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Understanding space between



- Self-Organizing Systems
- New, unexpected structures, patterns
 - Emergent phenomena - own Rules
 - Cultivate Creative Emergent behavior outside of crises
 - Caring & Healing in all interactions

Relationship Based Care STRATEGIES in a Complex System

- COLUMBIA UNIVERSITY MEDICAL CENTER
- 5 Waves over 2.5 yrs
- Complete RBC Rollout in 5 Waves over 2.5 yrs
 - Breadth vs. Depth
 - SIMPLE RULES
 - WORK as a Team + Unit Practice Council
 - SELF CARE
 - Shared Governance
 - LEADER Training
 - Reigniting Spirit of Care
 - Self-Organized Structure

Core Complexity Analysis



Advanced Analytic Methods

- Structured Equation Model
Turbulence - influence of RBC
Regression - Patient Satisfaction
- Hierarchical Linear Modelling
Turbulence = Patient Satisfaction
- Discrete Event Simulation
- Social Network Analysis
- Data Farming - Technology Workflow
- Computational Modelling



EVIDENCE of TRANSFORMATION

Empirical Testing

Complex Adaptive Systems are interdependent and evolve over time
- Require different types of analysis

Advanced Statistical Methods

- * Descriptive & Inferential Statistics
- * Principal Components Factor Analysis
- * Measure Variance unpredictability at pt & unit level

Data Sets - for Each Wave

- Health Care Environment
- HES Unit Based Rpt.
 - ▶ Relationships w/ Doctors & Nurses Pre-Post RBC
 - ▶ Parties & pieces to get to know each other as people significantly improves Teamwork
- Evolution of Attractors - Autonomy of Nurses - need to understand the predictors
- Emerging Patterns/Leverage Points

LESSONS LEARNED - RBC

- * TRUST the Process
- * RBC is an Experience, not education
- * Transformational - Cultural/Emotional Shift
- * Intractable Vision/Persistent Attention
- * Patient Care Director - articulated Expectations
- * Caring must be genuine
- * Inclusiveness & Collaboration
- * Lead with your HEART

RBC ATTRACTORS

- Caring & Healing Environment
- Leadership & Governance
- Behavioral Norms and Teamwork
- Professional Nursing Practice
- Patient Care Delivery
- Resource Driven Care
- Outcomes Measurement

COMPLEXITY ATTRIBUTES

Interaction of Elements

- * Unpredictability
- * Dynamic
- * Constant Energy Flow
- * Turbulence
- * Non-linear
- * Adaptive
- * Patterns
- * Self-organizing
- * Feedback loops
- * Emergence
- * Information Exchange is HIGH

AGENTS

- Multiple Disciplines (Hospitals, staff, patients)
- Many leaders-overlaps

RULES

- * Fuzzy Boundaries
- * Cooperation and Competition
- * Internalized Rules
- * Instinctive
- * Not one leader or leaders

EMERGENCE

Within Control? CONTEXT of our WORLD:
RN Performs 160 Tasks Avg. in 8hrs

- ▲ Teamwork
- ▲ MORE COMMUNICATION
- ▲ Feedback Loops

Emergence seen in a Crisis when groups adapt to the demands of the moment

TURBULENCE Movement

Random Behavior

- admissions,
- discharge
- Transfers
- Timing of care orders
- Randomness of Healing

"ATTRACTORS" Keep complex social ORGANIZATIONS stable in The face of change

EVIDENCE of AMAZING COMPLEXITY of Our Work!

FINDINGS

- Primary Nurses are most proud of org & satisfied workload
- WCA & NMMS Complexity of Care, Delegation and work allocation
- CFS Primary Nurses evolving toward internal control of their work

Complexity & Feedback Loops

H.R. turnover rate
Caregiver satisfaction ↑
Over Time ↓

FINANCIAL

TOTAL NHPPD ↑
ALOS ↓
QUALITY PERCEPTIONS
PATIENT SATISFACTION ↑
Hourly Rounding STARS

Clinical Quality

Falls Prevalence ↓
HAPU rate ↓
Infection Rate ↓
Relationship Based Care
Identification of Primary Nurse ↑ Heart Math Stress Conditioning
How well Patient Needs Met ↑
Daily Patient Goal

Sustainability

- Continue RSC Training
- Implement Leadership Training for RN's
- Continue Development Councils & Coordination Council
- Research & Discovery
- Continue Caring Research
- HES Staff Satisfaction Research
- Emlogis Predictive Staffing Model
- Turbulence & Patient Satisfaction