Healthcare organizations across the U.S. are undergoing transformative change in the movement toward healthcare reform solutions that achieve reduced costs, better outcomes and improved patient experience. One of the major movements is a push toward Population Health, a strategy of care coordination so care partners and services collaborate to best serve the patient.

Children’s Hospital of Wisconsin is one example of a system that is focused on this new imperative. Under CEO Peggy Troy, the healthcare system has moved ahead of the curve by creating the At Our Best culture to enable its strategy to be fully successful.
Creating the ‘At Our Best’ culture at Children’s Hospital of Wisconsin to help kids be the healthiest in the nation

Founded in 1894, Children’s Hospital of Wisconsin is one of the nation’s top pediatric care facilities. It is the region’s only independent, not-for-profit health care system dedicated solely to the health and well-being of children.

Serving children from Wisconsin, Michigan, northern Illinois and beyond, it provides primary care, specialty care, urgent care, emergency care, community health services, foster and adoption services, a child abuse center, child and family counseling, child advocacy services and family resource centers. Children’s Hospital of Wisconsin is also a major teaching affiliate of the Medical College of Wisconsin and is affiliated with more than a dozen schools of nursing.

When Troy became CEO, Children’s Hospital of Wisconsin was in the midst of major transformational change that would involve and affect the entire organization and the way it delivers care to children.

Structured as a functional business model enterprise with 13 different divisions, it was transitioning to an integrated delivery model, and implementing an electronic health record system that would serve as a catalyst to support this integrated approach to care.

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She understood that this major shift, as well as the sweeping changes impacting hospitals and healthcare systems through healthcare reform, would also require culture change in order to implement its strategy and fulfill its vision that kids be the healthiest in the nation.

Culture-shaping objectives

Senn Delaney was engaged to help guide the culture transformation across all key teams and departments. The key goal was to foster an At Our Best culture that shifts people beyond the episodic care approach to a more all-encompassing Population Health strategy of serving children ‘from cradle to college.’

An important part of the culture work involved building partnerships and increased collaboration and alignment with physicians. Also key was creation of a clear purpose and a set of values and guiding behaviors (see page 6) to bring the culture to life across all services and departments.

The following is an edited interview with Peggy Troy. Watch the video interview: http://sdtv.senndelaney.com/?p=1383

Q: What is it that makes Children’s Hospital of Wisconsin so unique and also a national leader?

We are a very unique organization, particularly for a Children’s Hospital because we are so much more than a children’s hospital. We also have several other pieces and parts to our organization. We have 67 primary care physicians who are out in the community. We also have a foster care and adoption program. We foster care case manage about 2,000 kids. We also have a health plan; an insurance company that is for Medicaid only.

We have a huge child abuse center. We are nationally recognized; we are a level IV, which means we have the highest level of care but also a teaching and research program that’s attached to that

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because there are so many victims of child abuse in the community.

We are an academic institution. We are affiliated with the Medical College of Wisconsin. They provide all of our specialty care. We have about 500 pediatric specialists. We have a very large training program; 66 residents and over 100 fellows. We are very steeped in research. We have about $19 million in National Institutes of Health grants; for an institution of our size, that’s pretty remarkable.

So, we have a lot of pieces and parts to our organization. But one of the things that I found when I came here is we were not very well integrated, particularly as you look at the child and the family as a center of what we do.

We find that our biggest opportunity and also our biggest challenge is really to integrate around them so that we can create pathways for our children to be successful over time. We saw that as an opportunity for us to take care of kids even better, outside our walls, inside our walls and within the community.

Q: What was it that really sparked the idea of this transformational culture journey that you are on?

This really started back when I arrived five years ago. We decided that we really needed to have a recorded strategic plan.

So, we began meeting with our Board of Trustees and started to look at all these different pieces and parts to our organization. How does that position us in the healthcare environment? We saw that as an opportunity for us to take care of kids even better, outside our walls, inside our walls and within the community.

Q: What’s been the implication internally for the organization? How has culture helped you integrate and have the organization be more collaborative?

We realized that we had an incredible advantage if we were to integrate to really meet what I believe is a new healthcare paradigm. And so we began the culture work. What was very fundamental to us was to be able to get in a room and talk about the why. The why is so important. We shone the light on the fact that we’ve got to be a first-class hospital and we’ve got to do the best. We have such a wonderful opportunity to look at how either end — before the child ever comes and after the child goes — to really create that continuum of care and make sure that at every phase of that journey we are able to provide our best but the way we do it best is that we really understand and talk to one another in a very important way.

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We started our culture journey a couple years ago. W brought about 50 people together; about half the people in the room were physicians.

Our Board of Trustees was brave and bold and said we want the children of Wisconsin to be the healthiest in the nation. That began our journey. In order for us to inspire and create health for people, we have to create healthy environments.

And we have to look at people over time because coming and getting a procedure, a surgery or whatever and discharging; yeah, that’s great and we have to do that and we have to be the best in our class. But we also have to think about what the longer term implications are for these kids.

So, we are moving into a space called Population Health where we are really committed to making sure that we are able to help kids from cradle to college and make sure that they are living in healthy environments and able to achieve what they can achieve.

Health really means the broader goal of keeping kids healthy and well, able to learn and become productive citizens. That was the North Star of our strategic plan and we realized if we could integrate all the different pieces and parts of our organization, we would be able to achieve a very audacious goal.
I felt very strongly about the fact that if we don’t partner with our physicians and we don’t help them come on the journey with us and actually lead a big part of the journey, that we were never going to accomplish that.

Q: Tell us more about the role of the physicians in some of the changes that you seen over the past couple years particularly as it relates to the physician population.

You know, physicians and administrators inherently have tension. A lot of times we do things and make decisions about things without considering the implications for what that really means for the practice environment.

I knew that we were going to go through a massive organizational change because we were going to install an electronic health record, and I knew that if we didn’t have the right soil conditions, the culture to accomplish that, that we were going to install the system but it would be a big failure.

We handpicked the doctors that came [to the culture-shaping session]. They were the ones who were named leaders or who we knew had huge influencing skills to be able to really work with us collaboratively. As we rolled out this massive change, we wanted be able to do it very effectively as partners coming from the same sense of purpose. And it really worked.

Q: Talk about the Epic system, when that whole integration happened. What are some stories or things that happened or some positive results as an aspect of the culture shifting?

As we went through the Senn Delaney culture-shaping work, I saw a change in the physician involvement, the physician commitment to the success of what we were trying to accomplish. They owned it in a way in which I would never have expected.

One story, and I will never forget this day in my life; we actually were three days in to implementation. The system had gone well. The connectivity and all the pieces and parts were rolling. Obviously, it was very stressful because it was a whole new way of doing your work. We had changed 4,000 workflow processes and they had to start overnight with a whole new deal.

About Tuesday, the system crashed to its knees. I ran to the OR when I realized what was happening because we had implemented the whole OR system for surgery and most particularly anesthesiology in this case. So, in the absence of the electronic record, we really were not able to effectively do our very best work, which was very, very frightening. And we had a very busy surgical day.

So, we had the world’s best experts from Microsoft and other places trying to figure this out and actually we did. One of our team figured it out. You can imagine the stress level on the anesthesiologists. I ran to the OR and sat down with the chief of anesthesia who was beginning to become very adversarial.

I said, “Let’s get to an accountable state and what do we really need to do right now.” The whole conversation changed. We worked through how we were going to run the OR, the system started coming back up within a matter of hours once we realized the server situation. Patients were not harmed. Nobody was throwing things at each other. And it worked.
Had we not had the culture shaping, that would’ve been a very different conversation.

**Applying culture shaping core concepts to shift behaviors and mindsets**

Q: What are some other aspects of the At Your Best process that have been working through the organization?

There are so many but I’ll focus on a couple. Let me come back to the whole conversation about integration and all our pieces and parts and how we have to do better to wrap ourselves around the kids in the families.

I guess child abuse is a great example. As I mentioned, we have 2,000 kids in foster care and about 500 caseworkers that are out in the field every day. These kids come to our primary care doctors, they come to our emergency departments, and sometimes, they are admitted to our hospital.

Sometimes, they are in the schools where school nurses are. We now are able to look at that child over time as opposed to just a discrete reason that they are there that day. This includes how we need to behave as a system around that child as opposed to just, ‘I’m the school nurse, I will do this because of the child for instance has asthma.’

It is important for our caseworkers, our navigators, our school nurses to prevent but also to follow through when the kids are admitted to the hospital, go back out into their communities and things like that. We are looking at ourselves very differently as a system of care, as opposed to a bunch of discrete little units. And people behave differently.

We are all accountable and we really have to look at ourselves as accountable and not be blaming — really take a personal stock in what’s my role in this?

We use the Mood Elevator all the time. I often say, “Are we at curious?” That is an opportunity for individuals to step back and if they are low on the Mood Elevator, it brings them back up.

And the other thing we’ve used quite often is ‘filter’ because we all come at this from different perspectives. We all have our own filters.

So, instead of saying you’re wrong or you’re not looking at this the right way, we say, ‘What filter are you looking through?’ It is a much less intimidating way to talk to individuals, and so they can get to curious, accountability and appreciation much faster than if we go lower and use those behaviors that just aren’t positive.

One of the things that really worked for me, particularly with my senior team, is when we looked at our own personal styles because it helped me understand where people are coming from. But they also understand me better about why I am ‘ready, set, go’ because I want everybody to just be on the team and go.

The other thing that’s happened through all this that has just been so exciting is the numbers of emails and personal conversations I’ve had with people who have said, “This is really been great professionally. Thanks for investing in me. You have no idea how much this is helped me personally in my own personal life.”

In fact, one of our individuals in the first culture-shaping session, when we all went offsite, one of the physicians, he has three little boys at home and he couldn’t spend the night. He had to drive back home. He came back the next morning saying that the concept of ‘Be Here Now’ changed his whole way of dealing effectively with his own children.

He said that in the past, he would have raced home and been all distracted and looking at his iPhone and all the things that we do. He really thought differently about how he was going to interact with his wife and children that night and it has forever changed him.

One of the most compelling stories… I was in a culture-shaping session with the foundation team, and one of the women came to me the next morning. She shared that she went home after the first night and it was the first time that she didn’t get out her iPad or her iPhone and the other devices she had.

She actually sat down with her family and ate dinner. She had great interaction. A few hours later, her husband came to her with tears in his eyes and wanted to know if she had cancer because her behavior was so extraordinarily different than ever before that he just assumed that she was sick and dying and wanted to tell him.

When you realize the impact that you can have on people’s lives, it’s very sobering.

**Creating the At Our Best culture and values to enable the vision**

Q: One thing that you were very keen on doing was developing a new set of values instead of framework guiding behaviors. Can you talk a little bit about why that’s so important to you?

We named our program At Our Best. We really feel that this is helping us become at our best because we have got to be at our best for these kids and our families. I mean, they come to us, they are vulnerable, they are scared, they need us, they need our expertise, they need our love and care.

We have a lot of values, and we talked about them and we never really formalized that and wove them into the fabric of our organization. So we spent time as a senior leadership team really validating what we really believed; the essence of how we had to behave as an organization. Of course purpose just resonated... What’s
Actually, people really appreciated that and I got several emails thanking me for having that as one of our values because it showed I care about them, the organization cares about them personally.

And with all the changes in the healthcare landscape, we have to be innovative, we have to think about new ways to do things because the insurers, the employers, they don’t want to pay more for health care. Parents now have a bigger burden of co-pays and deductibles. We want to make sure that we really are efficient, effective and value based in how we lead.

We have to lead with innovation because while many of the systems and parts of the organization in the healthcare industry worked well, they don’t in a new paradigm.

Advice for health care leaders on leading culture change

Q: What advice or thoughts would you provide to other leaders, other CEOs, who are about to embark on this journey?

My number one thought is culture matters. We all think we have great cultures, particularly in children’s hospitals, because we share the noble cause of making kids lives better. But when you really start to peel back the onion, you realize you may not have a consistent culture and a consistent way in which you run your organization.

So, I really think that this is one of the most important things you can do is to really get on top of this.

The second thing you have to do is be very humble yourself. As you go through the process, you have to be willing to be a servant leader in how you look at yourself. You have to be transparent. You have to be vulnerable. And you have to be willing to look at how you show up every day in order to make sure that
people feel okay and it is safe for them – that sets the expectation of how they are going to be at their best.

Be very inclusive of who you invite into this process. We included doctors from the get go. We realize that the only way we are going to be at our best is if we have a very healthy working relationship between the provider community, the administration and all the other employees. That was just key. And it set us up for success in ways that I would never have imagined.

Their effectiveness in working with us; it’s not perfect but it’s so much better than it was before. And we have a pathway that I think is very effective in how we communicate with one another, how we talk to one another, and how we really show appreciation for one another.

One of the things that we were able to do in our organization is that we have 12 (internal culture-shaping) facilitators. These are individuals who have great influencing skills across the organization, very talented. And we actually have two physician facilitators. The fact that we have two very extraordinary, well respected physicians as facilitators has just really helped us from a credibility perspective. So it’s been very successful.

Q: What advice and guidance would you give to other leaders in children’s hospitals?

If the CEO isn’t out in front of this thing and incorporating this into how they show up every single day, it will fail because then it means that it’s for everybody else but me.

It can’t be a program. It has to be woven into the fabric of the organization. It has to be a very active part of the evaluation process, the hiring process; all the way on through. If it’s looked at as another program again, it doesn’t have sustainability.

And my last thing is just believe in it. It really will make your organization a better organization, I promise you.

Children’s hospitals play very, very special roles in the healthcare community. We are all about kids and we are all about the families. We get up every day because we really want to do the best and the basic culture in our organizations is very positive.

So, we’ve got to be accountable, we got to really care for our patients and families and I think culture really plays an extraordinary role in not only how we do our work every day but how we are perceived, the value people put on us in the community.

And as we move forward, the challenges in the healthcare community, particularly for children’s hospitals, is going to be really, really tough. The prediction clearly is that there’s going to be fewer of us, and we will become parts of larger systems. Sometimes, you lose the essence of who you really are in those situations.

Business leaders around here tell me all the time Children’s Hospital is one of the crown jewels of our community because they know what we do is so important.

We are really helping kids’ lives to be better. And this culture work can only make that even better than we are today.

So I would say to any children’s hospital CEO that it’s a really important opportunity for you to really face what I would consider to be some of the biggest challenges we’ve ever had in our careers.

Where I am today is just a much different place and so I am so grateful for the opportunity to really help us understand the value of culture, the value of really emphasizing that on a daily basis to make us be at our best for our kids. ■

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about Senn Delaney

Senn Delaney is the culture-shaping firm of Heidrick & Struggles International, Inc., the premier provider of Executive Search, Culture Shaping and Leadership Consulting services worldwide. Founded in 1978, Senn Delaney was the first firm in the world to focus exclusively on transforming cultures. A singular focus of creating healthy, high-performance cultures has made us the leading international authority and successful practitioner of culture shaping that enhances the spirit and performance of organizations.

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