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Children's Cancer Center as a Clinical Microsystem: Engagement

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Children's Cancer Center as a Clinical Microsystem: Engagement

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Results

Introduction

- A clinical microsystem is the smallest functional unit within the healthcare system and is composed of the patient, a provider, and information.¹
- The Children's Cancer Center (CCC) outpatient clinic functions as a microsystem within the LVRCH mesosystem and LVHN macrosystem.
- The main purpose of this project was to assess and identify areas for quality improvement in work engagement within the Children's Cancer Center staff.
- Colleague, or work, engagement requires an employee's vigor. dedication and absorption.²
- Prioritizing engagement can decrease employee turnover and burnout while increasing well-being, performance, productivity, and patient satisfaction.3
- · Assessment tools:
 - Staff interviews, including twelve questions about identifying the CCC's purpose, staff morale, effectiveness of communication, etc.
 - Clinical Microsystem Assessment Tool and engagement surveys _
 - Daily morning huddle surveys



Materials and Methods

- The themes found from initial assessment were streamlining communication, increasing morning huddle efficiency, providing continuing education tools, and fostering a supportive atmosphere.
- Countermeasures:
 - Restructure of morning huddle
 - Provided continuing education materials, or "mini projects" _
 - Marbles corresponding to the staff's daily stress levels
 - Patient and peer-to-peer encouragement notes _

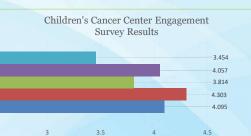
TODAY'S DAT LOOK BACK LAST 24 HOURS [5-10 min] LEARING events, daily metrics, exemples of exemples of exemples of exemples of events, daily metrics, exemples of exemples of events, daily metrics, exemples of exemples of events, daily metrics, exemples of exemples of events, daily	Total Visits No-Shows Late Cancels	Reschedule? How scort? Send letter? Nerlik (PCP?	Notes for schedulers:	
	Discharges O/N Phone Calls f/u	What needs to be scheduled? Who needs a call?	Notes for phone nume:	
	Safety events, near misses & other issues	Quick cause analysis & next steps if appropriate	Notes for PCC for Super Huddle:	
	Scheduling Issues? Waits over 30 minutes? Marbiles Great Day Supported Day Bad Day	Quick cause analysis/daily metrics & next steps if appropriate	Dramples of Droellence: Notes on other concerns raised:	

LVHN Children's Cancer Center Colleague E	ngagem	ent Su	irvey			
Please rate your level of agreement with the following employee engage comments may be included in the comment sections below	our level of agreement with the following employee engagement drivers listed below. Any addition ay be included in the comment sections below					
1 = Never, Not at all, Strongly clisagree						
5 = Always, Definitoly, Strongly agree	Never				NAZ	
1. Huddles are appropriately used in this area/unit.	1	2	3	4	5	
 In this area, I feel comfortable speaking up if I perceive a problem with petient care. 	1	2	3	4	5	
3. My ideas and suggestions are valued by leaders.	1	2	3	4	5	
4. My manager is open and responsive to staff input.	1	2	3	4	5	
5. My manager helps me balance my job and personal life.	1	2	3	4	5	
6. My organization helps me deal with stress and burnout.	1	2	3	4	5	

Figure 1: implemented daily huddle checklist.

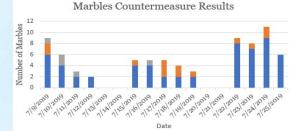


2.5



Resources Teamwork Stress Understanding of Role Communication

Figure 3: Initial engagement survey results, divided into themes.



Good Okay Bad

Figure 4: Number of good, okay, and bad marbles found daily

Statement	Before Countermeasures Average Score	After Countermeasures Average Score	Statement
Conflicts are resolved fairly in my unit/department.	3.42	4.00	The new approach to huddle has increased its value.
My organization helps me deal with stress and burnout.	4.54	3.50	The new approach to huddle is helpin us be better prepared for the day
We discuss our unique skills with each other, so we know who has relevant specialized skills and knowledge.	3.72	3.75	The marbles help to communicate ho stressful the day was. The mini projects will help us work together to better understand the wor we do and to find ways to standardiz
I am treated with respect every day by everyone in my unit/area.	4.09	4.00	it. The Cheers for Peers board will allow us to recognize the great work we al
I receive the necessary support from my colleagues in my unit/department to help me succeed in my work.	4.18	4.13	do. The patient comments being posting will allow us to appreciate the great work we do.

Figure 5: Final engagement survey results Figure 6: Final engagement survey results, before and after counterm regarding countermeasure effectivene

Discussion

Initial assessment:

- The high level of engagement seen in the CCC could be due to working within a rewarding clinical microsystem with high patient satisfaction and appreciation.
- The CCC engagement assessment showed opportunities for improvement through better support, including trauma. stewardship, staff training, more organized quality improvement, which includes the involvement of all staff.
- Countermeasures:
 - New huddle structure showed need for improvement in ensuring only pertinent information is reviewed.
 - Marbles as stress indicators showed less stressful shifts over time.
- Final assessment:
 - Repeated staff engagement survey with additional questions showed mixed results, which is likely due to lack of time from shifting culture.
 - Additional survey questions regarding countermeasures were very positive and suggest they will have a positive impact.
 - Responses showed more value in huddle after implementing the new structure.
- Limitations:
 - Some results in quality improvement can only be expressed qualitatively.
 - Results are dependent on multiple variables: patient volume, outcomes, external circumstances, etc.

Conclusions

- The Children's Cancer Center showed that it is a highly reliable clinical microsystem with overall good engagement.
- Implemented countermeasures have shown some improvements to fostering positivity, productivity, and continuing education.
- Future Directions:
 - Continue with current countermeasures in place and repeat staff interviews.
 - Administer support for staff in the event of negative patient outcomes.
 - Provide more structured training for new hires; add language training to continuing education materials.
 - Design a huddle board with daily staff engagement metrics.

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Average Score

4.25

4.38

3.68

4.13

4.13

4 38

¹ Likosky, Donald S. (2014). "Clinical Microsystems: A Critical Framework for Crossing the Quality Chasm." The Journal of ExtraCorport Technology. 2014;46:33–37.

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