



RELATIONAL COORDINATION
RESEARCH COLLABORATIVE

Transforming Relationships to Meet the Needs of Patients and Care Providers

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Jody Hoffer Gittel
Relational Coordination Research Collaborative
Brandeis University

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Challenges we face


- ◆ Healthcare sector is experimenting with care delivery models that require higher levels of coordination among professionals, with patients
- ◆ Increasingly diverse workforce is looking for more satisfying ways to work together
- ◆ Industry is dynamic due to changing payment models, technologies and patient needs
- ◆ Errors continue to be an epidemic despite patient safety focus



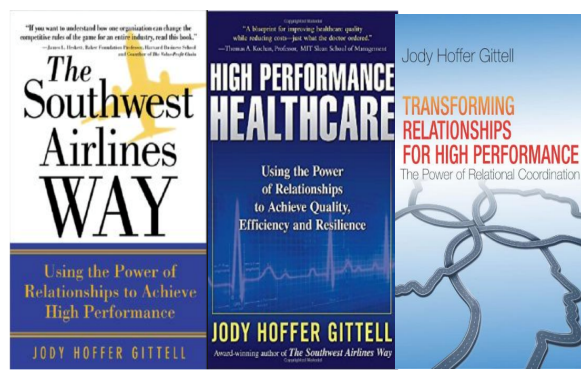
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Today

- What is relational coordination?
- How does it drive performance and well-being?
- How well is it working in our organizations?
- How well do our organizations support it?
- Six stages of change



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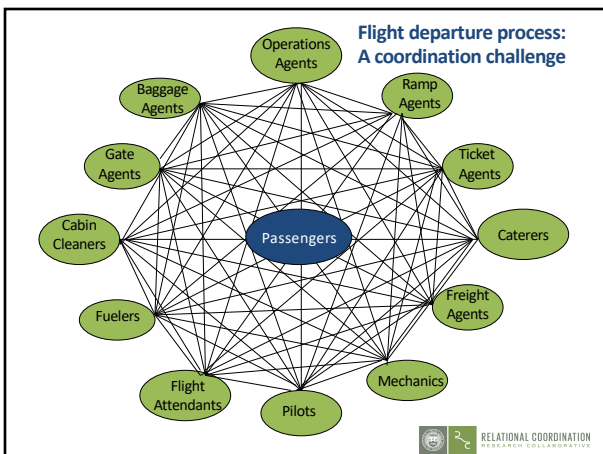


The Southwest Airlines Way
Using the Power of Relationships to Achieve High Performance
JODY HOFFER GITTELL

HIGH PERFORMANCE HEALTHCARE
Using the Power of Relationships to Achieve Quality, Efficiency and Resilience
JODY HOFFER GITTELL

TRANSFORMING RELATIONSHIPS FOR HIGH PERFORMANCE
The Power of Relational Coordination
Jody Hoffer Gittel

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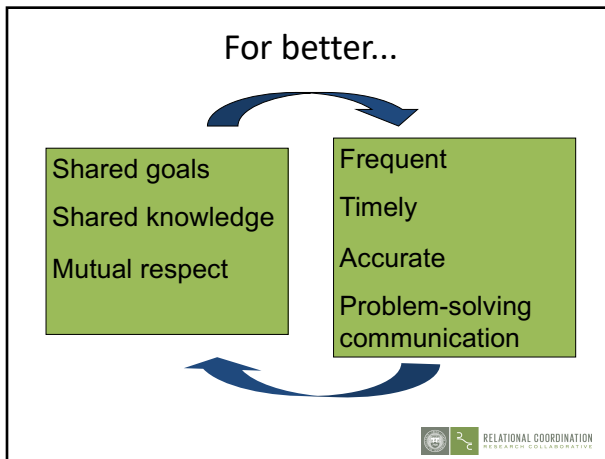


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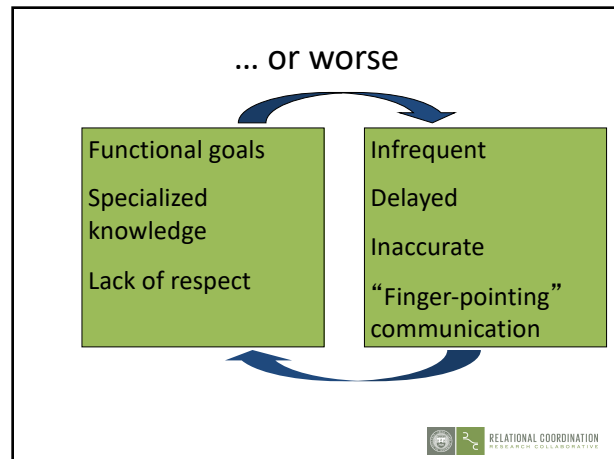
Relationships shape the communication through which coordination occurs ...



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This process is called

relational coordination

“Communicating and relating for the purpose of task integration”

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- ### 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
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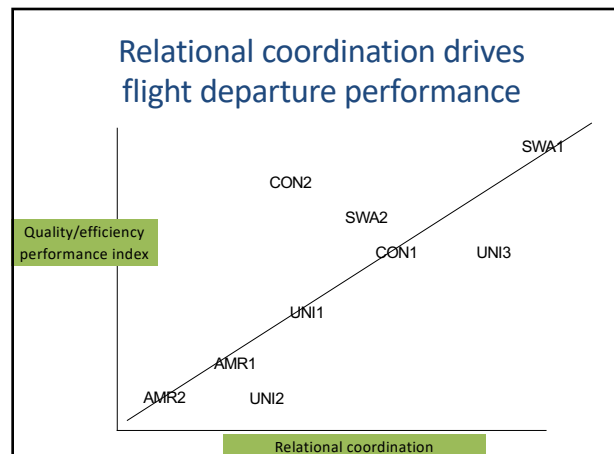
Relational coordination drives flight departure performance

| | Efficiency | | Quality | | |
|----------------------------------|------------------|----------------------|---------------------|-----------|---------------|
| | Gate time/flight | Staff time/passenger | Customer complaints | Lost bags | Late arrivals |
| Relational coordination | -.21*** | -.42*** | -.64*** | -.31* | -.50** |
| Flights/day | -.19*** | -.37*** | -.30*** | .13 | -.22+ |
| Flight length, passengers, cargo | .79*** | .45*** | .13 | .12 | -.54** |
| Passenger connections | .12** | .19** | .09 | .13 | .00 |
| R squared | .94 | .81 | .69 | .19 | .20 |

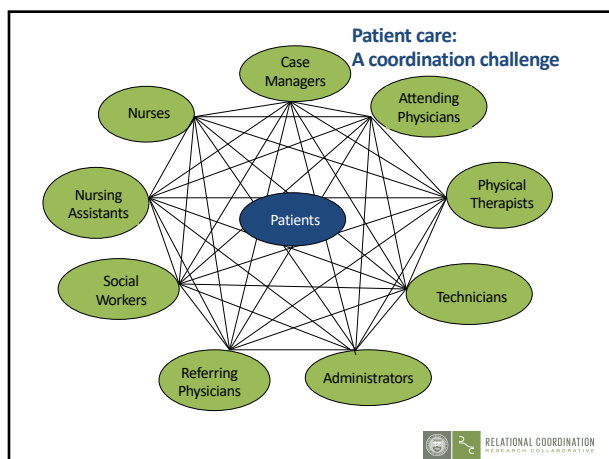
Observations are months (n=12) in airport locations (n=9). Standardized coefficients are shown.

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Institute of Medicine report

“The current system shows too little cooperation and teamwork. Instead, each discipline and type of organization tends to defend its authority at the expense of the total system’s function.” (2003)

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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

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Measuring RC

| | |
|----------------------------------|---|
| 1. Frequent Communication | How frequently do people in each of these groups communicate with you about post-operative care procedures for our surgical patients? |
| 2. Timely Communication | Do they communicate with you in a timely way about post-operative care procedures for our surgical patients? |
| 3. Accurate Communication | Do they communicate with you accurately about post-operative care procedures for our surgical patients? |
| 4. Problem-Solving Communication | 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? |
| 5. Shared Goals | Do people in each of these groups share your goals for post-operative care procedures for our surgical patients?? |
| 6. Shared Knowledge | Do people in each of these groups know about the work you do with post-operative care procedures for our surgical patients?? |
| 7. Mutual Respect | Do people in each of these groups respect the work you do with post-operative care procedures for our surgical patients?? |

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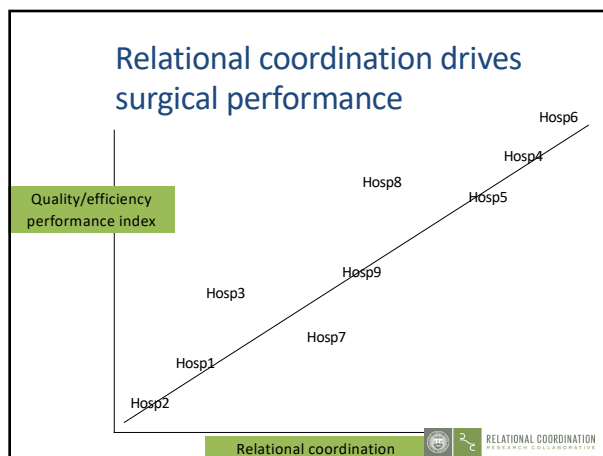
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Relational coordination drives surgical performance

| | Length of stay | Patient satisfaction | Freedom from pain | Mobility |
|-------------------------|----------------|----------------------|-------------------|----------|
| Relational coordination | -.33*** | .26*** | .08* | .06+ |
| Patient age | .02 | .00 | .01 | .04 |
| Comorbidities | .09* | .07 | .01 | .04 |
| Pre-op status | .03 | .01 | .20*** | .28*** |
| Surgical volume | .11** | .10* | .06+ | .03 |
| R Squared | .82 | .63 | .50 | .22 |

Observations are patients (n=878) in hospitals (n=9). Model also included gender, marital status, psychological well-being and race. Standardized coefficients are shown.

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Research has continued...



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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



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...and multiple countries

- United States
- Canada
- Denmark
- Norway
- Sweden
- Austria
- Germany
- Switzerland
- Netherlands
- Belgium
- Scotland
- England
- Ireland
- Japan
- China
- Korea
- Pakistan
- Saudi Arabia
- Israel
- Australia
- New Zealand
- Ecuador



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...around the world




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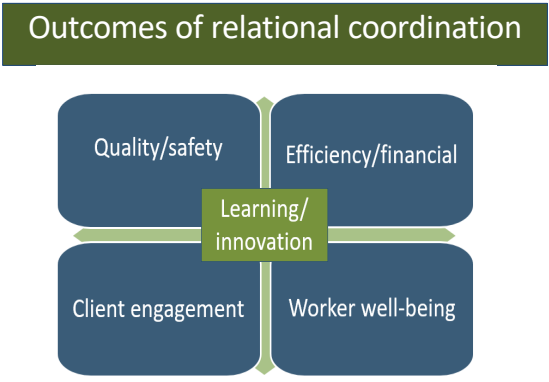

...from inpatient, to outpatient, to the community

| | | |
|---|--|---|
| <ul style="list-style-type: none"> ▪ Billings Clinic (Montana) ▪ Concord Hospital (NH) ▪ St. Josephs (NY) ▪ Boston Children's (MA) ▪ Boston Medical Center (MA) ▪ Beth Israel (MA) ▪ Maine Medical (ME) ▪ Stanford Medical (CA) ▪ Gold Coast Health System (Australia) | <ul style="list-style-type: none"> ▪ Kaiser Permanente (OR/WA) ▪ Dartmouth Hitchcock (NH) ▪ Blue Shield (CA) ▪ American Dental Partners (US) ▪ Primary Care Progress (US) ▪ National Health Service (UK) | <ul style="list-style-type: none"> ▪ Integrated Delivery Networks (NH) ▪ Community safety (MA) ▪ Municipalities (Denmark, Sweden, Netherlands) ▪ Family services (Denmark) ▪ New immigrants (Sweden) ▪ Community obstetrics (Netherlands) |
|---|--|---|

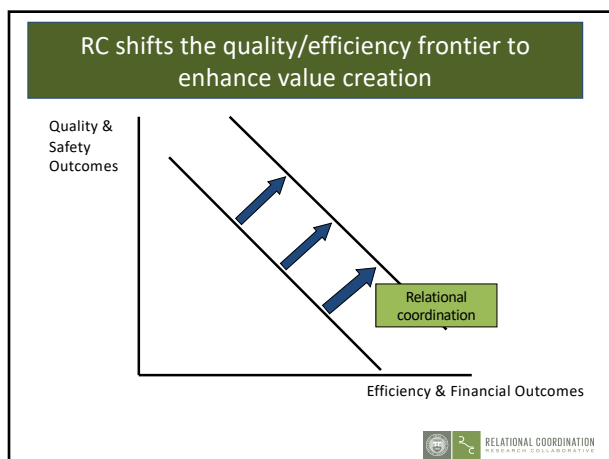


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Outcomes of relational coordination

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- There are *other* useful responses to performance challenges...
- ◆ Reengineering
 - ◆ Total quality management
 - ◆ PDSA
 - ◆ Quality improvement
 - ◆ Lean/ six sigma
 - ◆ High reliability
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Addressing technical issues is necessary - but not sufficient

“We’ve been doing process improvement for several years, and we think we’re on the right track. But we’ve tried a number of tools for process improvement, and they just don’t address the relationship issues that are holding us back.”

- Bob Hendler, Tenet Healthcare Systems

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Why does RC improve performance?

Relationships of shared goals, shared knowledge and mutual respect create a culture that supports process improvement

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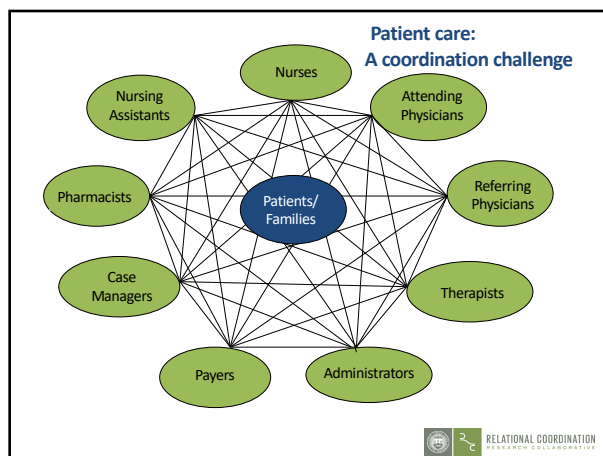
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Why does RC improve performance?

Relationships of shared goals, shared knowledge and mutual respect help care providers to see how they connect *around and with* their patients

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Why does RC improve worker outcomes?

- Relational coordination enables workers to achieve better quality outcomes for their clients with
 - less wasted effort
 - less stress
 - therefore less burnout



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RC increases satisfaction, engagement, lowers burnout

- **The importance of person-centered care and co-creation of care for the well-being and job satisfaction of professionals working with people with intellectual disabilities.** *Scandinavian Journal of Caring Science*, 2018
- **Impact of relational coordination on nurse job satisfaction, work engagement and burnout: Achieving the quadruple aim.** *Journal of Nursing Administration*, 2018.
- **Impact of relational coordination on staff and patient outcomes in outpatient surgical clinics.** *Health Care Management Review*, 2018.



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RC increases motivation and productivity

- ◆ **Performance management in context: Formative cross-functional performance monitoring for improvement and the mediating role of relational coordination in hospitals.** *International Journal of Human Resource Management*, 2017.



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RC increases engagement, commitment – and reduces turnover

- **Team work engagement as a mediator between relational coordination and team outcomes.** *PhD Dissertation*, Northcentral University, 2017.
- **A study of the perceptions of healthcare professionals about collaboration and learning in academic health centers.** *PhD Dissertation*, University of Pennsylvania, 2017.
- **Relational coordination: A predictor of nurse job satisfaction, organizational commitment, and turnover intention.** *Health Care Management Review*, 2018.



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Relationships are key to resilience at every level

- **Relationships, layoffs, and organizational resilience: Airline industry responses to September 11.** *Journal of Applied Behavioral Science*, 2006.
- **Relationships and resilience: Care provider responses to pressures from managed care.** *Journal of Applied Behavioral Science*. 2008.
- **Rethinking autonomy: Relationships as a source of resilience in a changing health system.** *Health Services Research*, 2016.



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And at a very basic neurological level


Positive relationships evoke positive emotions – activating more advanced parts of the brain.

Barbara Frederickson (2004) "The Broaden-and-Build Theory of Positive Emotions," *Philosophical Transactions of the Royal Society of Biological Sciences*



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When does RC matter?



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RC matters most under conditions of complexity


- ◆ Task interdependence
- ◆ Uncertainty
- ◆ Time constraints



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Are these conditions present in your work?

- ◆ Task interdependence
- ◆ Uncertainty
- ◆ Time constraints



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How well does relational coordination currently work in your organization?



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Like this?


| | |
|--|---|
| Shared goals Shared knowledge Mutual respect | Frequent Timely Accurate Problem-solving communication |
|--|---|



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... or this?

| | |
|--|--|
| Functional goals Specialized knowledge Lack of respect | Infrequent Delayed Inaccurate "Finger-pointing" communication |
|--|--|



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How well does your organization *support* relational coordination?



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Is RC supported through intentional design?


| | | |
|--|--|--|
| Organizational Structures Select for Teamwork Train for Teamwork Relational Job Design Shared Accountability Shared Rewards Shared Conflict Resolution Strong Boundary Spanners 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 Productive Resources Satisfaction Engagement Energy Learning & Innovation |
|--|--|--|



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Or not?

| | | |
|--|---|--|
| Organizational Structures Select Individual Players Train Individual Players Siloed Job Design Siloed Accountability Siloed Rewards Siloed Conflict Resolution Weak Boundary Spanners Siloed Meetings & Huddles Siloed Protocols Siloed Information Systems | Relational Coordination Infrequent Delayed Inaccurate Blaming Communication Functional Goals Exclusive Knowledge Lack of Respect | Performance Outcomes Low Quality & Safety Wasted Resources Dissatisfaction Disengagement Burnout Failure to Learn |
|--|---|--|



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The role of leadership


- ◆ Leaders' role is to redesign structures – or create new ones - to support the behaviors needed to succeed in the current environment
- ◆ If the environment is calling for relational coordination, leaders need to design structures that are less siloed, more relational
- ◆ Consider the case of the UW Regional Heart Center



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But changing structures is not enough

- ◆ Change rarely occurs simply by changing organizational structures
- ◆ Professional identities are deeply embedded in our personal identities
- ◆ Need to change the culture at the same time



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How do we get from here to there?



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Six stages of RC change

- Stage 1: Explore context
- Stage 2: Create change team
- Stage 3: Measure RC
- Stage 4: Reflect on findings
- Stage 5: Design interventions
- Stage 6: Implement and assess



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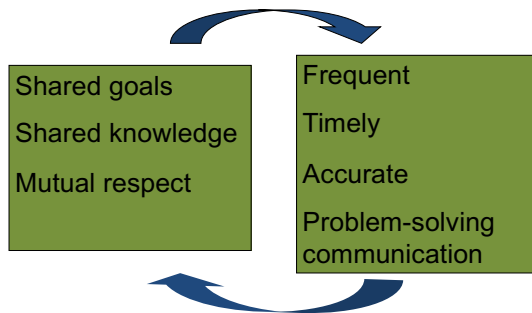
Stage 1: Explore context

- Start with the situation
- Who are the key stakeholders?
- What are the outcomes we are trying to change?
- What are the frameworks that might be helpful to address our challenges?
- RC might be helpful if there are challenges of coordination, interdependence, interprofessional teamwork



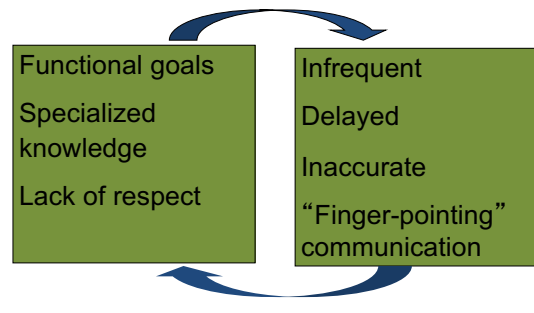
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RC may look like this...



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....or this



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Stage 2: Create change team

- Create change team that represents key stakeholders
- Motivate stakeholders from distinct perspectives/power to contribute time
- Facilitate sensitive discussions with a "safe space" to disagree respectfully
- Engage in relational mapping to visualize the work to be done



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Stage 2: Create change team



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Stage 2: Create change team



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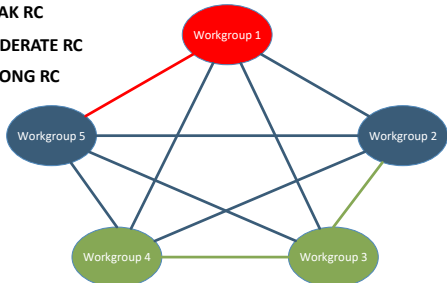
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Relational mapping of current state

■ WEAK RC

■ MODERATE RC

■ STRONG RC



RC = Shared Goals, Shared Knowledge, Mutual Respect,
Supported by Frequent, Timely, Accurate, Problem-Solving Communication

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Stage 3: Measure RC

- Change team invites their colleagues to engage in RC survey to assess the current state more accurately and inclusively
- Colleagues receive secure link by email, complete survey in 20 minutes
- Results remain anonymous

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Stage 3: Measure RC

| | |
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Stage 4: Reflect on RC findings

- Change team shares *selected findings* 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

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Stage 4: Reflect on RC findings

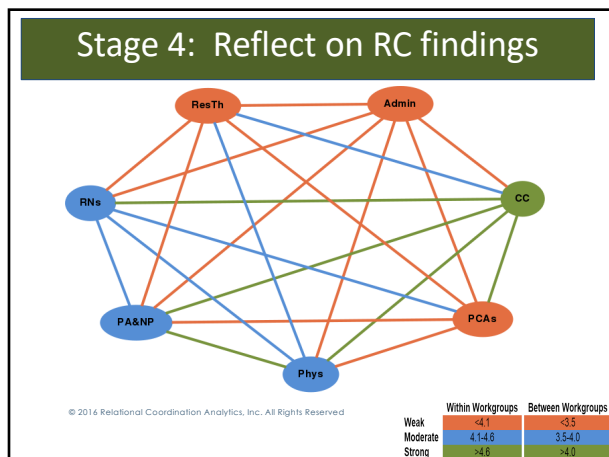
Between Workgroups
 N=104

| | Mean | Min | Max |
|-------------------------------|------|------|------|
| RC Index | 3.66 | 3.38 | 4.02 |
| Frequent Communication | 4.22 | 3.84 | 4.61 |
| Timely Communication | 3.46 | 3.03 | 3.96 |
| Accurate Communication | 3.67 | 3.40 | 3.93 |
| Problem-Solving Communication | 3.45 | 3.18 | 3.86 |
| Shared Goals | 3.86 | 3.56 | 4.18 |
| Shared Knowledge | 3.33 | 2.91 | 3.71 |
| Mutual Respect | 3.66 | 3.36 | 4.00 |

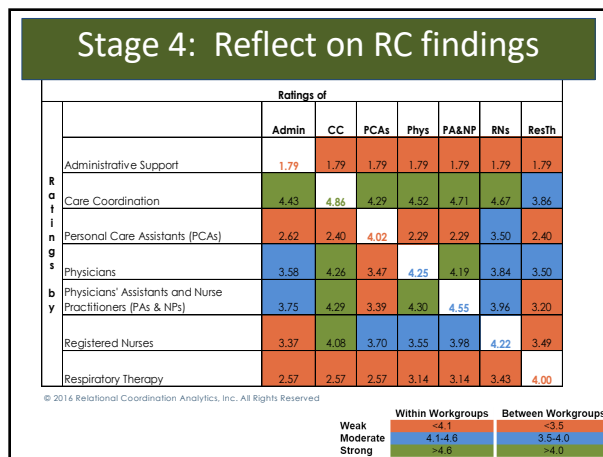
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| | | |
|----------|-------------------|--------------------|
| | Within Workgroups | Between Workgroups |
| Weak | -4.1 | -3.5 |
| Moderate | 4.1-4.0 | 3.5-4.0 |
| Strong | -4.0 | -4.0 |

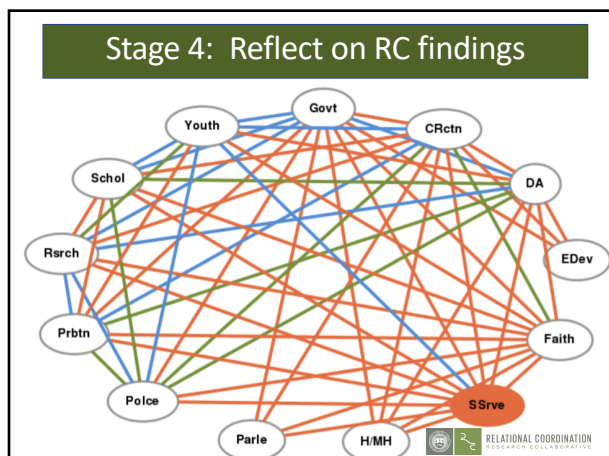
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Stage 4: Reflect on RC findings

| | G | C | D | E | F | S | H | P | P | P | R | S | Y |
|--------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| | o | r | A | D | a | r | e | a | o | o | e | c | o |
| | v | c | | e | i | / | / | r | i | r | f | h | u |
| | t | t | | v | t | M | M | i | c | e | r | o | t |
| | | n | | | | | | | | | | | |
| 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 | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- | -- |

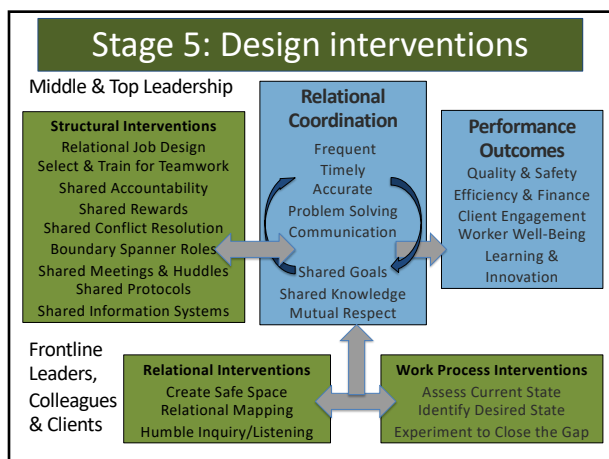
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- ### Stage 4: Reflect on findings
- Where does relational coordination currently work well? Where does it work poorly?
 - What are the underlying causes?
 - How does this impact our performance outcomes?
 - Where are our biggest opportunities for change?
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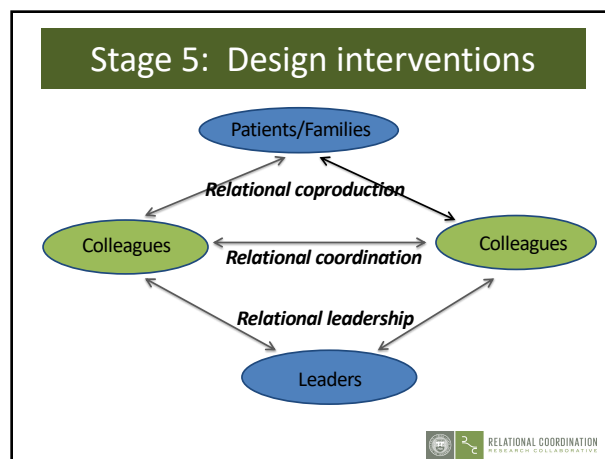
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- ### Stage 5: Design interventions
- Change team uses findings to create a plan of action for improving desired outcomes, in an inclusive process
 - Change team designs interventions with input from their key stakeholders
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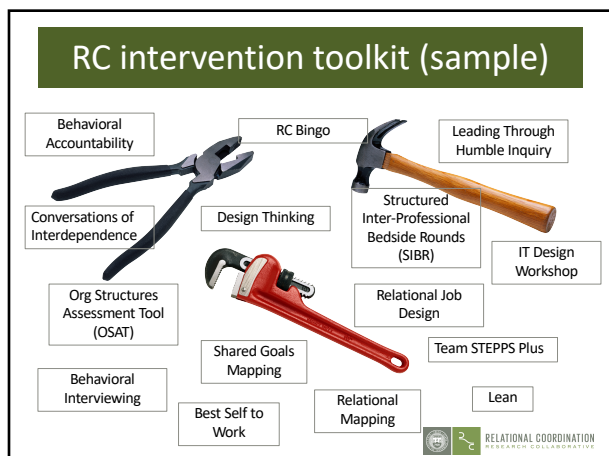
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- ### Stage 6: Implement and assess
- Change team implements the interventions they have designed
 - Change team assesses progress with periodic assessments of RC and desired performance outcomes

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Overarching principles for RC change

- Be the change (parallel process); you can't use the old culture to create the new one
- Include all relevant stakeholders (some may be less visible)
- Use RC to open up conversations, not to close them down
- Engage people in doing the work for themselves rather than doing it for them

Adapted from © 2014 Relationship Centered Health Care, LLC

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Could the RC framework be useful for strengthening physical therapy education and practice?

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Thank you!

Jody Hoffer Gittel

Relational Coordination Research Collaborative
Brandeis University

<http://rcrc.brandeis.edu>

<http://rcanalytic.com>

