



[Notes to presenter:

- Adapt the presentation as needed for your style and the audience.
- The presentation uses animation only minimally; if your presentation style is to use more animation, add animation as needed.
- We've included lots of talking points to help ensure you understand the purpose of each slide and how you can present it. The talking points are suggestions, but you can and should tailor your remarks to the audience, your style and the time available.
- We've included comments that may be counterintuitive to the audience and may even strike a nerve. Sometimes you must "get real" to influence change. And while we're telling the audience that *they* may run into resistance to change, you need to expect it from your audience at some points. Don't be afraid to raise emotions, but if you're uncomfortable with the way we've presented a talking point, skip it or tone it down.
- We've intentionally not designed the slides to be read to the audience. Your comments should describe the slide to the extent necessary for the audience to understand it, and complement and extend what's on the slide while the audience reads and absorbs it.

- Hi, my name is _____ and we're here to help bring clarity to chaos.
- Our goal today is to provide tools you can use as soon as you leave class.
- Too many times you sit in a workshop like this and then go back to your job and there's nothing tangible that you can do the very next day.
- We've created several tools that you will learn about during this workshop and then take home and begin using immediately.
- And they're all designed to be done over a cup of coffee with you and a mentor or

advisor.

- Not you and 35 people in a room in an offsite location for three days.
- They're meant to facilitate rapid change.

What Is a High Reliability Organization?

An organization in a high-risk environment
that operates nearly error-free
over a sustained period of time



- I'm not going to go too deeply into the history of high reliability or how it's played out in other industries. There's a great deal of information on that in your handouts, in our online videos and on our website.
- Today we're going to focus on how to approach high reliability to help you avoid the pitfalls that will derail your journey, and to provide you tools that you can put into use immediately to guide your high reliability journey to a successful outcome.
- But to make sure we're all on the same page, the concept of high reliability is simple: High Reliability Organizations manage to function virtually error-free over many years in spite of the fact that they're operating in very high-risk environments.
- It was pioneered in places like nuclear power plants, massive electrical power plants, water control systems, air traffic control towers and aircraft carriers, like the one you see pictured here.
- Landing on the flight deck of an aircraft carrier requires snagging an arrest wire while flying a \$150 million, 54,000-pound fighter jet traveling at 150 miles per hour in a landing area that's 315 feet long so you can come to a stop in 2 seconds. And, oh by the way, while the pilot is trying to snag that wire, the ship is traveling about 30 miles per hour and can also be rocking on the waves.
- Makes conducting a post-surgical debrief sound pretty easy, huh?
- If the pilot happens to succeed, no big deal. That's what was expected. If he fails, he dies, the rest of the flight crew dies and at least a few dozen sailors on the ship will die.
- But the Navy does this hundreds of times every day, day in and day out, year in and year out, with a near flawless safety record.
- That's high reliability.

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What Does HR Require?

- Deep process improvement skills
- A supportive culture
- The capability to manage change

- Too often, healthcare organizations are missing one or more of these components but still expect improvement.
- A shift in perspective, organizational structure and problem solving can lead to faster adoption and accelerated savings.

HURON 3

- Moving toward high reliability requires a foundation, just like building a skyscraper does.
- A critical component of that foundation is process improvement.
- The last thing we want you to do is to identify 400 things that need to be fixed before you have a process improvement engine to fix anything.
- Then all you've done is excite an organization that's already stressed out by saying, "I want to hear all your problems," but then not fix anything.
- Today we're going to help you understand what's required and give you some simple tools to get started right away.
- High reliability also must be built on a transparent, just, patient safety culture.
- With culture, you better be careful what you wish for. It may feel good to announce that you have a transparent, just culture, but that can backfire if you're not ready to hear the feedback and truly be transparent.
- Change management may be the biggest challenge healthcare organizations will face. Everything about pursuing high reliability requires change.
- What's the average job tenure for a healthcare executive? In our experience, 4-5 years. For nurses it's 3-4 years.
- If you're going to truly change your culture and drive out error, expect it to take a decade.
- So if your change agents -- your executives and your nurses -- are turning over twice as fast as it takes to change your culture, then the deck is stacked against you...unless you build change management tools into the organization so the shock of change is expected and you have the organizational skills to manage change.

Today's Agenda

- 8 a.m. – Registration
- 8:30 a.m. – Program
- 10:15 a.m. – Break
- 10:30 a.m. – Program
- Noon – Working lunch
- 1 p.m. – Program
- 2:15 a.m. – Break
- 2:30 p.m. – Program
- 3:30 p.m. – Adjournment

HURON 4

[Tailor the slide to your agenda.]

- Here's today's agenda, but the most important thing is that you're not going to have to sit through 8 hours of me talking at you.
- More than half of our time will be spent working on real projects —things you're facing or have been tasked with.
- We'll talk about them, learn some simple but powerful tools to help you with them, and set you up to succeed.
- So start thinking now about a project that's important to you. Something you've been working on — maybe it's going well and maybe it's not.
- Or maybe it's something you've been tasked to do, but maybe you don't know where to start.
- You're going to work with this project, individually, in small groups, and with coaching as we proceed through the day.



- Here's the first problem we face, and frankly, it's the problem I will have with you today.
- I'm talking to you and I think I'm communicating one thing.
- You're listening, and you're no doubt hearing some of what I think I'm communicating, but not all.
- And chances are you're hearing things that I'm not intending.
- So I'll be checking with you all day.
- I'll ask you questions. I'll try figuring out from your body language who's with me and who I've lost, and I'll listen carefully when you ask me questions or make comments.
- And that's exactly what you need to do in every discussion you have about high reliability — every meeting, every interaction with staff or patients.
- Check to make sure that communication is taking place...not the illusion that it is.



Now, I'm not trying to make a political statement here.

- As you can see, this is the cover of The Economist from when the Affordable Care Act was passed.
- It was one of many things that have been done during the past decade to try to improve healthcare.
- But let me ask you this: How are we doing? Is any of this working — the ACA, revisions to it, other improvement efforts inside and outside healthcare? Are things any better? [Allow short discussion.]
- Based on my discussions with hospital staff and leadership across the country, the intention of all these activities was good – to have benchmark data, quantitative comparison of satisfaction levels, payment, bundles, etc. — but things are worse, not better.
- Here's what we see all too often: A nurse on second shift has to log into four different systems using four different passwords to get to the one piece of information she needs to log a charge, then she has to go back to the patient on the 3rd floor where the printer doesn't work. That is happening all across the country while we're meeting today.
- That's a perfect example of a series of broken processes slowing us down and endangering the care we provide.
- That's what's killing healthcare. It's not the Affordable Care Act, it's not an indictment of our people or our intentions, it's massive process breakdown.
- You might say: OK, then let's implement Lean or Six Sigma and fix the processes.
- But it's not that easy because a hospital isn't like an auto assembly plant. We don't have hundreds of highly experienced process engineers that wake up every day ready to fix

things.

- And we don't make a product using precisely replicable steps. We'll come back to that throughout the day.
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