

Design your own health care organization



**ASSIGN
BUSTER**

The design of an organization is a “ formal, guided process for Integrating the people, information, and technology of an organization” (Clicking et al. , 2007). A good organizational design increases the likelihood that an organization will succeed; that its’ values will be realized and its mission will be attained. An organization begins with a strategy or a purpose, is followed by its philosophy or values, then identifies the mission and finally evaluates the environment and its’ strengths, weaknesses, opportunities, and threats to the organization (Kelly & Crawford, 2008).

I have been given the opportunity to create a new healthcare facility, and I have chosen to create a chronic non-cancer pain management clinic. This clinic will provide comprehensive chronic pain assessment and individualized treatment plans using a multidisciplinary team of healthcare providers. The rationale for choosing this clinic and its design is multiracial, and includes the following.

1. Current lack of accessible care for this condition that affects approximately one in five people worldwide. A Canadian Pain Society Study (2012) found that chronic pain afflicts seventeen to thirty five percent of Canadians. Lack of diagnosis or misdiagnosis for patients with chronic pain.
3. Management of chronic pain poorly taught among medical and nursing schools.
4. Significant associated morbidity and mortality with economic costs to society equivalent to heart disease or stroke (Canadian pain Society, 2012).
5. Complicated medical problem with large physical, financial, and emotional components requiring expertise from different healthcare providers.

Currently in the province of Prince Edward Island there is a single, government funded pain facility run by an elderly family physician looking to retire.

There is a significant wait list, only a small number of patients are seen daily, and ongoing follow-up of patients is difficult due to high demand. There is an opportunity in this environment for a new pain clinic based on a multidisciplinary model to be very successful. The name of the clinic will be the Vandals Centre for Pain Therapy (ACCEPT). As described by Kelly & Crawford (2008), a mission statement expresses the provides a framework for the company's strategy, should resonate with employees, and spell out the overall goals. It also demonstrates what the business is all about to tenants, employees, and the community.

The mission statement for ACCEPT will be as follows. " Our Mission is to improve the health and well-being of our clients living with chronic non-cancer pain utilizing multi-modal contemporary approaches in pain management. We will provide individual and innovative care and services to our community. Our health-care team will be dedicated, compassionate, highly qualified, and committed to excellence in health-care. " The values for ACCEPT will be published as follows. 1 . Excellence – providing service with the highest integrity and exceeding the expectations of those we serve. Compassion – maintain an awareness of the physical, emotional, and intellectual needs of others, and ensure the dignity and respect of each individual client. 3. Efficiency – working competently, productively, and cost effectively. 4. Leadership – accountable, proactive, seeking opportunities and innovations to further our mission. 5. Creativity – looking for new and different ways to best serve our clients. 6. Integrity – doing what is morally right and good, being honest with our patients and with one another.

Organizational Chart Often the terms manager and leader are used interchangeably.

Some people are great leaders but are unable to manage. Conversely, some are good managers but do not possess certain traits inherent of a good leader. Kelly & Crawford (2008) define management as “ a process of coordinating actions and allocating resources to achieve organizational goals”, while defining leadership “ as a process of influence whereby the person in charge influences others towards goal achievement” (p 413). Anderson (2012) suggests leaders acquire power and focus on empowering others, as well as motivating and inspiring others. Leaders are influential, sincere, and take risks.

Managers are given a formal role and are assigned specific duties with definite responsibilities. Managers plan, organize, coordinate, and control (Kelly & Crawford, 2008). Clearly there is a significant amount of overlap between leaders and managers. In order to effectively lead and manage this new facility, it is my ambition to incorporate the best characteristics of both. Effective application of both skill sets may assist me to provide a balanced and productive work environment. For my new role as Chief Executive Officer (CEO) of ACCEPT, I will have to use and evolve characteristics which will allow me to be an effective leader and manager.

Some of the characteristics which I already possess include: a) integrity, b) good communication skills, c) adaptability, d) team-player, e) form good relationships and get along well with others. Skills I would have to develop would include decision- making, delegating, and straightening. One

characteristic I will be looking to develop is learning how to delegate successfully. I place a lot of pressure on myself and often feel I am the only one capable of doing the work. I do not feel threatened by others, but rather feel that there cannot perform as well as me.

Learning to relinquish responsibility and authority on occasion will be something I seek to achieve. A second characteristic will to use strategies to combine several different health care professionals and other groups into an effective team. This is something I have never done before and will be a new, interesting challenge. Finally, a good leader must be able to make good decisions. This is an area where I experience difficulty at times. As an emergency room nurse with significant experience, I can make decisions and act quickly and with inference.

In other areas of life, however, I tend to over think things, analyze and re-analyze, often deferring the decision to someone else if possible. In my role as CEO, I need to develop my decision making ability and learn to make firm decisions. Leadership/management workshops, conferences, using mentors, professional associations, Journals and programs, and other available forms of continuing education will all need to be employed in order to develop my skills in these three areas. It will also be important as CEO to become more politically aware and involved. Empowerment

Hawks (1992) defines empowerment as the interpersonal process of providing the proper information, support, resources, and environment to build, develop, and increase the ability and effectiveness of individuals to set and achieve organizational goals. More simply stated it is the freedom to act

on what one knows. For nurses, empowerment is often thought of in terms of autonomy, or control over their work. It implies the ability to make decisions about their work. It does not mean total control, but the autonomous nurse is free to choose to take independent action based upon knowledge and skills.

By developing and using the following five strategies to empower staff, it is hoped they will show strong work motivation and initiative, will increase their job satisfaction and feeling of control, and encourage creativity in accomplishing the organizations goals. 1 . Empowerment through the media.

Nurses disembowel themselves by discounting the media in the public perception of nursing (Kelly & Crawford, 2008). To counter this, we would use the media to highlight this new service, showing nurses as coordinators of care and create a strong image of nurses as caring and skilled providers.

2. Empowerment through education.

Canter (1993) proposed that an individual's effectiveness on the job is influenced largely by organizational aspects of the work environment. This author identified power and access to learning opportunities as definitive determinants affecting the behavior of the employee. Support and resources to allow continued education positively impacts job satisfaction, commitment, and feelings of autonomy. As a result, staff becomes more productive and effective in meeting the goals of the organization. In practical terms, this means allowing time off to attend conferences and encouraging in-house continuing education. 3.

Empowerment through committees. Committees should be established to allow nurses and other providers to learn new skills, gain recognition,

provide an opportunity to showcase their abilities, allow active participation in a group setting, and forge professional workplace relationships and mutual support. 4. Empowerment through incentives. It is important to structure financial systems so that there are incentive programs shared by health care staff when corporation quality goals are met. This will be useful to continue to improve patient satisfaction and maintain employee morale. 5.

Empowerment through communication.

There are overall important aspects of communication to ensure the flow of information so that no one group can be perceived by the patients as being ill-informed or in a negative manner. Thus, information channels have to exist to allow the flow of information from the top of the hierarchy to all members. Alternatively, establishing channels to allow optimized information flow from members to the senior/corporate managers is a critical step in improving staffs sense of control and empowerment. These channels must break down divisions between hierarchies and staff (I. E. Managers vs.. Clinicians) which limit information sharing (Clicking et al. 007). Establishing grievance protocols, a CEO “ open-door” policy, random attendance by the CEO at division meetings, a “ suggestion” box which gets discussed at the next meeting, lunchtime education sessions hosted by the various groups, social events to bring groups together, are all examples of how these channels can be created. Empowering nurses and staff is essential for the future sustainability, growth, and development of the organization. Staff need to be part of the process so as not to be barriers to change but will help propel this facility to one of recognition as a superior health care unit.

Healthcare Team Formation Mackinac and Rodgers (2000) suggest that an effective healthcare team is difficult to define due to the complexity of teamwork. Through a literature review, they determined 6 team processes which led to effective team work. They are: 1) coordination, 2) communication, 3) cohesion, 4) decision-making, 5) conflict management, and 6) performance feedback. The team to be created will be interdisciplinary, which has advantages for the patient and for the team members. For the patient, it improves care by increasing coordination of services, especially for complex illnesses such as chronic pain.

It integrates health-care for a wide range of needs, is more efficient and timely as all services are provided under one roof. For the health care provider there is increased job satisfaction, it allows for learning of new skills and approaches when working with other team members, it allows providers to focus on their own areas of expertise and can defer to most appropriate resource, it can decrease the burden on acute care facilities, and potentially offer more efficient delivery of care (Grant & Fibonacci, 1995).

The first team created at CACM will be referred to as an “ intake” team. It will be led by the director of medical services and will consist of personnel from nursing, physiotherapy, occupational therapy, pharmacy, medical records, and psychology. This team will be organized so that on “ new patient day’ or “ intake” day, all new patients rotate through the various team members over the course of the day. Each team member would do an assessment or a review to determine what they could offer the patient.

For example, medical records would ensure completion and scoring of intake questionnaires and that reports from old imaging and consults are all obtained and on file as well as current contact and social history is recorded. Occupational therapy could evaluate for anything they could contribute, as would psychology. The “ intake” RAN would be responsible for the majority of the medical history and brief physical examination. At the end of the day, a team meeting where each group presents a rapid assessment and possible therapy options would occur.

At this meeting, a general consensus would be reached on a treatment plan, with the director of medical services acting as the “ consensus-maker. ” The rationale for patient, to maximize the use of non-physician health care providers, and to allow an individualized and innovative approach to every patient. To ensure that the group functions effectively will require use of the six characteristics as discussed by Mackinac & Rodgers (2000). The team process requires cohesion, the sense that individuals belong to the group.

As CEO, I would foster this by keeping the group small, employ those people who have similar, positive attitudes, and ensure ongoing support for their activities. For decision making, I would ask the team members to identify strategies to increase their efficiency and would attempt to attend at least one “ intake” meeting monthly to allow those ideas to be presented.

Additional support might be provided through patient satisfaction surveys. I would also foster team accountability and encourage decision making based on clinical data from both the patients and the providers.

This also ties into performance feedback, where it is necessary to provide accurate and timely feedback to the team as well as to the individual regarding their performance. Team performance evaluations emphasizes co-operation and unity rather than individual competition (Mackinac & Rodgers, 2000). This feedback would be provided quarterly, or more frequently should an adverse event or situation arise. Conflict management is a very important characteristic of a functional team. I will need to be able to recognize constructive or creative conflict versus destructive conflict, and utilize the appropriate method to intervene when necessary.

A good leader works to reduce the conflict by acknowledging both viewpoints, acts in a non-judgmental manner, and is unbiased, open, and honest. A good manager will provide an environment that is conducive to resolution and only uses authority or formal power when absolutely necessary. Through our clear mission statement and values, I would encourage the team members to use and share their knowledge, to recognize the benefits of working together, thus facilitating a team that recognizes the greater good and are therefore coordinated as a group. Lines of communication will be created, as well as regular meetings with both set and open agendas.

Finally, a well-designed chart and record keeping system will be created. Conflict Resolution Managers and leaders deal with different and difficult personalities and situations in the workplace on a daily basis. These conflicts may centre on patients, families, staff, or any combination thereof. When confronting two nurses have a heated debate, one must remain neutral, calm, respectful, and polite. According to Kelly & Crawford (2008), managing

conflict effectively allows those involved to believe their issue has been heard and the situation handled well.

If the disagreement is handled poorly, the issue will remain unresolved for at least one party, resulting in negative consequences, and most likely will resurface at a later time. In an ideal situation, this conflict would be resolved leaving both parties satisfied, creating a win-win solution. The seven techniques of conflict resolution include avoiding, accommodating, omitting, compromising, negotiating, collaborating, and confronting (Kelly & Crawford, 2008). In this scenario, the challenge for the leader is to determine which method of conflict resolution might work best.

Witnessing two nurses arguing is important because from a relationship point of view, it is necessary to maintain their collegial. Taking a collaborative approach permits both sides to work together to develop a mutually agreeable outcome. It involves cooperation, where both parties express their issues and concerns, both feel validated and are given a voice. Willingham (2001) writes of 6 steps to this collaborative method: 1. Define the problem. 2. Brainstorm possible solutions. 3. Select a solution that is agreeable to both. 4.

Plan how solution is to be implemented. 5. Implement the plan. 6. Evaluate the resolution and its effectiveness. This disagreement takes place in a hallway, so it would be appropriate to change this setting to a quiet, private, and neutral location. As the CEO, I would gather all the information from both individuals, and from any pre-existing protocols. Communication is crucial and I must proceed openly and courteously with both parties. By taking the

collaborative approach, it is hoped that a resolution can be reached, but it takes time and commitment.

Sometimes conflict resolution is not attainable due to new issues that arise. It is important as a leader to recognize which conflicts need intervention and by which method. Finally, once a resolution has been attained, I would advise the nurse that if further problems present themselves regarding this issue, we would gather as a group to discuss it. As well, it would be important to ensure the nurses involved were aware of the channels to bring forward suggestions and solutions, and that at a defined future point we would meet to evaluate the resolution and see if it could be improved upon.

Conclusion The Vandals Centre for Pain Therapy is a multidisciplinary, integrated healthcare centre using best available resources in a collaborative approach to achieve optimal patient outcomes. As CEO, I have developed a structure and team concept that addresses the challenges of providing great patient care while also being a rewarding place to work. This will require an open and innovative management structure which I have created in the organizational design. Our “ intake” team is just one example of the multidisciplinary approach the organization will follow.

Staff will be empowered through various methods to continuously strive for better patient outcomes and for better job satisfaction. Any conflicts which arise will be handled in an appropriate manner to yield the best long term results, and which best reflect our mission statement and our values.