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Your work is going to fill a large part of your life, and the only way to be truly satisfied is to do what you believe is great work. And the only way to do great work is to love what you do. If you haven't found it yet, keep looking. Don't settle. As with all matters of the heart, you'll know when you find it.

Steve Jobs

What's Keeping Quality Leaders Up at Night?

Trina Lorch (IHI)

Sixty percent of top quality leaders in health care are seriously concerned about building a culture of accountability and transparency in their organizations.

IHI recently conducted a survey of 90 US quality leaders to find out more about the challenges they're facing. Leaders in a convenience sample responded from health systems, primary care practices, and standalone hospitals. Whether they're managers, directors, senior directors, vice presidents, or chief quality officers, these health care leaders are facing pressures in many directions: lowering costs, improving population health, and managing their health system's reputation in the age of online reviews. Here are some issues these leaders are grappling with:

- Culture is a big issue, just as it is in safety: 60 percent of senior leaders — quality vice presidents and C-level quality officers, especially — reported concerns about building a culture of accountability and transparency. One CQO said that staff buy-in is still a huge issue at her ACO. “People take seemingly harmless short cuts, but that causes drift,” she said. “We really need nurses involved in quality — they should be joined at the hip.” Quality leaders can help develop a culture of transparency and accountability by embedding quality improvement methodology and training into every level of work, as the East London NHS Foundation Trust has done with impressive results.
- The CQO is also seen as a key player in navigating the transformation from volume to value. The vast majority of organizations represented in the survey — 43 of the 46 organizations — are taking on some kind of financial risk for improving health and lowering costs for their patients. Forty percent of respondents said reducing costs is a major challenge, and 70 percent reported that they're just beginning or have moderate experience with adopting new payment models and reducing costs. One vice president, who reports in to the CMO/CQO and heads up the medical group, felt his team is making progress. They realized that the value of the population health department is to help primary care practices stratify patients by risk, including rising risk and high risk, to help them focus resources on the people who need it most. “After a few more projects, we can say, ‘here is what we've seen work.’” A key part of promoting the transition from volume to value is setting up a measurement system to support population health.
- Many of the respondents felt that their organizations were experienced or even expert at developing QI capability. But the next frontier is developing a true quality management system with robust data collection, a method to spread best practices from successful QI initiatives, and improving the reliability of care. About 60 percent of respondents said managing data collection and reporting were major concerns. In a recent white paper, the IHI innovation team presented a framework for how to manage quality at every level of a health system, from the front line to senior leaders.
- Finally, quality leaders are also facing the challenge of inspiring change among people who are increasingly burned out. The CQO at one health system in Pennsylvania said, “All [primary care doctors]

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want to do is take care of patients. ... Their hearts and minds are engaged, but they don't understand MACRA and the complexity of the calculations. They just want to know what to do to perform well." She felt it's her team's role to re-engineer the practice workflow so that providers can focus on patients and not worry about how they code.

It was clear from the survey that the person responsible for quality in an organization varies widely, and is often shared across multiple leadership roles, such as CMO or CQO.

But no matter their title, the leaders who are held accountable for quality within health systems are playing an increasingly critical and challenging role. To be effective, they must be equipped with technical knowledge of quality improvement methodology as well as an understanding of the human side of change.

This article is from the IHI. Please [click here](#) to view it.

Reflecting on Collaboration

Bonnie Tejada

Last year we started a Mission Awards toolkit to encourage reflection on our six values and to support the Mission Awards process. We'll continue the tradition this year with the: **Reflecting on our Values toolkit**. [see the Medical Staff portal]. Of the six editions of the toolkit leading up to the Mission Awards nomination deadline on February 14, 2018 previous newsletters took excerpts reflecting on Compassion and Respect. In this Newsletter, there are excerpts from the Reflection on Collaboration. All Mission Awards resources and inspiring videos from past years can be found on the [Mission Awards page](#).

As a part of the Covenant family - we must collaborate! As a provincial organization of 26 facilities across 15 communities with close to 15,000 employees, physicians and volunteers - we have so many resources that we can maximize by working together, sharing ideas and expertise, and inspiring each other to do amazing things. Each day we have opportunities to collaborate as we deliver care and as we plan or develop services for the future. Collaboration is key to achieving our bold vision **to be leaders and partners in transforming health care and creating vibrant communities of health and healing**. We can't do it alone.

WHY IS IT SO IMPORTANT TO COLLABORATE?

Accomplish something faster: If multiple parts can be worked on at the same time, having multiple people who can do it just makes sense to get it done earlier.

Achieve higher quality: Individuals are skilled at different things and if you can take advantage of those strengths, you will end up with a higher quality result.

Have higher moral: When doing something (especially something challenging), not having to do something alone and having support from others who are in it together can help boost morale.

Idea generation: We all come from different backgrounds and have different angles and approaches when it comes to thinking about things, consequently can all come up with ideas one individual may never have thought of.

Learn more by checking out the Collaborative Practice Challenge series and Collaborative Care Orientation CUC module. This Covenant Health resource utilizes articles and exercises to introduce the six collaborative practice competencies as defined by the Canadian Interprofessional Health Collaborative (CIHC). Check out [these great resources](#) to explore with your team (*network access required*).

Help us Improve Physician Information

Owen Heisler

Please complete our Physician Communications Survey, to help us better understand the information needs and priorities of physicians at Covenant Health. Your input will guide potential future redesign of the Medical Staff Portal and inform communication and engagement strategies for the coming year. The survey will close on **February 16th**. It should take approximately 10-15 minutes to complete. To start the survey, please [click here](#).

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Recent Additions to Medical Staff Portal (links included)

Maureen Korzan

DATE	NAME
5-JAN-18	Stollery Children's Hospital Age of Admission
5-JAN-18	eCLINICIAN Winter Newsletter
8-JAN-18	New & Revised Corporate Policies & Procedures - January 2018
8-JAN-18	CKCM Clinical Knowledge Lead FAQs
8-JAN-18	Edmonton Zone DOSU Reminder
9-JAN-18	Sue's News - January 2018
9-JAN-18	E & P Advisory: AHS Equipment information - Smiths Medical Medfusion 3500 & 4000 Syringe Pumps Safety Notice Advisory Information Acknowledgement
9-JAN-18	E & P Advisory: AHS - Aplicare Skin Protectant Pads found within Bard System Access Kits Recall Notification Advisory Information Acknowledgement
10-JAN-18	Reflecting on Social Justice Toolkit #4 - Social Justice Mission Awards video
10-JAN-18	MAID Public Opinion Poll The Province Daily Poll
10-JAN-18	Safe handling of Hazardous Medications
12-JAN-18	Completing the Influenza Immunizations Survey OHS&W's Influenza 2017 Survey "Got My Flu Shot" Form
12-JAN-18	Connect Care Direction-Setting Sessions - Physician Participation Requested & What's Coming in Jan/Feb 2018 Connect Care Newsletter - January 2018
12-JAN-18	ILI Requisition Process MEMO Sample Requisition
15-JAN-18	Prohibited Abbreviations Audit - January 2018 Prohibited Abbreviations Audit January 2018 - Audit Guide & User Manual Data Collection Tool FINAL (excel format)
16-JAN-18	Covenant Health Library Services: New Titles Related to Physicians
18-JAN-18	ACP/GCD Tip of the Month - January - Green Sleeve education is an essential part of discharge teaching
18-JAN-18	Drug Advisory: UPDATE - doPAMine Injection Shortage Drug Advisory: Morphine 1 mg/mL alcohol free syrup (Slatex®) shortage Drug Advisory: Cisatracurium 2 mg/mL Injection Shortage
19-JAN-18	Drug Advisory: ROPivacaine injection Shortage
19-JAN-18	Stroke Ambulance - Phase III
19-JAN-18	UPDATE: Hazardous Medication PPE Guide Implementation
23-JAN-18	Reflecting on Integrity Toolkit #5 - Integrity
23-JAN-18	ANNOUNCEMENT - Medical Director, Banff Mineral Springs Hospital: Dr. Matthew McIsaac
26-JAN-18	SURVEY: Restraint Use in Covenant Health Paper copy of survey