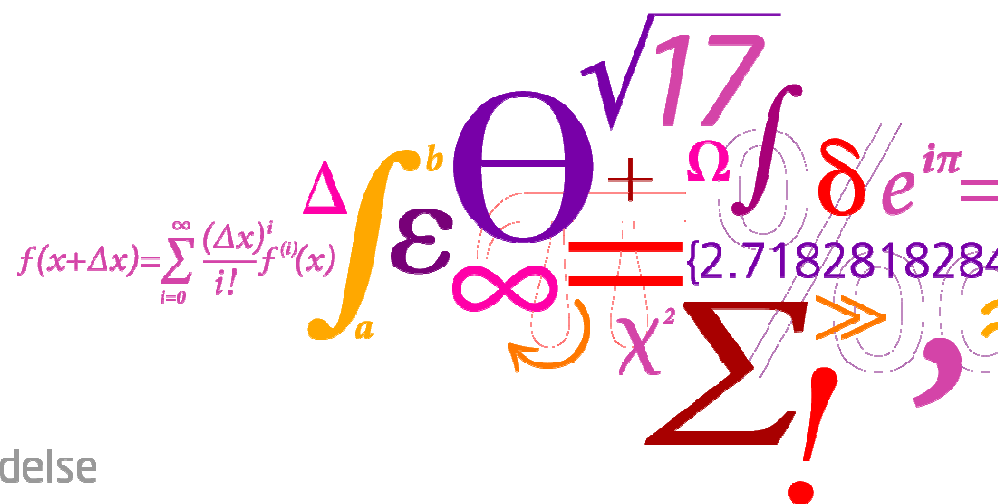


Servant leadership, Psychosocial work environment and performance

Kasper Edwards, Technical University of Denmark



Agenda

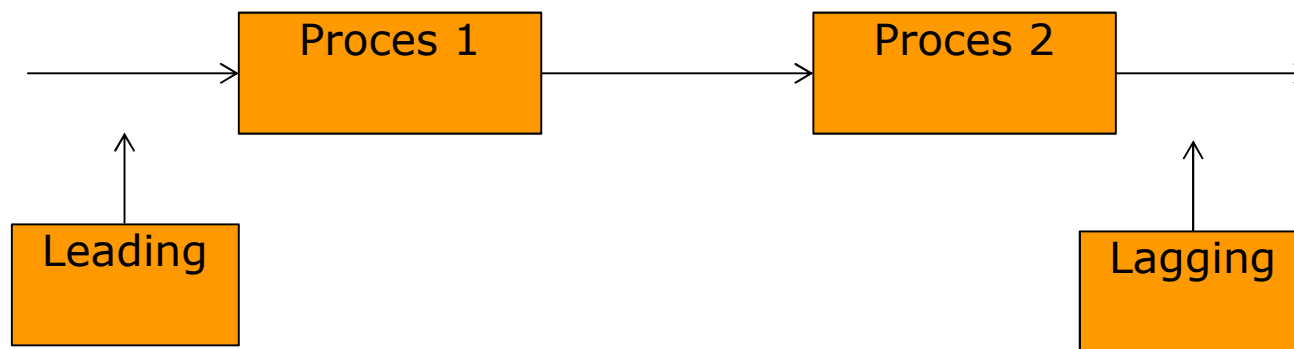
- Performance
- Psychosocial work environment
- Servant leadership
- Combine it all in a single model

Performance / Performance management

- The basic idea
 - Measure how an organization is performing
 - To get best possible performance
- Performance is many things
 - Revenue
 - Financial targets
 - Employee turnover
 - Absenteeism
 - Number of patients treated
 - Patient lead time
 - ...

Performance / Performance management

- The indicators
 - KPI's – key performance indicators – the few important ones
 - RI's – result indicator
 - PI's – performance indicators
- Leading or lagging
 - Leading – indicate future performance
 - Lagging – measure result



Performance / Performance management

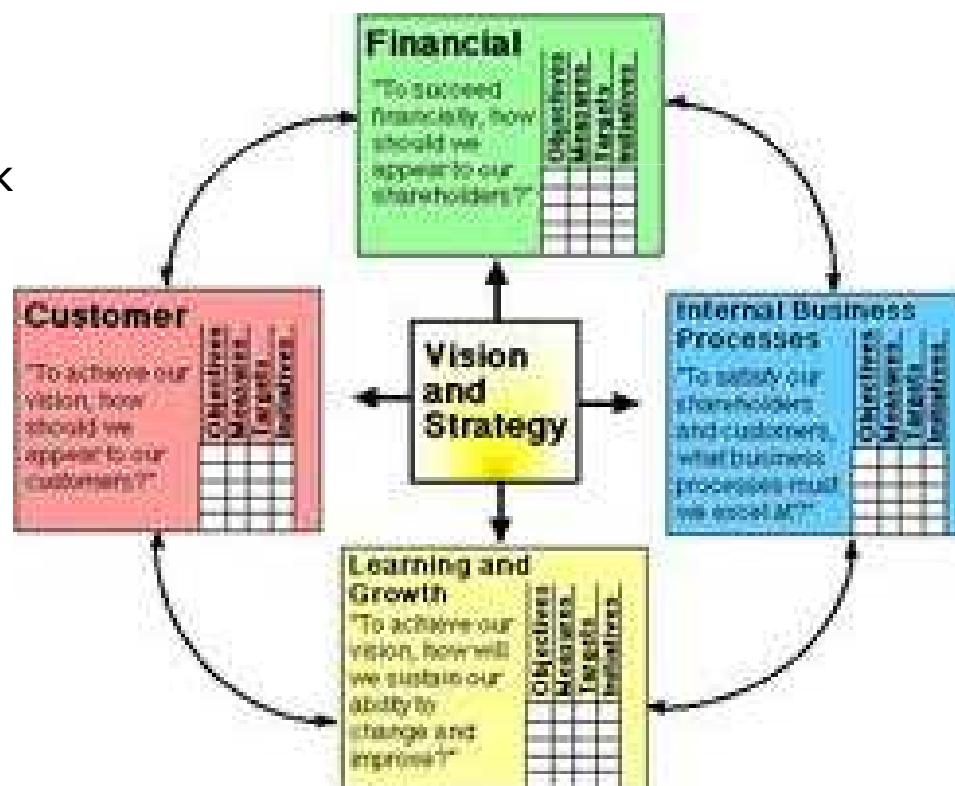
- The assumption
 - A relation between the overall goal and the KPI's
- Two approaches
 - The logic breakdown from organization goal to activities
 - The heuristic: We think this will lead to good performance
- What we know
 - You get what you measure – but do you want what you get?
- The bank
 - Management logic: High number of sales = make lots of money 😊
 - Employee: Number of sales = sell cheap products
 - Result: lots of sales, negative contribution to profit

Performance management systems

- Combine
 - Performance measurement
 - Performance management
 - Reward and corrective action
- The consultant sales pitch
 - *Improved Productivity* -- Improvement in both the way people work and the outcomes they produce.
 - *Improved Employee Morale* -- Resulting from on-time performance appraisals and rewards commensurate with employee contributions.
 - *Retention of Top Performers* – Employees who feel accomplished in their work become loyal employees.
 - *Increased Profitability* – Loyal employees deliver higher levels of service that result in customer loyalty.

Performance management systems

- The balanced scorecard and others
- Hard and soft dimensions
- But always numbers
- Detached from actual work



Performance management systems

- Basic idea
 - Reward induce certain behaviors
 - Management and monetary instruments
- Organization level determine degree of freedom
 - Individual
 - Department
 - Company
- Powerful motivational systems
 - Change behavior
 - More stick than carrot
- But, motivation is driven by
 - Autonomy
 - Mastery
 - Purpose



Lean – performance through processes

- A production system developed by Toyota
 - Originally called the Toyota Production System
- Draws on the ideas of Taylor, Ford, Deeming etc.
- A set of principles and tools
 - 5S, VSM, Kaizen, Waste, pull etc.
- Primary benefits
 - Shorter lead time
 - Higher quality
 - Less inventory

Lean principles

- Specify value from a customer perspective



- Identify value adding steps
 - Remove non-value adding



- Create flow



Lean principles

- Let demand pull goods through production

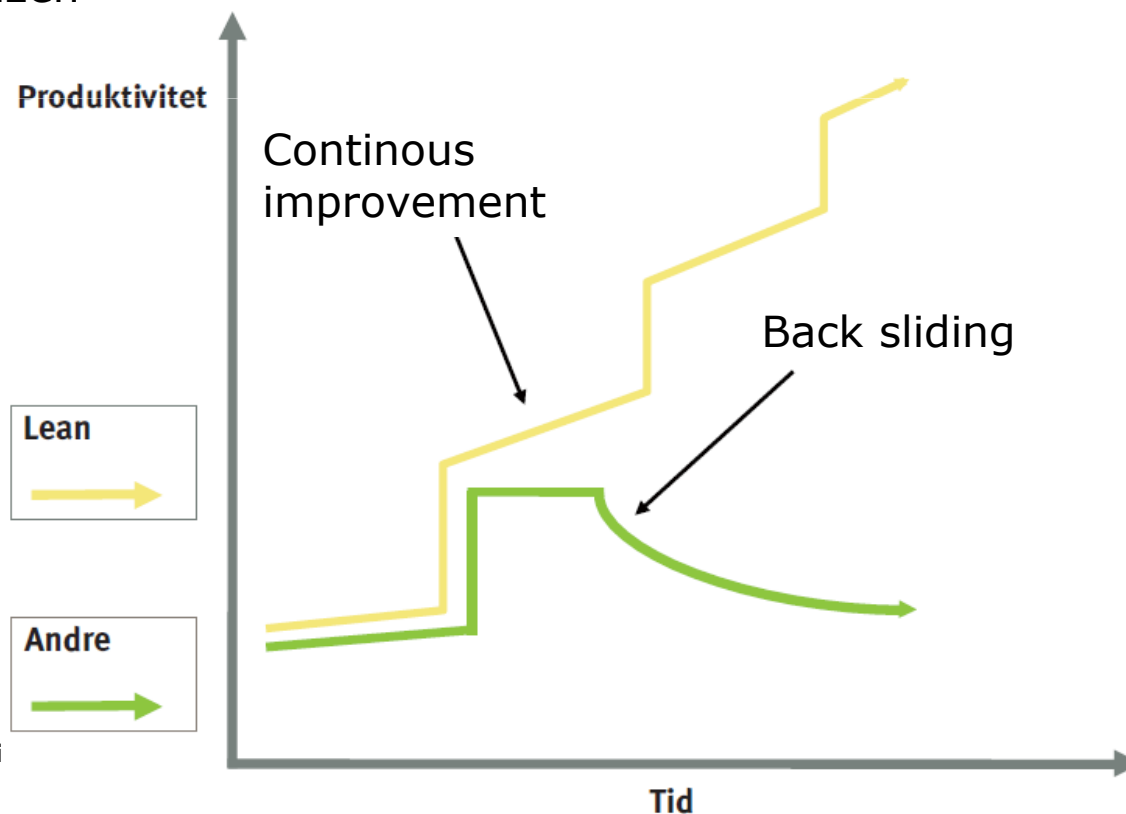


- Strive for perfection



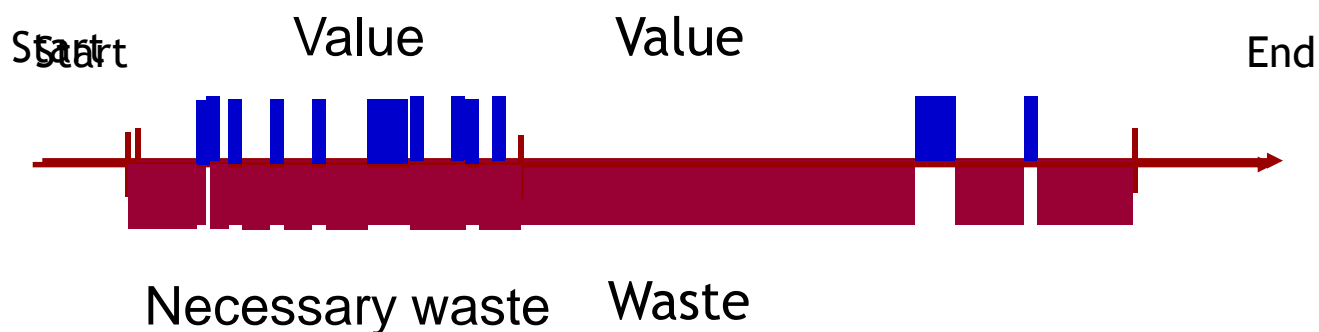
Lean is not a one shot wonder

- Lean do make rapid improvements
- The long run is important
- Continous improvement "Kaizen"



Lean – processes improvement

- Focus on lead time and efficiency
 - Lean has industry track record for solving such problems



- One, but not uncommon, example
 - Lead time average: 25 days
 - Process time average: 81 minutes
 - Huge potential for improvement

Pen and paper approach



Modtag. af henvisning	Visitation	Indkaldelse	Modtagelse af ambulatorie	Undersøg. & behandling	Undersøg. & behandling	Undersøg. & behandling	Patient-administration	Patient-administration	Afslut patient
Elektronisk henvisning findes i GS 1. vis.sygepl.	Fordeling af henvis. til lægerne/afsnit 1 vis.sygepl. ?	Finder 1. ledige tid til pt. + brev til pt + tolk, UL, kørsel mv. (ca. 22 forks. forløb) 1 vis.sygepl.	Mødelister udskrives for ugen (manuelt) 1 kt.pers.	Opdateret mødeliste udskrives automatisk dagligt - fordeles 1 i recept.	Identifikation af patient. 1 læge +1 sgpl.	Dagkirurgiske patienter der får tid til anæst./blodpr/samtale m sgpl. (efter 13.30/14)	Ny tid til kontrol+ kontaktkort til patient Evt. bestil. af kørsel	F-kontakt ændres til A-kontakt i GS Lægesekr.	Tastning af diverse skemaer (DUGA-base etc. Indenfor URO)
Papirenv. hentes forsk. steder (intern, fax, post mv.)	?	Telefon indk. Patienter til pakkeforløb (+ abort)	Journal findes frem el. oprettes + forside + mark. af scannet jour.	Journal til undersøgelsesstue 1 sygepl.	Højde+vægt tages i EPM, nark.skema, DUGA, journal+anamneses kem.	Prøvesedler udfyldes	Ændring af ventetstatus i Orbit, når patient flytter dato for operation 5 %	Oprette HI-kontakt, hvis Patient skal opereres i SDK/G115	
?	Dignosekoder, ventekoder, evt. læge, pakke, undersøgelser Op til 1 dag	Afbud/ændring af tid 10 – 15 %	Journal reg. i GS (skinjournal) til den enkelte ressource Kt.pers.	Stue klargøres: instr, poser, scanner, check af journal, printe finde svar mv. 1 i recept.	Anam.optagelse . Patient afleverer anamneseskema + mv. (yngre læger 30)	Prøver til ud.kasse el. køleskab i skyllerum	Journal indleveres til sekretær 1 sgpl.	Evt. henvisning sendes/faxes til anden afdeling 1. l.sekr/sgpl	
Henv. til tilsyn, ambulatorium (fax el. post) Recep.	?	Ændring af ventestatus, når pt. ændrer tid i GS + ny tid 10 – 15 %	Journal bringes fra jr.rum til reception dagen før over middag	Sygeplejekonferenc e – info og planlægning	Bestille bækkenbundstræning elektronisk (kun uro) 30 %	Læge dikterer forløbet i MIRSK 1 læge	Akut journal skrives med det samme (pakker, akut OP, akut indl.	Journal til læge efter svar er indløbet	
Henv. akut tilsyn, indlagte patienter Recep.	Patient oprettes i GS	Ombooking + nyt brev (evt.) 20 % 1 vis.sygepl.	Patient der er booket sent ordnes dagen efter af recep.pers. 1-2 pt./40	Patient møder. Reception reg. i GS at pt. er mødt. 1 sgpl+1l.sek.	Klargøring til GU, prøvetagning + instrumenter 1 sgpl. ½ -	Recept i hånd: 1 min Recept i EPM: 10 min (inkl. CAVE) ?	Ca. 10 journaler pr.	Journal til sekretariat + evt. brev+notat skrives	
		Påmindelse om tider		Patient instrueres i Flow+res (kun uro) 1/3 af patienterne 1 sygepl. 3	Assistere patient med aflædning og lejrning	Booke ny amb. tid (evt tolk), blorprøv. i ICE, US i WEB-RISC + henv til fys (fax el. elek.)	Registrering af journal til Sekretariat – lægges på skrivehylde	Journal til arkiv med intern post (Alt skal samles sammen) 1 l.sekr./sgpl.	
		Henvisning bringes til ambulatoriet til særlig bakke 1 vis.sygepl.		Patient afhentes fra venteværelse (inkl. afbrydelser) 1 sgpl+1læge	GU + UL og prøvetagning	Oprydning efter GU / rengøring 1 sgpl.	?	Løbende tastning af div. skemaer (DCBG etc.)	
		Henv. sorteres + fordeling til stuer el. journalrum i amb.		Patient hjælpes med Flow+Res (kun uro) 1/3 af patienterne	Information til patienten – plan og undersøgelser 1 læge	Ydelseskema udfyldes	Håndtering af svar på journal (almen+onko)		
76 Activities									
					Sygeplejerske udleverer information skriftligt + dok. for udlev.	Evt. henvisning til anden afdeling – fax/elektronisk/direkte	Sigtering af svar – lægge recept på EPM-server+ ringe, skrive til pt. Og journalnotat		
					St.P+C stetoskopi af lunger og hjerte Blodtryk 1 læge+1sgpl	Ved dagens ophør: Tømme affaldsposer Vaske spande (1 ad gangen i maskinen)	Patient rykker for svar		
					Booke patient i Orbit 50 % af patienterne		Skrivning af journal evt. + CAVE og kontaktlæge i OPUS 1 lægesekr. 10-		
Procestid: 36 min Gennemløbstid: 1 dag	Procestid: ca. 15 min Gennemløbstid: ?	Procestid: 122 ½ min Gennemløbstid: ?	Procestid: 16+ min Gennemløbstid: ?	Procestid: 74 min. Gennemløbstid: ?		Procestid:731½-120+ m Gennemløbstid: ?		Procestid:146½-249+m Gennemløbstid: 3 uger+	Procestid: 30 - ? Min Gennemløbstid: ?

Future state Gynecology ward

Henvisning, visitation og indkaldelse	Undersøgelse og behandling	Patient-administration	Afslut patient
Alle henvisninger modtages elektronisk inkl. billedmateriale. Henvisning visiteres hver morgen. 1 læge 5 min.	Ankomstregistrering med sygesikringskort. Pt. Indtaster højde, vægt, anamnese i OPUS på PC venteværelse. Evt hjælp fra lægesekr. 1 patient /1 lægesekr. 5 min	Journal skrives og registrering foretages samme dag eller indenfor 24 timer. Sekretær 5-20 min	Tastning af diverse skemaer (DUGA-base etc. Indenfor URO) 1Sgpl./l.sekr. 30m/sk.
Patient modtages på henvisning, brev til patient om at ringe 1 sekretær. 5 min	Patient kaldes til stue via nummervisning. 1 sygeplejerske 5 sek.	Henvisning til andre funktioner Sekretær 5 min	
Patient ringer selv og booker tid. Alle forventede undersøgelser bookes. 1 sekretær 5 min	Anamneseoptagelse pba. patientens indberetning. Tilrettes direkte på skærm. (1. patient på dagen: Samtidig klargøring til GU, prøvetagning + instrumenter.) 1 læge + (1 sgpl): 10 min	Journal til læge når svar er kommet Sekretær 2 min	
Patienter mailer evt. spørgsmål og får elektronisk svar 1 sygeplejerske 5 min	Assistere patient med tøj og lejring. 1 sygeplejerske 3-5 min	Signering af svar elektronisk – lægge recept på EPM-server+ ringe, skrive til pt. Og journalnotat 1 læge 15 min	17 Activities
SMS til patient med reminder om tid. (Evt. automatisk) 1 sekretær. 5 min	GU + UL og prøvetagning. Information til patienten – plan for videre forløb. Booking af resterende tider. 1 læge+1 sgpl 15 min	Løbende tastning af div. skemaer (DCBG etc.) 1 sekretær 3 min/ skema	
	Diktering og klargøring til GU, prøvetagning + instrumenter mv (næste patient).. 1 læge + 1 sgpl. 10 min		
Procestid: ca. 25 min Gennemløbstid: 2,5 dage	Procestid: 46 min Gennemløbstid 1 dag (eksklusiv ventetid)	Procestid: 20 - 35 Min Gennemløbstid: 1-10 dag (afhænger af ventetid på svar)	Procestid: 30 Min Gennemløbstid: 0 dage

Many flavors of lean

- Hard lean
 - Valuestream mapping
 - Tact time
 - Tight planning
 - Strict standardization

 - Works well in planned and predictable environments

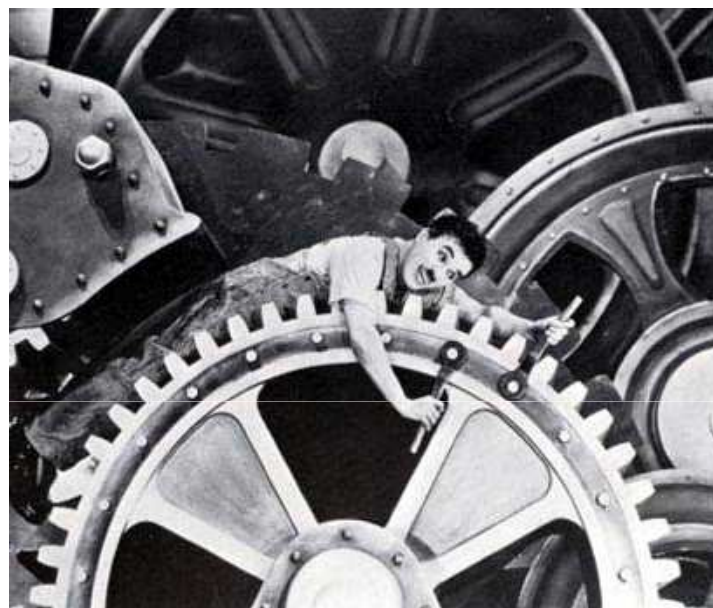
- Soft lean
 - Valuestream mapping
 - Common understanding of processes and activities
 - Individual understanding of role

 - Works well in unpredictable and reactive environments

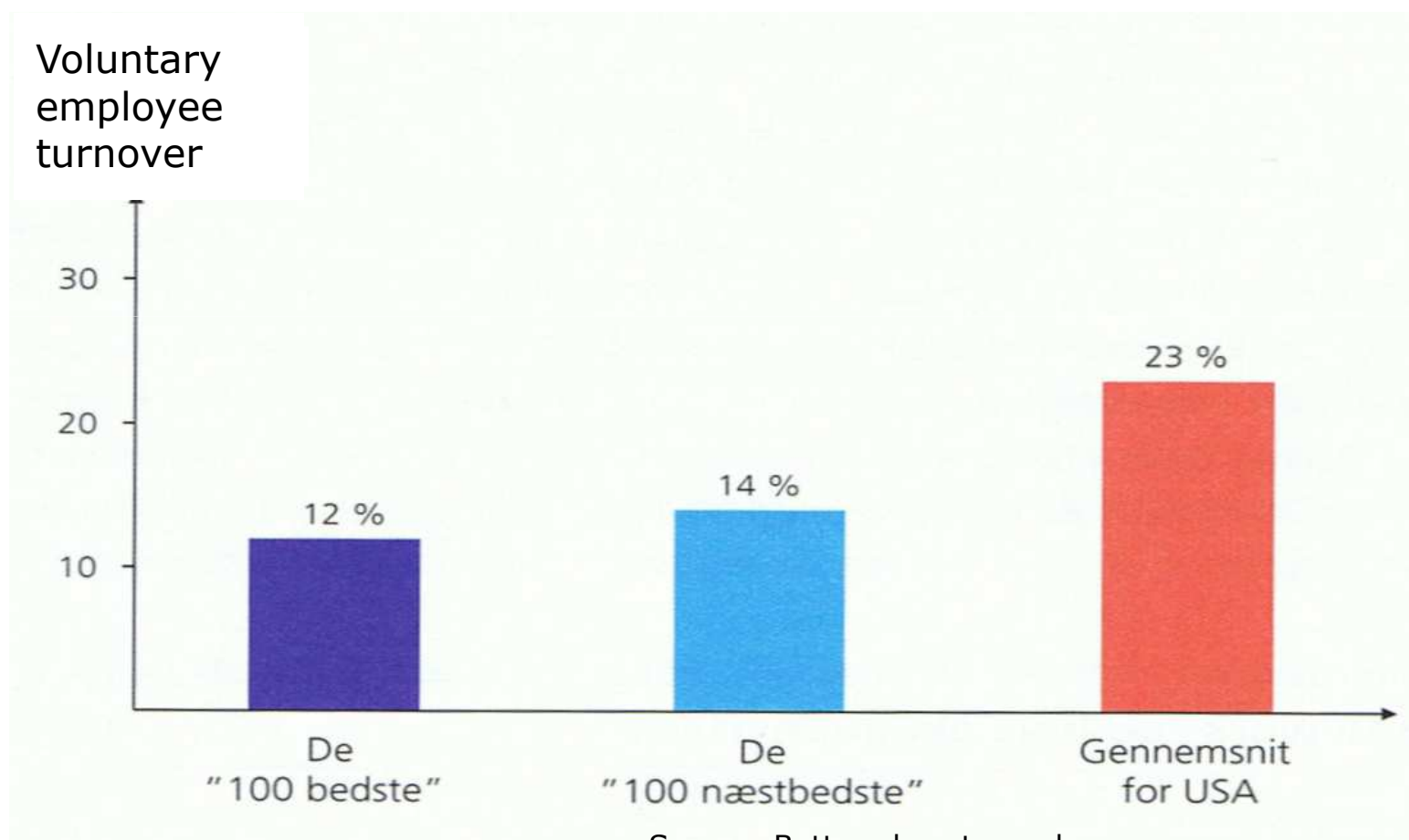


Work environment

- Differentiate between
 - Physical
 - Psychosocial
- Physical work environment
 - Smoke, noise and dirt
- Psychosocial work environment
 - Social relations
 - Mental wellbeing
 - How employees thrive at work



Good psychosocial work environment – good for the organization



Good psychosocial work environment – good for the organization

- Less absenteeism
- Higher productivity
- Higher job satisfaction
- Higher quality

Psychosocial work environment factors

- The six golden nuggets (job factors):
 - Influence
 - Social support
 - Recognition
 - Meaning
 - Predictability
 - Demands

- The three diamonds – social capital (workplace)
 - Trust
 - Justice
 - Cooperation



Social capital

- Coordination
- Social support
- Spontaneous support
 - lend a hand
- Does not create processes
- Supports processes



Social capital is not laissez-faire

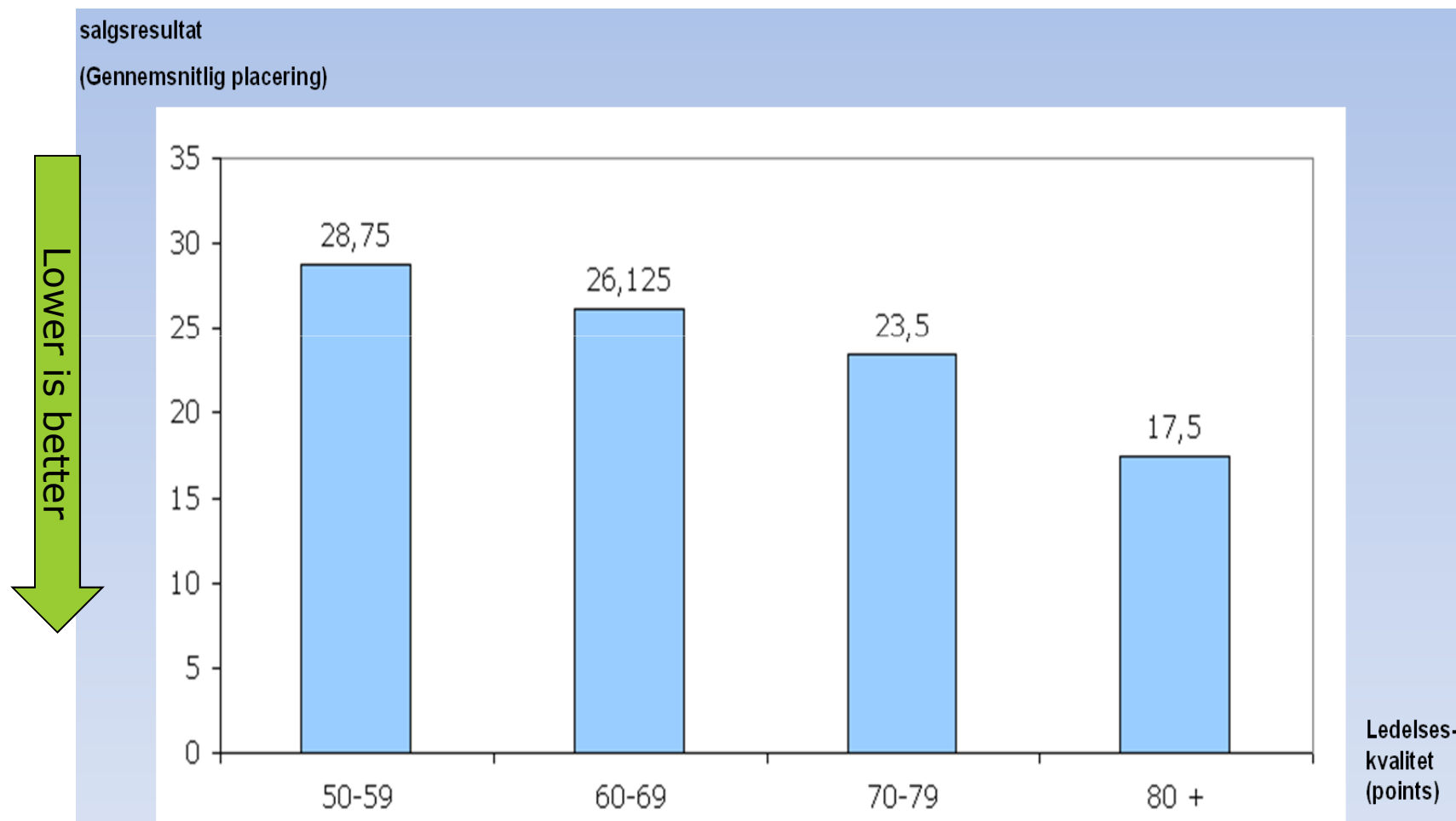
- Rules
- Social norms
- Structure
- Common goals
- A well run social system
- -> **Result of leadership**



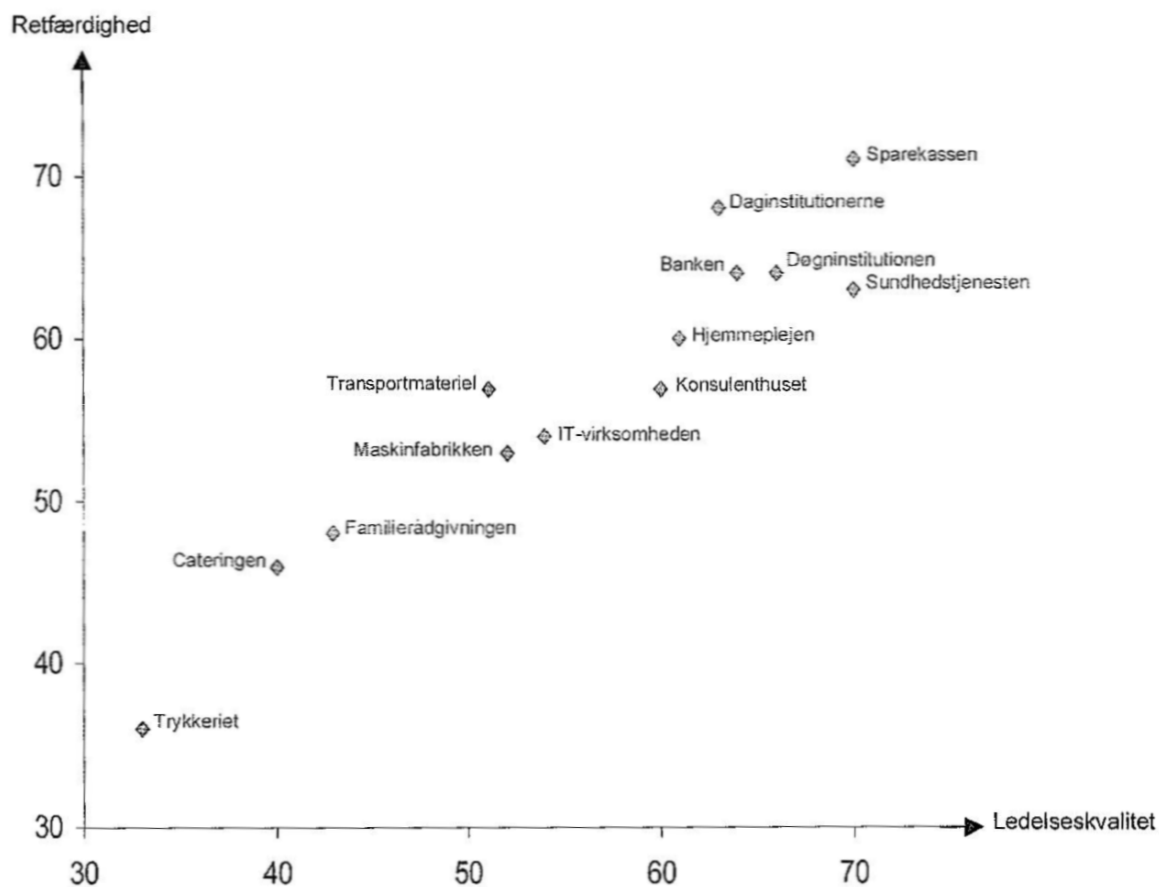
Social capital flows from the leader

- The leader sets norms and standards
- Decides how the work is organized
 - Together with employees
- Social capital theory does not (yet) have a leadership theory
- Social capital may depend on process performance

Leadership and sales performance (rank)



Leadership and justice



Sammenhæng mellem ledelseskvalitet og retfærdighed.

Kilde: Olesen et al. 2008, "Virksomhedens sociale kapital - Hvidbog", Arbejdsiljørådet og NFA.



Lean and work environment (stress)

- To types
 - Change induced stress
 - Work induced stress
- Change induced stress
 - Lean takes time
 - Tension between lean and production
 - Frustration and stress reactions



Change induced stress can be avoided

Stress Reduction Kit



Directions:

1. Place kit on FIRM surface.
2. Follow directions in circle of kit.
3. Repeat step 2 as necessary, or until unconscious.
4. If unconscious, cease stress reduction activity.

Change induced stress can be avoided ^(almost)

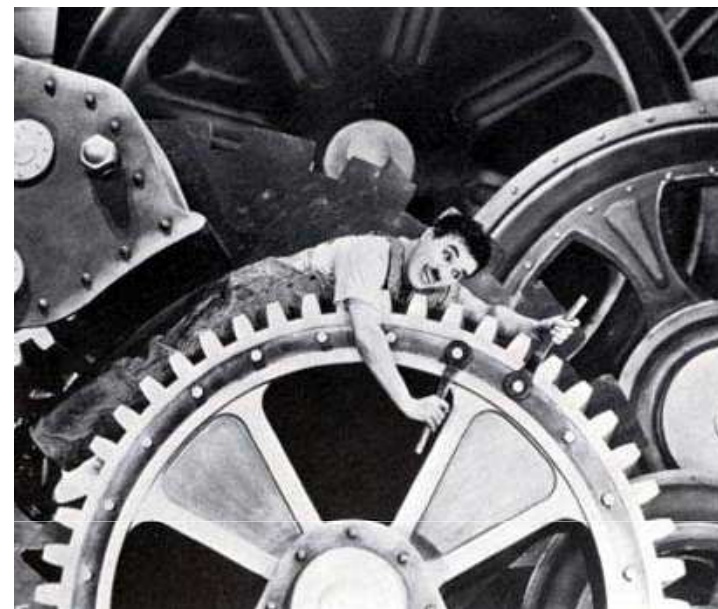
- Talk about the change process
- Let the frustration out

- Reflection seminar
 - Gather all project members
 - Its NOT a project meeting
 - Discuss good and bad in the project
 - All types of emotions are legitimate



Work stress

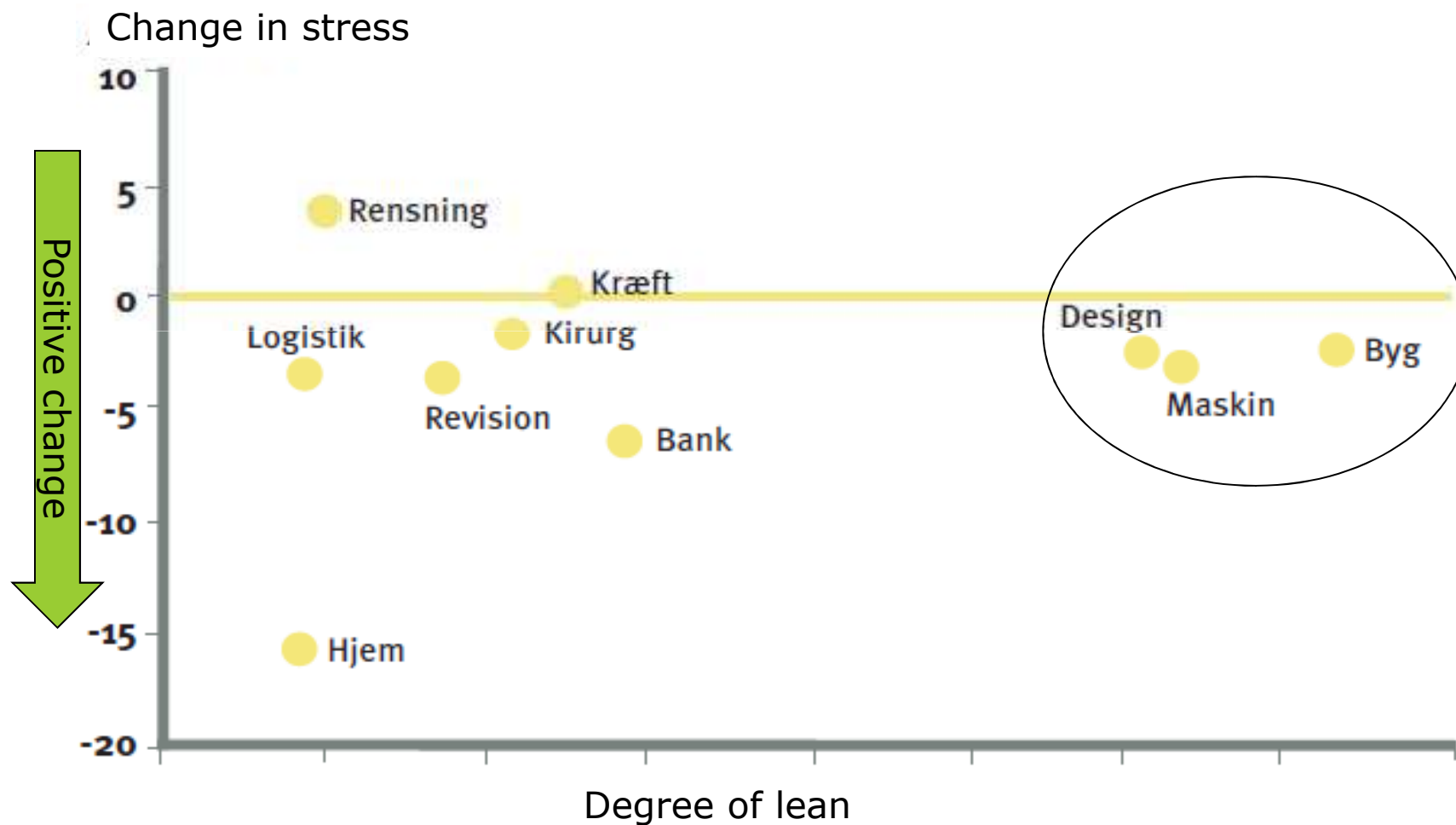
- Lean can lead to
 - Higher pace
 - Systematic removal of resources
 - Long workdays
 - Shortening of cycle times
- In short: Work intensification



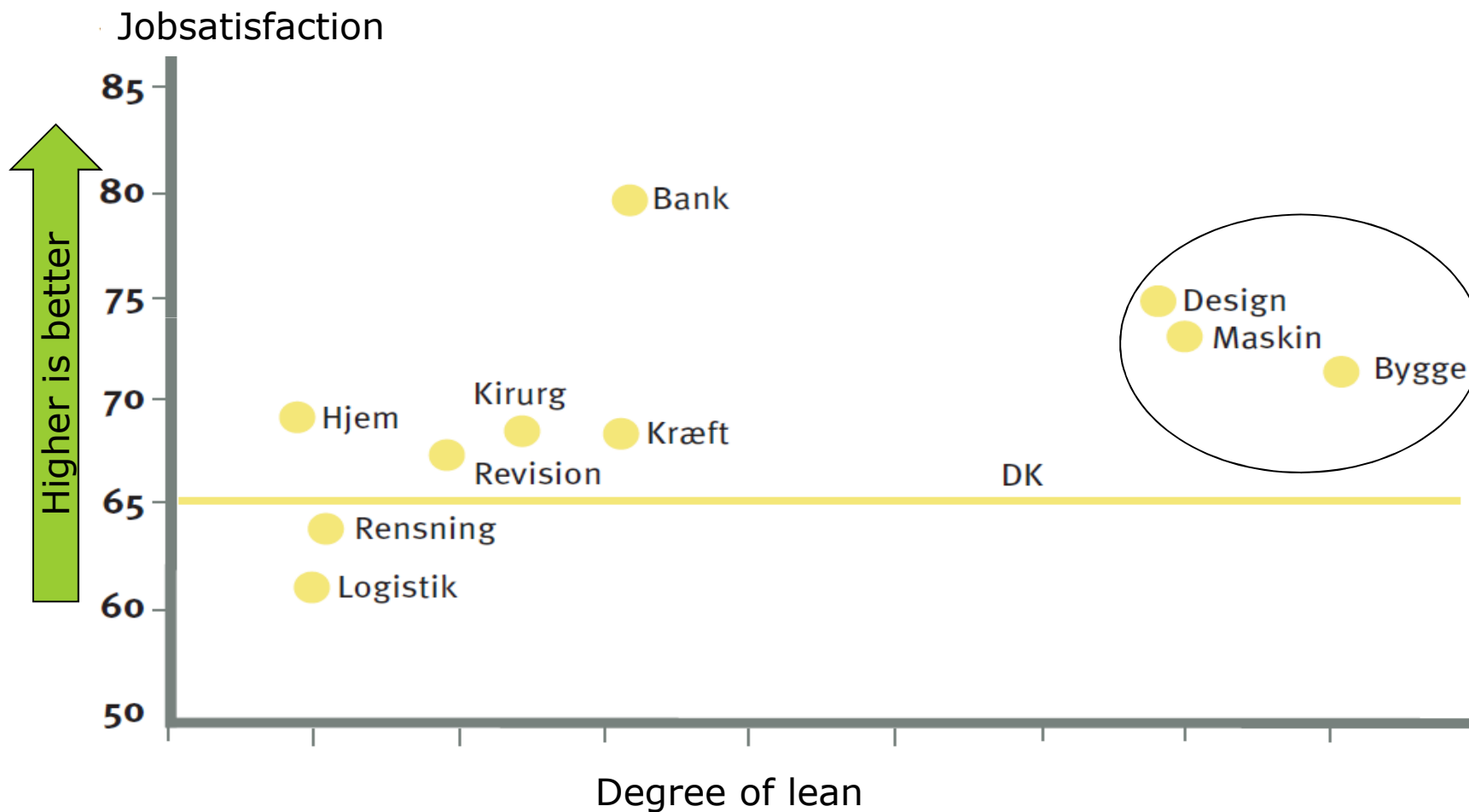
Lean – standardization and transformation

Standardization	Transformation
Rutinization	Development
Standardized production	Constant changing lean-initiatives
Maintain the system	Change the system
Focus on tools	Create a change-culture
Attention to detail	Considering the whole system

Lean and stress



Lean and jobsatisfaction



Overall change in work environment

Positiv	Banken Designafdelingen Logistikvirksomheden Hjemmeplejen
Uændret	Kræftafdelingen Byggemateriefabrikken Maskinfabrikken Rensningsanlægget Kirurgisk afdeling
Negativ	Revisionsinstituttet

Positive effects of lean

- Gain control of the processes
- Who does what and why
 - Remove daily frustrations
- Improved layout
- Team spirit
- Transparency
- No one wants to go back to the old days



Negative effects of lean

- Change is hard!
- Many develop change induced stress
- Too much focus on tools and too little on employees



Quick sum-up

- Performance management
 - Centralization through measures and built-in management action
- Lean
 - Performance through process improvement
 - Not evil 😊
- Social capital
 - Employee well-being at the group level
 - Associated with performance but does not create processes
 - Flows from leader

Servant leadership

- Empowerment
- Accountability
- Standing back
- Humility
- Authenticity
- Courage
- Interpersonal acceptance
- Stewardship

Putting it all together

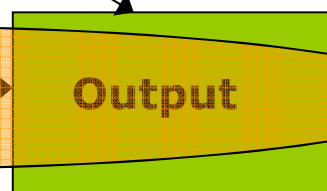
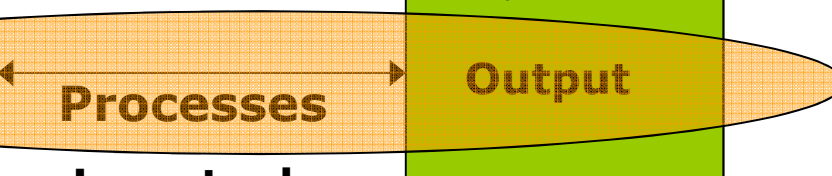
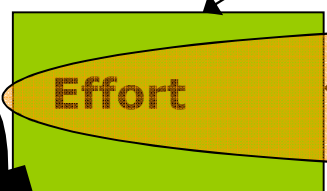
Humility
Stewardship
Authenticity
Interpersonal acceptance



Management



Leadership



Performance measurement
Accountability



Lean tools
Empowerment
Standing back
Courage

Servant leadership – not always one person

- Servant leadership
 - Many attributes in the same person
- May not be tied to a person but a role or a team
- Team of two
 - Care – social
 - Process - performance

Conclusion

- Good organizational performance is the sum of many parts
- Performance measures must provide insight and allows maneuverability
- Good processes that are continuously improved
- Social capital to allow support and autonomous coordination
- Servant leadership to tie it all together

The end

Background

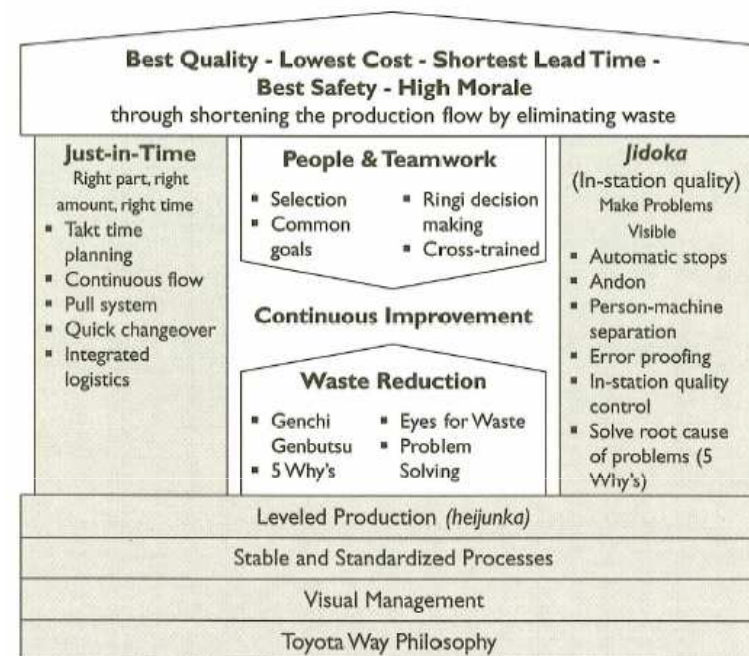
- The Danish healthcare system is primarily a public healthcare system
- Its ok –we do get a bit healthcare for our tax \$\$\$
 - 2009 OECD data
 - DK: health cost per person = \$3,512 (100% covered)
 - US: health cost per person = \$7,290 (<80% covered)
- Still we want more...
- The healthcare sector is the target of politically driven rationalization
 - More healthcare for less \$\$\$
- Lean is currently the rationalization approach of choice

Challenges

- The foundation for lean:
 - Stable and standardized processes
 - Leveled production

- Only true for some functions in healthcare
 - Blood samples
 - X-ray, CT, MRI
 - Elect surgery for uncomplicated patients
 - Out patient care

- Not true for
 - Diagnostic processes
 - Care and treatment where staff must respond to immediate needs
 - In general: Reactive environments are problematic for lean



(Liker, 2004)

Case: The surgical ward

- 200 Employees, 24 hour readiness, 10 operating rooms
- Mixed surgery: Orthopedic, abdominal, laser, wound treatment, electroshock
- Mix of elective and acute surgery
- Wasting time – 2 hrs./room/day
- Overtime and high absenteeism

Result: Turbo operating rooms

- 3 operating rooms were combined to 2 turbo operating rooms
- Surgeon must not leave the room
- Teamwork
- Work completed ahead of schedule
- High skill level
- "On rails"

Analysis

- Obviously a success:
 - Significant increase in productivity
 - No overtime
- Patient flow split in two:
 - 1) Turbo operating rooms
 - 2) Normal operating rooms
- Leveling and standardization in turbo rooms
 - No education
 - Senior and highly skilled doctors
- Requires more support staff

The soft side of lean

- Valuestream mapping is excellent
 - Overview of the processes
 - Transparency
 - Who does what and why – remove frustration
 - Sense of unity
- Positive effects on psychosocial work environment
- Improved performance
- But it's really the soft side of lean

The soft side of lean

- Lean works in healthcare
 - “Real” lean works in stable environments
 - The much larger rest must use the soft side of lean
- Valuestream mapping is the key
 - Use the language of lean to build processes
 - Use the language of healthcare to illustrate benefits
 - Leadership is needed to support and maintain social norms
 - Through processes relational coordination and social capital grows and with them performance!