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The snapshot features:
- relevant articles from healthcare industry experts
- case study success stories
- tips and tools for quality improvement
- patient experience and other industry research findings
- articles with ideas to help achieve success in your role

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Manager of Client Relations
snapshot@pressganey.com.au

Building a High-Performing Workforce

The January 2016 PG Snapshot is a recently released white paper revealing targeted engagement strategies to help build a high-performing organisation that drives positive patient experience, staff retention and solid financial performance. The white paper outlines a data-driven method to help establish engagement tiers, measure action planning readiness, and enact sustainable, meaningful change. The paper, which analyses a total of more than 1 million employee voices, identifies the critical drivers of engagement and provides key insights that include:

- The relationship between employee engagement and key patient experience performance metrics
- Behaviours and best practices that distinguish high-performing organisations committed to sustained improvement
- Actionable strategies driven by engagement levels to help build and sustain high-performing teams

The industry has come to recognise engagement as the ‘fourth aim’ to optimising health system performance along with improving the patient experience, population health and reducing health care costs.

To build a high-performing organisation, health care leaders need a focused understanding of where to drive change in order to create and sustain an engaged, patient-centred culture that reduces stress for caregivers and suffering for patients.
Building a High-Performing Workforce

Understanding engagement at the work-unit level, assessing readiness for action planning and incorporating an organisation’s global perspective are necessary strategies for keeping and growing an optimally engaged workforce.

Summary
An organisation’s relationship with its workforce is the fundamental building block of a culture that drives positive patient experiences, optimal clinical outcomes and solid financial performance. Organisations that actively foster a culture of satisfied and highly engaged caregivers who are committed to and aligned with operational objectives are best positioned to reach their safety, quality and service goals.

Regularly surveying caregivers and employees is an important first step toward understanding and addressing the cultural health of hospitals and health systems, but it is only the beginning of the journey.

To build a high-performing organisation, health care leaders need a focused understanding of where to drive change in order to create and sustain an engaged, patient-centred culture that reduces stress for caregivers and suffering for patients.

Such insight can best be achieved by capturing the voices of all employees at the work-unit level and tailoring improvement efforts to needs and readiness of each group based on their degree, or tier, of engagement. In this way, leaders can identify unique drivers of engagement, target improvement opportunities and celebrate the successes of their employees.

Why Engagement Matters Now
To achieve the triple aim of enhancing the patient experience, improving population health and reducing costs, leaders and health care providers must add a fourth aim: improving the engagement and work environment of those who deliver care, with the understanding that engagement plays a critical role in their success and improves the lives of employees.
In the health care setting, engagement measures each employee’s pride in the organisation, intent to stay, willingness to recommend to friends and family for care, and overall satisfaction toward the workplace. Caregivers and employees who are engaged in their work tend to be highly motivated, remain committed to the organisation and stay focused on achieving business goals and driving the organisation’s future.

Consider the relationship between employee engagement and patient experience performance (Figure 1). In a study that included more than 2,200 health care facilities, the contrast between organisations with top-quintile percentages of engaged employees and those in the bottom engagement quintile is clear: Organisations with the highest percentages of engaged employees are succeeding in the critical areas of patient experience, including how well nurses and doctors communicate with patients, the responsiveness hospital staff to patients’ needs, how well hospital staff help patients manage pain, how well the staff communicates with patients about new medicines, whether key information is provided at discharge and whether patients would recommend the hospital to family and friends.

Most individuals who pursue a career in health care have a desire to help people, and as such are highly motivated to provide compassionate care. The vast majority also want to feel emotionally connected to their workplace and to contribute meaningfully to the healing culture. Unfortunately, when this connection is absent or eroding, employees begin to disengage, which in turn influences everything from service to quality, productivity and retention. In such a culture, employees often lack the tools and the leadership support to improve. Likewise, despite managers’ desire to foster an engaged workforce, many lack the necessary insights into what to change and how to change it.

To be successful, organisations must seek these insights by consistently surveying employees, listening to their feedback, committing to open, honest communication, and implementing the necessary changes at the organisation and team level to create and sustain a more motivated, engaged workforce.
High-performing organisations make the continuous improvement of employee engagement a top priority. These organisations rely on detailed views of engagement at the work-unit level to design and implement targeted improvement strategies based on the engagement of each group.

Failure to build high-performing teams will increasingly cost organisations revenue under payment reform. Similarly, it will negatively influence financial performance, making organisations less likely to be considered for inclusion in preferred provider delivery models.

In addition to the financial considerations, an engaged workforce is a must to achieve organisational goals in the face of the resource challenges facing health care today. These include increased utilisation and demand for primary health care as a result of population growth, the aging population, and insurance expansion; projected shortages of nurses and primary care providers; and diminished care resulting from rapidly increasing levels of clinician burnout.

New data derived from the 2015 Press Ganey Healthcare Average employee engagement database comprising more than one million respondents indicate the time to begin actively managing engagement is now. According to the findings, direct caregivers—those employees closest to the bedside—are less engaged and are more likely to leave an organisation compared to other health care employees (Figure 2). The data also suggest that loyalty is lowest for employees ages 25-39, who represent approximately 38% of the workforce (Figure 3). This segment of the workforce, which includes older millennials and younger generation X employees, is too large to ignore. Increasing engagement of all segments and retaining the most dedicated employees should be a strategic imperative across health care systems.

Figure 2

![Employee Intent to Stay and Employee Loyalty](image)

Not in Direct Patient Care
In Direct Patient Care
Appreciate Your Team

Some health care leaders may express concern about measuring employee engagement. Health care today demands measurable performance; however we must recognise that survey numbers do not have intrinsic meaning; people have meaning. The survey is an invitation to begin a dialogue on matters of importance to employees. There are no “bad” results from a survey, only the opportunity to build a more engaged workforce and team. The only negative outcome is a lack of action or progress.

Employees are the most important asset in health care. If organisations meet employees’ basic needs—a trusting manager, good communication, the resources to do their job—employees will be satisfied with their work. If they feel an emotional connection to the organisation and pride and fulfillment in what they are doing, they will be engaged and they will advocate for the organisation. Satisfied and engaged employees are valuable strategic partners who are invested in the organisation’s success.

Measuring employee engagement with a scientifically valid instrument is an important component of an engagement strategy, but alone it is not enough. It must be accompanied by deep data insights, accurate and actionable results, and improvement efforts.

Three actions separate organisations that simply measure employee engagement from high-performing organisations committed to improving and sustaining engagement over time. High performing organisations:

1. Measure engagement at the work-unit level and manage the follow-up activities based on each work group’s engagement.

2. Assess the readiness of each work group before initiating action planning.

3. Identify the key drivers of engagement unique to their organisation.
Measuring Engagement at the Work-Unit Level

Improving engagement requires a focus at the work-unit level to pinpoint which employees are more or less engaged. With enterprise-wide surveying of employees, the most effective means of identifying engagement opportunities is through work-unit tiering.

Designating work units as Tier 1, Tier 2, or Tier 3 based on performance on a set of questions that are key drivers of workforce engagement allows organisations to customise engagement approaches to the needs of individual groups.

Tier 1 units demonstrate the highest performance on key drivers of engagement whereas Tier 3 units perform significantly poorer on the same drivers.

Figure 4 illustrates the national proportions of work units by tier. Looking at the defining characteristics of each tier, employees in Tier 1 work units are the most loyal and intend to stay with the organisation (see Figure 5).

Figure 4

NATIONAL DISTRIBUTION OF WORK UNITS BY ENGAGEMENT TIER

45% 41% 36% 23%

Tier 1 Tier 2 Tier 3

Figure 5

EMPLOYEE INTENT TO STAY BY ENGAGEMENT TIER

5.0 4.54 4.21 3.87

Tier 1 Tier 2 Tier 3
Tier 1 work groups and Tier 3 work groups require very different follow-up approaches (Figure 6). Because a struggling work unit needs more support than a high-performing unit, adopting a cookie-cutter approach across the organisation will either be insufficient to engage low performers or it will be addressing a problem that doesn’t exist in high-functioning units.

Figure 6

<table>
<thead>
<tr>
<th>FOLLOW-UP ACTIVITIES DIFFER BY ENGAGEMENT TIER</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TIER 1</strong></td>
</tr>
<tr>
<td>Reward</td>
</tr>
<tr>
<td>Recognise</td>
</tr>
<tr>
<td>Identify Role Models</td>
</tr>
<tr>
<td>Identify Mentors</td>
</tr>
<tr>
<td>Mine for Best Practices</td>
</tr>
<tr>
<td>Limited Action Planning</td>
</tr>
<tr>
<td><strong>TIER 2</strong></td>
</tr>
<tr>
<td>Support</td>
</tr>
<tr>
<td>Engage</td>
</tr>
<tr>
<td>Assess for Action Planning</td>
</tr>
<tr>
<td>Readiness</td>
</tr>
<tr>
<td><strong>TIER 3</strong></td>
</tr>
<tr>
<td>Identify Reasons for Tier 3</td>
</tr>
<tr>
<td>Assess for Action Planning</td>
</tr>
<tr>
<td>Readiness</td>
</tr>
<tr>
<td>Offer Manager Support</td>
</tr>
<tr>
<td>Offer HR Support</td>
</tr>
<tr>
<td>Invest in Training</td>
</tr>
<tr>
<td>Pair with a Successful Mentor</td>
</tr>
<tr>
<td>Significant Action Planning</td>
</tr>
<tr>
<td>(provided APR is not too low)</td>
</tr>
</tbody>
</table>

As indicated in the schematic, the tier score indicates the level of work-unit action planning that is needed. For example, Tier 1 groups are the high performers on the key drivers of engagement. These groups have high scores on all the drivers of engagement, including engaged employees who are the least likely to leave. They are thriving in the organisation’s current work environment and require minimal action planning. At the other extreme, Tier 3 groups require significant action planning and likely require additional training and resources. Tier 2 groups need to engage in some action planning, but to a lesser degree than that required by the Tier 3 groups.

Organisations that regularly measure engagement at the work-unit level and target action planning accordingly are the most successful. For example, at Grady Health System in Atlanta, all work groups receive feedback and conduct action planning, but the intensity of action planning is driven by the tier structure, with Tier 3 work groups having the most attention, human resource and manager support. As a result, the organisation has experienced a dramatic movement across tiers.

In one year, Grady Health System saw a five-fold increase in the percentage of work units in Tier 1 (from 4% to 21%), and halved both the number of work units in Tier 3 (from 65% to 33%) and its voluntary turnover (from 25% to 12%).

High-performing organisations understand that recognizing and celebrating Tier 1 employees is an important part of the improvement journey. North Carolina-based Carolinas HealthCare System, for example, takes an entire day (and months of planning) to celebrate and reward Tier 1 leaders with a leadership summit that features employee recognition and motivational speeches by organisation leaders and nationally recognised business leaders and authors.
Highly engaged work groups can be a valuable resource for less engaged groups. Identifying and supporting the successful practices of Tier 1 groups provides a model for other for Tier 2 and Tier 3 groups to replicate.

Tier 3 work units, who score lowest on the key drivers of engagement, also require special attention for several reasons. First, there are various ways that a work group finds itself in this position. Perhaps it is under new management. Maybe it is a work-in-progress and has not had sufficient time to progress. Or perhaps it is being managed by the wrong leader (not necessarily a bad leader, just the wrong leader for this group). In this regard, Tier 3 work units require additional scrutiny to understand what is happening from a leadership perspective.

The good news is that with focus and effort, the engagement of Tier 3 work groups does improve. Carolinas HealthCare has an intense boot camp/leadership training academy for its Tier 3 leaders and action plans are carefully monitored and evaluated. Additional scrutiny is focused on those Tier 3 leaders who fail to move to Tier 2 or Tier 1 status over time.

For most organisations, action planning is the first improvement step, but not every Tier 3 work unit is ready to action plan right from the start, so it is important to understand its readiness.

**Assessing Action Planning Readiness**

In addition to tiering, assessing each work unit’s readiness for feedback and action planning is key to a successful engagement strategy.

A work unit’s action-planning readiness (APR) score—a metric derived from various survey items—indicates how well-prepared the unit manager is to lead the group through the action-planning process. This key metric provides insight into manager-employee relationships by measuring trust, respect, communication skills and openness to discussing issues and solutions. High APR scores indicate that the work unit is ready to begin action planning, while low scores suggest that manager-employee relationship issues exist that likely are barriers to effective action planning.

Action-planning readiness identifies whether employees and their managers have the foundations of mutual respect and confidence necessary to have a meaningful dialogue and tackle improvement initiatives. Understanding specific APR scores is an additional way the organisation can pinpoint improvement opportunities and align strategies with the readiness level of individual units.

There are distinct differences in action-planning readiness across the units of different organisations. In all instances, the initiation, level and intensity of action planning should be directly related to tier scores and action-planning readiness. In the absence of communication and trust, action planning is a wasteful endeavour that can cause more harm than good.

To ensure that the necessary resources are being directed toward the work groups that need them, action plans should be optional for Tier 1 work groups. Most Tier 1 leaders complete them by choice and focus on capturing best practices to share with other units.

Groups with low APR scores should focus on improving the communication and trust within the team before action planning.
Identifying Key Drivers of Engagement
For optimal effectiveness, action plans should reflect the unique drivers of engagement within an organisation. The key drivers of employee engagement globally are shown in Figure 7. While these drivers tell a compelling story of what matters globally, they are no substitute for what happens at the local level. In fact, in a recent study, the key drivers specific to a healthcare system or facility matched national key drivers only 23% of the time. To maintain high levels of performance, organisations should measure and address issues specific to their caregivers.

Figure 7
GLOBAL KEY DRIVERS OF EMPLOYEE ENGAGEMENT

1. This organisation provides high-quality care and service.
2. This organisation treats employees with respect.
3. I like the work I do.
4. The environment at this organisation makes employees in my work unit want to go above and beyond what’s expected of them.
5. This organisation provides career development opportunities.
6. My job makes good use of my skills and abilities.
7. I get the tools and resources I need to provide the best care/service for our clients/patients.
8. My pay is fair compared to other healthcare employers in this area.
9. This organisation conducts business in an ethical manner.
10. I respect the abilities of the person to whom I report.

It is also necessary to consider the issues that affect engagement at the organisation level. Successful organisations select one or two key drivers at this level for focused improvement efforts. This approach complements the specific action planning that happens at a work unit level and ensures consistency in messaging for organisational imperatives.

Importantly, action plans at the organisation and unit levels should be crafted with a positive focus that incorporates the organisation’s goals, rather than focusing on what is wrong. Inspiring employees with common organisational goals and giving them the tools to succeed at the local and global levels promotes a sense of shared purpose which is essential for engaging the workforce.
Conclusion
Understanding engagement is a critical imperative for organisations today. Building and sustaining a high-performing culture requires consistent and sustained engagement of the work force. To engage staff in sustainable change, health care leaders must:

- Communicate a shared vision.
- Measure engagement at organisational and work-unit levels.
- Promote open and honest communication.
- Work to build trust, foster loyalty and support a sense of shared purpose.
- Reinforce the positive aspects of care delivery rather than focusing on errors.
- Promote ownership of the change process and draw on each team's collective experience, wisdom, and resources to develop solutions at the organisational and work-group levels.

Building high-performing teams, attracting and retaining top talent, and aligning employees around patient experience goals and business strategies are important to achieve sustainable improvements in the safety, cost and quality of care.

The most important action is to focus on the right issues at the right level and use the data to drive action planning and change. Taking the time to understand engagement at the work-unit level, assess readiness for action planning and incorporate the global perspective are all winning strategies for keeping and growing the most engaged workforce possible.