

SHSMD CONNECTIONS



SEATTLE 2018

When Employee Engagement is Essential,

MANAGERS MATTER MOST!

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TODAY: Insider info on an internal communications system that works

(And is simple, and ultra low budget!)

- Why does employee engagement matter?
- What role does communication play?
- What's the hottest new approach to successful communications? (Hint: It's not new at all)

Employee Engagement: A vital sign

- Employee engagement is key vital sign for healthcare organizations
- Greater commitment to mission and values
- Impacts all of our KPIs: quality, safety, productivity, patient and family experience

*Drucker Institute study: 50 biggest overall gainers in corporate effectiveness shot up by an average of 11% in employee engagement. **By taking care of people, they perform at higher levels, productivity and employee satisfaction levels increase.***

Communications: Foundation for employee engagement

- Information
- Interchange
- Inspiration

You need all three!

Status: How are health systems really doing?

The surveys said...

Data from surveys and focus groups at five major systems with a total of 50,000+ employees, and thousands of managers, consistently showed the same picture:

- Most employees say internal communications – how well they feel informed and engaged – is neither good/great, nor horrible. It's a C-. They want to know more and be more involved.

Their words speak volumes

- *“We are told to be – and we ARE – dedicated to caring for and about patients and families. But **it’s so hard when we don’t know what’s going on.**”*
- *“**I can’t keep up** with everything – work two days, come back four days later and it’s like I have missed SO much.”*
- *“**Things change all the time.** My badge won’t open this door anymore?”*
- *“Most of us have to focus on getting our work done . . . But **we want to be proud.**”*

And touch our hearts . . .

- *“We need to feel we are contributing. We need to be inspired.”*
- *“We aren’t “just support people” – our work matters.”*
- *“If we knew more about what was going on, why things are done, where we are going . . . **We’d all feel that we are part of something big and great.**”*

SO, how do we earn an A+ with our people?

- At the heart of our health systems, it's MANAGERS who are . . .
 - Closest to employees – face to face, day after day
 - Trusted
 - Accessible
 - Reassuring
 - Listeners
 - Advocates

Managers are key to A+ engagement

- They are the employees' preferred source of information and most effective source, too
 - Email isn't accessible to many employees
 - Printed materials aren't popular with all
 - Town halls are nice but infrequent
 - ONLY source that every single employee has is a manager
- And when not chosen as #1 source it's generally because:
 - System had no active face-to-face program to inform them, so email was the only available channel
 - OR managers were so uninformed they couldn't be effective
 - OR surveys didn't even ask about managers

How do managers feel about communicating?

- Their hearts are in the right place (a change that has evolved in last ten years)
 - More than 90% say they know communicating is a key part of their work and they want to do it well!
 - **BUT, they are struggling with many challenges!**

Why are they struggling?

- Only “somewhat” well informed themselves
- Have workers on multiple shifts and/or at multiple sites
- Asked for all kinds of information from employees that they don’t have
- Besieged by executives and management with requests to “please share this with your workers”
- Buried in emails and can’t keep up -- much of it irrelevant, or duplicative

And struggling . . .

- Not getting the right information (what's happening that will affect my work group) *“Info is at the top, but the cascade is a trickle when it gets to me”*
- Their bosses email to them, so they turn around and email their workers
 - Or try to tell people, informally, as they see each other – no consistency
- When they do get info, no direction on whether to share, how to share, what are key messages, etc.
- Ten or more sources for information that they have to cull through to find information for their work group – takes up much time that they don't have

And to make it worse . . .

What they get is too often too little, too late:

- Not enough lead time take any needed actions.
- “My team hears through the grapevine before I do.”
- Info rarely includes “the why” or staged over time.
 - not easy to get their work group to understand (let alone be brand ambassadors)

Front-line managers need tools, content and support!





**THINKING
BEYOND**

A new model delivers results for University Health System

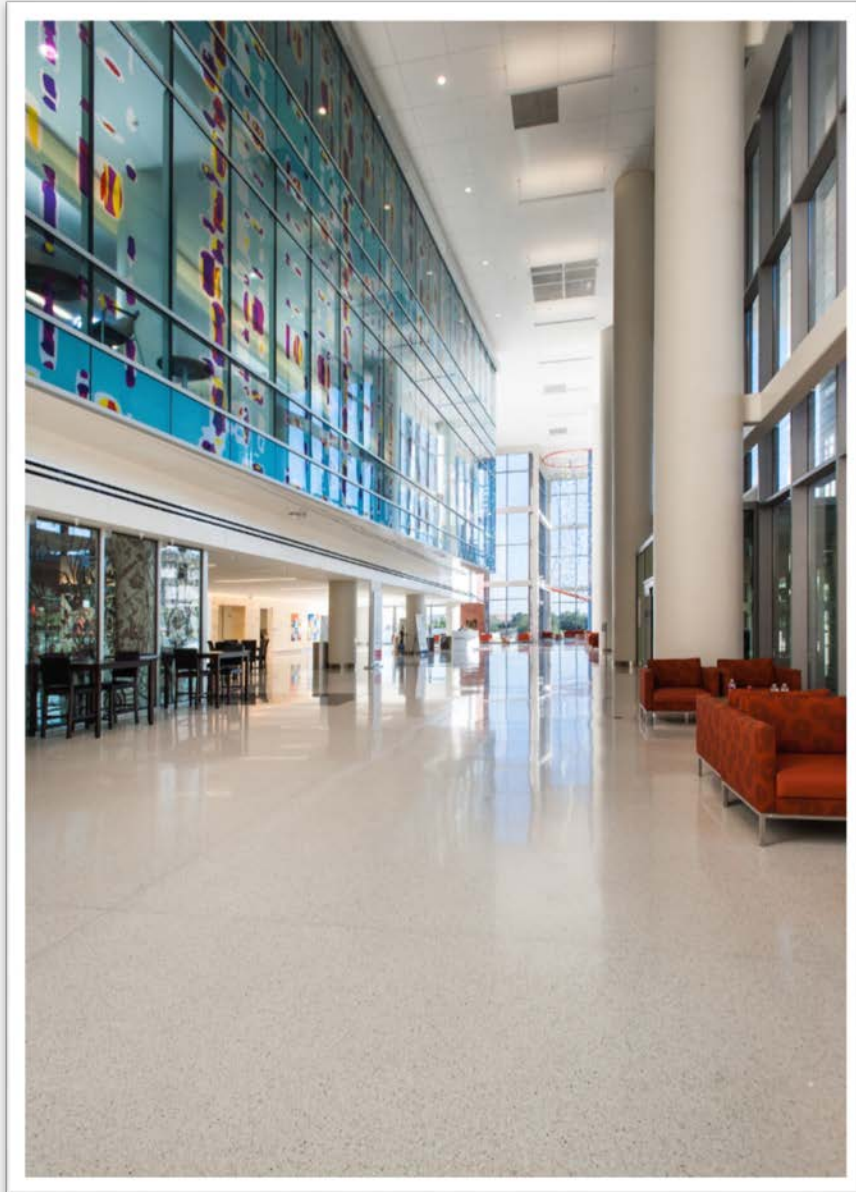
San Antonio, Texas

We are...

- Proudly owned by the people of Bexar County, with roots that go back to 1917.
- One academic hospital and 24 ambulatory locations. About 8,000 employees and 1,000 physicians. Operating budget of \$1.6 billion.
- Partnered with University of Texas Health Science Center San Antonio
 - South Texas' first Nurse Magnet health system (2010 & 2015)
 - Level I Trauma Center for 22 counties
 - Comprehensive Stroke Center
 - Center for Organ Transplantation
 - Level IV Neonatal ICU & MFM Center
 - Level IV Epilepsy Center
 - Adult & Pediatric Cancer Centers



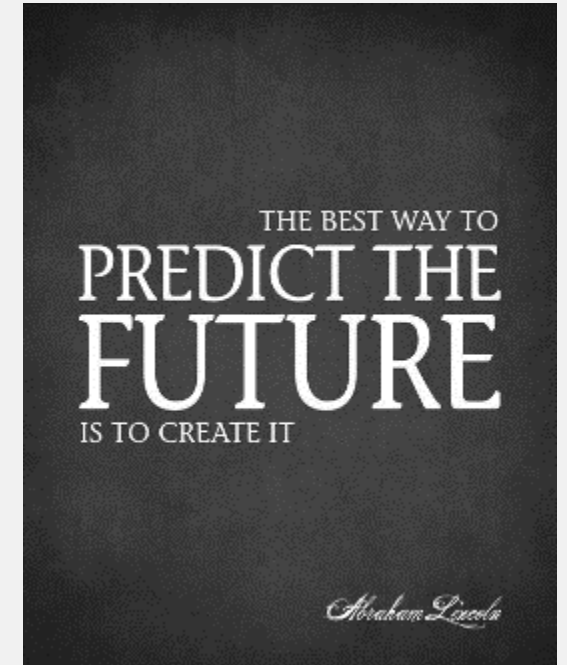
Our challenge: Perception



- In 2014, a \$900 million expansion made us the most technologically advanced, beautiful hospital in South Texas.
 - Huge private rooms, room service
 - Rooftop gardens, \$9 million healing arts program.
- *But everyone, **including our staff**, still saw us as “the county” hospital instead of the most advanced hospital of choice.*

New marketing plan began with *employees*

- 2015 - 2016 Comprehensive brand assessment and strategic marketing/communications plan developed and approved by the board.
- Employees #1 priority audience!
- Internal communications plan based on data:
 - Manager email survey (240 people)
 - Employee focus groups (90 total staff, multiple locations & shifts)



Change was needed, but didn't want to make it worse or do a "flavor of the month" quick fix

How to avoid the “new initiative” syndrome?



Our NEW
initiative



Leaders
see ...



Managers
think ...

Listen to what managers told us:

- Biggest issue wasn't lack of channels
 - we had more than enough.
- Information was going out in bits and pieces. They wished they could get it timely and share it consistently.
- We needed to make information easy for managers to find.
- We needed to change habits: no more one-off emails to various out-of-date email lists.



The goal: make an “easy” button

- Get all employees the information they need, when they need it, so they feel informed (engaged, inspired, excited, etc.) by . . .
- **Making it easy for managers to get and share relevant information. . .**
- Which would also reduce the amount of “all user” emails and wrong information shared through the grapevine.



The big idea!

- **Create an infrastructure – one coordinated communication system**
 - One PRIMARY source that reaches staff via the one channel that reaches them all – their manager
 - Surrounded by three SUPPORTING sources that provide repetition + more details
- Sources must be:
 - Timely
 - Accessible – reaches every employee system-wide
 - Accurate and transparent
 - Consistent – so it is reliable

Huddle-Centered Communications Infrastructure

Timely, accessible to all, accurate and transparent, consistent and reliable

Primary Source:
InfoHuddle

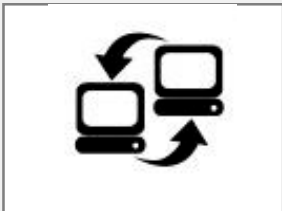


Face-to-face brief meetings between employees and managers, who receive weekly **InfoHuddle Notes**

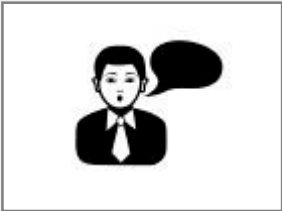
Supporting Sources:



Weekly **Print**
and **Online**
Newsletter
(**InfoLine**)



Intranet
News and
Highlights
(**InfoNet**)



Town Halls
Face-to-Face
With Leadership
(**Routinely**)

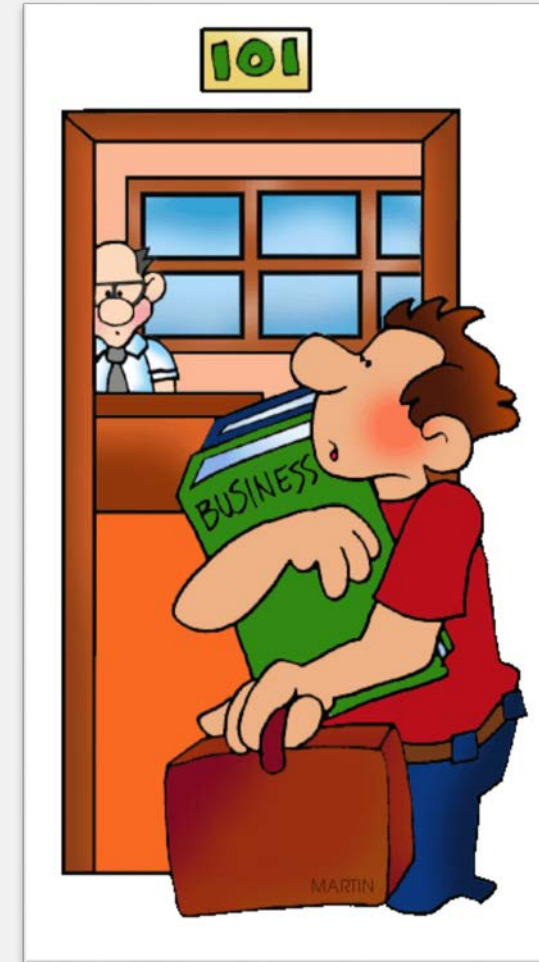
Simple, streamlined primary source, 3 supporting sources

REDUCES NEED for non-emergent all-employee Emails

Keys to success #1: Executive buy-in

Build the business case!

- Communications → Engagement → Morale = Greater commitment to mission, vision and values.
- Impacts KPIs:
 - Quality
 - Safety
 - Cost effectiveness
 - Patient and family experience = HCAHPS scores + word-of-mouth = ↑ volume

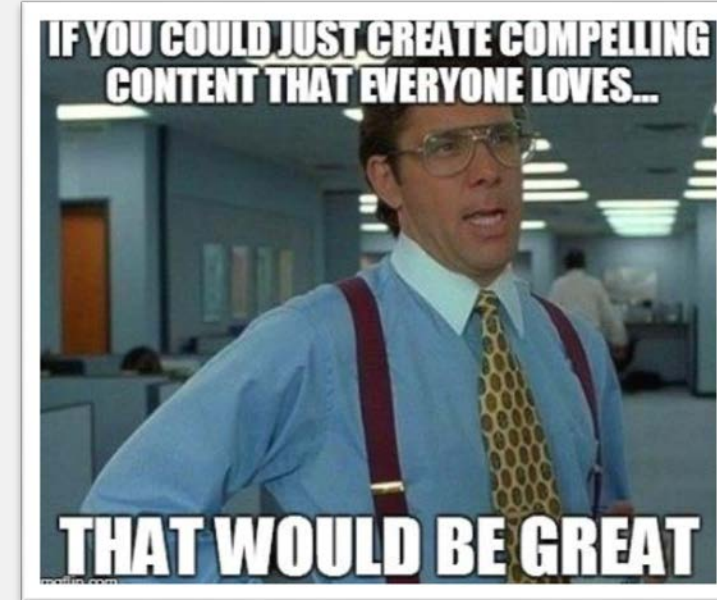


Key #2: Mid-level executives “all in”

- The people who manage the front-line managers are the **most critical interface**.
 - If they aren't excited, this becomes another flavor-of-the-month.
 - Sell it as a benefit for them and their managers.
 - From frowns to smiles when we said “We will provide all the info from system and facility, ready to use, EVERY Week!”
 - And even bigger smiles when we said “Managers can customize their huddles so it works for them.”
 - SO, when we asked them to designate huddle leaders, they said “SURE!”

Key # 3: Content is king

- **Getting relevant, timely information is vital. Start at the top!**
- Developed a weekly Communications Advisory Group (CAG)
 - Invited executives to first session. (COO onboard as endorser, enforcer)
 - Showed them the problems – real examples, from their divisions.
 - Gave them ownership of getting their direct reports to share info.
 - Asked them assign someone to CAG. (They told us they'd be there themselves, "This is too important." WHAT?!)
- CAG, lead by Internal Communications Manager, shares content and makes suggestions on draft content.
 - Upcoming construction/closures/new services locations
 - IT changes/updates
 - Always includes the "WHY."



Key #4: Formal submission process for ALL

- Anyone can submit a note. Most of content comes from our mainline staff, not senior leadership.
 - It doesn't have to be fancy. Just the facts.
- **Deadline: Mondays at noon.**
 - Draft HUDDLENotes document sent to CAG Monday afternoons.
- HUDDLENotes can be expanded for weekly newsletter.
- Advance notice is helpful - try to promote events two weeks in advance.
- Conduct trial runs for submission process.

Key # 5: Prep the managers to be HUDDLE leaders

- **Not training (dreary) – “prepping,” short and focused**
 - What a huddle is, how it works, why you need to do it?
- **Position as a service to, and support for, managers.**
 - We are making your job easier.
- **The magic phrase: It’s flexible, do what works for YOU!**
 - Timing – whatever works for them. Do several a day if needed
 - Same format as clinical, but different content: Info about system, facility and work group news
 - Assistant Huddle leaders – sure, just make sure they are trained
 - Post notes if needed – sure, just not in place of face-to-face meeting
 - Example: Employees in multiple locations directly report to same supervisor/manager, groups by phone/Facetime, supervisor can rotate to locations.
- 30 sessions for leaders and backups, plus one-on-ones for those who could not attend scheduled sessions.
 - All received learning credit

Key #6: The managers' easy buttons

- Templated **infoHUDDLE Notes** written and sent to leaders via email
- Posted on a **dedicated microsite**
 - Includes schedule and locations of all infoHuddles
 - Tips for conducting a huddle & FAQs
 - Past issues
 - Directory
- Delivered/posted right on time, every week
- And something old school too: Their **Leaders' Binder!**

OUR GROUP NEWS

Don't forget to celebrate and share group news like birthdays, service anniversaries, information that is group-specific, etc!

UNIVERSITY HEALTH SYSTEM NEWS

The Joint Commission: Thank you for your hard work

- Based on the survey team's exit briefing on Aug. 10, University Health System's accreditation with The Joint Commission remains intact for both the hospital and all of our ambulatory care areas. The feedback from the survey team was overwhelmingly positive.
- We were praised for best practices in several areas. The Joint Commission will share these with hospital systems nationwide.
- University Health System has only two conditional findings and, more importantly, no findings that were identified in the "High" category of the Survey Analysis for Evaluating Risk matrix. We will share the information in more detail once we receive the final report and develop action plans to correct the findings.

The Center for Learning Excellence is now accepting nominations for the 2018 Supervisor Development Academy!

- Vice presidents, directors and managers can nominate a candidate for the Academy. Use this link: <https://www.surveymonkey.com/r/SDAFall2018>
- Space is limited! Nominations are due by Aug. 17 by 5 p.m.

Magnet Nursing Kickoff: Join us to Remember the Mission

- Join us for a short presentation and celebration, 7:30 a.m. or 8:15 a.m., Aug. 24, Cypress Room, UH, or at 11:30 a.m. or 12:15 p.m., Aug. 31, Foundation Room, RBG

2nd annual Bereavement Symposium: The Compassionate Death: Going Beyond the Tasks

- This educational and interactive symposium is sponsored by the UHS Bereavement Council. Topics include, The Compassionate Death, Creating Legacy Items for Loved Ones, Compassionate Communication with Loved Ones, Caring for Ourselves
- Luncheon Speaker: Michelle Ramirez - "Self-Care While Caring for Others"
- 9:30 a.m.-3 p.m., Aug. 29, Cypress Room, UH, Register in Learning Central, 500398; CEUs are available for nurses and social workers.

Open Enrollment 2019 is coming! October 1 - 30, 2018

- Start thinking now about how you might change your elective coverage. Do you need to add a dental plan, vision plan or life insurance?
- You must re-enroll in the FSA accounts to continue coverage.
- Watch your mail for a postcard; we will share more reminders as Open Enrollment approaches.

ON LOCATION (Location-specific news)

Call Center: Blood Drive: Aug. 22 from noon-4 p.m.

Corporate Square: S.M.A.S.H. men's health event, Aug. 22, 11 a.m.-1 p.m., Corporate Square. This program is designed for 18-24 year-old men.

Ambulatory:

- Blood Drives:**
 - North: Aug. 21 from 10:30 a.m.-1:30 p.m.**
 - SE: Aug. 23 from 11 a.m.-2 p.m.**
- Summer Education Expo: Aug. 17, 9:30 a.m.-12:30 p.m., 1st floor conference room, TDJ; come meet with more than 10 universities to discover programs to advance your career.**
- Education Connection Info Session (5057):** Register in Learning Central and learn how to electronically request tuition reimbursement.
 - Aug 28, 2 – 3 p.m. in the Historical Building - Computer Training Room A200
- Fire inspections:** RBG and Pharmacy, Aug. 16
- Medicine /Medicine Specialty will host the August Activity,** with a line dancing party. Everyone is encouraged to attend! Put your boots and your cowboy hat on; you can also boogie down in your tennis shoes. 11 a.m.-1:30 p.m., Aug. 27, 3rd floor, FFACTS conference room, RBG. Refreshments provided.

Tech Center:

- Fire alarm inspections:** Aug. 23

UH:

- KBMA scanning of CRRT treatment fluids will start in early September to help improve medication/treatment safety during CRRT. Questions? Call the Advanced Technologies department, 210-743-2132.
- Fire alarm inspections:** South Garage, Aug. 20, Rio Tower, Aug. 15-21, Horizon Tower, Aug. 24

FACILITY IMPACTS

Sky Tower Medical Vacuum Shutdown Coming

- Saturday, Aug.18, from 2 – 10 p.m.
- A contractor will be re-routing medical vacuum piping in the Sky Tower 4th floor mechanical room.
- Materials Management will assign portable vacuums to all patient floors by 8/17. Those staff members who will be affected should check with their PCC for the portable vacuum locations.

Expansion joint project

- We will have to temporarily close hallways to replace floor expansion joints.
- We are starting in the Emergency Department; watch signage for detours. The ED portion of the project should be complete by late September. Additional areas will follow.

NEWS FOR U (Helpful to know)

Looking to learn something new? The Center for Learning Excellence has courses for you.

- Taking Control of Your Workday with Time Management (500475): Register in Learning Central.
 - Aug. 21, 1 p.m. – 3 p.m. in the Rio Tower - Sublevel Classroom
- Education Connection Info Session (5057): Register in Learning Central and learn how to electronically request tuition reimbursement.
 - Aug 21, 2 – 3 p.m. in the Rio Tower - Computer Training Room 805
- Effective Communication Webinar (30047): Register in Learning Central.
 - Aug 22, 2 – 3 p.m. Accessed online from your own computer!

Have a patient or neighbor looking for Back to School immunizations?

- Invite them to our Back to School Health Stop at the Alamodome on **Friday, Aug. 17 from 9 a.m.-noon.** This event is in partnership with KSAT 12 and includes immunizations and a booster seat giveaway (for eligible children).
- Supplies are limited, first come, first served.
- No need to register and parking is free.
- They should bring their child's current immunization records and insurance card. For booster seat giveaway, child must be between 5 and 10 years old, and present to be evaluated for need.
- If someone other than the legal guardian is bringing the child, please bring a letter signed by the legal guardian to authorize the visit. Siblings cannot bring other siblings if both are under 18 years old.

Compliance Matters: Sanctions for HIPAA Privacy and Security Policy Violations

- All HIPAA violations will be forwarded to Human Resources for review and disciplinary action including Level I violations.
- Level I violations occur when an individual unintentionally, accidentally, incidentally, carelessly or negligently accesses, reviews, uses, discloses or reveals PHI in violation of the UHS HIPAA Privacy and/or Security policies and procedures.
- For additional information and examples of all violations, please see the Employee Handbook pages 48-51.

IS SYSTEM STATUS (IS-specific news):



infoHUDDLE

Build Stronger Teams

University Health System is working to strengthen internal communications so that employees throughout the institution feel well-informed, better understand how they fit in the UHS mission, and have a reliable way to voice concerns and get answers to their questions.

Recent Notes

Notes for 3-1-2017
March 1, 2017

Archives

March 2017

Questions?




Huddle Notes

Notes for 3-8-2017

 March 8, 2017

This week's issue has information on the powdered glove ban and new continuing education requirements for all employees.

[Download Notes](#) 



Recent Notes

Notes for 3-8-2017
March 8, 2017

Notes for 3-1-2017
March 1, 2017

Archives

March 2017

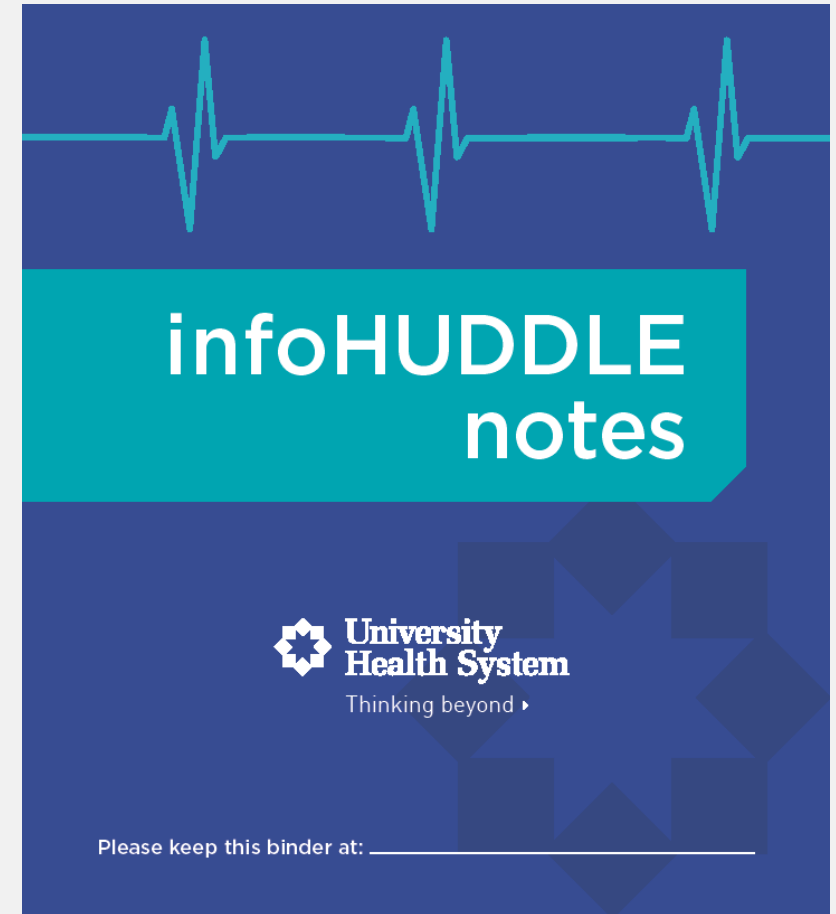
Questions?

Visit our Frequently Asked Questions page to learn more about the purpose and features of this website.

[FAQS](#)

A binder means important & permanent!

- This is where infoHUDDLE Notes live post-huddle.
 - EVERYONE can re-read the notes or catch up on what they missed.
- And other important info can be “bindered.”
- Leaders value the binders – call and ask for binders, because the original was lost, or the past leader took the binder with them to their new position.



The launch!

- Tell the employees what you are doing for them – and for their managers.
- March 2017:
 - Email from CEO – “this is important to me because you are important to University Health System.”
 - Flash ads on the intranet homepage
 - Stories in all employee news channels
 - Lots of word-of-mouth drumbeat



infoHUDDLES: People talking to people!

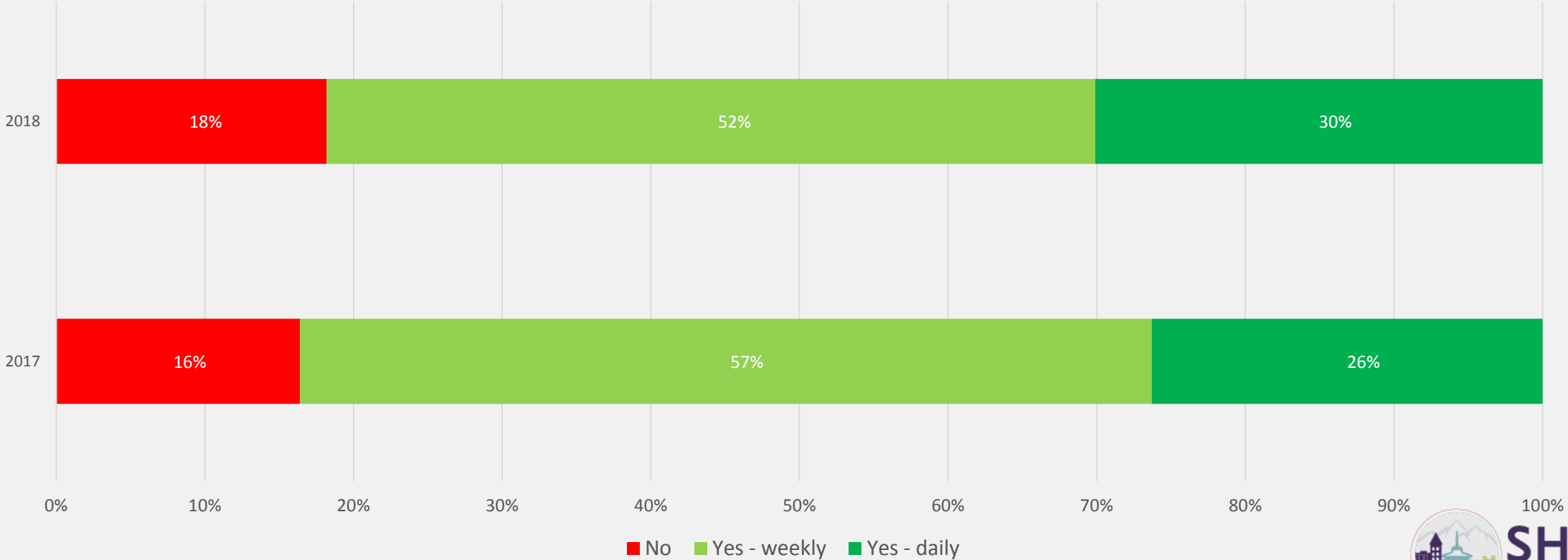


Measure impact early on and track results

- Surveyed **infoHUDDLE leaders** after first two months. Great response rate.
 - How are infoHuddles going so far?
 - 60 % said GREAT, 20% GOOD, 12% tweak
 - *Are **you** getting the information you need?*
 - 60% yes, 35% somewhat (made changes based on feedback)
- Similar employee results:
 - By 2018, 88% positive responses about Huddles – positive and helpful
- Custom questions on annual staff engagement survey in 2017 & 2018

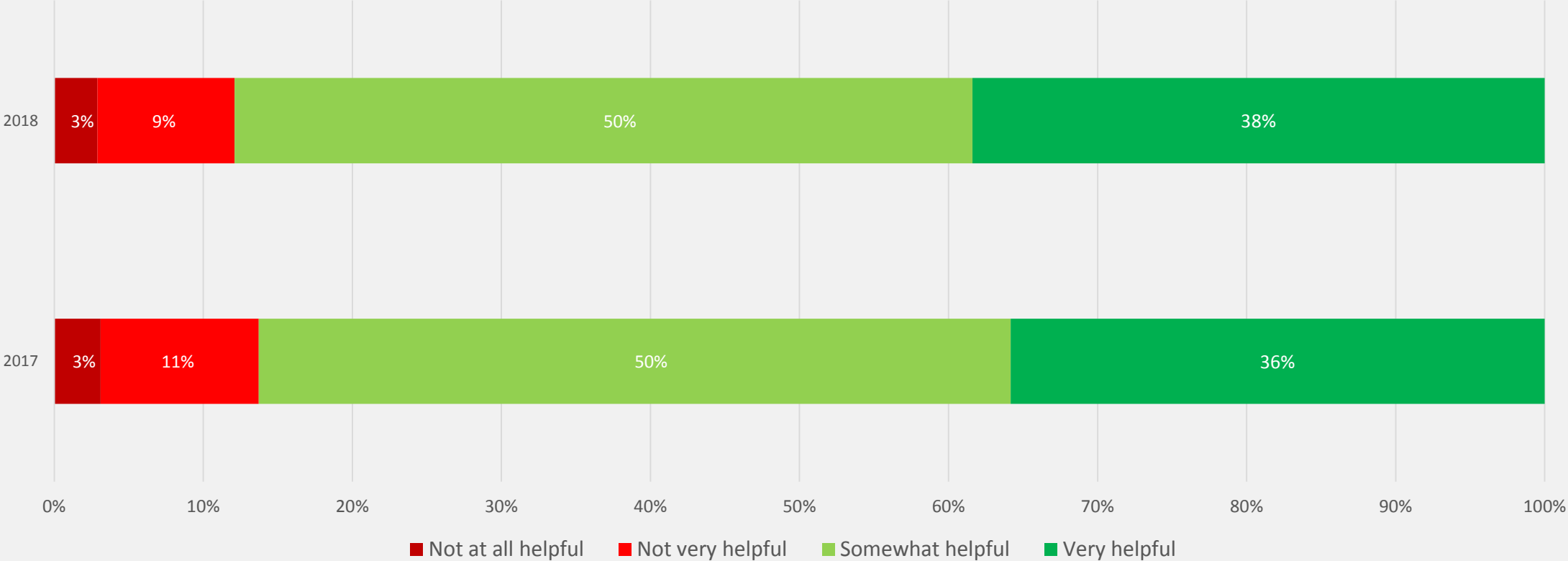
Engagement survey: Hardwired or flavor-of-the-month?

In your work group, are you having what are called "INFOhuddles" (when the person you report to shares information about your group, the facility where you work, and UHS)?



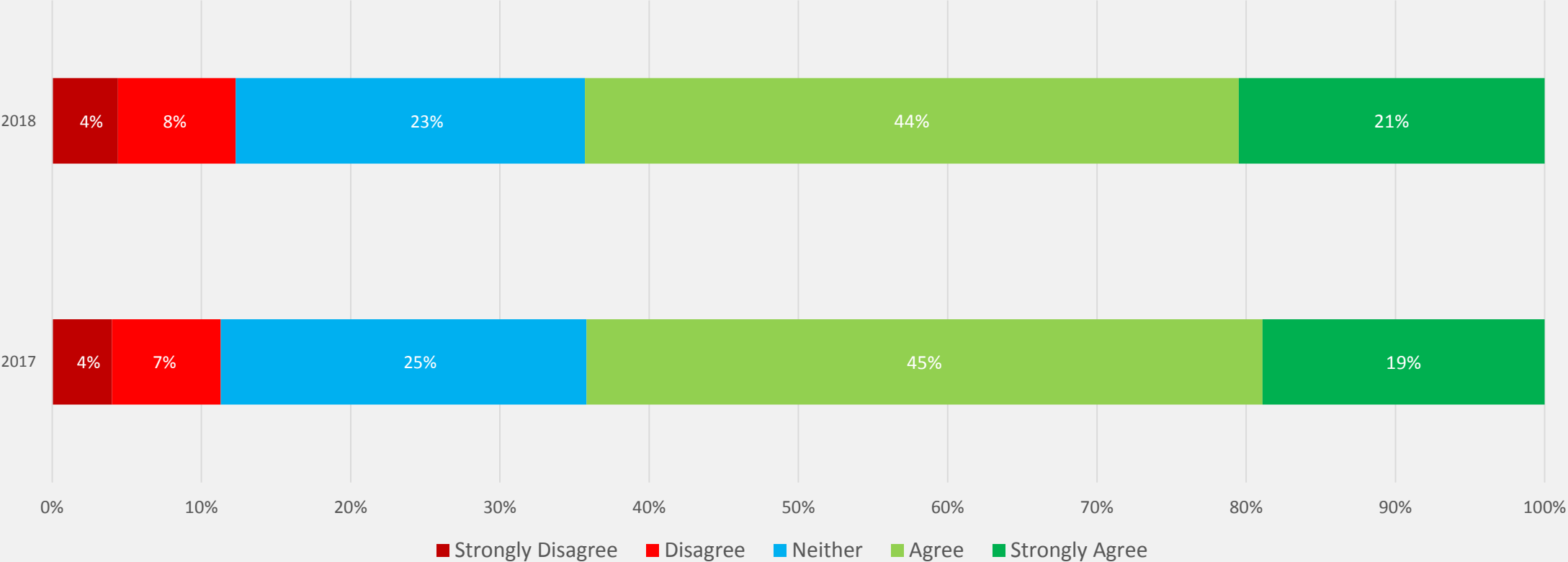
Engagement survey: Huddles helping?

Are INFOhuddles helpful?



Engagement survey: Feeling more informed?

Compared to this time last year, I feel I'm getting more information on things that are happening in my workgroup, my facility, and UHS.

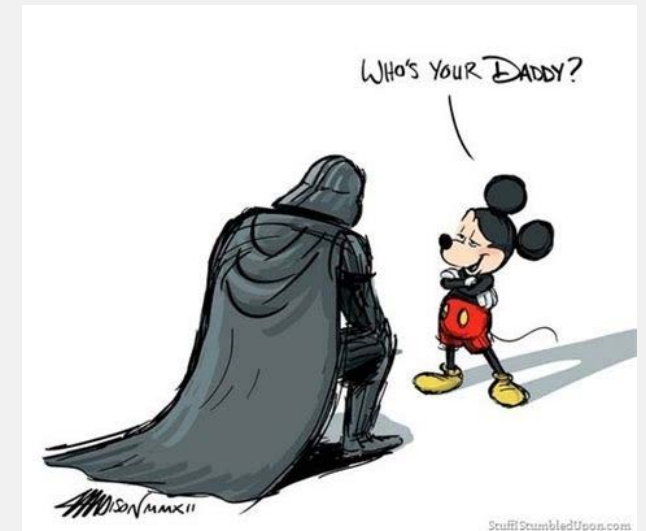


Overall engagement on the rise –top box scores

	2015	2016	2017	2018
Response rate	42.5%	66.6%	77.6%	79.1%
Communication never a problem	40.2%	47.7%	48%	48.1%
Would recommend as a place to work	42.9%	50%	52.8%	53.4%
Rate as a place to work (9 or 10)	30%	36.5%	38%	40.1%

Maintain the system and the success

- **Always. Be. Training. New hires, new locations**
 - Create an online training system
 - Pop-in audits to find areas not doing info Huddles.
- **Find your best sources and stay in touch**
 - Know who knows all. Check in with them to make sure you aren't missing anything.
- **Win converts:**
 - Facilities wasn't excited about this, until they realized that people were much happier knowing about elevator closures a week ahead of time. Now, they are best submitters.



Keep the **CONTENT** coming

- **Be responsive:** Thank everyone who makes a suggestion for infoHUDDLE notes.
- **Be polite:** Explain why their note might not have been included in an issue. Sometimes, it is a space issue, sometimes it was too late. Sometimes, it wasn't deemed appropriate. But always explain why.
- **Redirect:** Not everything is appropriate for a short, bullet point format. We have other venues. If an item is directed to another channel, everyone is happy.

Above all, believe!

- It's not as glitzy as digital signage. Or apps. Or Facebook at Work.
- It sounds basic – and it IS. That's why it works!
- It sounds like a lot of work, but it isn't (but it is a full-time job).
- Combined with newsletter and decent intranet and effective Town Halls, information and inspiration are delivered!!
- Keep saying "Saves your time," "Makes your employees happier," and "Fewer emails." (And NO BUDGET)

"Forget all the reasons why it won't work and believe the one reason why it will."

Unknown

Three Key Take-Aways

1. Has to start at the top.
2. Has to be seen as a ***benefit for managers*** and employees.
Not just another “administration” initiative.
3. Has to WORK. Simple. Flexible. Useful content. Routinely delivered. By their trusted source – “my manager.”

SHSMD CONNECTIONS



SEATTLE 2018

THANK YOU!

Questions?

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Please be sure to complete the session evaluation on the mobile app!



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