

Resilience Solutions Starter®

This Solutions Starter provides strategic and tactical ideas to consider when starting an improvement project. The Starter is organized by the themes of Decompression and Activation of the Press Ganey Resilience dimension.

Press Ganey research scientists developed questions to meet the specified definitions using a combination of cognitive and psychometric testing, literature reviews, client, and respondent feedback, focus groups, and discussions with Press Ganey's Client Advisory Council. The suggestions are based on literature reviews of industry best practices, top-performer experience, and Press Ganey thought leadership.

Solutions Starters support your ability to build an organizational culture and purpose-driven workforce to achieve exceptional patient-centered care. Improvement requires selecting tactics that are aligned with goals and implementing them consistently across your organization. For assistance, please contact your Press Ganey Account Team or partner with [Press Ganey Strategic Consulting](#) to design and implement a tailored action plan.

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Decompression

Decompression is the ability to disconnect from work at the end of the day and recharge

Decompression

I can enjoy my personal time without focusing on work matters.

QUESTION DEFINITION

This survey item measures a healthcare professional's ability to spend time away from work on personal endeavors without worrying about, or being preoccupied with, work-related matters. Although many job roles necessitate putting in extra hours beyond a standard work week, being able to separate oneself from one's job and mentally refresh is a core component of the ability to decompress. An inability to do this may indicate the organization's overdependence on the individual, resulting in an inflation of tasks and responsibilities. Alternatively, it may indicate that an individual is reluctant to decline additional work even though they are able to do so, which can ultimately lead to workloads becoming overwhelming.

It is important to note that members of a fully engaged workforce may be relied upon more—or be in positions that require them to do more—and they may be apt to take on additional responsibilities because of the enjoyment they derive from these tasks. However, it is also important to be able to rest and recuperate from time to time to avoid long stretches of being overworked and overwhelmed.

VOICE OF THE WORKFORCE

- 🗣️ *"The consistent support and teamwork within my unit makes me feel good about leaving at the end of my shift."*
- 🗣️ *"Staff should be able to leave at the end of shift or shortly thereafter. It is completely unacceptable for us to continuously stay after shift for sometimes 2 - 3 hours. This is a complete disregard to any of our personal obligations and isn't conducive to having a life after work."*

IMPROVEMENT SOLUTIONS

Educate on the importance of resilience, including how to build and maintain it.

- Transition from a focus on burnout to a focus on resilience to introduce positive psychology.
- Dedicate time to talk about resilience and why it matters. Include points such as the following:
 - Resilience is the ability of employees and physicians/APPs to recover and remain engaged even in challenging work environments and is interpreted as an early warning of burnout.
 - Taking care of oneself naturally results in better care for patients.
 - Resilience is also important because, according to Press Ganey data, organizations with highly engaged employees and physicians/APPs score higher on patient experience results (i.e., HCAHPS measures). Hospitals with a highly engaged workforce also perform better on core measures and earn more Value-Based Purchasing points than hospitals with a disengaged workforce.

Promote practices that help with stress management.

- Cope with stress in healthy ways to help build resilience.
 - Exercise
 - Meditate
 - Journal
 - Pray
 - Spend time in nature
- As an organization, further encourage practices by making them readily available. Offer yoga classes, a meditation room, discounts on meditation applications for phones, discounts at gyms or fitness centers, onsite counseling, etc.
- Inspire the organization to create a learning module about resilience that all employees and physicians/APPs must complete. In the module, include leaders emphasizing the importance of self-care.
- Have open dialogue around how individuals like to decompress. When people share how they disconnect/decompress it can be encouraging to others to also adopt healthy self-care practices. Many people feel everyone is also “on” and so they must be too—this dialogue can help change that narrative.

Make work-life balance an organizational priority.

- The common terms “work-life fit,” “work-life balance,” and “work-life integration” imply that one must make a choice between work and personal life, ultimately evoking guilt if either is chosen.
 - Accomplish work and personal life separately.
 - Determine work and non-work priorities each week and encourage the practice by modeling it. Share your own priorities in a huddle or staff meeting.
 - Help individuals focus on what they can do versus what they should do.
 - Empower employees to say “no.” Saying “no” is often regarded as negative: not being a team player, being judged later in a review, being thought incapable of handling workload, etc. Instead, regard “no” as realistic self-preservation.
 - Also empower individuals to say “when” (i.e., instead of yes or no) as the situation warrants. For example, “When I finish hourly rounds with my patients, I’ll be happy to help.” Sometimes we convey a sense of urgency that a task needs to be completed immediately, and this may not always be the case.
 - When an individual is faced with continuous, competing demands, encourage them to take a minute to breathe, focus, and rest the mind. This can be helpful and re-energizing.
 - Explain that resilience practices also apply to personal life. Think about what you can do outside of work this week. It is likely unrealistic to say, “I will cook dinner every night this week,” but it is realistic to say, “I will cook dinner three nights this week.”

Implement strategies to help nurses decompress.

- Building resilience is vital to the health and well-being of your nurses, which ultimately affect the experiences and safety of patients and the well-being of the entire organization.
- Prioritize periodic breaks for clinical staff. Without breaks (including lunch breaks) nurses are not able to regroup and/or catch up on any personal needs. Scheduling breaks for nursing staff (with adequate coverage) should be a priority for the organization.
- Ensure that decompression-focused support and resources are available to nurses on all shifts. Night-shift nurses have lower decompression levels than nurses on other shifts, so interventions for these nurses should focus on the areas that promote decompression, including addressing the challenges they face in terms of achieving work-life balance and self-care.
- Reduce the impact of added stress. Processes, procedures, systems, and technology should all be reviewed and modified if they are weighing people down.
- Target interventions to meet differing nurse needs. For example, nurse managers are less able to decompress than nurse roles and may be well-suited to interventions focusing on self-care and work-life balance.

Prioritize manager resilience-building practices.

- Identify managers who have difficulty decompressing due to the workload burden that often accompanies the manager title and design interventions to help strengthen their resilience.
- Managers' inability to decompress can influence their teams. Prioritize manager care in the following ways:
 - Have a running calendar of key dates for managers to refer to (e.g., due dates for budgets and performance reviews). These activities take a significant amount of time and tend to creep up on managers. Ensure managers have the support to take on these tasks.
 - Managers should learn to delegate tasks (within reason) rather than taking on everything themselves. Often, letting go of a task and delegating it can provide a valuable growth opportunity for an employee.
 - It is essential that managers model the way by truly spending time away from work—especially on the weekends and while on vacation.

Ensure that leader practices do not contradict the promotion of work-life balance.

- Be aware of asking individuals to stay late to finish one more task. Evaluate whether the task must be done immediately or can wait.
- Protect your workforce. If a large improvement initiative is going on, avoid taking on other initiatives as you are able.
- Don't allow the same people to always volunteer for ancillary tasks or projects.
- Frame opportunities positively to those who have not been involved. For example, one can say, "Diana, we need someone to represent our unit for this project. It will require you to attend about three meetings over the next three months and report back progress to me. How do you feel about being our representative?"

Decompression

I am able to disconnect from work communications during my free time (emails/phone, etc.).

QUESTION DEFINITION

This survey item measures the ability of employees and physicians/APPs to cut themselves off completely from modes of organizational contact during their free time. This is like being able to spend personal time without focusing on work matters, but this merits specific attention, as the proliferation of technology runs the risk of constantly entangling individuals with work communications.

This is especially true with the popularity of smartphones, which create an easy communications conduit for both emails and phone calls. Constant notifications can drastically impede one's ability to disconnect from work during personal time, especially if it is commonplace for this to occur at all hours of the day and night.

VOICE OF THE WORKFORCE

- 🗣️ "My unit has an agreement about email responses, because we aren't expected to check email outside of our shifts. It is a comfort to know expectations are realistic."
- 🗣️ "Allow departments the room to hire more staff. No matter what the floors are always short staffed, and I feel like I'm always 'on-call.'"

IMPROVEMENT SOLUTIONS

Establish an email usage protocol that supports resilience-building.

- As an organization, establish a strategy around email use when people are off shift (e.g., email, scheduling, chat features, etc.). Build a culture that allows full decompression.
- Set email standards.
 - If employees have work email programmed on their phones, encourage turning off email notifications when not at work.
 - Explain that employees are not expected to respond to emails in their free time. They are expected to meet deadlines that are applicable to everyone; however, this should not warrant work during free time.
 - Hold emails to send at a particular time. For example, an email written by leadership or management at 8:00 p.m. will not be sent until 7:00 a.m. the following day. This prevents people from thinking everyone else is working 24 hours a day. Considering that the health care environment operates 24 hours a day, the strategy needs to consider the dynamics of the organization, perhaps determining when most employees are on and off shift.

- Program email to flag communications you need to read more quickly by identifying the sender (e.g., your manager or director). This helps employees prioritize and manage their time with email.
- Establish email codes that senders can enter in the subject line. For example, a "1" may mean the request is urgent and a reply is needed ASAP, a "2" may indicate a response is needed within the next day or two, a "3" could mean a reply is needed within the week, etc.

Determine cell phone use standards that promote work-life balance.

- Set call standards. Employees are only to be contacted for emergencies when they are not working or on shift.
- If there is an excessive need to contact employees who are off shift, evaluate communication efficacy in the form of bedside shift reports, chart notes, or whiteboard communication. Where are communication breakdowns occurring that may burden employees when they are not at work?
- Use the "Do Not Disturb" feature on phones when not at work.

Execute a standard communication coverage plan during vacations.

- State that the true organizational request is to disconnect completely.
- Use a "buddy" system where employees have an identified "buddy" that will be supporting them while they are away. Include that individual as part of an out-of-office message.
- For "always on" type positions (e.g., Information Technology), have the team create an "on call" schedule so that everyone is not on edge and can rotate when it is their time to step in if something goes awry during off hours or when someone is on vacation.
- Allow for differences in email and cell phone expectations at various levels of the organization as needed. For example, there are typically different expectations of senior leaders than there are of front-line employees.
- As a manager, gauge employees' and physicians'/APPs' compliance with organization standards.
- If you notice that an individual frequently emails when not at work, ask why they feel it necessary to do so. The person may need help prioritizing work and recognizing the value of disconnecting.
- Make sure as a manager you are not contributing to the issue. Do your best not to email or call those who you know are out of the office. When you are on vacation, model the way by not emailing or calling to check-in.
- Honor time off for your employees. If you have an individual out on vacation, draft an email to send upon their return which contains any ideas or updates you want to share with them. This helps them not to be tempted to check in before returning to work—or having to contend with an accumulation of messages on their first day back from vacation.

Utilize a variety of modes for communicating organization updates.

- Use other communication vehicles as much as possible in the work environment so that email is not as heavily relied upon.
- Use daily huddles, staff meetings, and one-on-one meetings to pass along necessary information.

- Make organization updates fun. Ask questions related to pertinent topics, and award correct answers with a small prize (e.g., candy, snack, ten-minute break, etc.).
- Post updates in visible and highly trafficked areas, such as a break room or the nurses' lounge.
- Always remove old updates and clutter. Individuals will begin to ignore these areas if they are not clean and up to date.
- Strategic use of intranets can also help. Using the intranet to post and organize information in an easy-to-use way can also be an effective way to reduce email traffic.

Decompression

I rarely lose sleep over work issues.

QUESTION DEFINITION

This survey item measures an employee's or physician's/APP's ability to maintain adequate sleep habits without the interference of work-related matters. This is especially important, as sleep is a primary method of recharging, both mentally and physically.

A lower score indicates not only an inability to maintain resting habits because of work-related issues, but also future performance issues due to the lack of adequate rest. These issues include making mistakes on the job or even increasing the occurrence of behavioral or health issues.

VOICE OF THE WORKFORCE

- 🗣️ *"I have a great person that I report to. She helps us focus on not getting burned out."*
- 🗣️ *"Remove management that have no clue about what is involved in patient care and have no idea how to adequately retain nurses. The current leadership is absent from reality about the stress of this job."*

IMPROVEMENT SOLUTIONS

Establish empathetic, open, and honest communication.

- Honest communication builds trust and does not leave people wondering what will happen next.
- Regard mistakes as learning opportunities, not punitive situations. Mistakes will happen.
 - A Just Culture avoids blaming individuals when errors occur. Open communication about error is supported in a non-punitive environment. Just culture is fair—it holds individuals accountable for reckless behavior but also withholds blame and shame approaches to dealing with error. Mistakes are treated as opportunities to learn.
 - If a mistake is made, find the time to talk with the individual as soon as possible. Making a mistake and then worrying about the consequences will distract from delivering the best possible care to patients. It is likely the individual will then take that worry home.
 - If there is not enough time to discuss the issue immediately, have a quick interaction to say that you are aware of the situation and that you will discuss it at X time (e.g., end of shift, next shift, etc.). Include a positive motivator in the end, such as, "You are an excellent nurse, and you care about your patients. Don't let this make you think otherwise."
- Never respond to a question or request for help with, "I don't have time." Instead, listen to the issue, and offer an honest suggestion or timeframe, for example:
 - "Marie, I understand you need assistance with the new system, and I will be available in 15 minutes when I finish this report. How does that sound?"

- “Terry, it sounds like you need help with this family. Let’s visit them together in 10 minutes. How does that sound?”
- “David, I won’t be able to discuss the new initiative today. How do you feel about me scheduling us time on your Wednesday shift?”

Gain a better understanding of the impact of workload on the ability to decompress.

- For non-clinical professionals, managers, and physicians/APPs, low scores on this survey item may be due to bringing work home. This may lead to late nights more so than mentally not being able to clear their minds to go to sleep.
- If that is the case, it is important to understand why work is not getting done during the workday:
 - Too many meetings?
 - Too many administrative tasks?
 - Unclear priorities?
 - Not enough support?
 - Poor time management?
- Seek ways to reduce workloads by eliminating work that has no value or is not necessary, and by streamlining processes and operations to allow for greater efficiency during the workday.
 - Use a time tracking system to understand where employees are spending unnecessary time.
- Encourage asking for help when needed rather than trying to take on everything.
- Check on workloads and the amount of off-hour work during one-on-ones and rounds.

Understand the unique decompression drivers for each generation of nurses.

- Drivers of Baby-Boomer nurse decompression include the availability of resources needed to do their job.
- Gen-X nurses are better able to decompress when they feel heard by their managers and the organization.
- For Millennial/Gen-Y nurses, decompression is strongest when clear assignments are combined with respect.

Provide resilience training that helps nurses identify stressors and personal triggers.

- Establish resources for education, support, and self-care.
- Focus on relationship-building activities and opportunities for enhancing nurse social support (e.g., regularly scheduled chat or “debriefing” sessions in which nurses share stories and experiences).
- Informal social events held outside of work can also enhance resilience by providing nurses with an opportunity to decompress.

Provide practices to help people disconnect at the end of their workday.

- Teach meaningful transitions. Have people end their day by checking off their to do list and writing their goals for the next day, rather than bringing work home.

- Conduct open discussions about the issues employees cannot free their minds from when they leave work (e.g., issues with patients, colleagues, work performance, etc.).
- Job stress can be a significant source of overall stress. A major factor is that technology enables 24/7 work access rather than only during a shift.
- Have a closing moment. Think about the ways individuals close their day so there truly is closure, and they can free their minds from work.
 - Ask people to think about the following at the end of each shift: "What is the one thing you're concerned about as you leave [this shift, these five patients, etc.]? What is top of mind?"
 - Communicate these concerns (e.g., during bedside shift report).

Provide education on ways to promote restful sleep.

- Create awareness that work affecting sleep is a known issue. Studies have found that lack of sleep not only affects a person's health, but also negatively impacts their ability to be productive at work.
- Encourage employees to track their sleep to make sure they are getting enough.
- Avoid caffeine at night, and drink water or decaffeinated beverages.
- Journal. For example:
 - Write down one work accomplishment and one personal accomplishment from the day.
 - Write down concerns before bed. The transfer from your mind to paper can relieve your mind of the concern.
 - Keep paper by your bed to write down concerns that wake you up. People lose sleep reminding themselves not to forget things that may wake them.
- Try sleep meditations/exercises. These include self-guided practices (many of which are available on the internet), phone applications, and apps or podcasts.
- Be aware of ways to make the room environment in which you sleep more comfortable. Consider:
 - Temperature (i.e., cooler is better)
 - White noise (e.g., white noise machine, fan, etc.)
 - Sleep shades or an eye mask
 - Earplugs
- Play calming music (e.g., soothing nature sounds or repetitive sounds).
- Consider where you place your cell phone when you go to sleep. Most people place a cell phone within arm's reach while sleeping, such that notifications or calls disturb sleep. Consider leaving your cell phone in another room and/or using a different device as an alarm clock.
- Get on a sleep schedule. Try to go to bed and wake up at the same time each day to establish a strong circadian rhythm. If you find you are still awake after 20 minutes, get up and do something relaxing until you are ready for sleep.

Decompression

I am able to free my mind from work when I am away from it.

QUESTION DEFINITION

This survey item measures the ability to disconnect from work during longer periods of time such as weekends (or the equivalent days off) or vacations. During these periods, the ability to mentally recharge while being free from work-related stresses is important. If an employee or physician/APP cannot disentangle their personal life from their work life during days off or vacations, there is the risk of work-related matters upsetting time outside of work, ultimately eroding resilience.

VOICE OF THE WORKFORCE

- 🗣️ *"My manager is so supportive of us taking care of ourselves. She demands we don't check our email when we take vacation days."*
- 🗣️ *"They need to work with people on things like promoting healthier lifestyles for employees."*

IMPROVEMENT SOLUTIONS

Build trust and camaraderie among team members.

- Highlight how people on the work unit can trust and rely on one another—and that employees can leave their shifts and trust that their colleagues will also do high-quality work.
- Share examples of teamwork (e.g., managing up) and build camaraderie with and between employees during daily huddles or staff meetings.

Resolve residual distractions before the workday concludes.

- Leftover work distractions can prevent people from freeing their minds. Help individuals recognize that if there is a "nagging" issue that is bothering them (e.g., someone says something rude or disrespectful in a meeting) it can be a signal to resolve it in some way so that it does not prevent them from disconnecting. Allowing the issue to turn over and over in your head may result in poor sleep and form a larger issue than is at hand. Instead, consider the following:
 - Choose to let it go. This is a conscious choice to deal with stress. by choosing to let the issue go, you have control of the situation.
 - Talk to the person the issue relates to. Communication often resolves issues.

Encourage time off and vacation usage.

- Find meaning outside of work. Engage in activities that free your mind from work-related stressors/challenges, such as social outings, hobbies, or time spent with family.
- Refer to the organization's standards about vacation and keep track of employees using their time off. This is not intended as a form of micromanagement, but rather to encourage employees to take time off or vacations.

- Prepare for vacations or long periods of time off to help employees detach from work during this time.
- Prior to an employee's vacation, set aside 10 minutes to discuss and prepare for it.
 - Ask the employee if they have any concerns. This is an opportunity for the employee to relieve their mind of concerns rather than toil over them while away.
 - Emphasize that it is NOT an expectation that the employee be available when away from work or on vacation. Suggest that employees turn off work email on their phones. It is easiest to free one's mind from work if the temptation is not accessible.
 - Ask whether they are awaiting responses to any requests (e.g., a pending decision about an initiative, an answer for a committee, etc.), and offer to serve as a point of contact while they are away.
 - Ask your employees to include your email address as part of their out-of-office email replies, so they do not feel compelled to answer any incoming emails.
- Schedule a short meeting when employees return from vacations or long periods of time off.
 - Provide only necessary updates. The employee may feel overwhelmed when returning to work and likely does not need to be informed of all corporate updates immediately.

Address the decompression challenges faced by physicians/APPs.

- Press Ganey research shows that physicians/APPs are the least resilient segment of the health care workforce, primarily driven by their difficulty decompressing (i.e., disconnecting from work). Leaders should ask, "What are we doing to help this critical group of caregivers free their minds from work when they are away?"
- Private practice, employed, and contract physicians/APPs all tend to have high activation but relatively low decompression scores. Provide support to these groups through physician/APP wellness coaching, self-care resources, peer mentorship, and social opportunities to help them free their minds from work when they are away from it.
- Physician/APP resilience varies substantially depending upon role (e.g., fellow, faculty, resident) and work setting (e.g., ambulatory, hospital, clinic). Targeted decompression interventions that address the unique needs of physicians/APPs in various roles and work settings are important.

Address the decompression challenges faced by nurses of different generations.

- Gen-X nurse managers tend to have lower levels of decompression compared with baby boomer nurse managers. Help Gen-X nurse managers who are relatively new to their leader positions better balance their new responsibilities with their ability to disconnect when not at work.
- There tends to be a decline in activation in the first 5-10 years of employment among millennials and Gen-X nurses, and a steady decline in decompression over time in Gen-X nurses. It's important to foster a sense of being valued in these nurses and provide the support and tools they need to achieve a healthy work-life balance.

Activation

Activation measures how connected someone is to the work they do, as well as their ability to focus on patients/clients as individuals

Activation

I see every patient/client as an individual person with specific needs.

QUESTION DEFINITION

This survey item measures the ability of employees and physicians/APPs to see their patients as individuals. Over time, with heavy workloads, it becomes easy to treat individuals in a checklist-like manner, doing only what is necessary to move on to the next. For those in a caregiving role, this can be compounded by the introduction of additional administrative or bureaucratic tasks that are necessary in many organizations. This rote approach can be efficient in certain circumstances. However, too much of it can detract from the human element of health care and undermine the intrinsic rewards individuals receive from their work, as well as their levels of personal commitment and motivation.

For those in caregiving roles, low performance on this item can also impact the patient experience. Some patients may require more empathy and reassurance, while others may prefer more education, and so forth. For employees not in caregiving roles, they may find that their internal clients may have preferences for reporting processes, information exchange, communication styles, etc. A chronic inability to see others as people with specific needs can indicate a lack of intrinsic motivation within a role. It may also indicate the lack of time and energy to give others the specific attention they need, which can eventually result in reduced levels of resilience.

VOICE OF THE WORKFORCE

- 🗣️ *"Providing the highest quality care to each patient is the best part of my job."*
- 🗣️ *"There are so many tasks, it can be difficult to focus on patients. I want to get back to the core of my work as a nurse."*

IMPROVEMENT SOLUTIONS

Make a personal connection with each patient.

- It only takes 55 seconds to make a connection with someone. Once you make this personal connection, you keep it throughout the patient's stay.
 - Inquire about a topic the patient is interested in (e.g., sports, gardening, grandchildren, books, television shows, music, cooking, etc.).
 - Solicit details with open-ended questions and statements. For example, "Tell me more about [X]," or, "How is [patient's hobby] going?" Probe for more information rather than asking a yes/no question.
 - Ask yourself at the end of a shift, "What are three things about the patient that is not in the chart?" Managers can support staff in this regard by asking them to share a few examples of what they know about a patient that cannot be found in the patient's chart.

Exhibit empathetic body language with patients to build connection.

- Maintain medically/culturally appropriate eye contact and look the patient in the eye when speaking.
- Decode facial expressions. The ability to decode facial expressions is a way to identify emotions that patients cannot (or will not) express verbally, and it is tied to the care employee's or physician's/APP's ability to express empathy. If a nurse detects that a patient is nervous because of fidgeting hands, the nurse will know to inquire further about the patient's fears by asking probing questions.
- Sitting down with patients at their eye level conveys interest in, and time for, these patients. Given equal time – sitting or standing – patients report more meaningful interactions when healthcare professionals sit.
- Balance the need to interrupt with allowing the patient to tell the whole story. Allow enough time for understanding.

Practice Compassionate Connected Care™ daily.

- Make compassion a required behavior standard. Include an individual's ability to display compassion as part of the annual performance review process.
- For care clinician members:
 - Pause and center yourself before entering a patient room – especially on difficult days – to remind yourself about compassion. The patient is suffering, and you can alleviate suffering.
 - Visualize the interaction you want to have with the patient and ask yourself, “What does this patient need, and what can I do to meet those needs?”
 - Acknowledge when things are distracting you from the current interaction. Be 100% devoted to this moment and avoid thinking about what may be going on in the room next door.
- For managers/leadership:
 - Don't forget about the suffering of employees and physicians/APPs; they have a need for compassion in the same way patients do.
 - Display empathic body language, acknowledging suffering, make personal connections, and see employees and physicians/APPs as individuals.

Activation

I care for all patients/clients equally even when it is difficult.

QUESTION DEFINITION

This survey item measures the level of engagement that employees and physicians/APPs have with each patient or internal client in terms of caring. It is normal to experience times of heavy workloads and stressful situations that necessitate being more attentive in some areas than others. However, if this is a chronic occurrence, individuals may simply run out of the psychological resources necessary to continue to care for and about everyone else equally. When circumstances are occasionally difficult, resilient individuals will still retain the capacity to be able to care for all patients and clients. If they cannot, then this is an indicator of eroding resilience, potentially due to circumstances always being difficult, thus resulting in a lack of energy and motivation to become fully engaged in one's profession.

VOICE OF THE WORKFORCE

- 🗣️ *"A lot of wonderful employees work here, and they really try their best under very stressful conditions to do the best job possible."*
- 🗣️ *"The organization needs to put less emphasis on expansion and corporate structure and place more emphasis on patient care and employee satisfaction."*

IMPROVEMENT SOLUTIONS

Foster an environment that allows for the delivery of safe, high-quality care.

- Ensure employees and physicians/APPs have the resources and support they need to deliver the safest, highest quality care.
- Ensure that employees and physicians/APPs are operating in an environment that can sustain high performance – one where they are inspired, energized, and cared for as individuals.

Discuss how resilience affects patient safety.

- There is a relationship between engagement and the safety and quality of patient care.
- Engaged healthcare professionals feel a sense of ownership, loyalty, and dedication to creating a safe environment for patients.

Focus on delivering Compassionate Connected Care™ with every patient.

- It may be difficult to feel you can provide excellent care to patients when you are stressed. Break down what you can do to continue to show empathy in overwhelming times.
 - Acknowledge suffering. Say "I'm sorry" or "I can see you are feeling X" to show patients you care and to acknowledge their suffering (please note that you should not verbalize when you see certain emotions – for example, embarrassment).

- Display empathic body language. Make medically culturally appropriate eye contact, sit at the patient's level when talking, lean forward when listening, and do not rush through interactions.
- Demonstrate real caring that goes beyond the delivery of medical interventions. Offer a blanket to someone who looks cold or take a moment to ask a patient about something personal.

Encourage taking a break when overwhelmed.

- Tell employees and physicians/APPs to take five. This is about recovery. If you notice an individual is having a particularly difficult or overwhelming day, tell them to "take five" and walk away for five minutes.
- Offer to check on a patient, so the individual doesn't feel they will further lose ground by taking a few minutes.
- Encourage the employee or physician/APP to spend the five minutes doing something to support decompressing. For example:
 - Go on a walk (ideally outside) and leave the unit. Do not bring phones with you. Completely disconnect for the whole five minutes.
 - Find a quiet place to do a breathing exercise. These exercises are naturally tranquilizing and relieve tension. One example is the 4-7-8 breathing technique:
 - First, exhale all air.
 - Then, breathe in up to a count of 4.
 - Hold your breath for a count of 7.
 - Exhale slowly while for a count to 8.
 - Repeat x5.

Conduct an "Ideal Day" exercise in a staff meeting or unit gathering.

- Ask staff to draw how their typical day feels (for approximately one minute). Oftentimes, staff draw images showing chaos, a hectic environment, multi-tasking, etc. Invite one or two people to share their drawings with the group.
- Next, ask staff to draw how their ideal day would look. Oftentimes, staff members draw images with fewer patients, lots of smiles, etc. These new drawings often indicate more positive time spent with patients. Invite one or two people to share their drawings with the group.
- Lastly, ask your team what they can do to better achieve their ideal day drawings. Task each person with working on one thing to have a more ideal workday.
- Remind staff members that even when they cannot spend a lot of time with their patients, the quality of each interaction matters more than the quantity. A smile or touch takes only a second and means more than two hurried minutes in the room.

Promote conscious acts of kindness.

- Conscious acts of kindness ask you to pause and intentionally do something kind or thoughtful to promote optimism, build relationships with colleagues, and reset attitude. For example:
 - Compliment someone with whom you have difficulty working.

- Greet someone warmly.
- Bring someone a coffee.
- Ask about something personal in someone's life.
- When someone is in a hurry, let them step in front of you.
- Keep track of kindnesses in a journal, during meditation, or noted as you leave your shift. Ask, "Have I done something kind today?" If not, you can still do something.

Address the activation challenges faced by staff members on different shifts.

- Ensure that activation-focused support and resources are available to staff members on all shifts.
- Night-shift staff members generally have lower activation levels than those on other shifts. Interventions for these individuals should focus on the areas that drive activation (e.g., job enjoyment, recognition, pride in their work, and clarity of responsibilities).

Activation

My work is meaningful.

QUESTION DEFINITION

This survey item measures how much meaning an individual derives from his or her work. In this case, meaning is an indicator of the intrinsic value of the work which, in turn, serves as a force of motivation. Without this present, motivation can be compromised, which can result in decreased levels of resilience as the work feels more like going through the motions rather than a rewarding endeavor in and of itself.

VOICE OF THE WORKFORCE

- 🗣️ *"I love feeling like I bring compassion to people who need it, at a time in their lives when they need it."*
- 🗣️ *"Treat employees like they matter, no matter what the job is they do. If they do good with their jobs, they should be acknowledged for it."*

IMPROVEMENT SOLUTIONS

Help people connect back to the reason they chose a career in health care.

- Conduct a reflection exercise. In a group setting, ask why people went into health care or why they stay in healthcare. Encourage employees to think about a meaningful example or story, because every time we appreciate an action or moment, we reinforce the "why."
 - People may write down their answers, or, in a group setting, consider having them write answers on post-it notes that can be placed on a flip chart.
 - Ask a few people – or everyone – to share their responses. Typical responses include: "to help others," "to make people feel better," "because a family member or friend had a tragic event," and "for job security."
- Remind individuals that the work they do every day, regardless of tough days or stresses, is valuable, necessary, and healing. Helping other contributes to resilience.
- Amplify the inherent rewards of the work. Help healthcare professionals understand their "why" and how they connect to the mission of the organization.

Seek value and empathy.

- Empathy reduces patient suffering. Healthcare professionals should be encouraged to have and recognize empathic interactions. Here are some ways to appreciate empathy:
 - Shadow employees as they interact with patients. Look for ways in which they show empathy, as well as for opportunities where empathy could have been shown. Examples include using open-ended questions and making medically/culturally appropriate eye contact when talking. Share general observations in group settings and specific observations in 1:1 meetings.

- Identify empathy beyond patient interactions. Recognize employees and physicians/APPs who assist family members who are lost, comfort visitors who are upset, or offer support to a colleague.
- Recognize specific interactions that exemplify empathy. Give a handwritten thank-you note or small gifts, highlight the interaction in a group setting or ask an organization leader to send a note.

Improve processes to maximize interpersonal connections.

- A sense of meaning in one's work could be adversely impacted by the introduction of additional administrative or bureaucratic tasks that are necessary in many organizations.
- Be mindful of ways that processes can be improved to maximize the connection employees and especially direct patient care clinicians have with patients, clients, and their families.
- Involve employees and physicians/APPs in discussions around how to best mitigate administrative or process related obstacles and increase their time and connection with patients.

Start each shift with gratitude.

- Whether in a daily huddle or as staff members begin their shifts, ask them to think about one specific thing they are grateful for.
 - Go beyond general descriptors like "work" or "family," and express something more detailed.
 - "I am grateful for my husband, who surprised me by making dinner last night so that I had time to exercise."
 - "I am grateful that my job makes me appreciate my own health, and it makes me want to make better choices to preserve my health."
 - "I am grateful for my dog, who wags her tail and is happy to see me, no matter how great or tough a day I had."
 - If in a group environment, ask one person to share what he or she is grateful for.
 - If people do not want to readily share in a group environment on an impromptu basis, designate the next person to share gratitude. For example, during Tuesday's huddle, ask a specific employee if they would be willing to share an instance of gratitude at Wednesday's huddle.

End each day with gratitude.

- At the conclusion of the workday, encourage employees to list three things that happened for which they are grateful.
- Actively look for ways to provide positive feedback to staff members about how their work has impacted a patient or co-worker.

Foster participation in organizational change.

- Ask employees to give input into the planning of new processes or improvements rather than only involving them during the execution phase.
 - Staff are more likely to accept and appreciate change if they themselves or their colleagues participated in creating the change.

Develop resilience strategies that target differing work roles.

- Both nurse managers' and non-managers' ability to achieve high levels of activation is highly correlated to their job enjoyment. Capitalize on this knowledge by developing resilience-building strategies around the themes that are meaningful for these differing work roles.
- For nurse managers, the key drivers of activation center on the themes of safety and pride in their quality of service – likely because their role requires them to be mission driven.
- For non-managers, the key drivers relate to the themes of personal pride in “my work” – likely because staff nurses are more task-driven than mission-driven.

Address the distinct activation drivers for each generation of clinical staff members.

- Drivers of the Baby-Boomer generation activation includes pride in the quality of care they provide.
- Gen-X staff members are most activated when they perceive organizational safety, diversity, and community.
- For Millennial staff members, activation is driven by clarity in roles and responsibilities.

Activation

The work I do makes a real difference.

QUESTION DEFINITION

This survey item measures the sentiment of whether the employee's or physician's/APP's work impacts the state of being of others. It is an evaluation of the tangible effect their day-to-day work efforts have on patients/clients and on other individuals. Even if one's work has meaning, the nature of their efforts may become devalued if they continuously see little influence coming from it. This can be especially true in attempts at innovation or process improvement that are hampered by organizational bureaucracies. Over time, this can erode the sense of value of the work, leading to a lack of motivation and a reduction in overall levels of resilience.

VOICE OF THE WORKFORCE

🗨️ *"I really love my job. I don't see myself as just a tech – I see myself as an extension of the patient, like a family member who stopped by to help."*

🗨️ *"I'd like to see more recognition for hard work within the units."*

IMPROVEMENT SOLUTIONS

Encourage practices that foster pride in one's work.

- It is difficult to discuss a concerning diagnosis with a patient. However, a staff member may take pride in their ability to offer empathy and help guide the patient through understanding it. Rather than regarding the interaction as the delivery of bad news, the staff member can serve as a means of comfort to the patient.
- Ask in a regular forum (e.g., staff meetings, huddle, etc.) for individuals to share moments in which they felt proud of their work.
- Display communication boards showing employees' proud moments (e.g., "You make an Impact"). This board may be posted in an employee-only area, such as a break room, or displayed publicly for patients, families, and visitors to see.

Present new initiatives or process improvements with positivity and empathy.

- Change is daunting, even when it is for the better. In the hectic healthcare environment, staff members typically have a routine that enables them to complete their work efficiently. When a new process is introduced – regardless of the positive potential impact – people naturally think about the implications to their routine and the difficulty of change.
- Take a change management approach.
- Provide a clear message about why change is needed and why now. Link the change to the organization's mission and vision. Include the what's-in-it-for-me for staff members.

- If available, share data that show how the process impacts patient care, staff efficiency, etc. For example, share how no-pass zones have decreased the number of adverse safety events or toileting accidents, or how a new computer system has resulting in higher patient experience scores on survey questions related to teamwork.
- Be an advocate for change. Speak positively about the benefits of change.
- Proactively discuss concerns about barriers to change and tackle them one by one.
- Communicate openly and frequently whenever possible to reinforce the need for change, and report progress. Use meetings and team huddles for this.
- Work with individuals in one-on-one settings to overcome personal barriers to change, such as confidence and skill level.
- Be wary of a lack of resistance. Change is difficult, and, if you don't encounter some form of resistance, it could mean that individuals are hiding their reactions.
- Do not forget the process change when official implementation is done. If a process does not develop new behaviors that are continuously reinforced, people will believe that the new initiative is unnecessary and won't stick, thus resulting in a lack of commitment.
 - Continue to report progress in terms of both data and patient feedback.
 - Reference individual employee progress in one-on-one meetings or reviews.

Establish processes to share positive patient feedback.

- Care clinicians may not directly receive gratitude or praise from patients and families, so sharing and celebrating this information highlights the difference they are making in people's lives.
 - Collect feedback from:
 - Patient experience surveys. Review survey comments regularly and establish a process for sharing positive responses (as well as learning from negative ones).
 - Leader rounding. During rounds, ask patients if they would like to recognize anyone for the care they provided, or for something meaningful that was done.
 - Share the feedback:
 - Share each positive comment, either verbally or with a handwritten note, with the staff member to whom it is attributed.
 - Share comments related to the entire unit or teamwork among the entire staff in a staff meeting or huddle.
 - Consider creating a "What Patients Say About Us" board where you post positive comments about patient care in an area that is visible to visitors and family members. This helps promote a favorable image of your unit or area.

Amplify added and inherent rewards of the work.

- Recognize staff and take time to celebrate wins together.
- Build collegiality and resilience – and amplify the inherent rewards of a career in health care – by creating opportunities for non-clinical collaboration and interaction.

- Help staff members find meaning in their work and recognize the value they add to the team and to the patients.

Increase nurse activation with meaningful recognition.

- Low activation may be a significant risk factor for nurse turnover. This may be attributable to the fact that nurses expect to be activated in their jobs, given that most choose the profession because they want to feel that they are making a difference in people's lives. Help nurses see that the work they do makes a difference to decrease their risk of leaving the organization.
- Drive nurse activation through meaningful recognition to help nurses see the value of their daily contributions. Recognize efforts and praise nurses for a job well done. Participate in formal recognition programs (e.g., DAISY Award for Extraordinary Nurses) to show the organization's commitment to celebrating its nurses.
- Target interventions to meet differing nurse needs. Millennial nurses have the lowest activation of other generations of nurses and may benefit from recognition programs that highlight their contributions and how their work connects to the "why" behind the work.

Appendix

Data Use and Learning

Comment Analytics

Comment analytics leverages Natural Language Processing to assess and review open-ended survey items. The technology will group similar themes and concepts together to provide leaders with an overall frequency report to better assess workforce engagement and important elements of culture.

Use comment analytics to gain a deeper understanding of staff member perceptions of resilience themes of decompression and activation.

Comment Analytics

- Quantifies and analyzes qualitative data for action.
- Enables identification of emerging trends and root causes.
- Uses sentiment analysis to represent the emotional tone in the comment text.
 - The purpose is to determine how the employee feels about the topic they are writing about.
 - The goal is to determine if the emotion or attitude of the respondent is positive, negative, or neutral/mixed.

Thematic and visual organization of comment responses and sentiments enable deep dives into certain themes and concepts.

- For example, a leader can isolate, and display comments related to decompression or activation and then discern positive from negative sentiments to uncover inconsistencies in perspectives and opinions.

Quantitative analysis of qualitative data provides information on:

- Topics: What is being said?
- Volume: Topic frequency.
- Sentiment Volume: Is it positive or negative?
- Sentiment Strength: How positive or negative?

Data Use and Learning

Learning Collaboratives

A Learning Collaborative is a quality improvement tool promoted by the Institute for Healthcare Improvement. As an educational process, it expands on the concept of cross-functional improvement teams to engage health care professionals to learn about successful practices from each other.

Learning Collaboratives engage the people doing the work in process and quality improvement. Adult learners can be energized by learning from those like them and contributing to institutional knowledge.

Identifying and promoting internal best practices is the most efficient approach to system-wide improvement. Sustainable success around building resilience among employees and physicians/APPs is dependent on local continuous improvement organized around specific needs. Learning Collaboratives provide an opportunity for managers and leaders throughout a health care system to learn from each other, and to spread resilience best practices system wide.

Create a forum for sharing lessons learned from successful and unsuccessful efforts.

- Schedule time for formal, routine collaboration across departments and locations.
- Engage cross-functional improvement teams from across the enterprise. To be truly cross-functional, there must be representation from managers and leaders across the organization.

Use a system improvement model to standardize language and accelerate adoption.

- Obtain executive leadership buy-in.
- Identify management champions.
- Define the purpose, goals, roles, and responsibilities.
- Routinely discuss the collaborative's efforts at standing meetings.
- Embrace high-reliability principles and commit to continuous process improvement.

Include participation in Learning Collaboratives in job descriptions.

- Provide incentives for participation.
- Recognize managers for contributing knowledge gains – both through success and failure.

Include participation in Learning Collaboratives in job descriptions.

- Document improvement efforts and processes from the identification of an improvement need through follow-up and monitoring.
- Draft procedures to capture and reapply successful process improvement efforts.
- Recognize and reward innovation and the adoption of evidence-based strategies.

Data Use and Learning

Predictive Analytics

Predictive analytics are statistical models that assess historical data to determine the probability that one variable has a positive or negative impact on another. Predictive analysis provides evidence of cause and effect. It highlights patterns that determine areas of risk and opportunity and can be used to determine the likelihood of future outcomes.

Press Ganey's Critical Metrics Map (CMM) is an example of predictive analytics.

Link patient experience and workforce data (including the Resilience dimension items) through the CMM.

- The CMM is a custom report that consolidates an organization's multiple performance metrics across Engagement and Patient Experience surveys at the work unit level.
 - Scores are color-coded to facilitate the interpretation, making issues immediately apparent and highlighting priority areas for post-survey action planning and support.
- By aligning work unit level data across measures of engagement/resilience and patient experience, the CMM empowers health care leaders to understand how engagement and resilience attributes influence the patient experience.
- Linking patient experience and caregiver experience data (including Resilience dimension items) supports organizations in more easily identifying and prioritizing departments that would benefit from targeted improvement strategies.
- By incorporating vital engagement/resilience and patient experience metrics into a single view, leaders can compare work unit performance, easily identify inconsistencies across metrics, and track progress on these metrics over time.

Data Use and Learning

Strategic Engagement Assessments

Resilience metrics can act as an early warning sign for burnout and assist organizations in determining which groups may need support for improving the ability to activate and decompress. In addition to assessing resilience, routine assessment of nursing excellence, employee engagement, physician/APP engagement and alignment, and safety culture are informative. These assessments help provide a straightforward and consistent process for interpreting data, identifying strengths and concerns, setting priorities for improvement, and measuring progress.

Note: Many engagement survey initiatives can be streamlined into one single survey administration to avoid survey fatigue and increase response rates.

Assess nursing excellence.

- Nurse retention is top of mind as organizations seek to maintain institutional knowledge, ensure consistency in care delivery, and promote patient experience and loyalty.
- Nurse disengagement can be costly for an organization because of its impact on nursing turnover, patient safety, and patient experience.
- Including nursing-specific measures on the employee engagement survey can help organizations drive nurse engagement, improve performance, and facilitate the Magnet Recognition Program® application process.
- Insights gathered from the segmentation of RN scores can have implications not just for nurse engagement and retention, but also for interventions to drive safety, patient experience, and reputation.

Assess employee engagement.

- Because every element of the care experience is delivered to the patient through the workforce, investing in building an engaged, high-performing workforce is crucial to the delivery of high-caliber care and facilitates optimizing other key performance metrics across experience, quality, and finance.
- Ensuring employees' needs are met is foundational to establishing a culture of engagement.
- It is important to have a clear understanding of key drivers that impact employees' work environment (e.g., relationships with managers, access to tools and resources, and opportunities for personal development).
- Use a comprehensive, continuous approach to collecting and acting upon employee culture and engagement data. The measurement tool should have a firm theoretical and empirical basis.
- Results of any employee engagement analysis should capture:
 - An outcome-based engagement metric.
 - A work-unit segmentation metric identifying which units need the most intervention.

- A management metric that identifies which managers need assistance or coaching to effectively drive improvement for their teams.

Assess physician/APP engagement and alignment.

- Strong physician/APP engagement and alignment can lead to better patient experiences and quality of patient care. Conversely, when physicians/APPs leave, become disengaged, or are not aligned with the organization's mission, vision, and values, the impact can be felt throughout the care delivery process.
- Engagement measures physicians'/APPs' appraisal of their work environment, emotional experiences, and attachment to the workplace.
 - A highly engaged physician/APP may be content with day-to-day, patient-facing activities, but resisting organizational change and preventing his department from attaining key goals. This describes an engaged physician/APP who is not aligned with his organization.
- Alignment measures the extent to which a physician/APP feels a strong partnership or connection with the organization's leadership.
- By measuring both engagement and alignment, organizations gain insight into if your physicians/APPs are likely to stay, as well as if they will support your strategic initiatives. Organizations that meaningfully engage and collaborate with physicians/APPs and their leadership are on the most direct path to deliver exceptional patient experiences and outcomes.

Assess safety culture.

- To align the organization around a mission to achieve Zero Harm, one of the first steps is to assess staff feedback, attitudes, and perceptions related to patient safety.
- Direct feedback from those responsible for delivering care informs the level of organizational focus needed to make safety a top priority across the organization.
- Assessing safety culture at the organization and work unit levels supports awareness around patient safety issues, identifies strengths, and concerns, and evaluates the impact of patient safety interventions and performance over time.
- Organizations are best positioned to develop a high-performing workforce when they build a culture of safety and adopt safe processes.

Process Improvement

Continuous Process Improvement

Continuous improvement is the ongoing effort to improve services by increasing the quality of those services or by reducing unnecessary or redundant steps. It supports both patient-centricity and employee and physician/APP engagement and resilience.

- It reflects a high level of interest in meeting patient needs for providing a work environment that improves the delivery of compassionate, patient-centric care.
- Employees and physicians/APPs who experience the inherent rewards of directly or indirectly reducing patient suffering can take pride that their work is meaningful.

Continuous improvement is the core principle behind every structured improvement model, such as the commonly recognized Lean, Six Sigma, Kaizen, and Robust Process Improvement models. It involves the adoption of a structured process for ongoing assessment and improvement.

Care delivery is incredibly dynamic. Science, technology, equipment, personnel, and patient needs are constantly changing. Even practices with high levels of performance across all metrics can only be sure of performance excellence through ongoing monitoring—a key component for continuous improvement. In fact, to become a high-reliability organization, you must develop a preoccupation with failure and conduct routine and ongoing self-assessment.

Everyone has room for improvement. Engaging in continuous process improvement indicates there is a formal program for routine self-assessment, and there are dedicated resources to identify areas of under-performance and to implement improvement plans. Continuous improvement processes allow a practice to identify low quality or care problems before safety events or harm can occur.

Adopt a formal, proven method for continuous improvement, such as (in alphabetical order):

- The Joint Commission's Robust Process Improvement
- Kaizen
- Lean
- Six Sigma

Implement continuous improvement across all practices in a system.

- This supports the Learning Collaborative approach for standardizing best practices.

Include all stages of a continuous improvement approach.

- Collect data to assess the quality of the patient experience and workforce experience.
- Include metrics reflecting the mission and values statements in a balanced scorecard for routine executive review.
- Identify areas of low or poor performance.
- Conduct root cause analyses to identify the underlying process or human factors.

- Focus on the process failures and aim to build processes that overcome the tendency for human error.
- Employ cross-functional improvement teams.
- Define improvement plans with roles, responsibilities, and deadlines.
- Identify outcome measures for continuous tracking to assess the success and sustainability of the improvement plan.

Include all stages of a continuous improvement approach.

- Take a closer look at the obstacles impeding improvement and identify ways to eradicate or get around them.
- Continuous process improvement is part of an overall data strategy. In addition to identifying and improving on areas of underperformance, it informs the identification of existing best practices.
- Standardize the adoption of best practices within a practice and system wide.

Sustainability

Change Readiness

Improvement planning is often the first step in the process of driving change. It includes reviewing engagement and resilience data, selecting specific metrics of focus, setting achievement goals, and implementing strategies for reaching those goals and improving performance on the chosen metrics. Assessing change readiness improves understanding of the organizational context driving readiness for change.

Address change readiness issues.

- Ask questions such as:
 - Are senior leaders prepared to invest their time and energy in this effort on an ongoing basis?
 - Is the broader management team capable of understanding the value of improving culture and resilience, and do they have the associated skill set to execute and sustain cultural initiatives?
 - Are dedicated resources available to manage change, either within the organization or through external consultants?
 - What is the experience of the organization with implementing large-scale change, and how may those previous experiences impact this initiative?
 - Is there a communications group charged with a communication strategy around change?
 - What listening methods does the organization have (e.g., leadership rounds, town halls)? How is feedback obtained from the front lines?
 - How is change assessed at the organization? What does success look like, and how is it measured?
 - Who is responsible for sustaining change?

Understand how much strategic support a unit may need to drive team engagement.

- Analysis of Press Ganey Employee Engagement survey data includes the Engagement Indicator and the Leader Index which provides key insights into group functioning and differentiates the level of support front-line teams need to be successful.
 - High Engagement/High Leader Index groups typically have less need for formal improvement planning and support. The goal for these groups is generally to maintain excellence, celebrate success, and harvest best practices and mentorship opportunities for the benefit of the broader organization.
 - Moderate Engagement/Moderate Leader Index groups are usually equipped to work through challenges within their teams through intentional improvement efforts. Depending on the types of obstacles these groups are experiencing, they may conduct more traditional self-guided improvement planning or relationship-strengthening activities between managers and team members.
 - Low Engagement/Low Leader Index groups often require strategic organizational support. These groups benefit from closer leadership involvement, strategic internal or external support, guided

improvement planning and reporting efforts, and investments in manager development. When organizational support resources are limited, these are often the groups with the greatest need for external assistance.

Determine how well-positioned a team is to move forward with improvement planning.

- Not all Low/Low teams are ready to action-plan right from the start. In some cases, it makes more sense for managers to focus on building relationships within their team, improving improvement planning readiness, and creating a more positive departmental culture that will sustain engagement in the future.
- One way to evaluate readiness is to assess the Leader Index explicitly, which is derived from a proprietary set of items on the Press Ganey Employee Engagement survey.
 - Units with high Leader Index scores have strong manager-employee relationships and are positioned to move forward successfully with their improvement initiatives. These may include maintaining high scores, documenting best practices, and developing improvement efforts to share with other units.
 - Units with moderate Leader Index scores may be missing some key elements of successful manager-employee relationships. They may move forward with their improvement plans and discussions but strengthening the core relationship of the units would dismantle any barriers to effective improvement planning.
 - Units with low Leader Index scores typically have strained manager-employee relationships and will likely experience significant challenges if they try to engage in improvement planning or improvement discussions. These groups may need to engage in relationship-strengthening activities prior to other activities, and they often require third-party support to build these relationships as well as leadership competencies.

Sustainability

Leader Skill Development

Managers are the organizational leaders responsible for empowering their employees, coaching for success, setting clear goals, recognizing achievements, communicating with transparency, listening carefully, providing constructive feedback, and helping employees to feel valued. They are essential to the health of the culture and the success of the organization.

It is important to properly enable these leaders to understand their team's culture/current functioning and their role in creating/reinforcing that culture. It is also essential to provide them with the necessary education and coaching to improve their skills and shape a culture that supports their goals.

Support managers in developing effective management skills.

- Many new managers are promoted based upon technical expertise, but this alone will not enable their success in this new and different role.
- Is the broader management team capable of understanding the value of improving culture, and do they have the associated skill set to execute and sustain cultural initiatives?
- It is critical that new managers are educated and supported with new manager training on basic skills (e.g., delegation, communication, teamwork, coaching, meeting management).
- In addition to targeted one-on-one coaching, cohorts of managers may be identified for training on specific management skills or leadership competencies. These groups can be monitored for progress that can be attributed, at least in part, to the training investment.

Prepare managers for success with a defined set of competencies.

- Consider the following questions:
 - How do you prepare your future leaders (and new leaders) for success?
 - Do you have a defined set of essential leader skills and competencies that leaders are trained on and coached to?
 - Are you proactive in supporting new leaders, or do they only get support when they start failing?
 - Do you see signs of burnout among new leaders (high activation/low decompression)?
 - Is your leadership team consistent in their level of competency in key leader skills that are essential to the business?

Establish Leadership Development Institutes.

- Best practice organizations regularly bring their leaders together for group learning and networking in sessions, commonly known as Leader Development Institutes (LDIs).
- LDI sessions provide leaders with the opportunity to:
 - Hear a unified message from their executive leadership.

- Receive ongoing leadership skill refinement in areas like leading change, coaching skills, and emotional intelligence, etc.
- Learn from one another's challenges and successes. This strengthens the collective knowledge base and increases the cohesiveness of the leadership team.

Sustainability

Standards of Behavior

Culture is shaped by how everyone across the organization behaves toward colleagues and patients. The resulting environment influences patient, workforce, and operational outcomes—including safety, quality, and patient experience. Formally drafted standards of behavior set the tone for culture and are essential to sustaining engagement.

For example, without standards of behavior, it is possible for unhealthy interpersonal dynamics to develop within teams (e.g., competitiveness, large authority gradients, and bullying). When these concerns are not addressed, engagement, resilience, and patient experience will suffer. We will see a lack of focus (i.e., if we are in “survival or “self-protection” mode we are not focused on the patient, nor are we likely to be fully situationally aware), less stability (i.e., more absenteeism and turnover), and more disruption (i.e., employee relations issues and manager time focused on problem solving rather than being future-focused).

Establish clear behavior expectations.

- Align all standards of behavior with the organization's mission, vision, and values statements.
- All standards must be accessible and understandable by all staff.
- Behavior standards should be universal across the enterprise.
- Include service expectations for phone, email, text, and in-person communication.
- Include behavioral expectations for attending daily huddles, speaking up for safety, and reporting safety events (including near misses).
- Include behavioral expectations for professional courtesy and staff interactions.
- A clear set of manager expectations must exist to ensure consistent training, monitoring, and accountability for standards—especially relative to staff management and discipline, and communication.

Train employees and physicians/APPs.

- Conduct behavior standards training.
 - Include attendees from various departments and disciplines at each training.
 - Set a schedule of training offerings to ensure everyone can attend.
 - Embed training in orientations for new employees and physicians/APPs in leadership training.
 - Include senior leaders in the training sessions to present about the purpose, including why behavior standards matter for our patients and colleagues.
- Assess the effectiveness of the training. Can front-line employees describe the organization's behavior standards and why they are important?
- Promote the standards on an ongoing basis.

- Mention behavioral expectations during daily huddles.
- Use multiple modes of communication to share reminders and prompts about behavioral expectations (e.g., intranet posts and newsletters).
- Create a formal recognition program with incentives for staff that meet behavior expectations.

Hold everyone accountable for behavior and service standards.

- Build expectations into job descriptions and annual reviews.
- Recognize and reward service excellence.
- Discuss standards of behavior during leader rounds on staff.
- Conduct observations and discuss findings. Create an observation checklist.
- Provide behavior standard reminders in follow-up communications (e.g., in newsletters and intranet posts).
- Measure physician/APP and employee compliance.
- Include an evaluation of behavior standards in physician/APP and employee annual reviews.
- Use an Appreciative Inquiry approach—empower staff to identify successful solutions to known issues.
- Present behavior standards as guidelines to achieve desired outcomes for each patient. This makes the connection between standards and the mission of health care.
- Immediately address any concerns about bullying, rudeness, or unprofessional behavior that may undermine how well employees work together.
- Speak up when colleagues are rude. It puts them on alert that somebody is watching and cares how everyone is treated.