

---

# Organizational Culture Change Issues in Home Health Care

Dolores Viotti, RN,C, Quality Improvement Task Leader  
Pat Cheney, RN, Quality Improvement Specialist

Original material developed by Northeast Health Care Quality Foundation. This material was prepared by Healthcare Quality Strategies, Inc. (HQS), the Medicare Quality Improvement Organization for New Jersey, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The content presented do not necessarily reflect CMS policy. HCQRN-13101-06-17



## Acknowledgements

- Many concepts from – “New Ideas and New Interventions: Creating a Positive Culture”
  - By Julie Kueker, MBA, MT  
Quality Improvement (QI) Specialist  
Louisiana Health Care Review, Inc.  
Louisiana Quality Improvement Organization (QIO)



## Why Study Culture Change?

- Change is constant, based on external/internal influences (Pay for Performance, reimbursement, corporate merges, new technologies)
- To seek out new ideas
- To utilize new interventions



## Why Study Culture Change? (cont'd)

- To create improved efficient systems
- To improve client-centered care
- To create empowered, satisfied staff



## Culture Change Plans of Action (POAs)

- Systems Improvement/Organizational Culture Change (SIOC) and Interventions and Telehealth (IT) Identified Participant Groups
- Survey required to assess your status
- POA required to identify and plan to work on one area of culture improvement



## Most Commonly Identified Culture Issues for POA

- Patient-centered care
- Leadership issues
- Communication issues
- Care coordination issues
- Productivity vs. commitment to quality



## Organizational Culture

- A company's mission, goals, and values
- Culture defined as those things that influence the working environment itself and the behaviors of those who work there
- Has its own spoken and unspoken rules of conduct



## Organizational Culture (cont'd)

- The “personality” of your workplace
- The customary way of thinking and behaving
- It is *learned behavior*



## Organizational Culture (cont'd)

- It is how people behave when they think no one is looking ...



## Why Study Culture?

- Negative culture issues lead to poor performance
- Change in any organization, for any reason, is scary—most people resist stepping out of “comfort zones”
- However, change is constant and necessary, as healthcare industry changes



## Why Do I Need to Know My Culture?

- The unwritten rules that govern us can make or break you as a business entity
- The unwritten rules play directly into staff turnover and employee satisfaction
- A negative work culture can have disastrous results



## We Resist Change

- However, resistance is futile ...
- Don't wait for disaster to create change

*The Washington Post:*  
**“Report Blames Flawed NASA  
Culture for Tragedy”**



## What NASA Culture Survey Found

- NASA workers feel unappreciated
- Afraid to speak up about safety concerns
- Excellence is treasured for technical work, but not imperative for management skills



## Why Does My Company Need to Consider Culture Change?

- *Wasted time* – communication conflicts (broken trusts, personality clashes, arguments regarding priorities) take up nearly 25% of management time!
- *Wasted resources* – staff turnover



## Why Does My Company Need to Consider Culture Change? (cont'd)

- Many opt to quit their bosses, not their jobs
- We all want to like our jobs—we spend so much time and energy at our place of employment ... and it trickles down to the patient care



## How to Change? Where to Start?

- The nursing process begins with *assessment*
- Survey a diverse set of staff
- Communicate constantly
- Lead, instead of manage
- Work as a functional team
- Motivate for an inspired workforce



## Mission and Purpose

- What is your agency's vision for the future?
- Vision should inspire hope, trust, and loyalty through the organization
- Do you know your mission statement?



## Leadership vs. Management

- *Manager*: Closed door traditional hierarchical policy. Input from staff only needed upon request; usually when a crisis occurs
- *Leader*: Philosophy of people change by being shown, not told. Constant feedback encouraged, open door policy, leads by example via mutual respect (leaders do not necessarily have a "management" title)
- *Which one would you rather work for?*



## Information/ Communication

- Is information passed officially via E-mail, meetings, correspondence, or ...
- Is the “grapevine” the best source of information?
- Do supervisors say one thing and mean another?
- What are the unspoken rules in your agency?



## Good Communication

- Is not about convincing someone that you are right
- Is about nurturing a spirit of teamwork
- Is about team problem solving
- Is about patience, strength, and courage to learn your shortcomings
- Is about wisdom, compassion, honesty, and truth



## Building Organizational Trust

- Respect employees
- Watch how you say it
- Do what you say you'll do
- Communicate openly
- Listen, don't argue
- Avoid the zingers



---

## **Building Organizational Trust (cont'd)**

- Point out the positive
- Appreciate others' thoughts
- Understand that trust is a mutual exchange
- Increase trust gradually
- Be truthful with yourself and others
- Be human



## **Throw Away Your Assumptions — What Managers May Assume About the Staff**

- They are not responsible
- They are only here for the \$\$\$\$
- They fail to see the big picture
- They cannot be trusted to follow policy
- Nothing will get done unless I micromanage them



## **What Staff Assume About Managers**

- They only pay lip service to our needs and requests
- They play politics and favoritism
- They are always more interested in their own ambition than doing the right thing
- They take credit for other people's work



## Functional Teams

- Treat all members with respect
- Are open minded
- Actively listen
- Share openly and honestly
- Are not afraid to contribute ideas



## Functional Teams (cont'd)

- Agree to disagree
- Take mutual responsibility
- Monitor themselves
- Lighten up!



## Be Inspired ...

- Be courageous enough to survey your staff and learn from your results
- Be willing to take constructive criticism that will improve care and staff satisfaction
- Form a trusting, functional team



## Be Inspired ... (cont'd)

- Use a team approach to care plans, improving quality outcomes
- Utilize the power of many ideas, vs. the power of one



## Functional Teams Lead To ...

- Empowerment
- Higher job satisfaction
- Improved patient care



## What About Your Agency?

- What changes have you encountered/will you be encountering that will require culture sensitivity (Point of Service, Telehealth technology, team/geographical structure change, Pay for Performance)?
- How have you dealt with changes in the past?
- What lessons have you learned from introducing change into your agency?



## Review Survey and Survey Instructions

- Review
- Distribute to staff with deadline for return
- Keep anonymous
- Forward completed surveys to Healthcare Quality Strategies, Inc., by March 31, 2006



## Culture Change POA

- Results of survey
- Select area for improvement
- Develop and submit your plan by June 2, 2006
- Implement your actions



## Culture Change POA (cont'd)

- Evaluate or monitor your plan (can resurvey any time)
- Expect to resurvey in January 2007
- Improvement?



## Questions?

- Discussion
- Comments



## Contact Information

- Pat Cheney, RN  
Quality Improvement Specialist  
732-238-5570, extension 2055  
E-mail: [pcheney@njqio.sdps.org](mailto:pcheney@njqio.sdps.org)
- Dolores Viotti, RN,C  
Quality Improvement Task Leader  
732-238-5570, extension 2117  
E-mail: [dviotti@njqio.sdps.org](mailto:dviotti@njqio.sdps.org)

