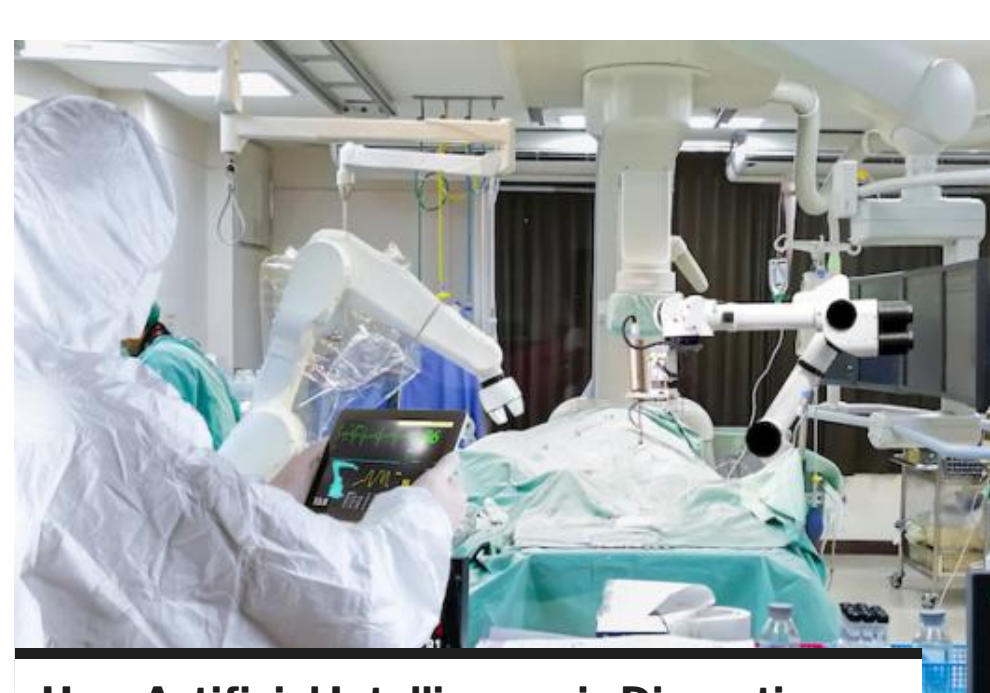
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