DNV GL HEALTHCARE

CULTURE CHANGE

and the importance of “why”

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It is a common observation that it is hard for people to change their behavior, both at home and at work. There are several factors that intersect to create this difficulty. First, the human brain is wired to lead people to do what feels good in the short-term rather than what is right for them in the long-term. Second, the brain has a number of mechanisms that are optimized to create habits that allow people to carry out routines mindlessly. Third, the culture itself promotes a set of behaviors. So, even if an individual would like to change, the collected actions of people around them can hamper efforts at change.

The healthcare industry is a prime example of the difficulties in changing behavior. At one level, the people served by healthcare often engage in behaviors that are bad for their health in the long-term. But, there are also structural changes in the industry that require changes in behavior.

As one example, many hospital groups are merging with primary care clinics, imaging centers, and specialists to create a comprehensive and vertically-integrated network. However, most physicians were not trained to be employees of a larger organization, and so their daily routines may not serve the overall needs of the goal of providing high-quality healthcare for their patients in an efficient and cost-conscious manner.

Ultimately, an organization’s mission needs to be aligned with the habits of its employees. In order to make that happen, there are three key things that companies need to do on a regular basis. First, they need to understand the basis of the cultural elements that maintain existing behaviors. Second, they need to understand the reward structures that are reinforcing current behavior. Finally, they need to structure the work environment to help employees to develop habits that lead to excellence.

Understanding the organizational culture
Culture is a blanket term that refers to the variety of messages, stories, structures, and habits within a group of people that enforce a set of norms for behavior. A particularly powerful aspect of culture is that people are often unaware of its influence on their behavior. For example, when new people come to work in an office building, they notice small details like whether their colleagues tend to keep their doors open or closed when they are working. Without thinking about it, new employees copy the actions of their coworkers.

A workplace in which people everyone keeps their doors closed can create an environment in which there is little spontaneous face-to-face communication, even though nobody in the organization is aware of how that came about.

An important element of culture change is to make the invisible and mindless elements of behavior more explicit and mindful. One of the most powerful tools for making elements of culture more obvious is a review that focuses on identifying positive and negative elements of behavior in the workplace and then asks the question “why.”

Employees in most organizations are asked to go through a yearly evaluation process in which they track their progress toward key goals in the past year and identify the contributions they would like to make in the coming year. The top leadership should also go through a yearly process of evaluating significant organizational goals. It is important to identify sources of systematic success and failure.

It is valuable to list successes in order to be aware of what the organization does well. Any time that an organization tries to change an element of its culture, there is a danger of unintended consequences in which new processes solve a problem with a process that undermine a key area of success.

Systematic failures are the key points that form the object of culture change. Every organization (and person) fails often, but most of those failures are unsystematic. These failures arise from resource limitations that prevent organizations from achieving every ideal to which they aspire. Managing the trade offs among the most important goals is the central role of leadership.
However, there are often some ideals that are crucial to long-term success that are never being met. These sources of systematic failure reflect aspects of a culture that are driving decisions of individual employees away from actions that would achieve these goals.

Once systematic failures have been found, the next step is to understand why they are happening. The power of asking “why” is that it uncovers the reasons (what psychologists call causal information) that the culture is structured as it is. Research suggests that people (including leaders) suffer from an illusion of explanatory depth in which they believe they understand the way the world works better than they actually do. Consequently, there are many actions people take without understanding why they do so or how those actions affect the ability of the organization to succeed.

Asking why is the cure to the illusion of explanatory depth. It gets people thinking about the roots of the actions employees take on a daily basis. Sometimes, the reasons that a particular procedure has been put in place are well-known, but often organizations discover that procedures developed over time without any explicit thought about how they contribute to the overall mission. At other times, procedures were implemented to solve problems that are no longer relevant.

By making these reasons explicit, leaders can determine whether there are alternatives to current practice that might address systematic failures.

When there are persistent behaviors among employees that get in the way of key organizational goals, it is like that people are being rewarded for behavior that is undesirable. Most people cannot articulate what rewards are affecting their actions, and so it is important to observe people’s behavior and to identify what it is about that behavior that gets employees what they want.

The human dimension of health care is a great example. The Seton family of hospitals in Austin recognized that their patients were feeling more like commodities being processed by the system than like individuals whose lives were being affected by their health-care providers.

In response, they created a comprehensive marketing and engagement strategy they call HumanCare. The program was launched with an advertising campaign, but if that was all that was involved, the standard of care would not change. Patients often feel that they are rushed through appointments, because (in many systems) healthcare providers are rewarded for their efficiency rather than their relationship with patients. Seton has rewarded employees with recognition for their efforts in connecting with patients and creating relationships. This reward structure helps providers to shift their efforts toward the compassionate standard that Seton has set as its mission.

**Structuring the environment**
The environment has a significant impact on people’s behavior, though that influence often goes unrecognized. There are three core ways the environment affects what people do.

First, habits reflect an association between an environment and a behavior. So, when people are in that environment again, their habits are engaged automatically. That is why people can go through their entire morning routine at home without having to think about the details what they are doing. When people are traveling, it takes more mental effort to get dressed in the morning, because the hotel environment does not have all of the familiar behavioral triggers.
Second people typically to do what is easy in their environment and to avoid actions that are difficult. The successful public health campaign against smoking is an excellent example. Smoking rates have plunged over the past 50 years in part because it is now virtually impossible for people to smoke indoors in public buildings. Indeed, the Cleveland Clinic banned smoking on its entire campus. That makes the undesirable behavior of smoking difficult for people to perform, and has cut back on both the number of smokers and the number of cigarettes smoked by those who do smoke.

Finally, the environment provides reminders of desired behaviors. During flu season, signs that encourage people to wash their hands frequently and to sneeze into their sleeve are a way of using the environment to keep people thinking about important behaviors that may not yet have become routine.

After identifying systematic failures and understanding how they are being promoted by the culture, organizations must examine the work environment. The environment can be changed to disrupt habits that are getting in the way of important company goals. The environment can also be modified to make desirable behaviors easy and undesirable behaviors hard. Finally, organizations can embed cues in the environment about positive habits.

**Summary**

Ultimately, culture change can be accomplished. However, leadership cannot work toward improving an organization’s culture until the elements of that culture are understood. I suggest that organizations need to identify important successes and failures and to understand why they occur. Then, organizations must focus on aligning the reward structure with the desired behaviors. Finally, organizations can manipulate the work environment to support desirable behaviors and to block habits that get in the way of success.

**Resources**


**ABOUT THE AUTHOR**

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How Accreditation Helps Drive Culture Change

We didn’t enter the accreditation market just to offer another service (although many would say just having a choice was a breakthrough unto itself).

We spent four years and all that investment to create a program that would fundamentally alter the culture of accreditation, and to advance the connection between accreditation and patient outcomes in modern hospitals.

I say four years because that’s how long it took us to obtain deeming authority from CMS. But in reality, our NIAHO® program is the product of a lifetime of effort, several career’s worth of seeing what wasn’t working and along the way brainstorming a new approach. Brainstorming sounds like such a fun word. Actually producing a set of standards – one that is starkly different from anything before or since – that would pass muster with the gatekeepers of the US healthcare system . . . maybe fun isn’t the first word that comes to mind.

But all that enthusiasm finally won the day. We were recognized by CMS in 2008, and are now recognized by you (the hospital community) as a new source of vibrancy and optimism in the regimented – often intimidating – business of accreditation. Virtually every hospital accredited by DNV GL - Healthcare will tell you how different we are, and how inspiring for staff, and management, our approach can be.

What is DNV GL Healthcare approach?
As Professor Markman has so poignantly stated in his article, we believe that it’s all about ‘why.’ Why do hospitals do things the way they do? Is there a better way? And why can’t we embrace the better way instead of following old habits until there are so many unspoken rules it becomes virtually impossible for individual caregivers, techs or support staffers to articulate the reason for, or benefit of, processes they follow every single day.

The tipping point of culture change occurs when those reasons and benefits are simple and clear to everyone in the organization. Moreover, when the people following the rules have helped set them in the first place.

That’s why, for starters, we tell hospitals please don’t worry about preparing for our surveys. It isn’t necessary. The whole notion of “OMG get ready” is a symptom of culture that desperately needs changing. Like the pressure wave preceding a category five hurricane, the anxiety of prepping for triennial surveys is a warning signal of something ominous approaching. We have grown men and women (i.e., professional quality and accreditation managers) telling us stories of staff calling in sick and literally running out of the building for extended breaks when surveyors show up at the door.

After the initial DNV GL survey, these same professionals feel like they’re breathing fresh air; they no longer fear the survey they actually look forward to them; the management and staff are more engaged. Engagement leads to improved buy in for making the necessary changes to improve.

That is culture change taking root. And it is attributable to two things. The first is the highly collegial nature of our survey teams (trained to be collaborative). The second, and even more important reason is the science of the NIAHO® standards platform. Let’s face it; it’s not about being more personable (even though hospitals do appreciate it).

“"In the few years we have been with DNV GL accreditation, we have changed our organization, it’s been a transformation.”

Deborah Weller, Director of Accreditation
Scottsdale Lincoln Healthcare
ISO 9001 is something that has distinguished DNV GL from other accrediting programs since our inception in 2008. We do not view ISO as a “magic potion” that solves all that ails the healthcare system, but it many ways it is becoming a game changer for those used to accreditation as a rigid, dictatorial activity.

With ISO, accreditation can help spread “why” throughout the organization. People start to feel empowered by the accreditation surveys (hard to believe, we know), and motivated to do their jobs in the most consistent and patient centered way.

Suddenly staff understand not only WHAT they are required to do, they WHY they are being asked to do it. Why they fill out certain forms (or don’t), why they take certain actions under certain circumstances, and why those behaviors contribute to better care and safety.

As the ‘aha’ moments light up across staffing teams and departments, the next big epiphany occurs: Consistency; the underlying ingredient of a sustainable business process. You gain consistency because all key processes are written down, reviewed and subject to collective ‘how can we do it better’ analysis on a regular basis. If they’re not worth your effort to write down, they’re not worth your effort, period. Virtually all DNV GL hospitals go through a sort of spring cleaning process that liberates them from bloated and redundant policies. That is the requirement—and unique advantage—of the ISO 9001 Quality Management System. Which is seamlessly integrated into the NIAHO® standards.

Year after year, these organizations find themselves realizing the meaning of continual improvement. With a true system of quality management in place, they do not see good ideas fading away after a couple of months. Projects for improvement are replaced by a mindset of improvement.

Sustaining excellence is the absolute hardest thing to do in any endeavor. If you start by asking why, the how makes a lot more sense to everyone. That is the path to sustainable performance for your organization, and better outcomes for those in your care.

It is important that your accreditation organization can help you improve beyond just getting the certificate. Having a partner for accreditation is not, historically, been the norm. Times have changed. So has accreditation. Having a meaningful relationship with the accreditation organization as a partner rather than adversary helps pave the way to improving processes and outcomes.

“This felt like the first transformational moment, and the first time I have really seen a shift in the culture, in terms of the way everyone in my organization felt about quality. That’s a home run.”

Margaret Paroski, MD, Chief Medical Officer
Kaleida Health

ABOUT THE AUTHOR
Patrick Horine is President and Chief Executive Officer of DNV GL Healthcare USA, Inc. He is responsible for the North American healthcare business of DNV GL, which includes a growing portfolio of standards-driven accreditation and certification services. He was a founding member of the entrepreneurial team that developed—and gained USCMS acceptance of—the NIAHO® accreditation standards.

Patrick has more than 25 years of healthcare management experience, and has held various leadership positions in hospitals including that of Chief Executive Officer, Chief Operating Officer, and Vice President for Quality and Business Development. He has a Master’s Degree in Hospital and Health Administration from Xavier University.
DNV GL is a world-leading certification body. We help businesses assure the performance of their organizations, products, people, facilities and supply chains through certification, verification, assessment, and training services.

Within healthcare we help our customers achieve excellence by improving quality and patient safety through hospital accreditation, managing infection risk, management system certification and training.

The DNV GL Group operates in more than 100 countries. Our 13,500 professionals are dedicated to helping our customers make the world safer, smarter and greener.