GBBN

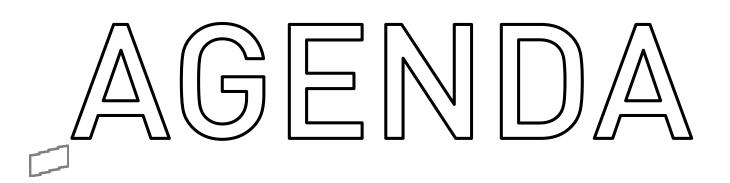
WHAT DOES WORKSPACE HAVE TO DO WITH IT?

Radical Approaches to Work and Educational Space

LEARNING OBJECTIVES

- Understand the relevant workspace influences from outside of healthcare that can improve work and education in this industry
- Discover the correlation between improved workspace and patient satisfaction and care outcomes
- Address current burnout and retention issues with new workplace strategies.
- "Right spacing" strategies based on real world needs for improved education and collaboration.

- 1. Setting the stage
- 2. Foundations of change
- 3. New Approaches



SETTING THE STAGE

WORKSPACE MATTERS

Despite heightened awareness of the widespread negative impact of physician burnout, the **nationwide Physician Misery Index has increased from 3.78 to 3.94 out of 5 since the January 2015 physician survey.**

Among the results:

- 89% of physicians believe the "business and regulation of healthcare" has changed the practice of medicine for the worse
- 80% feel at risk for burnout

-2018 Geneia Physician Misery Index

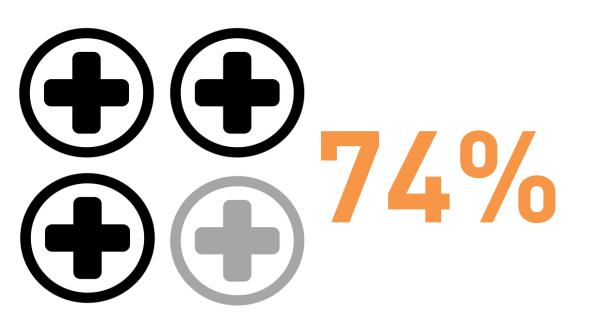


Physicians rate their morale as somewhat or very negative -The Advisory Board 2017

28%

Physician Burnout 2013 - 2016 -The Advisory Board

WORKSPACE MATTERS



Nurses who report concern with effects of **stress and overwork**

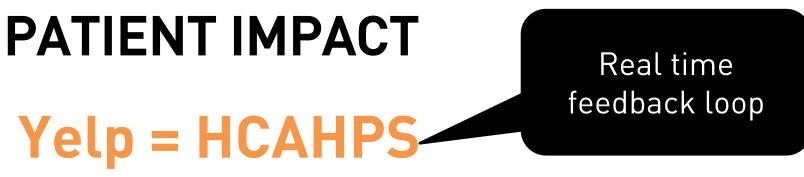
American Nursing Association Health and Safety Study 2011



Nurses who report being **burned out**

****** 50%**

Nurses who considered **leaving the profession** RNNetwork study 2017



Yelp reviews cover additional **twelve domains not reflected in HCAHPS** mostly highlighting patient and caregiver centered experiences and is directly linked to satisfaction scores



Americans with internet access who read someone else's experience regarding care on the internet.



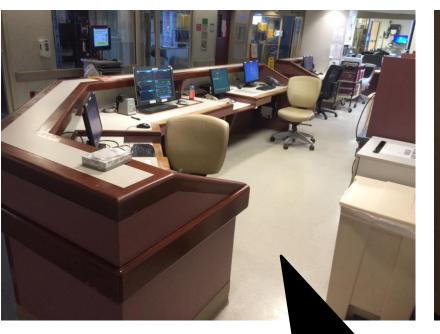
-The Advisory Board study of impacts of physician burnout

HOW ARE YOU SEEING CAREGIVER WELL BEING AFFECT PATIENT CARE OUTCOMES?



WORKSPACE IMPACTS

No space for collaboration







Not Enough Seats

Isolated and fragmented

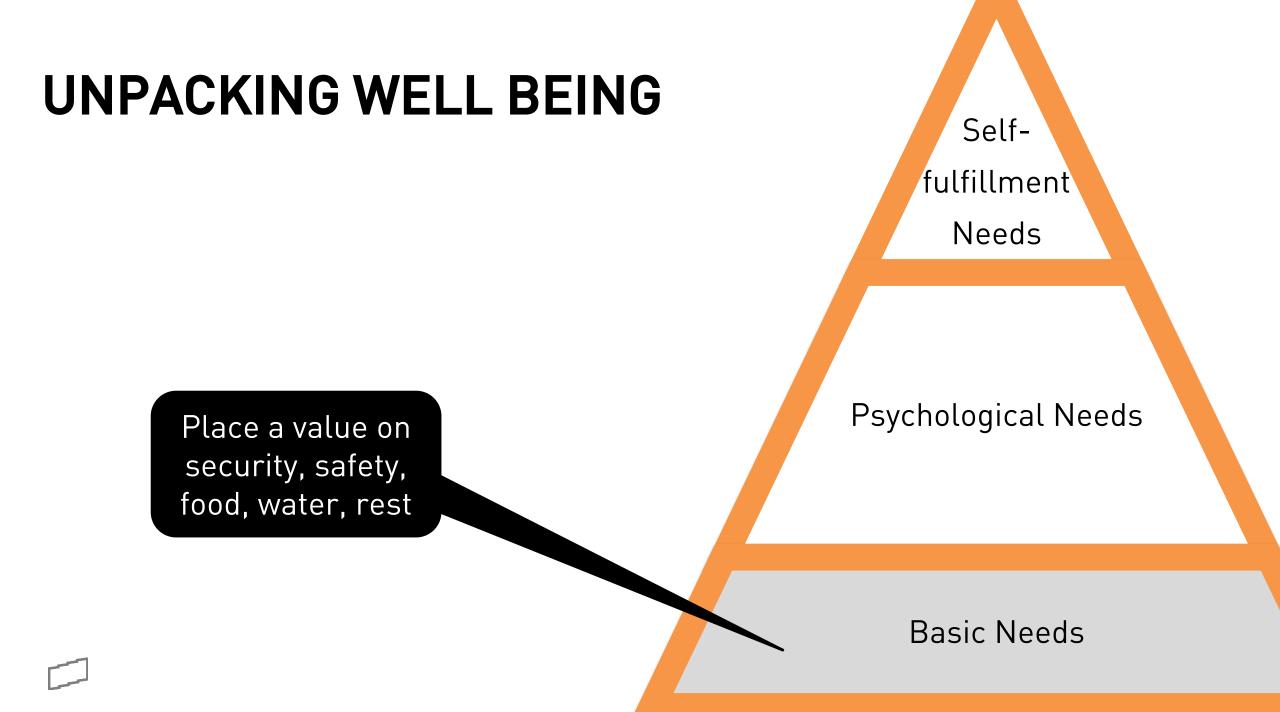


Training



No respite

Break and Lockers and conference and...



PUT WELL BEING TO WORK

Self-

WELL BEING

Self actualization

Esteem

Belonging

fulfillment Needs

Psychological Needs

WELLNESS

Safety Psychological Basic Needs



WHAT DOES RESILIENCE LOOK LIKE?

 \square



POINT OF CARE SAFETY

UNCOMPROMISED CARE



EE

CONNECTED TO COWORKERS

TIME TO RECOVER

WHAT IF GOOGLE DID CLINICAL WORKSPACE?

UNCOMPROMISED CARE

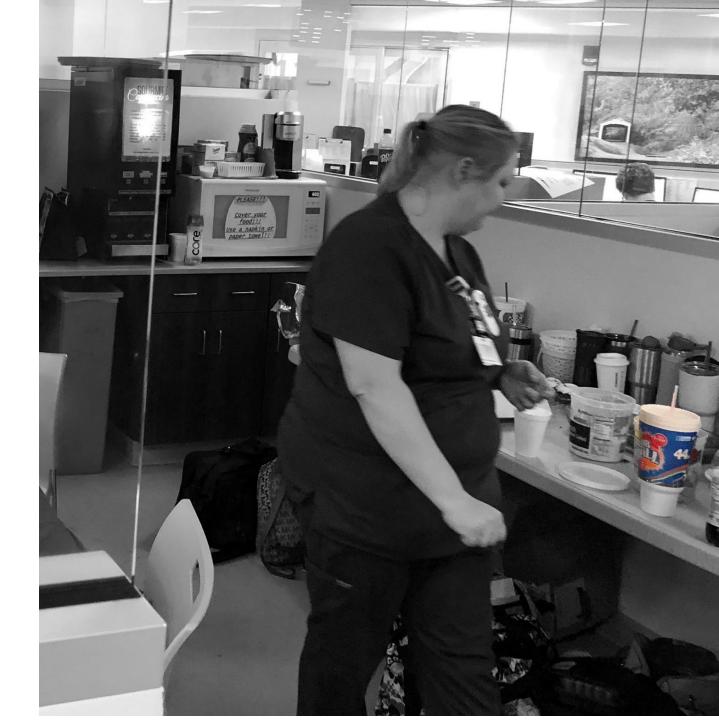
THE OWNER WATER

CONNECTION TO COWORKERS

TIME TO RECOVER

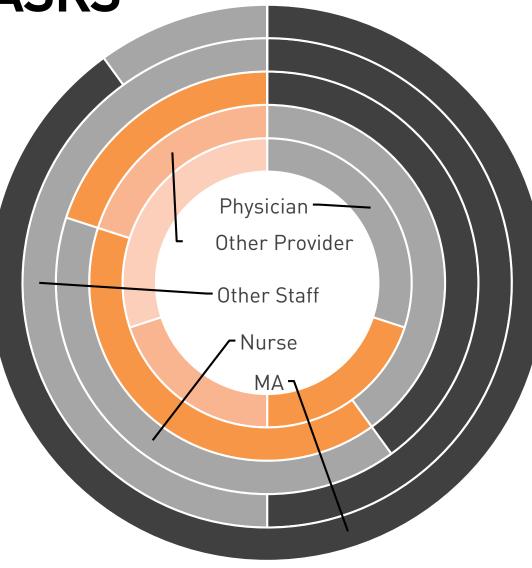
WHAT'S STOPPPING US?

 \square



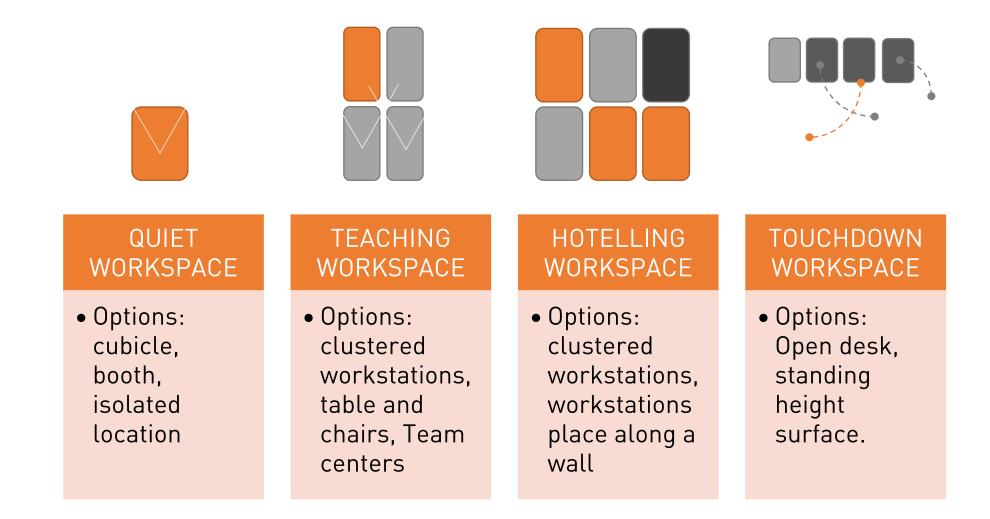
NEW APROACHES

UNDERSTANDING TASKS

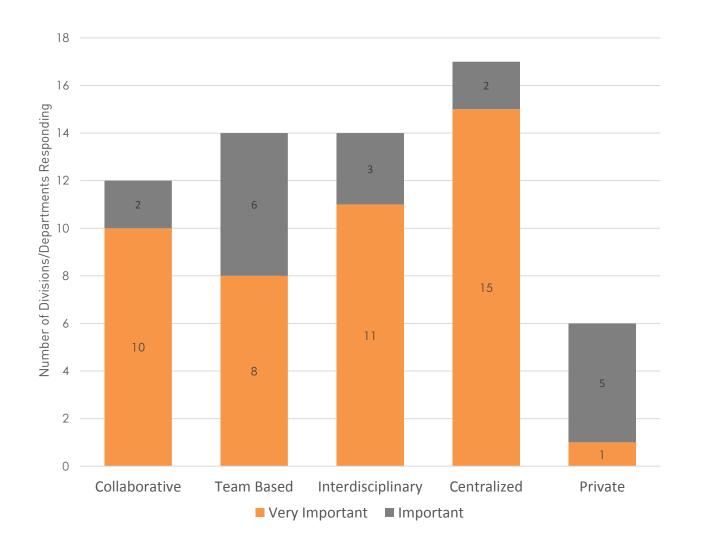


Touchdown
Huddle
Hotelling
Quiet
Teaching

BUILDING AGILITY TO SUPPORT TASKS



SPACE CHARACTERISTICS



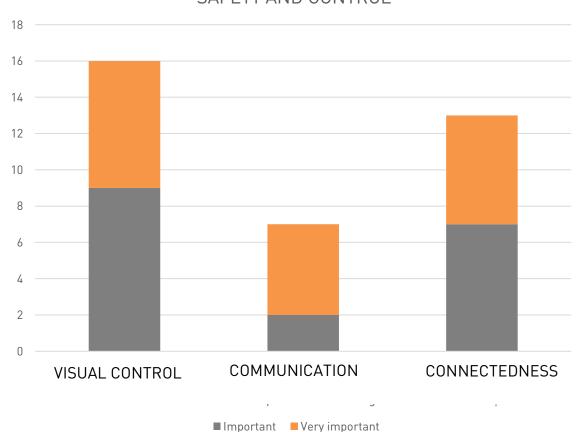
COLLABORATIVE: Informal interaction with others to discuss issues or solve problems

TEAM BASED: work in a group where we each have a designated role

INTERDISCIPLINARY: work with staff from outside the department

CENTRALIZED: close access to patients, support spaces, and other staff

PRIVATE: focused work I do on my own



SAFETY AND CONTROL

VISUAL CONTROL: Situational awareness of clinic/treatment areas

COMMUNICATION: Ability to communicate with other care providers

CONNECTEDNESS: Physical separation of workspace from main flow of presentation

How do we use this to get the satisfaction and retention rates up?



BUILDING IN RESILIENCE







THANK YOU



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