



# Using the Baldrige Framework to Create a Legacy of Organizational Excellence

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For a health care organization, ensuring customer satisfaction can be a challenge. Our customers come to us during some of the most emotional and vulnerable moments of their lives. Unless the impending arrival of a new baby is involved, chances are most people would prefer not to be here.

This is why Mary Greeley Medical Center puts such an emphasis on making sure patients and families, as well as our employees, have outstanding experiences when they are here. This focus on quality has resulted in Mary Greeley Medical Center becoming the first organization in Iowa to receive the prestigious Malcolm Baldrige National Quality Award. It also helped us earn Magnet Designation, the nation's top recognition of nursing quality. We are one of only 12 hospitals in the country to have both honors.

It took a decade to reach this milestone.

In 2008, we began looking for a system of evidence-based quality principles. During a presentation on the Baldrige program at an American College of Healthcare Executives (ACHE) conference, we realized that we had found what we were looking for.

From the start, we decided our process to document performance improvement would be a long-term priority and not simply an annual goal. Our journey began not in a single moment, but as a culmination of several.

Here are some of the big quality lessons we have learned along this journey.

## Onboard Everyone

Adopting a tactic from two-time Baldrige recipient MidwayUSA, we made the decision to expose as many departments as possible to the Baldrige framework and criteria. We enrolled staff as examiners in our state's program, the Iowa

Recognition for Performance Excellence (IRPE). This provided us with exposure to organizations striving to radically improve.

Learning from other Baldrige organizations as well as using the Institute for Healthcare Improvements (IHI) improvement philosophy, we developed what we call our Big Dot goals. There are four of them: reducing patient harm; improving patient engagement; improving employee engagement; and achieving a positive operating margin. These goals helped create laser focus around the most important priorities at the medical center. And today everyone knows them. They are on wallet-size cards on which employees can describe how they contribute to these goals. Each goal has a metric that is tracked both organization-wide and in individual departments.

We track our progress on our Big Dot Goals on huddle boards displayed in clinical and non-clinical departments across the hospital. Using the vernacular of 4DX, a formula for executing on important strategic goals laid out in the book *The 4 Disciplines of Execution*, departments create lead measures that align with the Big Dot Goals so each staff member understands how their work contributes to the organization's goals. Daily huddles are routinely held near these boards during which we stress operations issues, process improvement, and current performance.

Our work process discussions are grounded in understanding and meeting patient expectations. We continually ask our leaders three questions about their departments:

- 1) Is your department doing as well as it could?
- 2) How do you know?
- 3) What and how should your department improve or change?



Leaders respond to these questions monthly with their one up and every nine months with the senior leaders through a process we call the Leadership Business Review. This 'mini-Baldrige' document by department is a high-level overview of each department, including a TOWS analysis (SWOT upside down, which we learned from Memorial Hospital in Jasper, Indiana), a review of the departments' priorities by Baldrige category and department performance by Big Dot Goals and other key department metrics. The Leadership Business Review process has been through several cycles of improvement in the four years of its existence and is currently a standard work document that is transparent to the entire organization.

### Create On-Going Improvement and Innovation Mechanisms

Our improvement philosophy is that everyone at Mary Greeley has two roles: Do Our Work and Improve Our Work. To support this, we encourage staff to present improvement ideas through an online system. Additionally, we challenge our leaders to come up with innovative ways to reduce costs or generate revenue through the 100-day workout concept.

We created a quality improvement unit which, among other things, oversees rapid improvement projects, designed to literally break down our processes, develop ideas to improve them, and then execute these ideas. Each of these projects involves cross sections of staff, which further hardwires a culture of improvement throughout the organization.

### Act On What You Hear From Your Customers

We get feedback from our customers in a variety of ways, including hourly rounding, patient surveys, a patient and family advisory council, social media, letters, unsolicited phone calls, and through informal

interactions with patients and families. We collect and track these comments through a customer listening system and complaint management process, which enables us to address problems in an efficient and timely manner. It also enables us to monitor trends that indicate larger opportunities for improvement.

### Sustain the Focus

During our IRPE journey, we received Gold-level recognition (the highest awarded in the state program) in 2014 and 2017. We remain the only Iowa organization to reach this top level twice. We continued to submit an annual application to the IRPE program even though we were not award eligible (awardees are not eligible for three years following highest recognition) because we receive feedback that helps us remain focused on the process. We also continued to recruit staff to be IRPE examiners. To date we have over 80 years of combined examiner experience!

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Perhaps the best example of how all of what we just detailed can have a significant impact is our patient-centered scheduling project. This was a rapid improvement event that was a result of listening to both patient and employee concerns. It was also spotlighted in our 2019 Baldrige feedback report. The idea behind the project is to more efficiently schedule inpatients for daily tests, treatments, and therapies. This required adapting our electronic medical record system, Epic, to create a way for staff to see what is scheduled for a patient. This meant, for example, that a patient did not have to have to



worry about a therapist showing up the same time as a meal. They would know what was going to happen and when, reducing anxiety and creating more comfort for patients and families.

The impact of our efforts can be seen in the measurable quality of our care and the feelings of our patients and employees.

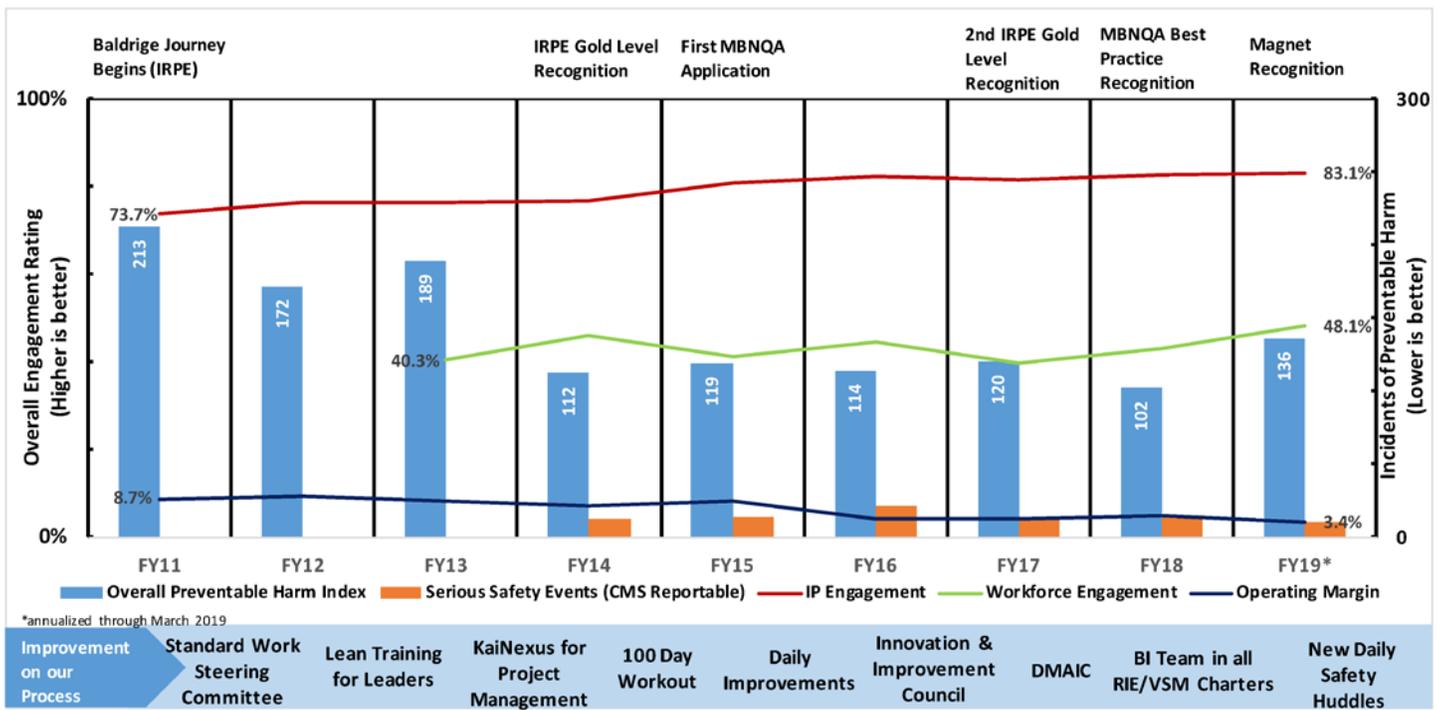
Our key measurements are in the Centers for Medicare and Medicaid Services (CMS) top decile, including 30-day readmissions, 30-day mortality, incidence of preventable blood clots, and compliance with sepsis practices, influenza vaccinations, stroke bundle, and outpatient imaging measures.

Inpatient satisfaction, as measured by HCAHPS, has been at or above top-decile performance since 2016. More than 75 percent of inpatients and outpatients

would recommend Mary Greeley to others, representing top-decile or near-top-decile levels.

Close to the National Research Corporation top decile, 75 percent of employees “talk up” the organization as a great place to work. Meanwhile, physician engagement ranks in the 86<sup>th</sup> percentile.

Our 10-year journey has had a significant impact on our patients and families and on our staff, and it does not end. The Baldrige Excellence Framework has become the way we do our work and how we improve our work. It has allowed us to document, standardize, and improve some of the most complex and seemingly impossible-to-document processes in our health care system. Most importantly, it has enabled us to provide continually improving care to our patients.



Mary Greeley Medical Center

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Our tenacious focus on getting better every day has transformed our performance improvement journey to deliver some of the most exceptional outcomes.