The Nebraska CAH Executive Fellowship Program

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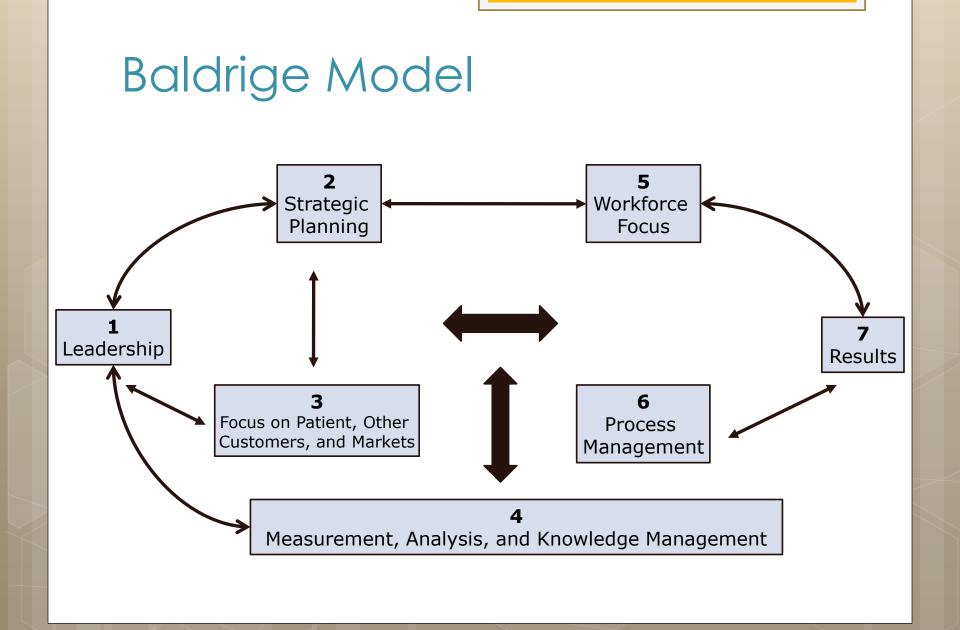
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Outline

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Rationale of the Program

- Program developed and sponsored by NeRHA, ORH, and the QIO – see Baldrige Model
- Purpose: Assist CAH executives in developing leadership skills that are needed to make cultural changes and accomplish their performance improvement goals
- Focus is on teaching performance improvement concepts, applying practical PI tools, and preparing action plans for their CAH



Eligibility and Selection Process

- Selected CAH CEOs and health care executives
- Target 8-10 executives
- Sponsors select and recruit the applicants
- Aim to recruit participants from across the state

Selection Process (cont'd.)

• All applicants submit an application

- Describe how leadership style impacts quality of care
- Interaction between executive and QI/PI Coordinator
- > Why they want to attend course
- Focus of their PI project

Curriculum

- February Finalize Fellowship PI Projects
- March Leading Complex Systems (tools of systems thinking)
- June Creating Clinical Effectiveness, Quality Improvement, and Patient Safety
- September Attend NRHA CAH Conference
- November Creating a Culture of Ownership
- December Completion of Fellowship Projects

Examples of Fellowship Projects

- Reduce the number of adverse drug events
- Apply Lean management principles in selected projects
- Improve patient satisfaction scores
- Change the culture of the organization by applying Studer principles.

Lessons Learned

- Leaders are responsible for the culture of an organization
- A successful leader:
 - Understands the complex systems that exist in their organizations
 - > Understands their role as a leader in the system
 - > Understands how to create and promote change in their organization

Lessons Learned

- Individuals often constrain their thinking by their experiences and stories
- If we reframe our stories and think more broadly, new options begin to emerge
- The leadership program attempts to broaden the participant's thinking and vision
- No hard data, but we have observed a broader vision and a greater willingness to change in many CAHs.

Implications for other FLEX Programs

- Although it can be developed and implemented solely by the FLEX program, it is recommended that other partners be involved
- The cost of the program is about \$25,000, but it could be reduced by substituting another session for the NRHA CAH Conference
- In Nebraska, performance improvement leadership skills have increased, but there is still a need for this program – your state may be different.
- A more formal evaluation of the impact of the program should be undertaken through surveys and interviews

Conclusion

- This program has enhanced the PI leadership skills of CEOs and other hospital executives
- It is consistent with the Baldrige Model and complements other PI initiatives
- It can be replicated in other states depending on your needs and resources
- A more formal evaluation of the impact of the program will be conducted

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