Building Relational Coordination for High Performance in the Veterans Administration

VHA Cyberseminar
December 13, 2018

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Chief Scientific Officer, RC Analytics
Relational Coordination Research Collaborative

The RCRC is an international learning community welcoming partners from a variety of sectors who use relational coordination theory in their research and practice. Relational coordination is a mutually reinforcing process of communicating and relating for task integration. Relationships shape the communication through which coordination occurs, for better or for worse.
TRANSFORMING RELATIONSHIPS FOR HIGH PERFORMANCE

Relational Coordination Analytics, Inc. (RCA) is a measurement and analytics company that provides action-oriented roadmaps for organizations seeking to improve their performance.

See what sets us apart
Poll Question

What is your primary role in VA?

- student, trainee, or fellow
- clinician
- researcher
- administrator, manager, policy-maker
- other
VA is a complex system – many roles with their own knowledge and expertise

Veterans have complex conditions with needs that extend across the VA and beyond

Due to Veterans Choice Act, a growing demand to coordinate care with external entities

How to leverage VA strengths and mission to respond to these coordination challenges?
Inpatient Veteran care: A coordination challenge
Veteran care in the community: A bigger coordination challenge
Growing interest in relational coordination in the VA

Relational coordination was keynote topic at this year’s State of the Art (SOTA) Conference

All VA employees are eligible to become partners in the RCRC in the current year

And there’s a competitive process to get funding for your baseline RC Survey for research or improvement project
Today’s agenda

- How well does relational coordination currently work in the VA?
- How well do VA organizational practices currently support relational coordination?
- Four tools that can help
  - Relational Mapping
  - RC Survey (RCS)
  - Organizational Structures Assessment Tool (OSAT)
  - Relational Model of Organizational Change (RMOC)
Relationships shape the communication through which coordination occurs ...
For better...

**Relationships**
- Shared goals
- Shared knowledge
- Mutual respect

**Communication**
- Frequent
- Timely
- Accurate
- Problem-solving
... or worse

Relationships
Functional goals
Exclusive knowledge
Lack of respect

Communication
Infrequent
Delayed
Inaccurate
Blame shifting
This process is called \textit{relational coordination}

“Communicating and relating for the purpose of task integration”
Flight departure process: A coordination challenge


RELATIONAL COORDINATION RESEARCH COLLABORATIVE
Investigated performance effects of relational coordination

- Nine site study of flight departures over 12 months of operation at Southwest, American, Continental and United
- Measured quality and efficiency performance, adjusting for product differences
- Measured relational coordination among pilots, flight attendants, gate agents, ticket agents, baggage agents, ramp agents, freight agents, mechanics, cabin cleaners, fuelers, caterers and operations agents
Relational coordination drives flight departure performance
Patient care:
A coordination challenge

- Case Managers
- Attending Physicians
- Physical Therapists
- Technicians
- Administrators
- Referring Physicians
- Social Workers
- Nursing Assistants
- Nurses

Patients
Same study conducted in hospital setting

- Nine hospital study of 893 surgical patients
- Measured quality and efficiency performance -- and job satisfaction, adjusting for patient differences
- Measured relational coordination among doctors, nurses, physical therapists, social workers and case managers
Relational coordination drives surgical performance
Research has continued...
across multiple sectors...

- Airlines
- Banking
- Retail sector
- Manufacturing
- Construction
- Accounting
- Consulting
- Early child education
- Higher education
- Youth services
- Surgical care
- Medical care
- Emergency care
- Intensive care
- Obstetric care
- Primary care
- Chronic care
- Home care
- Long term care
- Pharmacy sector
...around the world
...from inpatient, to outpatient, to the community

<table>
<thead>
<tr>
<th>Billings Clinic (Montana)</th>
<th>Kaiser Permanente (OR/WA)</th>
<th>Integrated Delivery Networks (NH)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dartmouth Hitchcock (NH)</td>
<td>Blue Shield (CA)</td>
<td>Local Health Integration Networks (Ontario)</td>
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<tr>
<td>Concord Hospital (NH)</td>
<td>American Dental Partners (USA)</td>
<td>Community safety (MA)</td>
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<td>St. Josephs (NY)</td>
<td>National Health Service (UK)</td>
<td>Family services (Denmark)</td>
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<td>Partners Health (MA)</td>
<td>Municipalities (Denmark, Sweden, Netherlands)</td>
<td>New immigrants (Sweden)</td>
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<td>Windsor Health (Canada)</td>
<td>Primary Care Progress (USA)</td>
<td>Community obstetrics (Netherlands)</td>
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<td>Gold Coast Health System (Australia)</td>
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<td>Beth Israel (MA)</td>
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<td>Maine Medical (ME)</td>
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<td>Stanford Medical (CA)</td>
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</tbody>
</table>
Performance outcomes of RC

- Quality/safety
- Efficiency/financial
- Learning/innovation
- Client engagement
- Worker well-being
Why does RC improve performance?

Relationships of shared goals, shared knowledge and mutual respect create a culture that supports process improvement.
Why does RC improve performance?

Relationships of shared goals, shared knowledge and mutual respect help care providers to see how they connect around and with the patients.
Positive relationships evoke positive emotions – activating more advanced part of the brain
RC significantly improves engagement, satisfaction and reduces burnout for nurses in 5 rural hospitals

Havens, Gittell & Vasey (2018) “Impact of Relational Coordination on Nurse Outcomes: Achieving the Quadruple Aim,” *Journal of Nursing Administration*
Recent findings

RC significantly improves engagement, satisfaction and reduces burnout for surgeons, nurses, technicians and secretaries in 11 surgical units – while increasing patient satisfaction

Gittell, Logan, Cronenwett, Foster, Freeman, Godfrey & Vidal (2018) “Impact of Relational Coordination on Staff and Patient Outcomes in Outpatient Surgical Clinics,” Health Care Management Review
RC matters most under conditions of complexity

- Task interdependence
- Uncertainty
- Time constraints
How well does relational coordination currently work at the VA?
Like this?

**Relationships**
- Shared goals
- Shared knowledge
- Mutual respect

**Communication**
- Frequent
- Timely
- Accurate
- Problem-solving
... or this?

**Relationships**
- Functional goals
- Exclusive knowledge
- Lack of respect

**Communication**
- Infrequent
- Delayed
- Inaccurate
- Blame shifting

*RELATIONAL COORDINATION RESEARCH COLLABORATIVE*
How well does RC work, in your experience?

- In your own department? 1=weak, 5=strong
- With other departments? 1=weak, 5=strong
- With non-VA entities? 1=weak, 5=strong
How well does the VA currently support relational coordination?
Like this?

**Organizational Structures**
- Relational Job Design
- Select for Teamwork
- Train for Teamwork
- Shared Accountability
- Shared Rewards
- Shared Conflict Resolution
- Boundary Spanner Roles
- Shared Meetings & Huddles
- Shared Protocols
- Shared Information Systems

**Relational Coordination**
- Frequent
- Timely
- Accurate
- Problem Solving
- Communication
- Shared Goals
- Shared Knowledge
- Mutual Respect

**Performance Outcomes**
- Quality & Safety
- Efficiency & Finance
- Client Engagement
- Worker Well-Being
- Learning & Innovation
Relational Coordination

Infrequent
Delayed
Inaccurate
Blaming
Communication

Functional Goals
Exclusive Knowledge
Lack of Respect

Organizational Structures
Siloed Job Design
Select Individual Players
Train Individual Players
Siloed Accountability
Siloed Rewards
Siloed Conflict Resolution
No Boundary Spanner Roles
Siloed Meetings & Huddles
Siloed Protocols
Siloed Information Systems

Performance Outcomes
Low Quality/Errors
Inefficiency
Financial Losses
Client Disengagement
Worker Burnout
Failure to Learn

Or this?
These structures can strengthen or weaken relational coordination – and performance - depending on their design.
Where to start?
Stage 1: Choose sites, introduce RC

- Choose pilot sites
- Identify desired performance outcomes
- Who are the key stakeholders involved?
- What are their coordination challenges?
- Introduce RC framework to those stakeholders
Stage 2: Create Change Team

- Create a Change Team that represents key stakeholders
- Motivate these stakeholders from distinct perspectives/power to contribute time and effort to change process
- Facilitate sensitive discussions with a "safe space” to disagree respectfully
- Engage in relational mapping to visualize the work to be done
Identify a work process that needs better coordination – “caring for our Veterans”

Which workgroups are involved?

Draw a circle for each workgroup and lines connecting between them

• **WEAK RC = ORANGE**
• **MODERATE RC = BLUE**
• **STRONG RC = GREEN**

Color of the circle says how we are doing within each workgroup, color of the line says how we are doing between the workgroups
Relational mapping of current

WEAK RC
MODERATE RC
STRONG RC

RC = Shared Goals, Shared Knowledge, Mutual Respect, Supported by Frequent, Timely, Accurate, Problem-Solving Communication
Stage 2: Create Change Team
Stage 2: Create Change Team
Where does relational coordination currently work well? Where does it work poorly?

What are the underlying causes?

How does this impact our performance outcomes?

Where are our biggest opportunities for change?
Stage 3: Measure RC

- Use the RC survey to assess the current state of coordination accurately and inclusively
- Survey takes about 20 minutes to complete and results remain anonymous
- Results will be shared as a basis for designing interventions in an inclusive process
## Stage 3: Measure RC

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Frequent Communication</td>
<td>How frequently do people in each of these groups communicate with you about post-operative care procedures for our surgical patients?</td>
<td></td>
</tr>
<tr>
<td>2. Timely Communication</td>
<td>Do they communicate with you in a timely way about post-operative care procedures for our surgical patients?</td>
<td></td>
</tr>
<tr>
<td>3. Accurate Communication</td>
<td>Do they communicate with you accurately about post-operative care procedures for our surgical patients?</td>
<td></td>
</tr>
<tr>
<td>4. Problem-Solving Communication</td>
<td>When there is a problem with post-operative care procedures for our surgical patients, do people in each of these groups blame others or work with you to solve the problem?</td>
<td></td>
</tr>
<tr>
<td>5. Shared Goals</td>
<td>Do people in each of these groups share your goals for post-operative care procedures for our surgical patients?</td>
<td></td>
</tr>
<tr>
<td>6. Shared Knowledge</td>
<td>Do people in each of these groups know about the work you do with post-operative care procedures for our surgical patients?</td>
<td></td>
</tr>
<tr>
<td>7. Mutual Respect</td>
<td>Do people in each of these groups respect the work you do with post-operative care procedures for our surgical patients?</td>
<td></td>
</tr>
</tbody>
</table>
Stage 4: Reflect on RC findings

- With facilitation, Change Team shares RC measures with key stakeholders
- “Looking into the mirror”
- “Putting the elephant on the table”
- A starting point for new conversations
- A starting point for reflection and change
Stage 4: Reflect on Findings

Between Workgroups
N=104

<table>
<thead>
<tr>
<th>Metric</th>
<th>Mean</th>
<th>Min</th>
<th>Max</th>
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<tbody>
<tr>
<td>RC Index</td>
<td>3.66</td>
<td>3.38</td>
<td>4.02</td>
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<tr>
<td>Frequent Communication</td>
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<td>Timely Communication</td>
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<td>Mutual Respect</td>
<td>3.66</td>
<td>3.36</td>
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Stage 4: Reflect on RC findings
## Stage 4: Reflect on RC findings

<table>
<thead>
<tr>
<th>Ratings of</th>
<th>Admin</th>
<th>CC</th>
<th>PCAs</th>
<th>Phys</th>
<th>PA&amp;NP</th>
<th>RNs</th>
<th>ResTh</th>
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<tr>
<td>Administrative Support</td>
<td>1.79</td>
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<td>4.52</td>
<td>4.71</td>
<td>4.67</td>
<td>3.86</td>
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<td>Personal Care Assistants (PCAs)</td>
<td>2.62</td>
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<td>4.02</td>
<td>2.29</td>
<td>2.29</td>
<td>3.50</td>
<td>2.40</td>
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<td>Physicians</td>
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<td>3.47</td>
<td>4.25</td>
<td>4.19</td>
<td>3.84</td>
<td>3.50</td>
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<td>Physicians' Assistants and Nurse Practitioners (PAs &amp; NPs)</td>
<td>3.75</td>
<td>4.29</td>
<td>3.39</td>
<td>4.30</td>
<td>4.55</td>
<td>3.96</td>
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<td>Registered Nurses</td>
<td>3.37</td>
<td>4.08</td>
<td>3.70</td>
<td>3.55</td>
<td>3.98</td>
<td>4.22</td>
<td>3.49</td>
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<td>Respiratory Therapy</td>
<td>2.57</td>
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<td>2.57</td>
<td>3.14</td>
<td>3.14</td>
<td>3.43</td>
<td>4.00</td>
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Stage 4: Reflect on RC findings
## Stage 4: Reflect on RC findings

|                      | G o v | C R t n | D A | E D v | F a i t h | S S r v | H / M H | P a r l e | P o l c e | P r b t n | R s r c h | S c h o l | Y o u t h |
|----------------------|-------|--------|-----|-------|----------|--------|--------|---------|---------|---------|---------|---------|---------|---------|
| City Government      | - -   | 2.00   | 3.57| 2.86  | 2.43     | 2.71   | 3.14   | 2.14    | 3.14    | 2.29    | 3.86    | 3.71    | 3.86    |
| Corrections          | 3.29  | - -    | 3.43| 2.20  | 4.43     | 1.71   | 1.86   | 2.50    | 4.43    | 3.57    | 3.00    | 3.00    | 3.57    |
| District Attorney Office | 4.14 | 4.43  | - - | 1.50  | 1.50     | 2.67   | 2.50   | - -     | 4.57    | 4.86    | 4.00    | 4.29    | 3.29    |
| Employment Development | - -   | - -    | - - | - -   | - -      | - -    | - -    | - -     | - -     | - -     | - -     | - -     | - -     |
| Faith-Based Services | 3.00  | 2.00   | 3.71| 3.29  | - -      | 3.29   | 3.29   | 2.67    | 3.00    | 2.86    | 3.00    | 3.00    | 3.29    |
| Family/Social Services | 2.39 | 2.17   | 3.23| 2.35  | 2.54     | 2.72   | 2.44   | 2.28    | 3.00    | 2.45    | 2.74    | 2.69    | 3.77    |
| Health/Mental Health | - -   | - -    | - - | - -   | - -      | - -    | - -    | - -     | - -     | - -     | - -     | - -     | - -     |
| Parole               | - -   | - -    | - - | - -   | - -      | - -    | - -    | - -     | - -     | - -     | - -     | - -     | - -     |
| Police               | 2.57  | 1.60   | 3.14| 2.71  | 2.57     | 2.83   | 1.00   | 1.00    | - -     | 4.29    | 3.57    | 4.43    | 3.57    |
| Probation            | 3.29  | 3.57   | 3.43| 3.71  | 3.86     | 3.71   | 3.71   | 3.20    | 3.57    | - -     | 3.86    | 3.29    | 3.29    |
| Research/Academia    | 4.14  | 1.20   | 3.86| 3.71  | 2.86     | 3.71   | 3.29   | 1.40    | 3.86    | 3.00    | - -     | 3.43    | 4.29    |
| School/School-Based  | 3.57  | 3.29   | 5.00| 3.14  | 3.29     | 3.86   | 3.43   | - -     | 5.00    | 4.00    | 2.86    | - -     | 4.00    |
| Youth Outreach       | - -   | - -    | - - | - -   | - -      | - -    | - -    | - -     | - -     | - -     | - -     | - -     | - -     |
Stage 5: Design interventions

- With facilitation, Change Team creates a plan of action for improving relational coordination and the desired performance outcomes
- Change Team assesses current structures – designs interventions as needed
Create a matrix with the roles or entities from your relational map across the top.
Add organizational structures in the left column.
For each structure, ask “How well does this structure currently support RC for this role?”

**Weak Support for RC = Orange**
**Moderate Support for RC = Blue**
**Strong Support for RC = Green**
## Organizational structures assessment

<table>
<thead>
<tr>
<th></th>
<th>OR Nurses</th>
<th>PACU Nurses</th>
<th>Surgeons</th>
<th>Anesthesiologists</th>
<th>Service Line Cr</th>
<th>OR Scrub Tech</th>
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<tbody>
<tr>
<td>Relational Job Design</td>
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<td>Hired for Teamwork</td>
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<td>Trained for Teamwork</td>
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<td>Shared Rewards for Outcomes</td>
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<td>Shared Conflict Resolution Process</td>
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<td>Boundary Spanner Roles</td>
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<td>Shared Meetings/Huddles</td>
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<td>Shared Protocols</td>
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<td>Shared Info Systems</td>
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</tbody>
</table>

- **WEAK SUPPORT**
- **MODERATE SUPPORT**
- **STRONG SUPPORT**
Design interventions

Middle & Top Leadership

Structural Interventions
- Select & Train for Teamwork
- Shared Accountability
- Shared Rewards
- Shared Conflict Resolution
- Relational Job Design
- Diversity Management
- Boundary Spanner Roles
- Shared Meetings & Huddles
- Shared Protocols
- Shared Information Systems

Frontline Leaders, Co-Workers & Patients

Relational Interventions
- Create Safe Space
- Relational Assessment
- Humble Inquiry/Coaching

Relational Coordination
- Frequent
- Timely
- Accurate
- Problem Solving
- Communication
- Shared Goals
- Shared Knowledge
- Mutual Respect

Performance Outcomes
- Quality & Safety
- Efficiency & Finance
- Client Engagement
- Worker Well-Being
- Learning & Innovation

Work Process Interventions
- Assess Current State
- Identify Desired State
- Experiment to Close the Gap
Stage 5: Design interventions

- Patient/Families
  - Professionals
    - Relational coproduction
    - Relational coordination
    - Relational leadership
  - Professionals
  - Leaders
Stage 6: Implement and assess

- Change Team implements the interventions they have designed
- Change Team assesses progress with periodic assessments of RC and desired performance outcomes
Six stages of change

- Stage 1: Choose sites, introduce RC
- Stage 2: Create Change Team
- Stage 3: Measure RC
- Stage 4: Reflect on RC findings
- Stage 5: Design interventions
- Stage 6: Implement and assess
Discussion

◆ How relevant is this work for the VA?
◆ How ready is the VA to do this work?
Relational Coordination in VA HSR&D
(not exhaustive list)

- Iowa City VA Health Care System
  - Veteran Dual Use of Health Systems

- Denver/Seattle Center of Innovation
  - Veteran-Centered and Value Driven Care
  - Impact of Relational Coordination on Care Coordination
  - The Experience of Providing Hospice Care Concurrent with Cancer Treatment in the VA

- Tuscaloosa VA Medical Center
  - Relational Coordination in informatics
  - Healthy Connection: Veterans’ Patient Engagement and User Satisfaction through Use of VA’s My HealtheVet Patient Portal

- Cleveland VA Medical Center
  - Impact of Interdisciplinary Rounds in the Spinal Cord Injury Unit on Relational Coordination for Patients with Pressure Injury: A Pilot study

- RCRC Student Partner at Rutgers
  - Studying Role of RC in Improving Health Outcomes, Patient Experience of Care and Reducing Per Capita Healthcare Spending in Patient Aligned Care Teams

- Patient Care Services - UT Health Science Center San Antonio
  - Relationship Quality and Patient-Assessed Quality of Care in VA Primary Care Clinics: Development and Validation of the Work Relationships Scale
  - Alignment of Patient and Primary Care Practice Member Perspectives of Chronic Illness Care: A Cross-Sectional Analysis
  - Implementation of the Epilepsy Center of Excellence to Improve Access to and Quality Of Care – Protocol for a Mixed Methods Study
  - Relationships Within Inpatient Physician House Staff Teams and their Association with Hospitalized Patient Outcomes

- Cleveland VA Medical Center – Impact of Interdisciplinary Rounds in the Spinal Cord Injury Unit on Relational Coordination for Patients with Pressure Injury: A Pilot study
All VA employees are eligible to become partners in the RCRC through October – visit RCRC website (rcrc.brandeis.edu) to sign up

Competitive process to get funding for your baseline RC Survey for research or improvement project - contact Heather Gilmartin - Heather.Gilmartin@va.gov