

hank

Fall 2016 | Issue 49



FRONTLINE NEWS FOR KP WORKERS,
MANAGERS AND PHYSICIANS

F R O M **S K E P T I C S** **T O**
B E L I E V E R S

ADOLESCENT BEHAVIORAL HEALTH

I'M IN A
UBT
AND SO ARE
YOU

WHO'S IN A UBT?

IN THIS
ISSUE

3 NEW STANDARDS
FOR ALL

10 PULL YOUR TEAM TOGETHER
IN FIVE MINUTES



Performance: A union issue


Henrietta is on vacation. This guest column is by Michael Aidan, a senior representative and assistant executive director of IFPTE Local 20 in Northern California, representing clinical lab scientists and others. He chaired the union coalition executive board in 2014 – 2015.

Workers—and the unions that represent them—care about performance. Kaiser Permanente employees come to work to ensure patients and members deliver the highest quality of care and service. Everything they do, almost without exception, is focused on this.

So I was dismayed when I recently attended KP’s Associate Improvement Advisor training, meant specifically for frontline workers, and saw very few union faces at the table. I know that many would want that training. And I believe employers should recognize the benefits—and justice—of having frontline workers with an equal voice in performance improvement.

Our National Agreement provides a vehicle for union workers to be actively engaged in performance improvement. Unit-based teams, co-led by union members, are embedded in KP operations. Yet union members run into roadblocks when seeking training or a seat at the strategic planning table. That lessens the contributions all workers could be making—and discourages many from fully engaging with their teams.

Our coalition is stepping up efforts with KP to expand opportunities for workers in performance improvement efforts, enable workers and unions to help shape needed innovations, and build union capacity to give workers the tools and support they need.

This will remove barriers we face that have outlived their time, and enhance patient care and service. 

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Time for flu shots!



WHO’S BEHIND HANK?

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WHAT IS HANK?



Hank is an award-winning journal named in honor of Kaiser Permanente’s visionary co-founder and innovator, Henry J. Kaiser.

Hank’s mission: Highlight the successes and struggles of Kaiser Permanente’s Labor Management Partnership, which has been recognized as a model operating strategy for health care. *Hank* is published quarterly for the partnership’s more than 145,000 workers, managers, physicians and dentists. All of them are working to make KP the best place to receive care and

the best place to work—and in the process are making health care history. That’s what Henry Kaiser had in mind from the start.

For information about the management and union co-leads advancing partnership in your region, please visit LMPartnership.org.



LMP LABOR MANAGEMENT PARTNERSHIP





NEW STANDARDS FOR ALL

Article by: PAUL COHEN

LAST year, the outpatient procedure unit-based team at Capitol Hill Medical Center rewrote the instructions it sends to patients scheduled for a colonoscopy. A patient who found the earlier directions confusing played a leading role in the process.

The new instructions helped reduce by 20 percent the number of colonoscopies that needed to be repeated. Involving the patient was “a transformational experience for the team,” says Jennifer Walker, RN, lead UBT consultant and improvement advisor in the Mid-Atlantic States region.

It also showed the power of a new provision of the 2015 National Agreement.

More rigorous team assessments

The agreement adds new requirements to the UBT Path to Performance. To be rated high performing, teams must now:

Get direct input from the voice of the customer (in teams that work directly with Kaiser Permanente members and patients): For example, through patient rounding or co-designing a process or service, as the Capitol Hill team did.

Spread or adopt a successful practice: Such as replicating an improvement project listed in UBT Tracker.

‘Scorecards bring more consistency and accountability to the partnership.’

— **JOAN MAH**, optometrist, senior UBT consultant and IFPTE Local 20 steward (Northern California)

Demonstrate a culture of health and safety: Includes having a team health and safety champion.

Have face-to-face assessments: Team co-leads now must meet in person with their UBT consultant and union partnership representative, rather than assessing themselves.

Facility and regional ratings

In addition, the National Agreement now extends partnership assessments to higher levels of the organization. A scorecard, called Pathway to Partnership Performance, enables KP and union leaders to determine how well KP facilities, service areas and regions are working in partnership. The assessments include the following measures:

Culture: Employee turnover rates and People Pulse scores on speaking up and workplace safety.


Governance and structure: Level of LMP Council participation, diligence and results.

Speed and agility/Change readiness: Level of labor engagement and speed of issue resolution.

Continuous improvement infrastructure: UBT performance levels; integration with KP performance improvement efforts.

Workforce planning and development: Effectiveness of training, career development and redeployment processes.

“The scorecard is a step forward,” says Joan Mah, a Northern California optometrist, senior UBT consultant and IFPTE Local 20 steward, who helped develop the scorecard.

“It brings more consistency and accountability to the partnership and lets regions and facilities document their achievements and identify gaps.” 

RESOURCES: Help your team make the grade

Three things you can do to up your team's game:

- » Talk with your UBT consultants and union partnership representatives (UPRs) for advice.
- » Contact the Patient Advisory Councils in your facility, service area or region for guidelines on how to include the voice of the customer in your work.
- » Use UBT Tracker and the new Team-Tested Practices section of LMPartnership.org to find successful practices from other teams or regions.



	F	R	O	M	LMP	LMP	LMP	LMP	LMP	LMP	
LMP	S	K	E	P	T	I	C	S	LMP	T	O
LMP	B	E	L	I	E	V	E	R	S	LMP	LMP
	LMP	LMP	LMP	LMP	LMP	LMP	LMP	LMP	LMP	LMP	

I'M IN A
UBT
AND SO ARE
YOU

Creating a better workplace turns cynics into champions of unit-based teams. UBTs give union coalition-represented workers a way to lead change. They help workers, managers and physicians better serve KP members and patients. Yet too many people don't know they are part of a UBT. Truth is, everyone in the unit is a UBT member. And, as you'll see in this issue, engaging with your team can change lives—including your own. Read on and see how.

BIG PICTURE COMES INTO FOCUS



‘I had a fear of speaking up and so did the managers.’

WHEN we first learned about working in partnership, I thought it would be difficult. I was a little skeptical and reluctant. It was hard to work with management because they’re actually your boss. I was part of a hiring team and felt uncomfortable speaking up to say why I thought certain candidates wouldn’t work.

Working as a team was very new to everyone. I wondered if there would be backlash or repercussions. Some employees didn’t feel secure about their jobs and didn’t feel like they even had a voice. One day, I realized they were the same as I was. I had a fear of speaking up and so did the managers. After I realized that, we were able to move forward. Employees, providers and everyone needed to have a voice. We needed to not only talk, but to make things happen. It’s been a lot of learning, a lot of great experience and growth.

When I first started out I didn’t see how you needed each person and each piece to make the company grow. The puzzle came together for me.

Now the communications piece is there. We work to be effective, efficient and see the broad picture. It’s amazing to see everyone come together with one common goal to fix things, such as patient wait times.

I enjoy it better now. I’m learning more. I like the results I have seen. Partnership is like you had a child two decades ago and they’ve grown up to be a successful person.

—KIMBERLEY CAROLINA

Clinical assistant, OPEIU Local 2, Neurology
(South Baltimore Medical Center, Mid-Atlantic States)

(continues on page 6)



‘This is where I want to be, mentoring teams.’

FINDING MY CALLING

I came to Kaiser Permanente in 2009 as a temporary employee answering membership calls about the H1N1 flu virus. I really wanted to work for KP, so when my temporary position ended and I was offered a full-time position, I jumped at the opportunity. I was happy to get my foot in the door and planned to work my way into a regional finance or administrative role. However, that plan changed when I heard about unit-based teams. It happened one day when

I learned how employees could impact our annual bonus by improving outcomes on certain goals.

When I asked others if they knew that we could impact our bonus payout, no one seemed to know. The call center had several starts and stops with the unit-based team and we just couldn't seem to make it work. I was voted in as labor co-lead and attended a training with my manager where we learned about representational models. This seemed like a possible solution for our employee team of about 90 members, which made it nearly impossible for all employees to attend a meeting together.

The Regional Appointing UBT covers six departments. Representatives from each area were voted in by the entire team to become part of the representative team. The reps created staff lists of about 10 to 13 employees they would each communicate with. Every month, reps huddle with everyone on their list, often just two or three people at a time, in between phone calls.

The model is working and as the largest UBT in the region, now with about 200 employees, the team ended 2015 with most of its goals reached on its scorecard. I've since left that role as a UBT co-lead and I've moved into the labor sponsor role for the building. Now we're working on creating another representative team for specialty care scheduling. I didn't expect to be with the call center seven years later, but this is where I want to be, mentoring teams.

—JAN GREENE

Labor partner and steward, SEIU Local 49
(Regional Call Center, Northwest)

ENGAGE YOUR ENTIRE TEAM

Finding ways to involve everyone on the unit-based team can be hard to do, especially in large departments. If you're struggling to involve your team members, try these tips:



Find the right fit. Unit-based teams come in all shapes and sizes. In small departments, everyone may attend meetings. Large units typically organize representational UBTs, with each union, classification and shift choosing representatives for the team. Talk with your team co-leads and sponsors if you want to try a different UBT model.



Make a difference in the communities that we serve. This holiday season, volunteer as a team in a local soup kitchen or shelter. Your efforts will assist those in need and help engage everyone on the team.



Get healthy together. Create a UBT project based on the Total Health Incentive Plan. Find out more online: LMPartnership.org/stories-videos/better-ever-incentive.

CALL TO ACTION: Are you on a unit-based team? Help your team members answer that question with this colorful poster: LMPartnership.org/tools/poster-are-you-unit-based-team.

THE POWER OF BEING HEARD

WE used to have a representative UBT. It was hard for the reps to find time to meet, and there were no active projects. If someone made a suggestion, no one wanted to make the changes. Our views weren't getting expressed. I felt no one would listen to us.

Then a year and a half ago, our UBT became all-inclusive. That means everyone in our department attends the monthly UBT meetings. We have only 20 employees, so switching was easy to do. With everyone at the table, there was talking and engagement. The supervisor was asking our opinions, "What do you guys want to try?" We started working on projects, and we made quite a few changes in the department. We're here so many hours a day, if we can make this a happy place, then let's find a way.

One project, in particular, had a big impact. Our department is responsible for notifying physicians of positive test results. Speed is important. But our turnaround time was too long. So we did some tests of change and discovered that when we paired up and consolidated key tests, times improved. The new approach is less stressful. When you work with another person, the pressure isn't as strong and you don't feel as overwhelmed.

When I started to see changes happening, I realized that management really is listening to us. That's when I became involved in my UBT. I was chosen to be the labor co-lead in January 2016.

Our new UBT has brought more unity to the department. We're not upset, we're not frustrated and our workdays have become so much better.

—**AMBER IBANEZ**

Lab assistant, SEIU-UHW, UBT union co-lead, Client Services Center/Specimen Processing (Regional Reference Laboratories, Southern California)

'Our new UBT brought more unity to the department.'



SPREAD THE WORD

It's important to find ways to reach everyone on the UBT. Use these tips to keep your team functioning smoothly and communicating well:



Share regular updates with those who don't attend regular UBT meetings. Huddles, visual boards and phone trees can help everyone stay connected. Have UBT representatives talk informally with a few team members at a time to fill them in.



Encourage others to ask questions. If you're a team leader, encourage co-workers to share ideas, express concerns and suggest solutions to a problem. Find tips, tools and resources online: LMPartnership.org/free-to-speak



Follow up and take action. Take action on concerns that are raised. Then share the results.

CALL TO ACTION: Keep everyone informed with this handy report-out sheet. Download it for your next huddle or team meeting: LMPartnership.org/tools/ubt-meeting-report-out

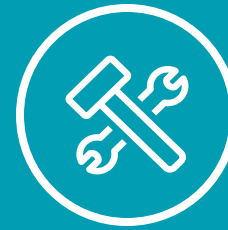
Humans of Partnership on LMPartnership.org

You'll meet frontline workers and managers—like Victor Shen (right), a clinical supervisor in Southern California, where "our badges are off. It's no longer 'manager,' 'therapist,' 'assistant' or 'aide.' We're all together on the same level." Humans of Partnership is inspired by Humans of New York, a blog started by photographer Brandon Stanton in 2010 that now has millions of followers. We'll be adding more stories all the time. Visit LMPartnership.org/humans today!



WE'VE LAUNCHED!

Five reasons to visit the new LMP website:



1 Find the exact tool you're looking for



2 See the latest videos and more

ALL NEW **LMPartnership.org**

IDEAS. TOOLS. RESULTS.



4

Move your team to the next level with the toolkits in the Path to Performance section



3

Get ideas for improvement—search by topic, department and more in the brand new Team-Tested Practices section



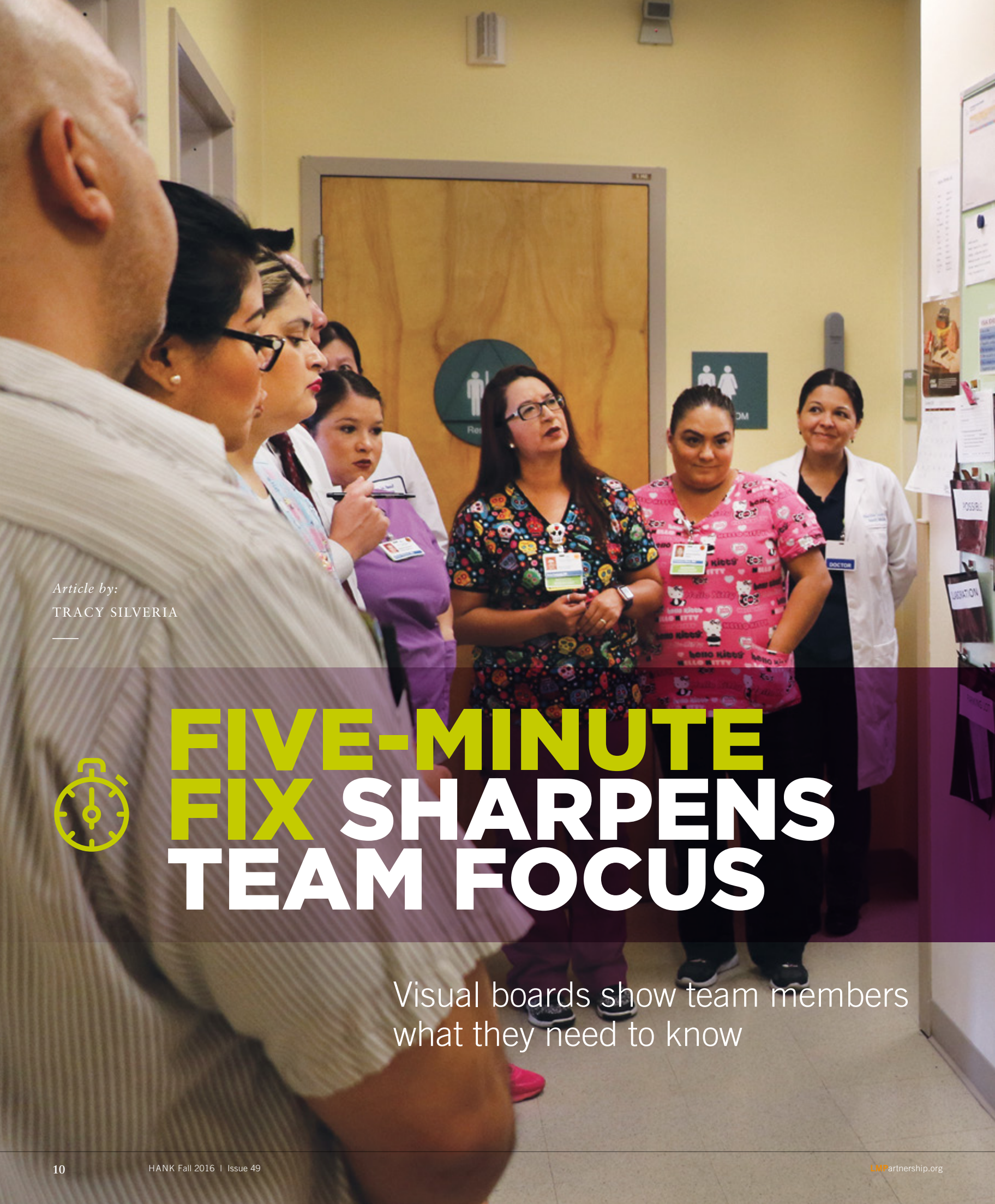
5

View it all on a mobile device

We talked with UBT members, leaders and consultants... and rebuilt the site to make your job easier.



Visit **LMPartnership.org** today!



Article by:
TRACY SILVERIA



FIVE-MINUTE FIX SHARPENS TEAM FOCUS

Visual boards show team members
what they need to know



WONDERING how to keep your meetings short and to the point? Stop by Gilroy Medical Offices in Northern California and watch a unit-based team power through its five-minute daily huddle.

On a Tuesday in October, the Family Medicine UBT for Station 1 gathers around a magnetic marker board filled with visual reminders and messages. Medical assistant and SEIU-UHW member Nabi Lopez takes her turn leading team members through the day's staffing and scheduling assignments, a discussion of where they stand on key clinical goals and upcoming department events.

Exactly five minutes after they gather, a buzzer sounds, and the 10 nurses, physicians, clerks, pharmacists, EVS staff and others head off to start their day.

A new routine

Crisp meetings and high team engagement were not always the norm for the department.

"Prior to using visual boards, our meetings were few and far between," says SEIU-UHW member Dawn Reyes-Takaki, a medical assistant and member of the original project team. "They were chaotic, filled with complaints and negativity. Staff felt that changes were forced on them with no input."

Three years ago, a San Jose-based team studied performance improvement techniques in other

organizations. One of the ideas that stood out was the use of visual boards. A larger group of managers, workers and improvement advisors agreed on necessary adjustments and a standard format for the boards, and selected Gilroy Medical Offices to test their use.

On the same page

When the Station 1 team first was asked to conduct huddles using the board, Anabel Godoy, a medical assistant and SEIU-UHW member, thought, "I have patients to see—I don't have time for this."

But, she continues, "after a month I totally got it." It helps us speak up on ideas we have. I can go to one place to see who is on call, or what our quality goal is for the week."

"By using the visual board during our huddle, we have consistent teamwork, workflow and accountability," adds Nikhat Shaik, MD. "It allows all of us to be on the same page."

Managers say the boards also support the rounding that they are asked to do with their teams. For instance, their huddles provide a way to surface operational concerns, suggest ideas for improvement and recognize achievements.

After about three months, the Station 1 team shared its results with others in the department. A key to success was training all members of the

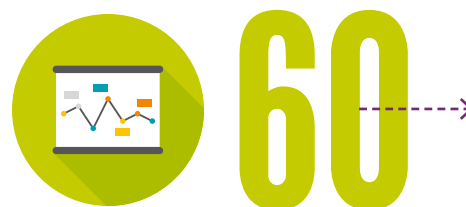
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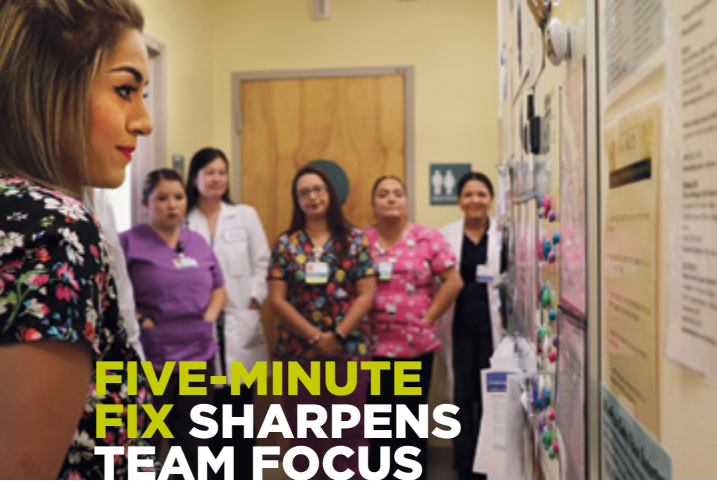
'By using the visual board during our huddle, we have consistent teamwork, workflow and accountability.'

—NIKHAT SHAIK, MD

NO MORE CHAOS: Quick, action-oriented huddles around a visual board have replaced boring meetings filled with negativity at the Gilroy Medical Offices (opposite page). Team members are more engaged, and their practice is spreading to nearby facilities. Chris Jung, director of Clinical Services, points out key results, while Alicia N. Chavez, a medical assistant and SEIU-UHW member, and other employees listen up.



THE NUMBER OF BOARDS NOW IN USE BY MORE THAN 30 DEPARTMENTS AT SAN JOSE MEDICAL CENTER.



FIVE-MINUTE FIX SHARPENS TEAM FOCUS

(continued from page 11)

department on how to effectively use the board. The practice soon spread to the rest of the facility. By spring 2014, all six stations were using visual boards in their daily huddles. Today there are eight boards in use—at all the patient care stations, plus an overview board for team co-leads and another for the Gilroy administrative team.

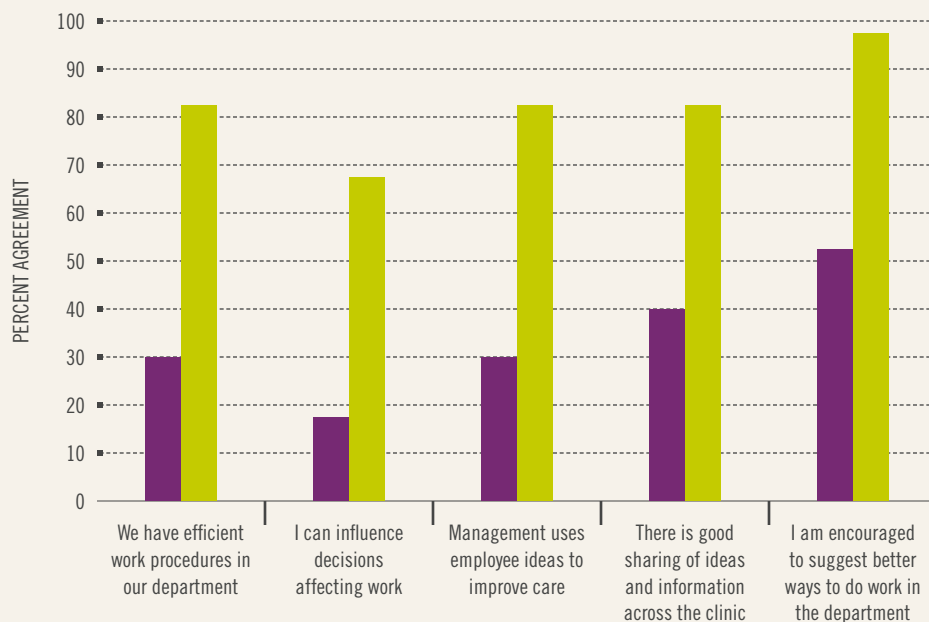
Last year the visual boards spread to the San Jose Medical Center, where 60 boards are now in use by more than 30 departments. They've changed the way work gets done.

“Instead of monthly meetings, information is shared daily,” says Kelly Coelho, Gilroy’s administrative services manager and a member of the original project team. “It’s very different from the old days.” hank

Visual boards boost staff engagement

■ Before visual board huddles (2014)

■ After visual board huddles (2015)



SOURCE: Department survey

The Gilroy Family Medicine department surveyed its physicians and medical assistants before and after implementation of daily huddles with visual boards. The survey showed dramatic improvement in five People Pulse measures of team effectiveness.

HOW YOUR TEAM MAKES A DIFFERENCE

I'M IN A UBT AND SO ARE YOU

UBTs give frontline workers a voice in decision making, an opportunity to develop their skills, and a way to better serve Kaiser Permanente members, patients and customers.



11,000+

performance improvement projects in 2016, including more than 3,000 related to affordability



3,600

unit-based teams



HIGH-PERFORMING, ENGAGED UNIT-BASED TEAMS





GETTING RESULTS:

Let teams see how they're doing

Visual boards have made unit-based teams at Gilroy Medical Offices more focused, productive and comfortable sharing ideas. That in turn helps teams deliver better, more affordable care.

More than 360 ideas have come out of the teams' daily huddles since the boards were introduced in late 2013, says Chris Jung, Gilroy's director of Clinical Services. Many of them go into the "Just Do It!" file for immediate implementation. For example, by using the board to identify staff members on call each day, physicians and staff were able to cover lunch breaks that previously required last-minute scrambles.

Since implementing these and other process improvements, physicians and staff report higher

satisfaction and engagement (see chart, opposite page). By huddling at the boards, "everyone hears the same message at the same time," says Jung. "We want to foster ownership of ideas, and what better way to do it than through the UBTs?"

The boards also have improved people's leadership skills. Anabel Godoy, a medical assistant who was initially doubtful about the boards, says, "We have more communication now. I have the confidence to lead a huddle. I have a voice."



Take action to keep your team informed and engaged

If your team doesn't yet have a visual board, discuss it with your team and ask two volunteers to put one together.

To get started, visit LMPartnership.org and type "create visual board" into the search box.

If you already have a board, keep it up to date, and use it in your huddles. Ask your UBT consultant or performance improvement advisor for tips.



\$35 million saved

per year by reducing waste and improving affordability



60% fewer

patient falls with injuries



38% fewer

workplace injuries



21% fewer

lost work days



13% improvement

in patients' overall hospital satisfaction



**HEALTHY PATIENTS,
FAMILIES AND
COMMUNITIES**



WHO'S THAT PERSON?

In each issue of *Hank*, we feature someone prominent from Kaiser Permanente or its unions on the front cover.

CAN YOU NAME THIS PERSON?



ICEBREAKER: Would you rather...

INSTRUCTIONS: Use this fun meeting icebreaker before a huddle or brainstorming session. Have everyone stand in a circle. Decide who will start. Have that person turn to the person on her right and ask a question from the following list. Each respondent has 10 seconds to answer.

Would you rather:

- » Win \$1 million in a lottery or never have to pay for anything ever again?
- » Fly all over the world with your favorite celebrity or be marooned on an island with the one you love?
- » Become a popular celebrity whom everyone hates or be a normal person whom everyone loves?
- » Be bitten by a radioactive spider or a vampire?
- » Kiss a jellyfish or step on a crab?
- » Have a beautiful house and an ugly car or an ugly house and a beautiful car?
- » Be invisible or able to read minds?
- » Save a damsel in distress or take a pot full of gold?
- » Wake up with a different face with the same gender, or a different gender with the same face?
- » Be remembered with hatred or forgotten altogether?
- » Age from the neck up only or the neck down only?
- » Eat anything and never gain weight or be able to fly?
- » Tell that special someone you love them and risk losing them or never tell them how you feel and suffer inside?
- » Have three wishes in 10 years or one wish today?
- » Visit the world 100 years into the past or 100 years into the future?

WORD SEARCH: I'm in a UBT and so are you!

DIRECTIONS: Find the following words, all of which relate to principles of partnership. The words may appear vertically, horizontally or diagonally, and may be read from either direction.

I A H R K T X Y T Q N S I D P
M G T E A R S T E S T D S I E
P R G S E U H I O N E F H C R
R E N U P S D L E A M S N E Z
O E E L S T U I S A R E S N E
V M R T X T T B N E D P D E C
E E T S I A T A N I E E O P N
M N S O P M G T F C S E Q Q E
E T N F A E R N T A D C R O L
N S W E M A O U B R I S K F L
T F T E P C N O I S I C E D E
I A N Q S U C C E S S F U L C
N T L A B O R C D E T I N U X
U T R A N S P A R E N T M Z E
S N A I C I S Y H P S L O O T

ACCOUNTABILITY	IDEAS	RESPECT	TEAM
AGREEMENT	IMPROVEMENT	RESULTS	TOOLS
BASED	LABOR	RISK	TRANSPARENT
CONFIDENCE	MANAGEMENT	SOLUTIONS	TRUST
DECISION	PARTNERSHIP	SPEAK	UNIT
EXCELLENCE	PATIENTS	STRENGTH	UNITED
FREE	PHYSICIANS	SUCCESSFUL	

WHERE'S THE MISTAKE?

In each issue of *Hank*, there is a purposeful mistake hidden somewhere in the pages. Can you find it?



FOR EXAMPLE:

Woman is holding a cactus instead of a cup of water.

YOUR ANSWER:

.....

TRIVIA QUESTION

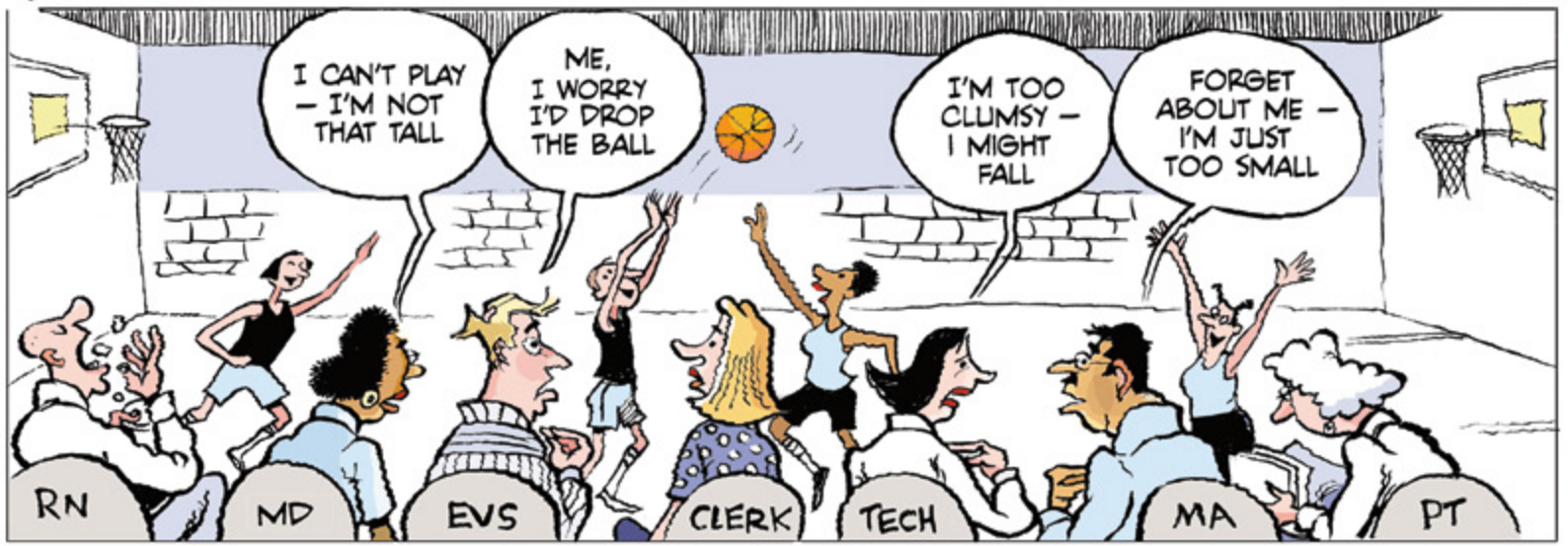
What is the largest internal organ in the human body?

- a) Brain
- b) Lung
- c) Heart
- d) Liver



Check out the answers to this issue's puzzles and games at LMPartnership.org/puzzles-and-games/answers.

SUPER SCRUBS: I'M IN A UBT — AND SO ARE YOU!





IT'S A LIFE SAVER.

Kaiser Permanente managers, physicians and union coalition-represented workers are teaming up to beat the flu. Our patients, teammates and communities are counting on us. And our National Agreement commits us to take the flu vaccine or wear a mask during the active flu season. Protect your team, your patients and yourself.



Ask your manager or employee health office for the flu shot schedule in your facility.

For more information, please visit LMPpartnership.org/tools/10-essential-tips-flu-prevention.

LMP LABOR MANAGEMENT PARTNERSHIP

FOLD AND TEAR ALONG DOTTED LINE