Embrace “the genius of the and”

“A truly visionary company embraces both ends of a continuum: continuity and change, conservatism and progressiveness, stability and revolution, predictability and chaos, heritage and renewal, fundamentals and craziness. And, and, and.”

– Jim Collins

Avoid “the tyranny of the or”

Where progress is slow and incremental, we see, as Jim Collins might say “black or white” thinking. We see what Collins describes as the “Tyranny of the OR” – polarized decision making; painful and false choices between:

- Short-term OR long-term
- Cost OR quality
- Clinical care OR Administration
- Win OR lose
- Me OR you
IHI’s Strategy to Improve Health and Health Care Worldwide

Transforming health care will require:
Reliable systems for providing safe, harm-free, evidence-based care
Patients and families empowered to be genuine partners in their care
New models for high-quality, high-value care
Building improvement capability at all levels
Improving health, improving care, and lowering per capita cost (Triple Aim)

Creating a culture of health will require:
Health care systems optimized for “health” and “care”
Bridges between health care, community, and public health
Healthy communities initiatives
Creating enabling conditions
Peer-to-peer supports
New mindsets

Accelerate the pace of improvement in health care
AND
Innovate and partner with organizations and communities to improve health

Supporting our customers wherever they are on the journey

Working in five focus areas
Leveraging IHI’s core strengths

Innovating new models and methods
Convening globally to harvest, share, and spread learning
Partnering with others to accelerate the pace and scale of improvement
Driving measurable results worldwide within health care and across communities

October 2014
Accelerate the pace of improvement in health care

AND

Innovate and partner with organizations and communities to improve health
Improve Health Care AND Improve Health
Reasons to Celebrate

From 2010 – 2013:

- Hospital-acquired conditions (HACs) declined by 17%
- 1.3 million fewer patient harms
- $12 billion in health spending avoided
- 50,000 lives saved

However…….
Quarterly rates of Clostridium difficile per 100,000 bed days (65+)

82% reduction in c-diff cases in the over-65s since 2007

Source: Health Protection Scotland
A new safety framework

- A shared and comprehensive framework (or game-plan)
- Safety across the continuum
- Engaging patients in safety
Patient Safety Framework

Learning System
A learning system collects and analyzes social, clinical and operation metrics based on a strategic plan; engages multidisciplinary teams to debrief and put into action processes (PDSA) to improve the outcomes and incorporate a continuous feedback loop to reassess if the new processes has generated better social, clinical and operational outcomes.

Culture
“...the product of the individual and group values, attitudes, competencies and patterns of behavior that determine the commitment to, and the style and proficiency of, an organization's health and safety programs.”

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Improving work processes and patient outcomes using standard improvement tools including measurements over time.

Facilitating and mentoring teamwork, improvement, respect and psychological safety.

Applying best evidence and minimizing non-patient specific variation with the goal of failure free operation over time.

Regularly collecting and learning from defects and successes.

Being held to act in a safe and respectful manner given the training and support to do so.

Openly sharing data and other information concerning safe, respectful and reliable care with staff and partners and families.

Developing a shared understanding, anticipation of needs and problems, agreed methods to manage these as well as conflict situations.

Creating an environment where people feel comfortable and have opportunities to raise concerns or ask questions.

Gaining genuine agreement on matters of importance to team members, patients and families.

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Other Quality of Care priorities?

- Access
- Continuity
- Empathy
- Compassion
Empathy and Compassion

The research shows that kindness-oriented care has a more statistically significant impact on outcomes than aspirin for reducing a heart attack.
“Doctor for your soul”
Improving Health

A 25 year old with Bachelors degree will live 9 years longer than a peer who doesn’t get their high school diploma
Health Care’s contribution to Health

- The social determinants of health are such that health care can’t do this work alone
- But Health Care can contribute so much – we can bring will, ideas and crucially our knowledge of improvement to the table
- We need to be a better partner
- Humility to listen and support
- Courage to start and to persevere
Escape Velocity to a Culture of Health: 100 Million People Living Healthier Lives by 2020!
What is 100 Million Healthier Lives?

An audacious goal for improving health: “100 Million People Living Healthier Lives by 2020”

A catalytic social movement whose purpose is to create a shift in culture, heart and mindset.

A unifying coalition that helps to bring together those who are working to improve health across sectors to accelerate change.

An improvement portfolio designed to achieve a measurable goal of improving health and spark large-scale innovation about how to get there.

For more information email: 100MLives@ihi.org
Vision: Fundamentally transform the way the world thinks and acts to improve health and well-being

Identity: An unprecedented collaboration of change agents pursuing an unprecedented result: 100 million people living healthier lives by 2020

Supports: A culture of health and wellbeing
6 Core Strategies

100 Million Healthier Lives is committed to six core strategies:

- Creating a health care system that is good at health AND good at care
- Building bridges between health care, community, public health, and social service systems
- Creating healthy communities
- Promoting peer-to-peer support networks that leverage and empower individuals
- Creating enabling conditions, such as new payment structures and policy changes, that promote success
- Developing new mindsets - about partnerships, co-design with the people we are hoping to serve, collaboration, and servant leadership
Topical hubs and geographic hubs

**Topical Hubs:** Hubs are made up of people and organizations who are leading the thinking, learning, and acting of the 100 Million Community in a key topic area.
- Goal is to identify or generate simple, scalable solutions which could be adopted in multiple contexts.
- Each topical hub is global – offers opportunity to innovate together and share “bright spots” across the globe.

**Geographic hubs:** Organizations which have the capacity to engage local health systems and communities, coordinate participation in 100 Million for a geographic area (may be working on multiple topic areas).
- Adapt bright spots to local context
- Support communities in their improvement journey.
SCALE: Scaling up 1000 health systems and communities

“Bright Spots”

Pace-setter communities
Including Algoma
Wave 1 (20)

Mentor communities
(4)

Pathway to Pacesetter

Scale-up of other communities; spread of lessons learned

Additional pace-setter communities through other community improvement efforts

Pace-setter communities
Wave 2 (50)

Pace-setter communities
(Wave 3) - 250

Pace-setter communities
(Wave 3) - 250

Pace-setter communities
(Wave 3) - 250
From a doctor.....
A New Prescription and New Responsibilities

Ask your doctor if getting off your ass is right for you.
Improve Health Care AND Improve Health
Incremental Improvement AND Radical Redesign
The adjacent possible is a kind of shadow future, hovering on the edges of the present state of things, a map of all the ways in which the present can reinvent itself.
Incremental Gains
What are these and how did they help win Olympic medals for Team Great Britain?
Incremental gains

They are “bum warmers” to warm the buttocks muscles of Olympic cyclists before a race! The extra warmth means the cyclists can start one hundredth of a second faster than their opponent.
Some obvious gains

- They started by optimizing the things you might expect
  - Nutrition of riders
  - Weekly training program
  - Ergonomics of the bike seat
  - Weight of the tires
  - Of course the ‘bum warmers’
The less obvious marginal gains

But Brailsford and his team didn’t stop there. They searched for 1 percent improvements in tiny areas that were overlooked by almost everyone else:

- Discovering the pillow that offered the best sleep
- Testing for the most effective type of massage gel
- Teaching riders the best way to wash their hands to avoid infection
- Data collected in real time to understand what was working

They searched for 1 percent improvements everywhere.
Alone, are small gains significant?

Do we really believe what is important to people can be reduced to . . . .

\[
\int_{-\infty}^{\infty} e^{-x^2} \, dx = \sqrt{\pi}
\]

\[
f(x) = a_0 + \sum_{n=1}^{\infty} \left( a_n \cos \frac{n \pi x}{L} + b_n \sin \frac{n \pi x}{L} \right)
\]

\[
x = \frac{-b \pm \sqrt{b^2 - 4ac}}{2a}
\]
What difference might aggregation make?

Aggregation of Marginal Gains

In the beginning, there is basically no difference between making a choice that is 1% better or 1% worse. (In other words, it won’t impact you very much today.) But as time goes on, these small improvements or declines compound and you suddenly find a very big gap between people who make slightly better decisions on a daily basis and those who don’t.
How about half the length of a bicycle?
A Leadership Alliance proposing audacious change
Change From the Inside Out
Health Care Leaders Taking the Helm

Even as politicians and pundits continue to debate the merits of the Affordable Care Act (ACA), it is time to look beyond it to the next phase of US health care reform. Although many physicians contributed to the development and implementation of the ACA, the forces that have steered it so far have been primarily governmental. Leaders from within health care should now more firmly take the tiller. To borrow a phrase contributed by Spline and colleagues, it is time to move from change forced from the “outside in” to change led from the “inside out.”
Change the Balance of Power
- Co-produce health and wellbeing in partnership with patients, families, and communities

Standardize What Makes Sense
- Standardize what is possible to reduce unnecessary variation and increase the time available for individualized care

Customize to the Individual
- Contextualize care to an individual’s needs, values, and preferences, guided by an understanding of “what matters” to the person in addition to “what’s the matter”
- **Promote Wellbeing**
  - Focus on outcomes that matter the most to people, appreciating that their health and happiness may not require health care

- **Create Joy in Work**
  - Cultivate and mobilize the pride and joy of the health care workforce

- **Make it Easy**
  - Continually reduce waste and all non-value-added requirements and activities for patients, families, and clinicians
- **Move Knowledge, Not People**
  - Exploit all helpful capacities of modern digital care and continually substitute better alternatives for visits and institutional stays. Meet people where they are, literally.

- **Collaborate/Cooperate**
  - Recognize that the health care system is embedded in a network that extends beyond traditional walls. Eliminate siloes and tear down self-protective institutional or professional boundaries that impede flow and responsiveness.

- **Assume Abundance**
  - Use all the assets that can help to optimize the social, economic, and physical environment, especially those brought by patients, families, and communities.

- **Return the Money**
  - Return the money from health care savings to other public and private purposes.
Year 2

- Joy in Work
- Why can’t my EHR be more like my smartphone
- From “it’s raining meds” to population health
- Living and Dying well
- Collective Voice
High-Impact Leadership Behaviors
What leaders do to make a difference

1. Person-centeredness
   Be consistently person-centered in word and deed

2. Front Line Engagement
   Be a regular authentic presence at the front line and a visible champion of improvement

3. Relentless Focus
   Remain focused on the vision and strategy

4. Transparency
   Require transparency about results, progress, aims, and defects

5. Boundarilessness
   Encourage and practice systems thinking and collaboration across boundaries

IHI High-Impact Leadership Framework

- Create Vision and Build Will
- Deliver Results
- Develop Capability

Driven by Persons and Community
Shape Culture
Engage Across Boundaries

IHI High-Impact Leadership Framework

Driven by Persons and Community
- Include patients on improvement teams
- Start meetings with patient stories and experience data
- Use leadership rounds to model engagement with patients and families

Develop Capabilities
- Teach basic improvement at all levels
- Invest in needed infrastructure and resources
- Integrate improvement with daily work at all levels

Shape Culture
- Communicate and model desired behaviors
- Target leadership systems and organizational policies with desired culture
- Take swift and consistent actions against undesired behaviors

Create Vision and Build Will
- Boards adopt and review system-level aims, measures, and results
- Channel leadership attention to priority efforts
- Transparently discuss measures and results

Deliver Results
- Use proven methods and tools
- Frequently and systematically review efforts and results
- Devote resources and skilled leaders to high-priority initiatives

Engage Across Boundaries
- Model and encourage systems thinking
- Partner with other providers and community organizations in the redesign of care
- Develop cross-setting care review and coordination processes

3 Interdependent dimensions of High-Impact Leadership

- **New Mental Models**: How leaders think about challenges and solutions.
- **High-Impact Leadership Behaviors**: What leaders do to make a difference.
- **IHI High-Impact Leadership Framework**: Where leaders need to focus efforts.
New mental model?
It can’t be like this, either. . . . .

*The Choluteca Bridge, after Hurricane Mitch*
Some keys for the new mental models

- Shared leadership
- Partnerships (staff, patients, communities)
- Embracing complexity
- Shaping culture
- Curiosity
A spectrum of shared leadership
Partnerships; Getting to the Third Curve
Hitting the target...

- If you are in a mechanical, manufacturing environment then hitting a target it a matter of throwing a rock – figuring out speed, trajectory, etc.
- If you are in a messy, human, complex, adaptive environment – it is like throwing a bird at a target – it is all about the ‘attractor’
- Medicine throws birds at targets and only thinks about the throwing part...

Hitting Target: Rock vs. Bird
It’s complicated……

“Too bad all the people who know how to run the country are busy driving cabs and cutting hair.”
- George Burns

Updated for 2015:

“It's too bad that everyone who has a solution for everything is at home commenting on the internet.”
- Twitter user Rasta Pasta (@rastahipsta)
Culture eats strategy for breakfast

“The only thing of real importance that leaders do is to create and manage culture.”

- Edgar Schein
(Iceberg ahead)
Explicit Culture – Heroes, Symbols, Structures

Implicit Culture – Values, Beliefs, Assumptions, Purpose
Curiosity, of course

“I have no special talents. I am only passionately curious.”

Albert Einstein

High CQ = Ambiguity + Acquisition
Humble Inquiry

“If a goal of conversation is to improve communication and build a relationship, then telling is more risky than asking. Asking temporarily empowers the other person and temporarily makes me vulnerable.”
Some Leadership Fundamentals (n=1)

- Comfortable with complexity and generous with power
- Heroism is out – humility is in
- Leaders need to figure out how to partner – co-design and co-produce
- Leaders need to get the whole team connected to the purpose and to the mission
Humility AND Courage
Thank You!

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