



## AHA Team Training

**Having Fun While Enculturating the High Reliability Principles for Zero Harm**

January 8, 2025



AHA CENTER FOR HEALTH  
**INNOVATION**

# Rules of Engagement

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- Audio for the webinar can be accessed in two ways: 1) through your computer speakers or 2) dialing in by phone – *listen only mode*
- Q&A session will be held at the end of the presentation
  - Written questions are encouraged throughout the presentation
  - To submit a question, type it into the Chat Area and send it at any time
- Other notable Zoom features:
  - This session is being recorded, the chat will not be included in the recording
  - Utilize the chat throughout the webinar. To chat everyone, make sure your chat reflects the picture below:



# Continuing Education Credit

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To receive 1.0 CE credit hour for this webinar, you must:

- **Create a Duke OneLink account.** You only need to create an account once – you may use it for all future webinars. Instructions will be chatted in and/or you may find them in your registration confirmation email.
  - Step 1: Register for a OneLink account
  - Step 2: Activate your account and ***confirm your mobile number***
- **Text LUTHOQ to (919) 213-8033 after 1:00 pm ET today – 24-hour window**

In support of improving patient care, the Duke University Health System Department of Clinical Education and Professional Development is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the Accreditation Council for Continuing Medical Education (ACCME), to provide continuing education for the health care team.

# Upcoming Team Training Events

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## In-person Master Training Courses – [Registration Now Open!](#)

- April 7-8 | New Hyde Park, NY | Northwell
- April 24-25 | Los Angeles, CA | UCLA
- May 19-20 | New Orleans, LA | Tulane

## Virtual Master Training Course – [Register Soon!](#)

- January 16 - March 13 | University of Washington

## Webinars

- More details on 2025 webinars coming soon!



# Custom TeamSTEPPS Advisory Services at Your Organization

## TeamSTEPPS Master Training Course

Using a train-the-trainer model, **we give you the foundational tools** and concepts, and train your staff through this **two-day training** program. You will gain a team of Master Trainers ready to teach others in your organization.

## Comprehensive TeamSTEPPS Programs

**We help you along the way.** After delivery of the two-day Master Training course, we continue to work with your team for **3-6 months**, building the internal capacity to hardwire TeamSTEPPS throughout your organization.

[Learn More »](#)

“Our relationship with the TeamSTEPPS faculty and the on-site trainings were both phenomenal. **They did a great job of meeting us where we were** and customized a program that really helped us gain clarity about the problem we’re trying to solve.”

– **Melissa Riffe-Guyer**  
Executive Director,  
Culture Cone Health

# Today's Presenters



**Elaine Huggins, RN, MSN, CPHQ, LSSMBB**  
QSI Consultant VI, National HRO Consultant,  
Kaiser Permanente Program Office Quality, Safety & Experience



**Celine Gray, MBA, LSSBB, CPXP**  
Senior Principal Consultant, Rounding and Daily Management  
Kaiser Permanente Program Office, National Care Experience

# Objectives

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Deepen attendees understanding of why healthcare needs to enculturate the principles of a High Reliability Organization (HRO) to attain zero harm.

Attendees will be able to make connections between the principles of HRO and healthcare operations.

Attendees will identify how a TEAMS or ZOOM meeting can be made into a personable, psychologically safe, entertaining and engaging format that can support systemic culture change.

# Poll | What interested you most about today's team training topic?

- A. I want to learn more about high reliability work in healthcare
- B. Curious about this tool that can help spread culture change
- C. I always learn something from AHA team training, so why not
- D. Need a CE and had an opening on my calendar 😊





# The Challenge

- Kaiser Permanente (KP) was founded in 1945 and has grown to 8 markets with 40 hospitals and over 600 medical offices
- Two largest markets, both in California, began to focus on building an HRO culture change
- Our Senior Vice President for Quality, Safety, and Experience challenged us to increase the knowledge and use of the HRO principles, processes and tools



Members  
**12.5M**



Hospitals  
**40**



Medical offices<sup>1</sup>  
**614**



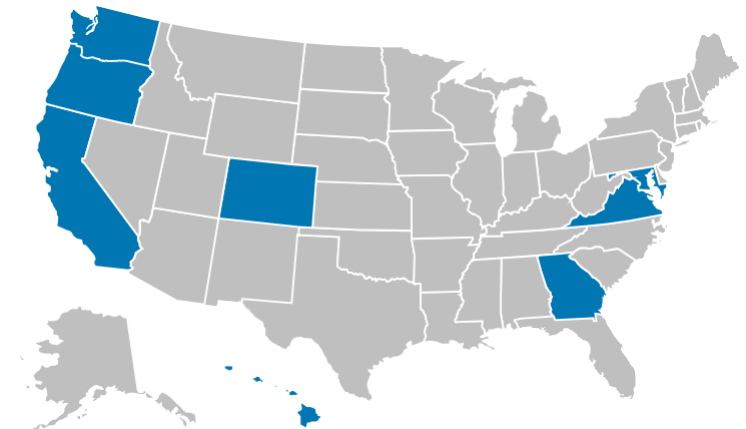
Physicians<sup>2</sup>  
**24,605**



Nurses<sup>3</sup>  
**73,618**



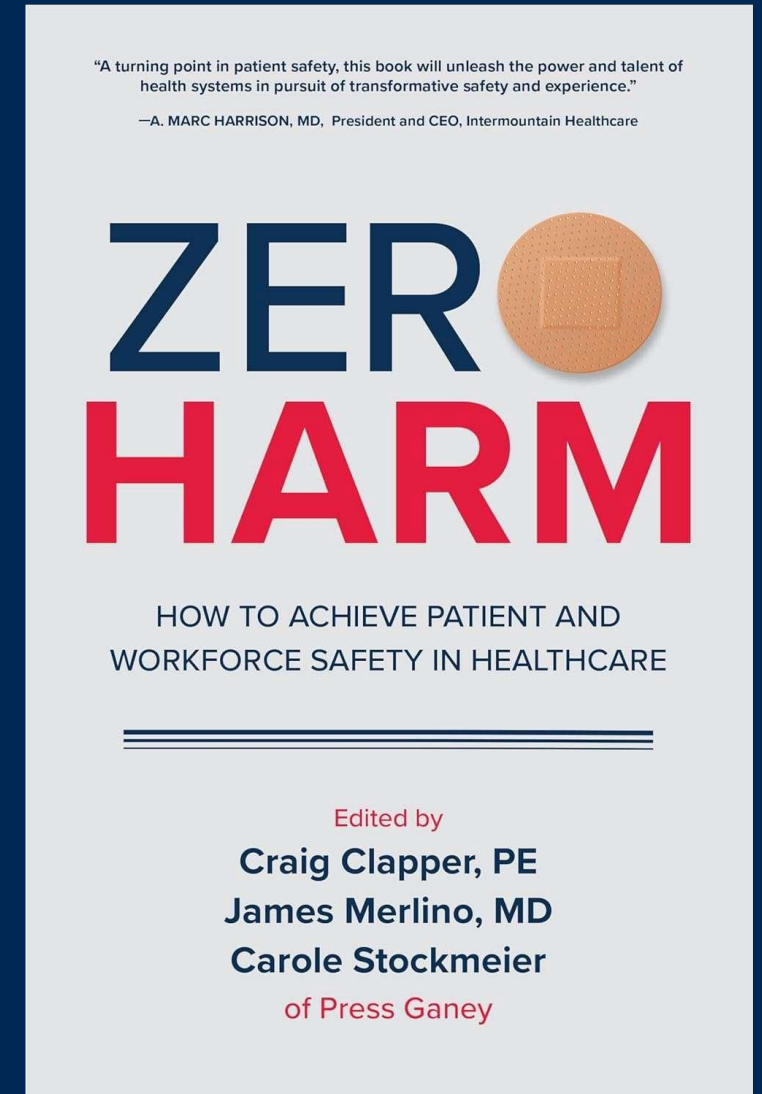
Employees<sup>+</sup>  
**223,883**



# The Why

“Understand that safety is not just inherently valuable, but is also the **best possible producer of quality, patient experience, workforce and physician engagement, and efficiency.**

Know that if some safety is good, more of it is even better, and total safety - zero harm - is the ultimate goal.” (page 11)



Clapper, C., Merlino J., Stockmeier, C. (2019) *Zero Harm: How to Achieve Patient and Workforce Safety in Healthcare*. New York, NY: McGraw-Hill Education

# How we started

Given the remote, on-site and varied location of our community, we opted to test out creating a monthly “Community of Interest”.

The Teams meeting was recorded and then made available organization-wide.



## Placed a heavy emphasis on psychological safety

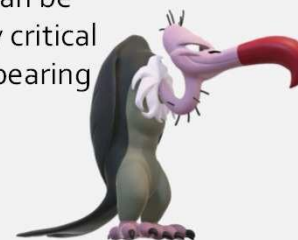
1. Anyone can ask questions without looking stupid



2. Anyone can ask for feedback without looking incompetent



3. Anyone can be respectfully critical without appearing negative



4. Anyone can suggest innovative ideas without being perceived as disruptive





Standard logo to create 'branding'



Standard TEAMS background



Standard HRO Radio PPT template



Standard graphic created for HRO Principles

# SEASON 1 2023 | What makes becoming a HRO so tough?

- Episode content was largely conceptual
  1. Historical Context and the HRO Principles
  2. Blame and Psychological Safety
  3. Complicated vs Complex Organizations, the need for mindfulness
  4. Learning Teams and HRO
  5. Just Culture and HRO
  6. Fighting Bias: How HRO Does it
  7. Respectful Change Management for High Reliability
  8. HRO and Harm Reduction
  9. Tying Human Performance to HRO
- Started off each episode with a poll to get audience 'thinking'



# What is a High Reliability Organization?

“If reliability is compromised, severe harm results”

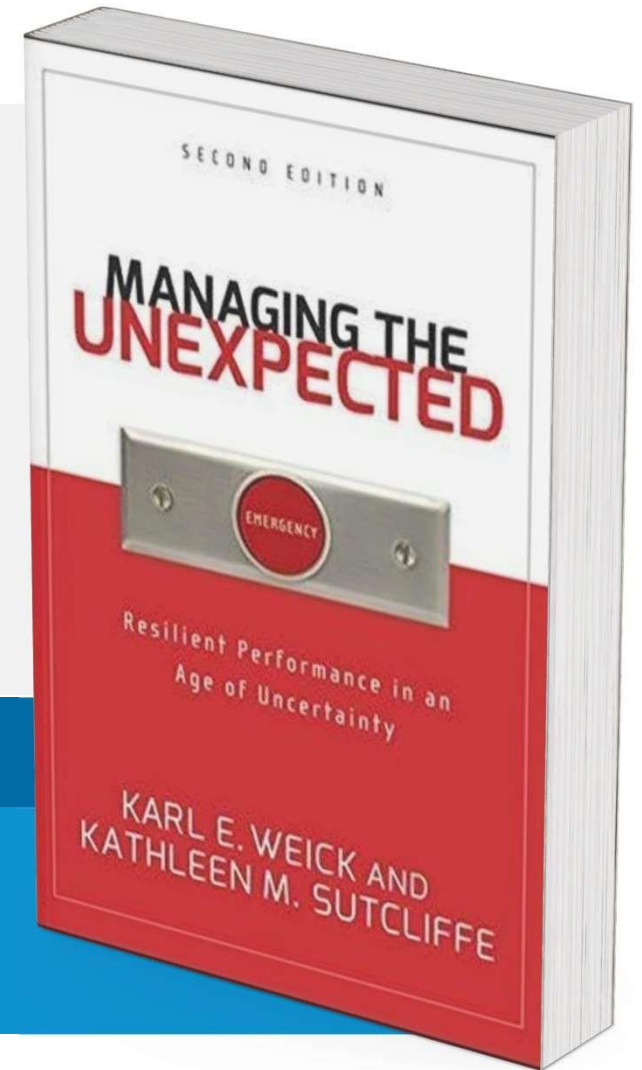
They studied organizations “where the potential for error and disaster is overwhelming”:

- Nuclear aircraft carriers
- Air traffic control systems
- Nuclear power plants
- And other high-risk professions

They discovered an UNUSUAL “Collective Mindfulness of Safety” that led to a much lower harm rate than expected and added clarity by identifying 5 principles around which work was organized to obtain these results.

Why is this important to KP and healthcare?

“....because (besides life) other losses – of assets, careers, reputations, legitimacy, credibility, support, trust, or goodwill - can be devastating, too, and result from unexpected events.” (Weick & Sutcliffe, pg. 18)



# The 5 High Reliability Principles

HRO Principle	Simply Put
<b>Preoccupation with failure</b>	<ul style="list-style-type: none"><li>- employees assume things will go wrong</li><li>- what works today may not work tomorrow</li></ul>
<b>Reluctance to simplify</b>	<ul style="list-style-type: none"><li>- threats to safety are complex</li><li>- resist oversimplification, not all areas are the same</li></ul>
<b>Sensitivity to operations</b>	<ul style="list-style-type: none"><li>- reliable communication practices are critical on the front-line</li><li>- front-line requires psychological safety to report drift from expectations</li></ul>
<b>Commitment to resilience</b>	<ul style="list-style-type: none"><li>- people will make mistakes</li><li>- need capabilities to 'bounce back'</li></ul>
<b>Deference to expertise</b>	<ul style="list-style-type: none"><li>- no one knows the work better than those doing the work</li></ul>

# Fundamental Message for a HRO

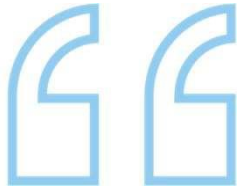
**COLLECTIVE MINDFULNESS is the key preventing harm!**

**Human beings in organizations have:**



**Expectations  
Normalization  
Automatic Processing**

**Enemies of Collective Mindfulness**



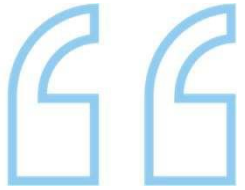
## Enemies of HRO Mindfulness

“If you want to manage the **unexpected** (patient/staff harm), you have to understand first, how **expectations** work and, second, how to engage them mindfully.” (pg. 23)

## #1 - EXPECTATIONS

### The Basic Argument (Olson, Roese, Zanna (1996):

1. Expectations are built into organizational roles, routines, strategies and create predictability
2. Expectations also create blind spots
3. Blind spots slow the recognition that something is wrong
4. Blind spots get larger because we inadvertently do a “biased” or filtered search for evidence that confirms that “all is well” as we “expected”
5. Over time, this can result in “disabling brutal audits”



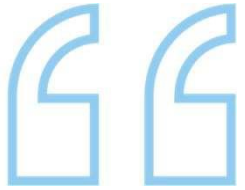
## Enemies of HRO Mindfulness

Normalization: the experience of **glossing over** the feeling of surprise, puzzlement or anxiety related to the sense that “something **isn’t quite right**, but you can’t put your finger on it”

## #2 - NORMALIZATION

1. Surprise is a short-lived moment, but is a solid clue that something is wrong
2. The normalization response changes our expectations and explains away noticing that something is off
3. Normalization protects us from feelings of fear related to unpredictability and lack of control
4. But it stops us from seeing a potential problem when it can be averted (near miss) or when it’s a manageable problem (safety event instead of a sentinel event)





## Enemies of HRO Mindfulness

Automatic Processing: a type of thinking that does **not involve any** effort or deliberation.

Familiarity with a task that requires less cognitive energy, in other words, going on **“auto pilot”**

## #3 – AUTOMATIC PROCESSING

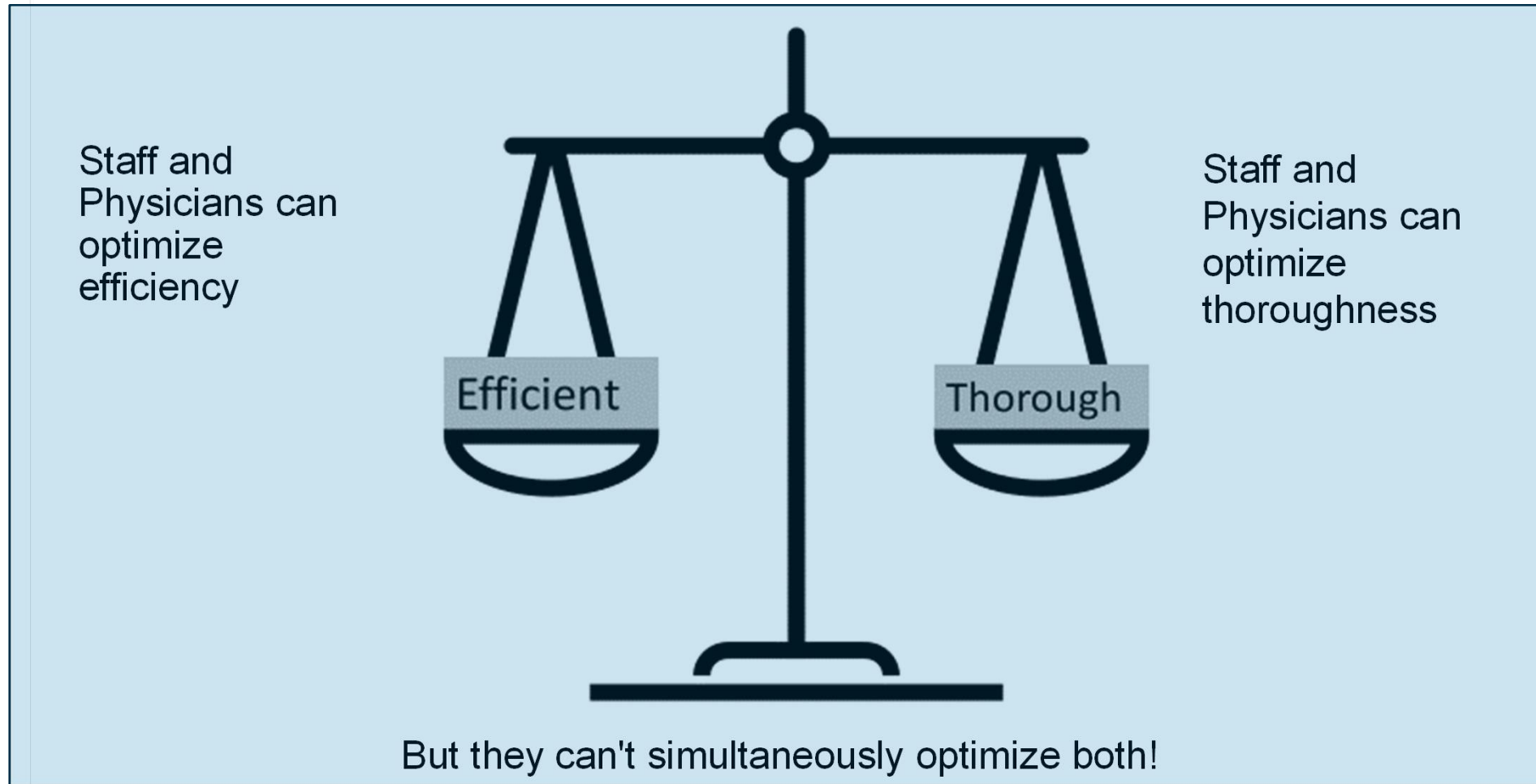
1. Central nervous system always chooses efficiency of energy, so once a person “memorizes”, automatic pilot will always be the choice
2. Automatic pilot prevents “in the moment” processing of sensory data – a blind spot for processing environmental cues



5 HRO Principles That Create

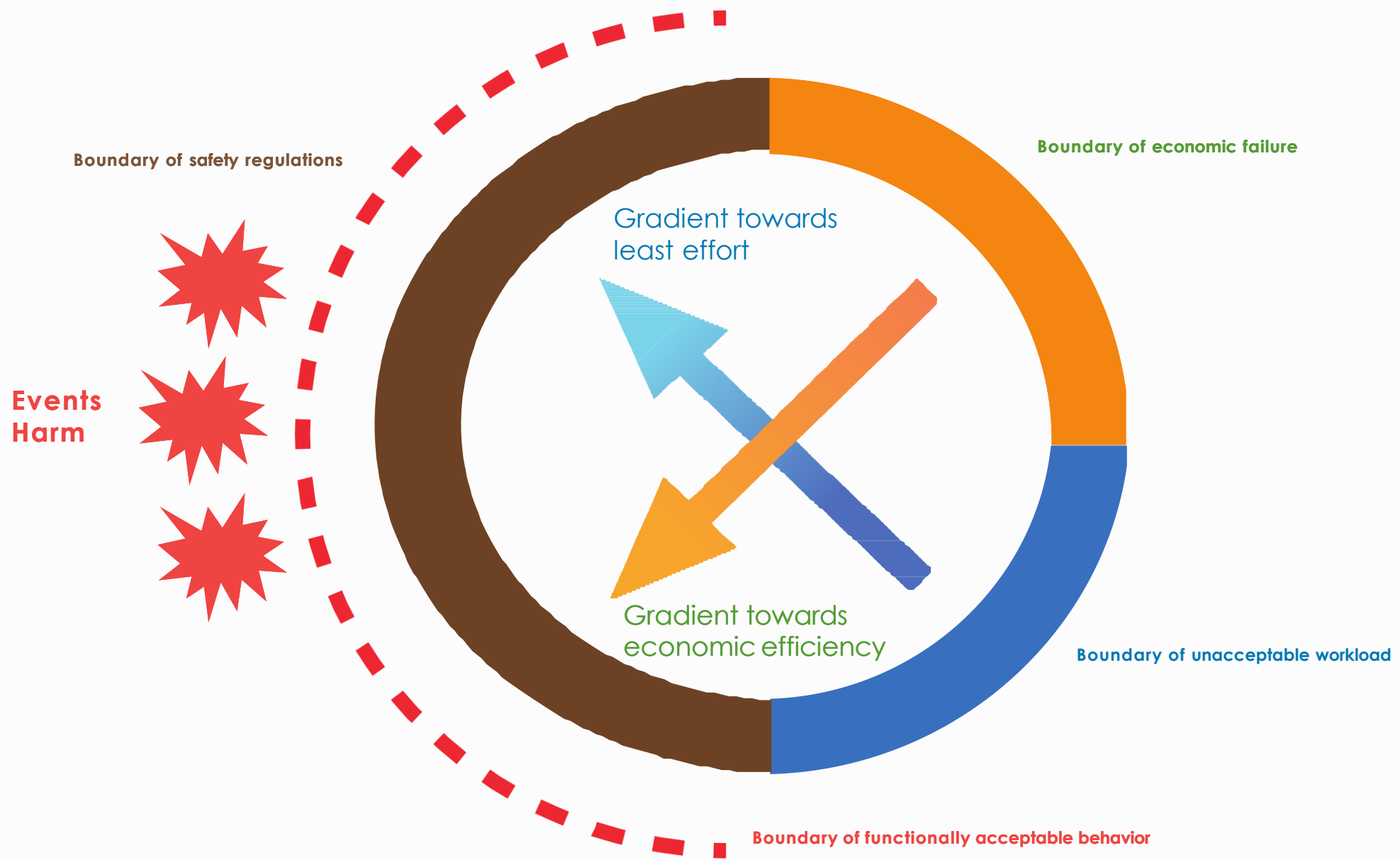
**Collective  
Mindfulness**

# The Reality – Daily Balance



**ETTO = Efficiency Thoroughness Trade-Off**

# A Day In The Life of a Healthcare Leader



# Connecting the 5 Principles of Human Performance to the 5 HRO Principles

People make mistakes (Error is normal)



People make mistakes (Error is normal)

Blame fixes nothing Context drives behavior



Blame fixes nothing

Learning and improving is vital Leadership response matters



Context drives behavior



Learning and improving is vital



Leadership response matters

Preoccupation with Failure

Commitment to Resilience

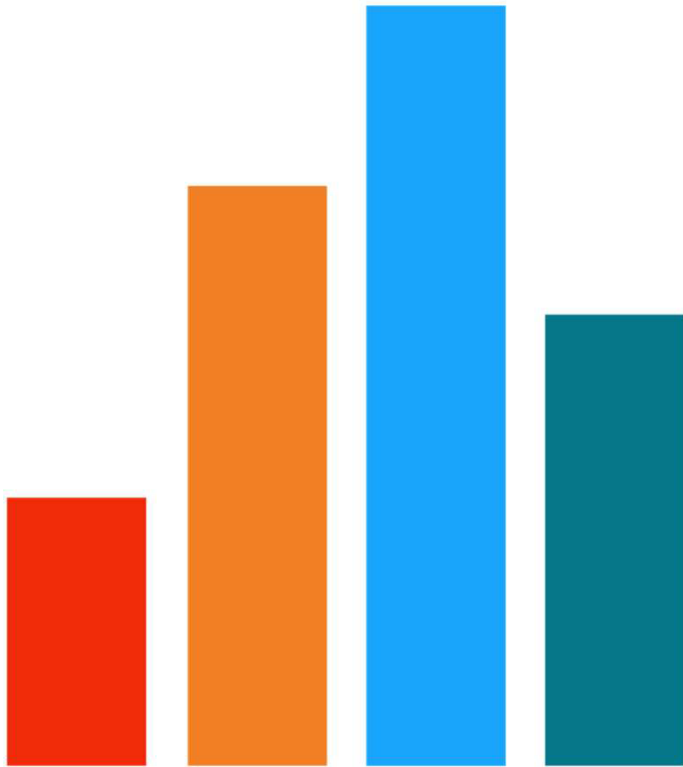
Sensitivity to Operations

Reluctance to Simplify

Deference to Expertise



# HRO Radio Post Episode Results for 2023



# STATS

# 1682

Total attendance across  
9 episodes

# 4.85

Overall star  
rating out of 5!

# 705

Unique  
listeners

# 15%

Post-episode survey  
response rate

# 97%

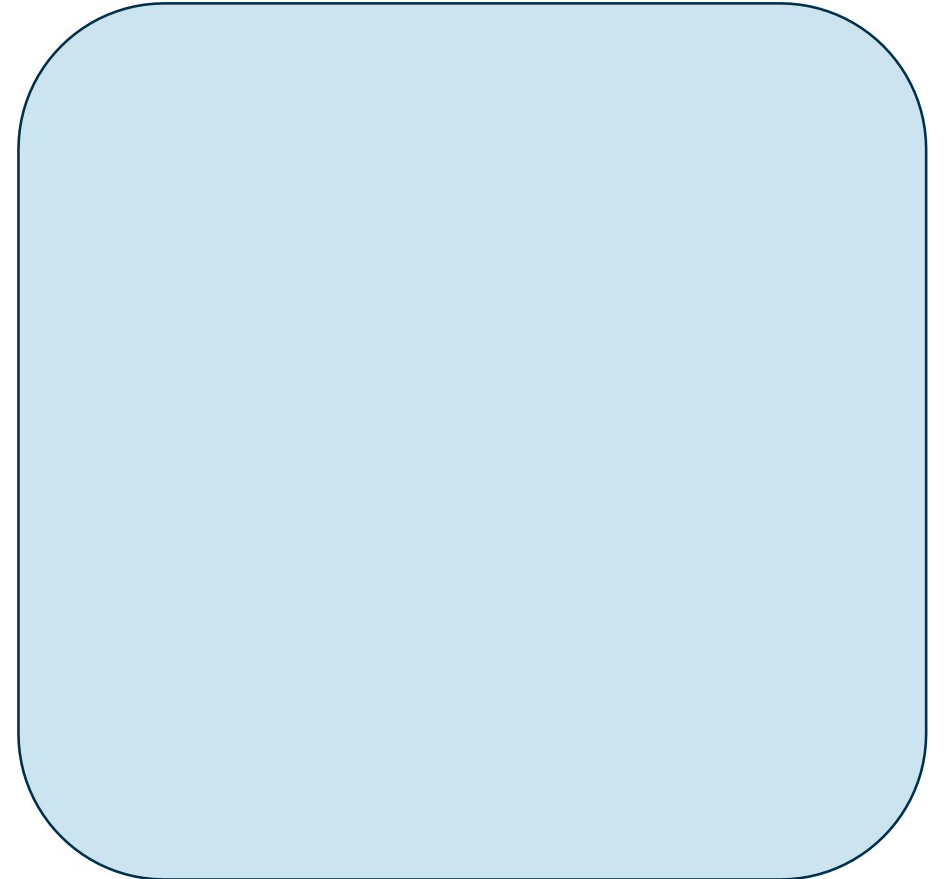
“Yes, I’ve learned something new from  
this episode.”

# 91%

“Yes, I’ve come away with something  
usable in my work.”

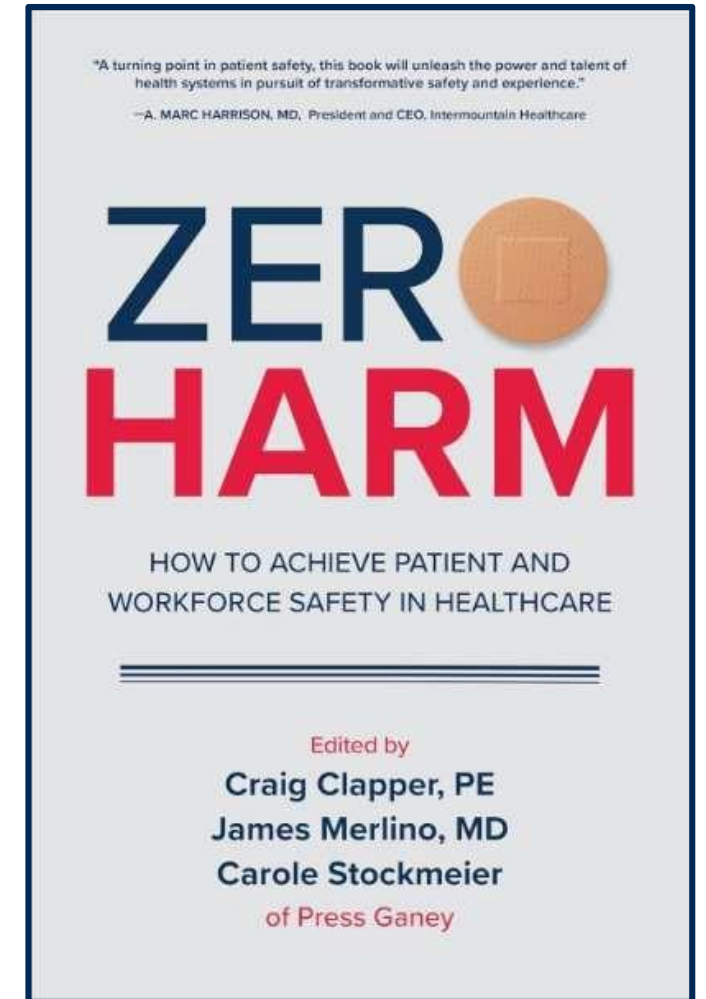
# Season 1 | Learnings

- Audience appreciates and likes interaction between co-hosts and guests
  - Documented more standard work!
- Attendees want to hear from front line staff, physicians, as to “how they do it” stories get a lot of interaction
  - Shifted focus to “what the work looks like in operations”
- Need to incorporate presenters from various care settings and markets
  - Invited guests earlier to provide more planning time
- Offered Nurse Continuing Education Credits
- Music and polls build engagement
- Keep slides simple
- Need to build awareness, many colleagues unaware
- Sign on early to perform tech check before start of meeting



# SEASON 2 | The HOW of a High Reliability Organization

- Connected the dots between HRO and awesome 'work happening' across the organization
  1. Daily management system rollout
  2. Reliability in workplace safety
  3. Emergency room to inpatient bed processes
  4. Applying the Just Culture algorithm
  5. Potential of Artificial Intelligence on care delivery
  6. Failure Modes Effects Analysis (FMEA) Simulations
  7. National Cancer Support Line rollout
  8. Person and Family Centered Care
  9. Clinical Guidelines and Health Equity
  10. Human Factors and System Engineering
- Opened each episode with a citation from 'Zero Harm' to introduce content



# Speak Up Culture Drives a Safety Culture



# FMEA Simulation of Prenatal Video Visit – Remote Perinatal Monitoring



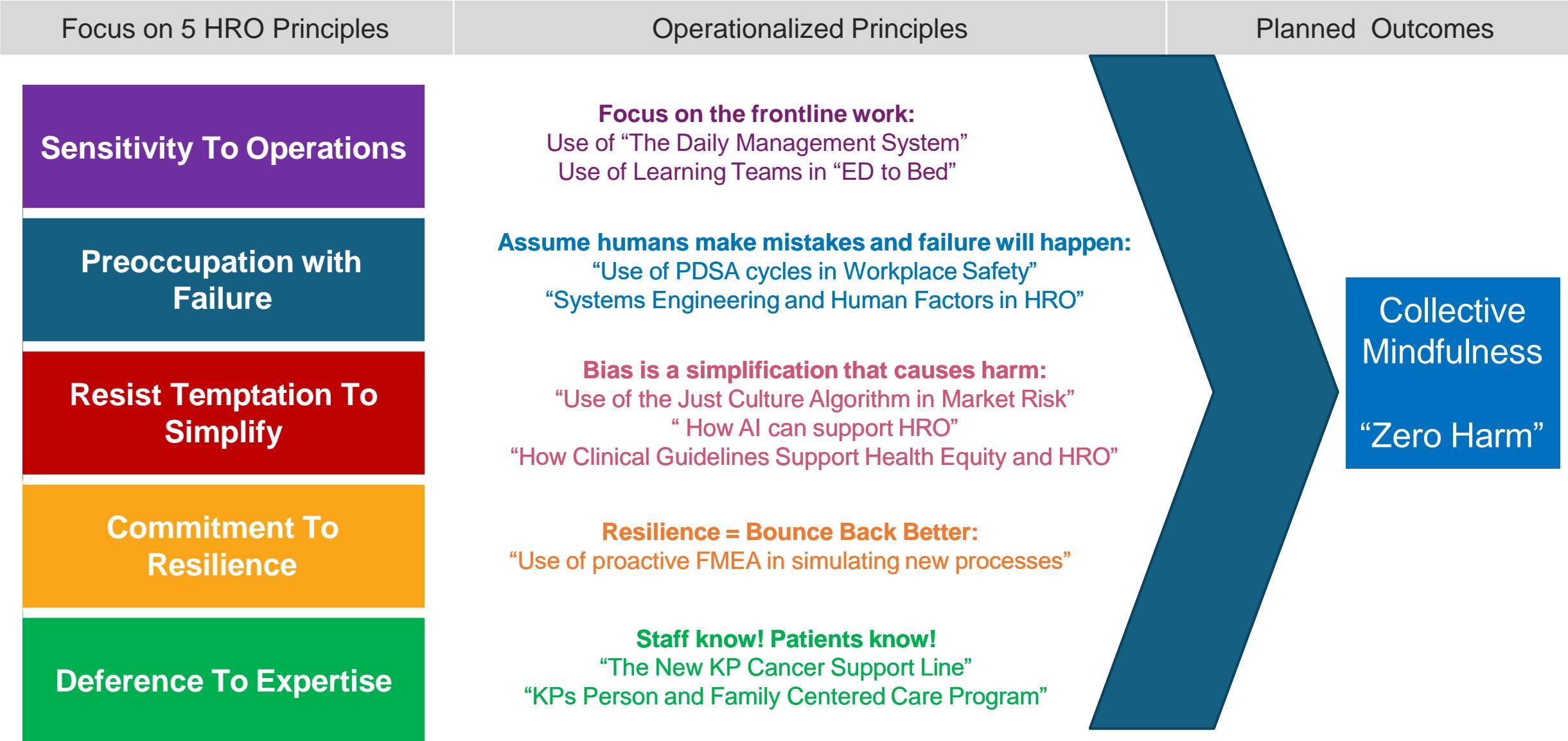
Video Visit



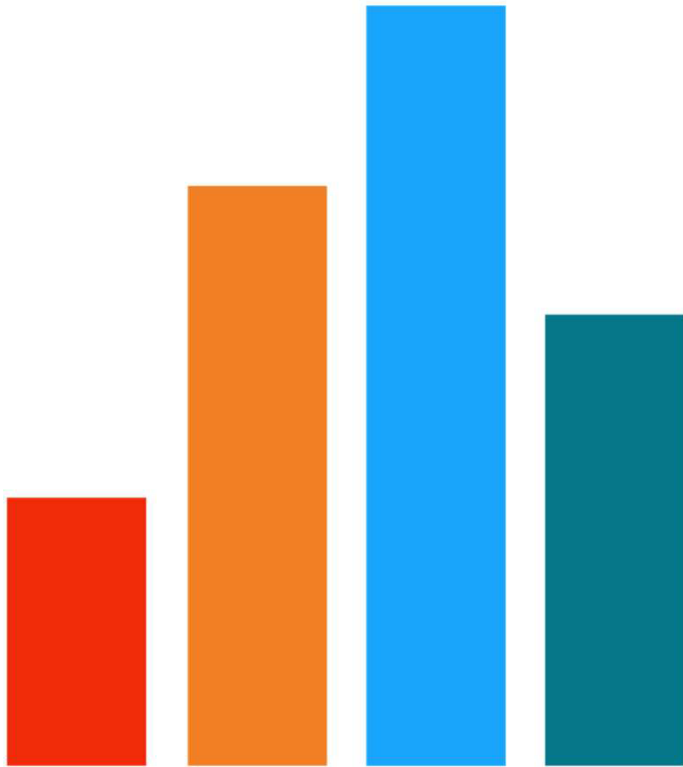


# Engineering a <sup>Better</sup> ~~Safer~~ Healthcare System

# 2024 Summary | Connecting the Principles to Operations



## HRO Radio Improvements 2024



# STATS

# 1753

Increased Total Attendance  
across 10 episodes

# 800%

Increased Physician  
Attendance

# 824

Increased Unique  
listeners

# 20%

Increased Post-  
episode survey  
response rate

Increased  
Diversity of  
Listeners  
Across  
Organization

**10% → 17%** Southern California Market

**14% → 17%** Markets outside of California

# What about the FUN??

## Comments from our listeners...



“**Love the topics** and real-world (and current) applicability of the discussions!”

“I’ve really enjoyed the **energy, safety, and information sharing** that occurs on HRO Radio! Keep it coming!”

“Thank you for this program. It's something **enjoyable** and **different** from all my other meetings 😊

“Thank you for creating a **safe and fun environment** for discussing these sensitive topics.”

“I love the **real talk** and **real support.**”

“**FANTASTIC EPISODE!** HRO and Equity was **so unexpected and useful for all aspects of life.** Really appreciated everything they had to say, and **the lightbulb went on** for me on how to improve how I "communicate," verbally and non-verbally, with all people.

# Today's Key Takeaways

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Outcomes of being a HRO (high reliability organization) are not only limited to patient and staff safety but also extend to patient experience and staff engagement.

HRO principles affect all aspects in operations and this work is NOT easy.

Interactive psychologically safe engagement is an attractive delivery mechanism to expand thinking and spread an HRO culture.



# Season 3 planning is well underway!

- **Focus: What individual leaders can do to enculturate HRO**
- **Integration of HRO Principles and TeamSTEPPS Tools**
- **Connecting the dots between HRO and your Daily Management System**
- **More to come...**



Thank  
you

Kaiser Permanente  
National Health Plan and Hospital Quality

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[Celine.Gray@kp.org](mailto:Celine.Gray@kp.org)

# Final Reminders

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- **Evaluation**

- Please complete the evaluation form that appears on your screen once the webinar ends

- **Continuing Education**

- Create a Duke OneLink account if you have not done so
  - Instructions can be downloaded from the Files pod or your registration confirmation email
- Text **LUTHOQ** to (919) 213-8033 within 24 hours



**Questions? Stay in Touch!**

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