



UMass Memorial Health





February 25, 2022

PRACTICING PARTNERSHIP

AN OVERVIEW FOR UMMH AND SHARE UBT CO-LEADS



UMass Memorial Health



THANK YOU KP!



We gratefully acknowledge assistance from the Kaiser Permanente Labor Management Partnership, upon whose materials much of this training's content is based.

LMP LABOR MANAGEMENT PARTNERSHIP

COALITION OF
KAISER PERMANENTE
UNIONS

 KAISER
PERMANENTE®

 **ALLIANCE**
OF HEALTH CARE UNIONS

OUR GOALS FOR THIS TRAINING



After this training, you will have a strong understanding of:

- Our Labor Management Partnership
- Our UBTs, and How to Be a Good Co-Lead
- How to Launch Your UBT



HOW WE'LL SPEND OUR TIME



PART 1 PARTNERSHIP and UBTs (What and Why)

PART 2 6 ESSENTIAL SKILLS for LEADING YOUR UBT (How)

PART 3 LAUNCH SEQUENCE – NEXT STEPS (When)

PART 4 QUESTIONS for VETERAN CO-LEADS

OUR NEXT COHORT OF UBTs



PLACEHOLDER FOR UBT NAME
NAMES OF CO-LEADS

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INTRODUCTIONS



PLEASE UNMUTE and TELL US...



**Your
NAME**



**Your JOB
& DEPARTMENT**



**SOMETHING COOL
about the people
you work with**



LEVEL 1

Launching



PART I

PARTNERSHIP AND UBTs

(WHAT & WHY)

GOALS OF LABOR MANAGEMENT PARTNERSHIP (2016)



BRING “frontline SHARE employees into the job of improving the work as respected partners”



CREATE “a culture where all employees treat each other with kindness and respect”



HELP UMMH become “the best place to give care and the best place to get care”

UBTs Are the Centerpiece of Our Partnership:

- Pioneered in healthcare at Kaiser Permanente
- Aim to create an invigorating work culture, make partnership real at the frontline, and organize a bottom-up social movement for improvement
- Currently have 25 UBTs, launching 25 in FY22

WHAT IS A UBT?



The goal of a UBT is to improve how caregivers feel at work by engaging them at a deep level in measurably improving the work itself.

WHY UNIT BASED TEAMS (UBTs)?





DISCUSSION

“What did you observe about the way this team worked together”



WHAT IS A UBT?



- Department-level improvement system
- Co-sponsored by AVP/Director and SHARE organizer
- Co-led by manager and frontline caregiver
- Solves 2-3 problems at a time using Lean methods
- Complements (but doesn't replace) Idea Boards
- Decides by consensus, using interest-based problem-solving methods

We test for consensus by asking 3 questions:

1. Has everyone been heard?
2. Can everyone live with this decision?
3. Will everyone actively support this decision outside this room?



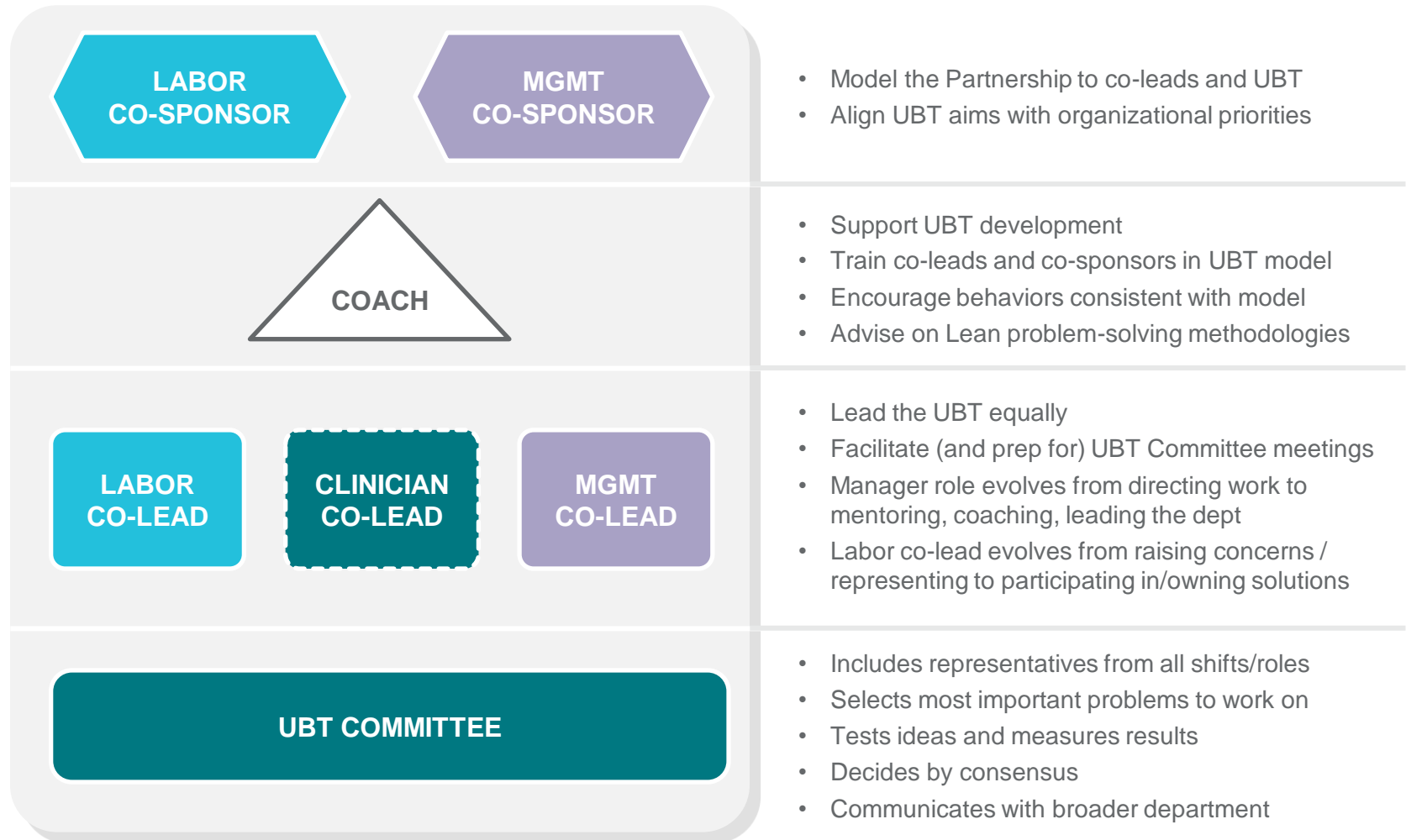
HERE'S WHAT A UBT IS NOT...



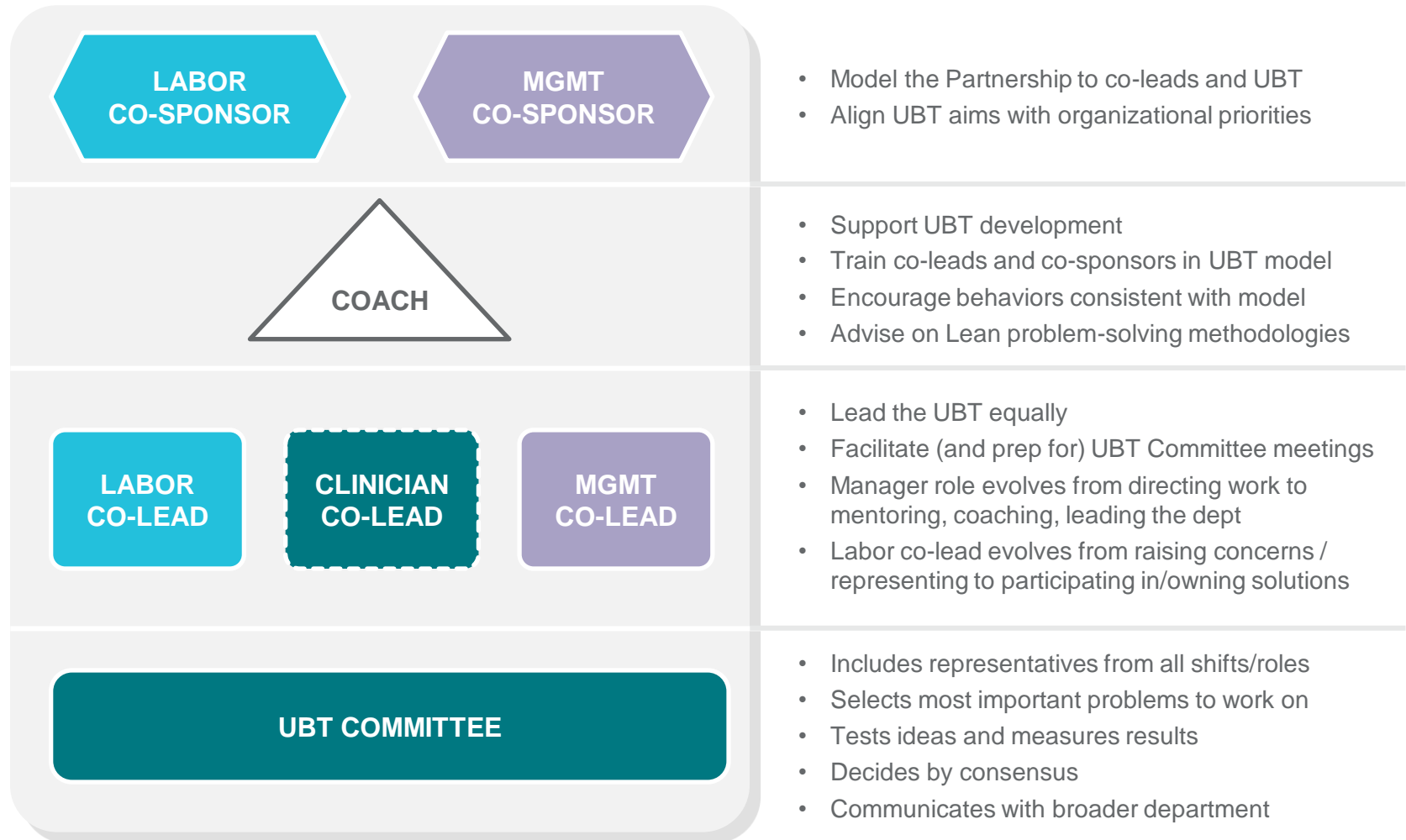
- A quick fix that will make everything better without collective effort
- Use of the word “team” without actual teamwork
- A requirement that everyone participate
- A vehicle for finger-pointing and blame
- A substitute for the problem-solving process or collective bargaining
- An exclusive initiative (all members of work unit are included and welcome)
- An endless debate over what to do
- A flavor of the month initiative



A UBT IS A VEHICLE FOR PROCESS IMPROVEMENT & LEADERSHIP DEVELOPMENT



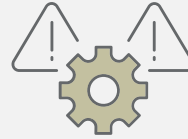
A UBT IS A VEHICLE FOR PROCESS IMPROVEMENT & LEADERSHIP DEVELOPMENT



A CLOSER LOOK HOW DOES A UBT WORK?



**Most UBT
Committees have
stable membership**



**Most UBTs currently
work two major issues
at a time**



**Most meet
30-60 mins every
other week**



**Co-leads jointly facilitate,
decisions are made
by consensus**



**Co-leads meet to
prep on the off week,
sometimes with
co-sponsors**



**Issues are chosen by
UBT Committee, with
input from co-sponsors
and broader department**

A CLOSER LOOK HOW DOES A UBT WORK?



UBTs rely on a Lean problem-solving approach, asking:

1. What is the problem are we trying to solve?
2. What process is causing the problem?
3. How could we measure our progress?
4. What change idea could we test?



WHAT'S THE DIFFERENCE BETWEEN AN IDEA SYSTEM AND A UBT?



Idea Systems and UBTs nest together and complement each other:

Idea Systems

Focus is on smaller, more easily implemented ideas

Can have many ideas in progress

While key dept metrics can be built into idea board to spur ideas, results of most ideas not followed or studied over multiple PDSA cycles

Utilize Idea Board on Innovation Station

Example: We've been running out of washcloths at night on the Unit, so let's update the par level on the linen cart

Department-level improvement system

Engage frontline in improving processes

Employ A3 problem-solving (identify problem, investigate root causes, test countermeasures)

Meet regularly

Record progress

UBTs

Work 2-3 projects at a time

Projects are "meaningful, measurable and actionable"

Projects are larger, with uncertain root causes and multiple PDSA cycles

Co-led by manager and frontline leader

Co-sponsored by SHARE organizer and manager's manager

Utilize UBT Board on Innovation Station

Example: Increase % of our clinic's pts with Ha1C >9 who receive diabetes education

WHAT KINDS OF PROBLEMS DO UBTs WORK ON?



ONCOLOGY



SDOH screening new cancer patients improved from 58% to 89% from December 2020 to September 2021

MEMORIAL XRAY

Frequent wrong orders from Rheumatology dropped to almost 0 from July to September 2021



HFHC



Improved HC Proxies on file for 65+ from 37% to 51% from March to September 2021

PRIMARY CARE

Reduced incomplete / expired pain contracts from 495 to 449 from June to November 2021



WHAT HAVE OUR UBTs ACHIEVED?



The HVIL **reduced TAVR set up time** so patients and staff could come in later (and leave on time), and the Lab still saw 4 more cases/month

The Hand Clinic **improved its signaling process** with X-ray, shaving 1-2 minutes of waste from every visit (>100 times/day; 0.25-0.5 FTEs)

The Pedi Clinic UBT **tightened up their charge capture process**, resulting in 50 more charges per month for an anticipated \$96K/year

The Rx Center **overhauled its inventory process**, realizing close to \$1m in savings

BUT ARE THE UBTs MAKING A DIFFERENCE?*



| Primary Metric: Engagement | 2020 n= | Engagement Index | Improvement from 2018 | Leader Index | Improvement from 2018 |
|----------------------------|---------|------------------|-----------------------|--------------|-----------------------|
| UMMH (non provider) | 7,622 | 3.95 | + 0.07 | 82 | + 1 |
| UBTs (All) | 412 | 4.11 | + 0.14 | 86 | + 4 |

Where the UBT advantage shows up most strongly

“

“I am involved in decisions that affect my work.”

“This organization treats employees with respect.”

“Senior management provides a work climate that promotes patient safety.”

“This organization conducts business in an ethical manner.”

“This organization supports me in balancing my work life and personal life.”

“I get the tools and resources I need to provide the best care to our patients.”

”

* From 3/20 PG Caregiver Engagement Survey, UMMH

SO HOW ARE UBTs DIFFERENT?



IT'S ABOUT POWER

Shared ownership: co-led, co-sponsored, consensus-based

Structure **leverages** multiple leaders, networks

Model **makes it easier** to talk about hard things

Solves big problems, but in a way that:

Builds team
capacity for action,
reflection, leadership

Refreshes
manager and
union rep roles

Combats
pervasive
hierarchies

Strengthens
psychological
safety

OUR PLAN FOR FY22



GOAL: 50 UBTs up and running by September 2022

- Launch 25 new UBTs, mostly in Winter and Spring
- Transition to UBT Boards on Innovation Station (Work similarly to and complement Idea Boards)
- Build out UBT Toolkit
- Align UBT projects with organizational goals



WHAT QUESTIONS DO YOU HAVE?



WHAT IS A UBT?

WHAT IS A UBT FOR?

OTHER QUESTIONS...



LEVEL 1

Launching



PART II

SIX ESSENTIAL SKILLS TO LEAD YOUR UBT (HOW)

SKILLS ALL CO-LEADS NEED



We Teach 6 Essential Skills for UBT Leadership:

SKILL 1 Effective Listening

SKILL 2 Effective Facilitating

SKILL 3 Interest-Based Problem-Solving

SKILL 4 Getting to the Root Cause of Workplace Problems

SKILL 5 Designing & Measuring Experiments (PDSA)

SKILL 6 Communicating with Your Department

SKILL 1: EFFECTIVE LISTENING



PURPOSE: Listen to understand, and ensure the other person feels heard



TOOL

THREE STEPS of PARAPHRASING

1. Indicate you want to check the message

2. Restate what you heard

3. Check for accuracy (if no, clarify and check again)

Exercise: “Checking the message”

Ask your co-lead or co-sponsor about their hopes and fears regarding their role in the UBT. Follow the 3 steps. Reverse roles.

SKILL 2: EFFECTIVE FACILITATING



Dos



Keep meeting on track
(agenda items and time keeping)

Be a role model: Set the standard with your
own meeting behavior

Create an atmosphere where all can participate freely

Ask clarifying questions and encourage others to, as well

Encourage everyone to participate,
draw out the quieter ones

Follow ground rules

Seek consensus, but keep discussion moving forward

Always prep with your co-lead, and debrief afterward

Don'ts



Interrupt

Monopolize speaking time

Use judgmental language

Have side conversations

SKILL 3: INTEREST-BASED PROBLEM-SOLVING



“**Everything possible
begins in civility.**”

Robert Waller

Former CEO, Mayo Clinic



SKILL 3: INTEREST-BASED PROBLEM-SOLVING



What it IS



- A way to meet each party's needs in a way that maintains or even deepens their relationship
- A collaborative approach to solving problems
- The “how” of our Labor Management Partnership

What it is NOT



- Being nicey-nice
- Giving in and regretting it later
- Avoiding talking about hard things

POSITIONS VS. INTERESTS



POSITIONS

**State what you want
but not why you want it**

- “I want to work from home”
- “I want a 5% raise”
- “I want you to work Saturdays”

INTERESTS

**Describe what is important
to you and why you care**

- “My commute is making it hard for me to spend time with my kids”
- “My rent went up by 10% this year and I may need to move”
- “We’re booking patients 8 weeks out, we need to improve access”

LISTENING FOR INTERESTS



STATEMENT BY A FRONT-LINE WORKER TO A UNIT SUPERVISOR:

“You were supposed to train me two months ago on how to use the computerized ordering system to order supplies and this still hasn’t happened.”



What are some potential underlying interests?

How would you know which interests are most important in this instance?

WHAT BEHAVIORS DO YOU SEE?



4 STEPS OF INTEREST-BASED PROBLEM-SOLVING



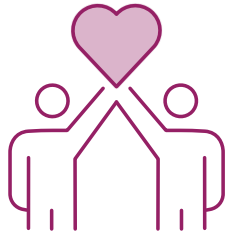
STEP **01**

DEFINE
ISSUE



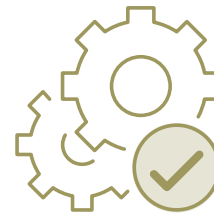
STEP **02**

DETERMINE
INTERESTS



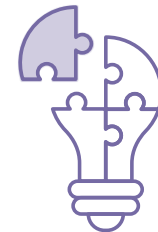
STEP **03**

DEVELOP
OPTIONS



STEP **04**

SELECT
SOLUTIONS



STEP 1 OF 4 DEFINE THE ISSUE



STEP 01



Describe the problem that needs to be addressed

WHY?

Facing a common problem (albeit from different angles) will help you find a common solution

Agree on a common set of data

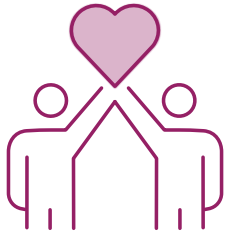
WHY?

So that you don't keep arguing about what's true, even after you're trying out a solution

STEP 2 OF 4 DETERMINE INTERESTS



STEP 02



Each side develops its own list of interests, then build a list of common interests

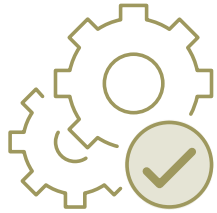
WHY?

Both sides can focus on core concerns (which usually overlap) and avoid extreme positions

STEP 3 OF 4 DEVELOP OPTIONS



STEP 03



Brainstorm (lots of) potential solutions

WHY?

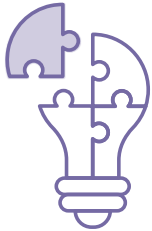
Allows for range of possible solutions to emerge

Best solutions often build from other ideas

STEP 4 OF 4 SELECT SOLUTIONS



STEP 04



Reach consensus on a solution or solutions

WHY?

Consensus ensures sustainability

But you're not done yet! You need to agree to:

Action plan (what, when, who)

Evaluation plan (if you are trialing a solution)

HOW CAN YOU SHOW RESPECT AT EACH STEP?



STEP **01**

DEFINE
ISSUE



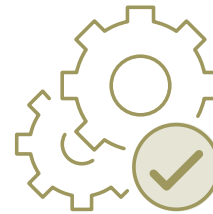
STEP **02**

DETERMINE
INTERESTS



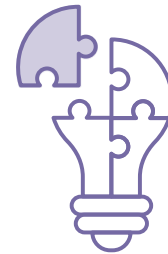
STEP **03**

DEVELOP
OPTIONS



STEP **04**

SELECT
SOLUTIONS



IN SUMMARY...



- Assume common and competing interests
- Process matters
- No one best way
- Appreciate creativity
- Assume good intentions
- Understand and advocate for your interests
- Show respect at every step
- Lead, don't react

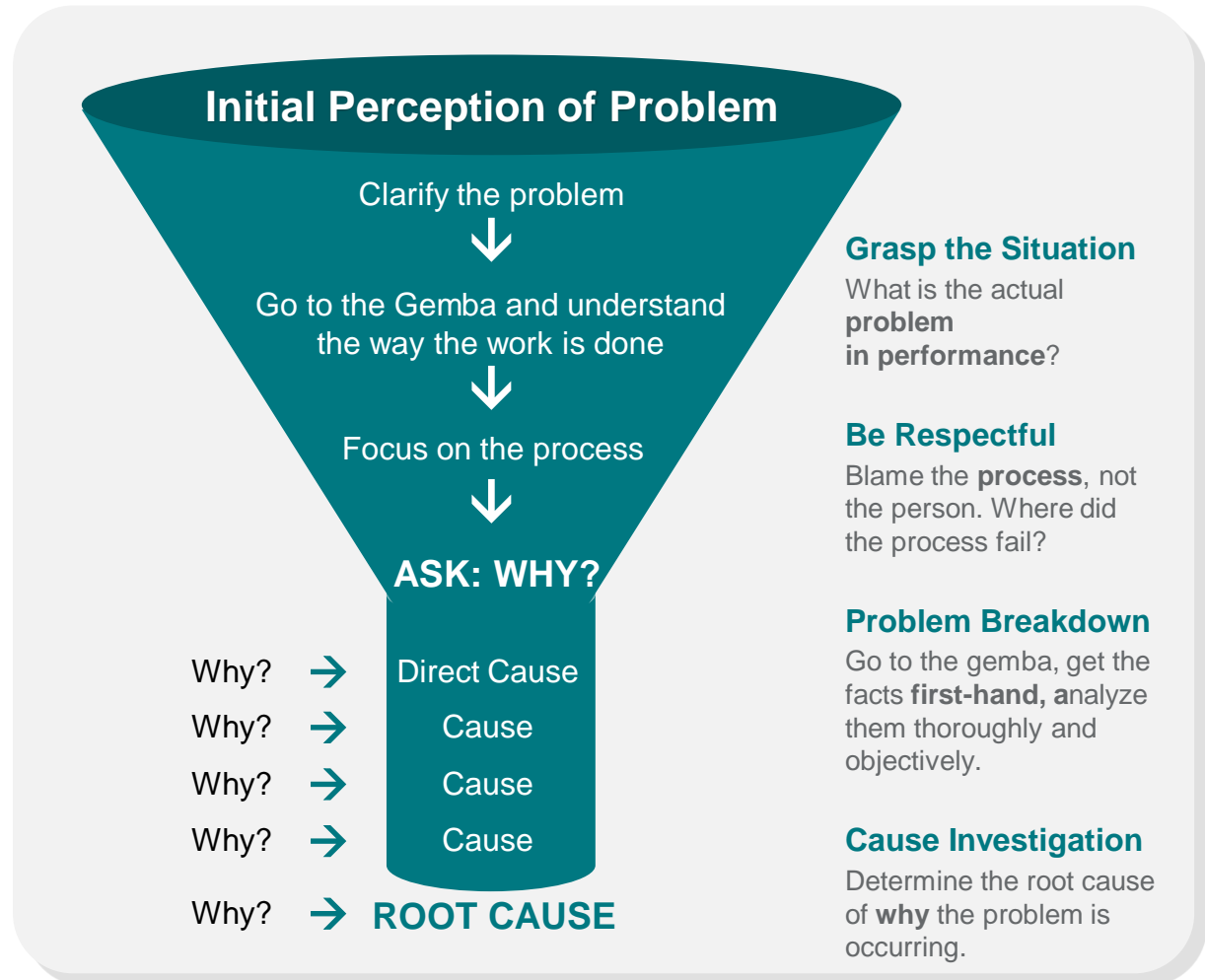


SKILL 4: GETTING TO THE ROOT CAUSE



“
Every system
is perfectly
designed to
get the results
it gets.”

Paul Batalden

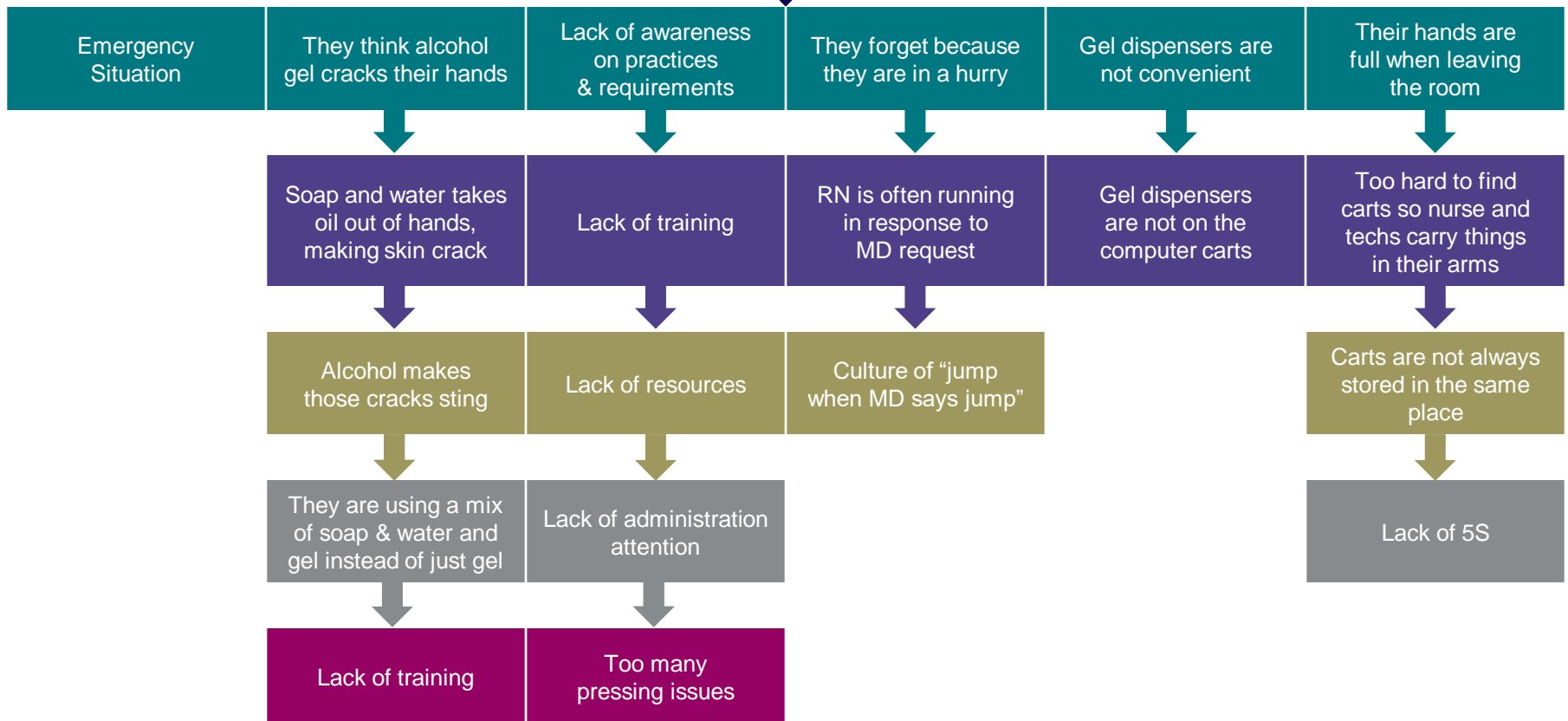


5 WHYS EXAMPLE...



“A bad process will beat a good person every time.” – W. Edwards Deming

**Clinicians don't follow hand hygiene practices
100% of time**



SKILL 5: DESIGNING & MEASURING EXPERIMENTS

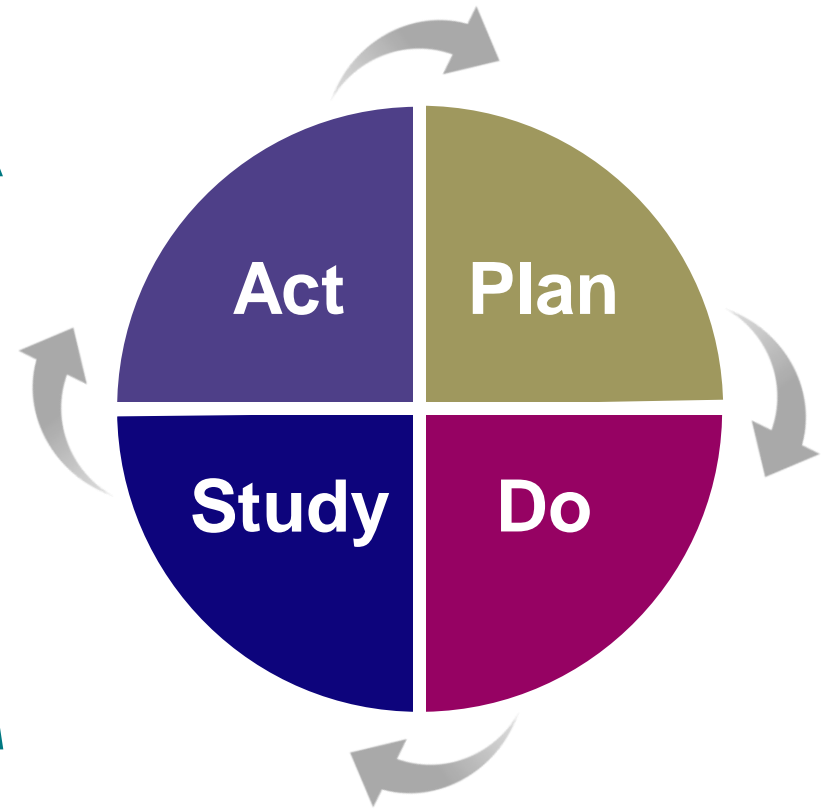


Model for Improvement

What are we trying to accomplish?

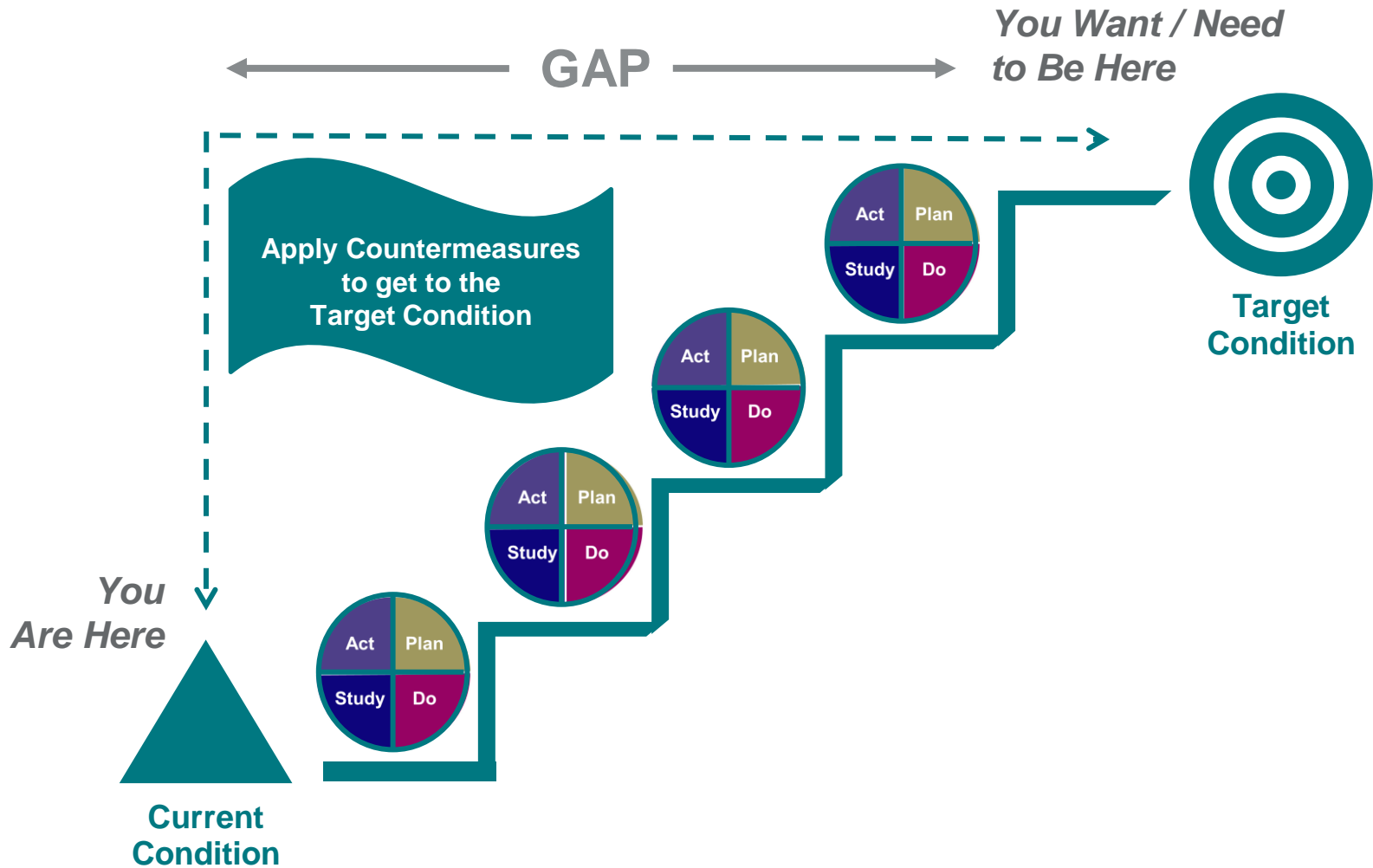
How will we know that a change is an improvement?

What change can we make that will result in improvement?



Reference: *IHI Model for Improvement.*

IMPROVEMENTS FOLLOW FROM SMALL RAPID TESTS OF CHANGE



COUNTERMEASURES (CHANGE IDEAS)



Should Follow from the Root Causes You've Identified

Root Cause 1

Countermeasure 1:
DEVELOP STANDARD WORK
for surgical admissions



Root Cause 2

Countermeasure 2:
DEVELOP UNIT FLOOR MAP
for visitors

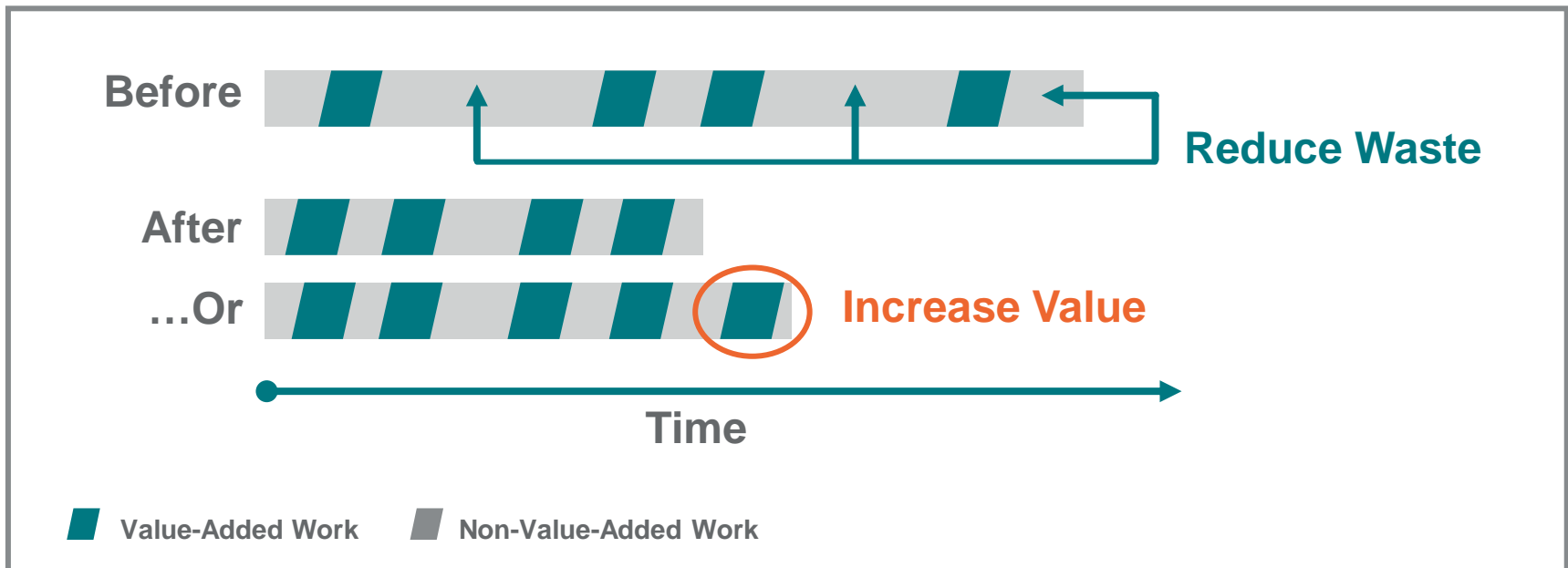


INCREASE VALUE BY REMOVING WASTE



Observe that **TWO THINGS** are **ALWAYS** happening...

1. Things that **SHOULD** be done → **Value-Added**
2. Things that **SHOULD NOT** be done → **Non-Value-Added**



SKILL 6: USING YOUR UBT BOARD



PURPOSE:



Gives UBT a **SINGLE PLACE**
to Track Project & Progress



Viewable
to **ALL**

KEY FEATURES:

On Innovation Station,
SITS ALONGSIDE
idea board



**INNOVATION
STATION**



Guides Teams
to identify:



- ✓ **WHAT** problem they are trying to solve
- ✓ **WHY** the problem is meaningful
- ✓ **MEASUREMENT** plan
- ✓ **ROOT CAUSE** analysis
- ✓ **CHANGE IDEAS** to test (PDSAs)
- ✓ **NEXT STEPS**

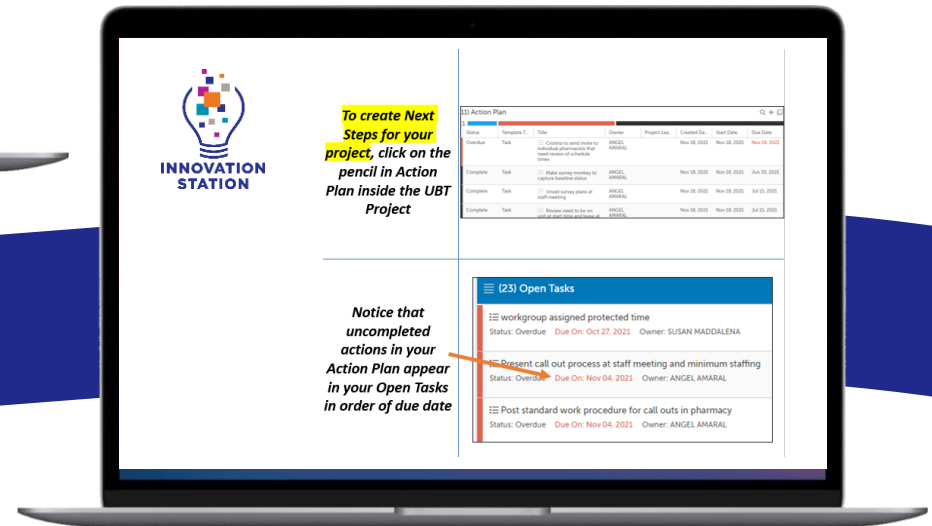
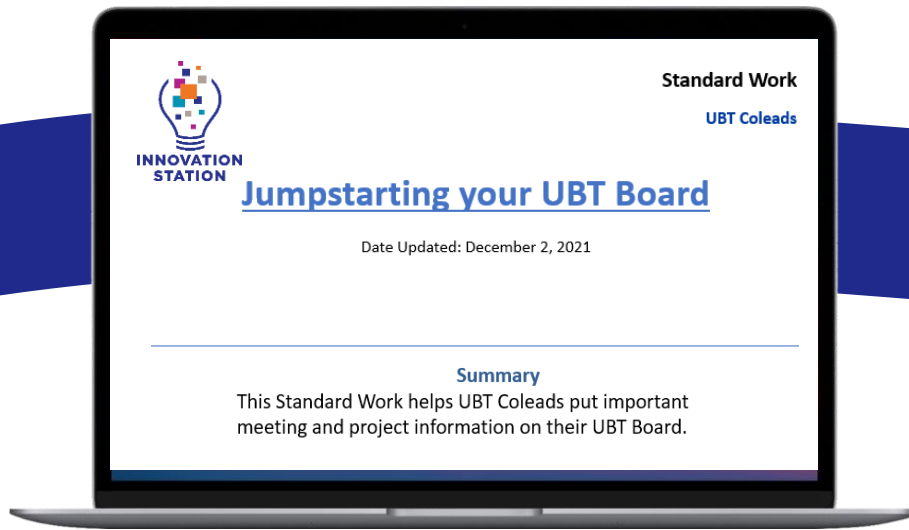
Acts as a
MEETING AGENDA
(like the idea board)



JUMPSTARTING YOUR UBT BOARD



FIND THE JOB AID ON INNOVATION STATION
UNDER “RESOURCES & TRAINING”





LEVEL 1

Launching



PART III

LAUNCH SEQUENCE: NEXT STEPS (WHEN)

LAUNCH SEQUENCE: NEXT STEPS



1. Orient co-leads and co-sponsors to UBT model

- Ensure co-sponsors and co-leads have attended UBT orientation

2. Orient department to UBT model, invite participation

- Select date to present
- Co-leads prepare to co-present to department (use tool 15 in your toolkit)

3. Prepare for 1st UBT meeting

- Select UBT Committee (make sure it is a diverse representative group of volunteers)
- Select time (ideally a regular biweekly time)
- Prepare agenda and presentation
- Complete first draft of UBT charter

4. 1st UBTC Meeting

- Review department performance
- Confirm regular meeting time
- Validate and/or amend charter

5. 2nd UBTC Meeting

- Brainstorm problems to work on, select 2-3

6. 3rd UBTC Meeting

- Discuss 1st problem. Strong case for change? Baseline data? Root causes?

UNIT BASED TEAM CHARTER: PRIMARY CARE CLINIC

PURPOSE

A UBT is a collaborative partnership comprised of frontline staff, managers, and clinicians. In alignment with system, medical group and medical center goals, Our UBT will identify clinical and operation improvement opportunities within our unit and innovate solutions together.

The goal of the UBT is not only to get better results, but to improve how caregivers feel at work by engaging them at a deep level in measurably improving the work itself.

METHOD

Working on no more than 2-3 critical areas at a time, the UBT will improve through running frequent, small, measurable tests of change in order to make a measurable impact.

The UBT Coordinating Committee will meet regularly to select issues, design experiments, learn and adjust, and track progress.

UBT LEADERSHIP ROLE

UBT Co-Leads direct/facilitate improvement work of team, Coordinating Committee meetings, encourage broad participation:

Labor: Rita Caputo
Management: Andrea Santiago
Clinician (optional): _____

UBT Co-Sponsors support the co-leads, remove barriers, align UBT work to system goals, focus not just on results themselves but how we get results):

Labor: Carol H.
Management: Shavel Aldophe

UBT Coach helps UBT use PI tools, adhere to UBT structure, support learning: Will Erickson

UBT COMMITTEE ROLE

UBT Committee (UBTC) is made up of a broad spectrum of roles, helps select issues to focus on and solutions to test, and helps implement changes:

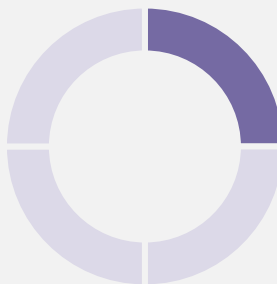
Dr. J. Subramanian, *MD*
AnnMarie Peterson, *RN*
Denise Nickish, *LPN*
Rose Welsh, *ASR*
Cathy Cotton, *ASR (PAs)*
Diane Bolden, *MOA*
Alicia Giroux, *MOA*
Kara Goodwin, *Admin*

MEETING GROUND RULES

- Decisions will be made by consensus
- Be on time and present
- Follow the agenda, and come prepared
- One person talks at a time
- Everyone has a voice
- Participation equals progress
- Respect confidentiality
- Listen to understand
- Think and talk possibility - 'what would it take?'
- All meeting participants will strive to communicate content to rest of dept
- _____
- _____

QUARTERLY MEETINGS

Meetings Completed



- 1st Qtr
- 2nd Qtr
- 3rd Qtr
- 4th Qtr

MEETINGS

Each UBT should have regularly scheduled UBTC meetings, co-lead prep meetings, and idea huddles:

UBTC mtg time: _____






Co-lead Prep mtg time: _____

Idea Board huddle time: _____

SCOPE

The UBT shall focus on the work of the unit with an eye toward improving the patient and caregiver experience of care.

UBT PATH TO PERFORMANCE: ACTIVITIES, TRAINING & REQUIREMENTS FOR EACH LEVEL

| DIMENSION | LEVEL 1 LAUNCHING  | LEVEL 2 STABILIZING  | LEVEL 3 IMPROVING  | LEVEL 4 HIGH-PERFORMING  | LEVEL 5 HARD-WIRED  |
|---------------------------|---|--|---|--|--|
| Sponsorship | Identify co-sponsors | Co-sponsors visibly support UBT to department (send announcement email, visit, attend UBT meetings, etc.) | Co-sponsors and co-leads participate in coco meetings Co-sponsors provide input and ongoing guidance on UBT projects | Co-sponsors check UBT Board monthly Co-sponsors regularly ask co-leads about UBT in 1:1s | Co-sponsors challenge UBT to work on larger-scale problems |
| Leadership | Identify co-leads | Co-leads use PIP tool at bimonthly coco meetings to advance UBT (ex. from L2-L3) | Co-leads viewed by department and co-sponsors as jointly leading UBT | Trust is developed such that UBT meetings can proceed without either co-lead | Trust is developed such that UBT meetings can proceed without both co-leads |
| Training | Co-sponsors and co-leads complete UBT Training Co-sponsors and co-leads trained on Innovation Station UBT board Department oriented to UBT model | UBTC members complete LWB (3 hrs) training UBTC members complete Interest-Based Problem-Solving (30 mins) training | Co-leads complete LYB training Co-leads able to orient new UBTC members to Interest-Based Problem-Solving | Majority of UBTC completes LYB, Standard Work for Respect, and Speed of Trust training Co-leads complete Leading at the Speed of Trust and Crucial Conversations training | Co-leads pursuing LGB training Majority of UBTC members complete some level of DEIB training |
| Engagement | Select UBTC members who represent a diverse range of caregivers, department roles and shifts | UBTC solicits input from department on potential UBT projects for improvement | Department staff receives regular updates on what UBT is working on and results | Department staff feel connected to UBT, receive regular updates on project progress, and are regularly consulted | UBT is primary coordinator of improvement work across department |
| Process | At first UBT meeting, UBTC members choose regular meeting time | UBT meets regularly Co-leads jointly prepare for UBT meetings | Co-leads jointly facilitate UBT meetings Co-leads seek input from and delegate tasks to UBTC members | Co-leads able to work through UBTC disagreements using Interest-Based Problem-Solving | In addition to improvement projects, UBT also working to resolve emerging department issues, including staffing/budget |
| Use of Tools | Complete UBT Charter and upload to Innovation Station | UBT uses UBT Board on Innovation Station to guide meetings, record activity, update co-sponsors, and record all ideas/projects | Co-leads work with coach to determine measurement plan for each project UBTC uses UBT Board to track projects and metrics, guide meetings, and update co-sponsors and department | UBTC members celebrate successes and one another regularly (ex. UMMatter Central) | UBT can employ A3 methodology on UBT projects and department-level problems |
| Goals/ Performance | Orient UBTC members to department-level True North metrics and current performance | UBTC proposes at least 1 project for consideration for UMMH Seed Program UBTC selects 2-3 measurable projects related to department goals | UBT completes two PDSA improvement cycles on at least 2 projects UBT demonstrates at least 1 measurable improvement | UBT demonstrates at least 2 measurable and sustained improvements | UBT is impacting at least one department-level True North metric UBT has been nominated at least once for the UMMH Seed Program |
| Level Status | IN PROGRESS | | | | |

ADDITIONAL RESOURCES



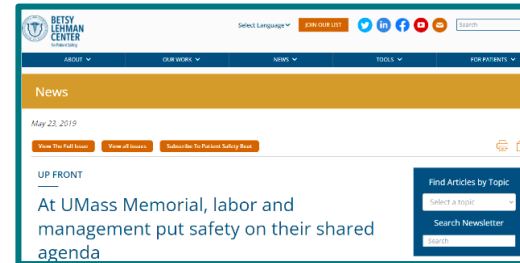
**SHARE-UMass Memorial
Unit Based Teams**



**Labor Management
PARTNERSHIP**



PERSPECTIVE | MAGAZINE
**How do we solve
health care problems?**



BETSY LEHMAN CENTER
**At UMass Memorial, labor and management
put safety on their shared agenda**

Search “Lean Tools and Templates” on
The Hub to find more materials

Will.Erickson@theshareunion.org

Stephanie.Pepi@umassmemorial.org

LEVEL 1

Launching



LEVEL 2

Stabilizing



LEVEL 3

Improving



LEVEL 4

High-performing



LEVEL 5

Hard-wired





LEVEL 1

Launching



PART IV

QUESTIONS FOR VETERAN UBT CO-LEADS

SO, WHAT'S IT LIKE TO LEAD A UBT?

