# MSN Coursecast Show Notes

## Episode 52: Shared Leadership (NR663)

Dr. Cari Simpson and Dr. Mariah Hockin discuss Shared Leadership.

Transcript

DR. SIMPSON:

Hello everybody. My name is Dr. Cari Simpson and I am an associate professor for the MSN accelerated track. And today we are going to have a discussion for our podcast number 2 in NR663. We're going to be discussing the microsystem analysis and the high-performing microsystem. But before we begin our discussion, I would like to introduce you to Dr. Maria Hockin, who is an Assistant Professor in the MSN accelerated track. So Dr. Hockin, and thank you so much for joining us for this very important discussion.

DR. HOCKIN:

Yes. Thank you so much for this opportunity. My professional background includes working as an acute care bedside nurse for eight years, serving as a Clinical Nurse Leader or CNL, on a 40 bed general medical unit for five years, and a variety of teaching experiences including clinical online and face to face. I received my CNL in 2013 through Grand Valley State University and my DNP in 2017 from the University of Michigan. I am proud to say I started as a full-time faculty member at Chamberlain University in January of 2020.

DR. SIMPSON:

Well, we are so happy to have you join us on this call today. So, what I would like to start with, Dr. Hockin, is, can you discuss; What is a microsystem?

DR. HOCKIN:

As defined by the Institute for Healthcare Improvement, or the IHI. A clinical microsystem is a small interdependent group of people who work together regularly to provide care for specific groups of patients. This small group is often embedded in a larger organization, such as a hospital. Formed around a common purpose or need, these groups, or micro systems, may comprise discrete units of care, such as a neonatal intensive care unit, or a spine center. A general clinical micro system includes, in addition to doctors and nurses, other clinicians, some administrative support, and a small populations of patients with information and information technology as critical participants.

DR. SIMPSON:

So, I would think based on what you're saying is most of us are involved in microsystems in one way or another?

DR. HOCKIN:

Yes, certainly! In our duties. Yes. Especially since many nurses work in the hospital setting, and so if you're working on a particular unit that would be considered your microsystem. And as full-time faculty for chamberlain University, you and I would work within the microsystem of the accelerated track. So, microsystems are found everywhere.

DR. SIMPSON:

Okay, great information. So, Dr. Hockin, what makes a high performing microsystem different?

DR. HOCKIN:

Yes, so a high performing microsystem entails awareness as an interdependent group with the capacity to make changes. They connect routine daily work to the high purpose of benefiting the patients, responding successfully to strategic challenges. Measuring the micro systems performance as a system, and juggling improvements all while taking care of patients. In addition, many studies have indicated high performing microsystems include strong leadership, strong organizational support, they have a staff focus, there's an emphasis on a continued education and training, there's staff autonomy and interdependence, there's definitely that patient focus, but there's also a community and market focus. There is a focus on performance and measuring results, process improvement, and information technology. So, a lot of moving pieces there that are continually changing. And many times, and in my experience, you can feel the difference in the culture of a high performing micro system, even within several minutes of stepping foot within that setting. Staff attitudes are positive, management is visibly present and supportive, and patients express their satisfaction openly.

DR. SIMPSON:

I absolutely agree. I know many at times being in microsystems and the difference between a high performing versus a either non-existent or lack of collaboration can really make a difference. So, thank you for that information. So, I now want to go on to the next question. So, for our students there in this practice, as they're in the focus to the clinical nurse leader. How would you determine your microsystem setting to be high performing? So, how would they know that? So, maybe they might have some aspects which are, or maybe you can discuss your own experiences as to what we're present and lacking.

DR. HOCKIN:

As I see you now, I certainly felt that I worked on a high performing unit or microsystem. And support started really from the top down. The hospital administrators were very supportive of change and change initiatives. Staff had a strong focus of the organization. So, the staff were familiar with the organization's goals and other measurement performance-based criteria. The manager’s motto was, I work for the staff. The staff does not work for me. And she portrayed her words and her actions, which I think was such an important part of the leadership focus. In addition, I kept close track of our unit data, educational needs, complex patient cases, and organizational goals. I served as a support and a resource for the staff, many of which considered me as a friend and not simply a supervisor or a person

holding a higher position. Patients received visits from hospital personnel at all levels and concerns were immediately addressed. Throughout the hospital, the unit in which I worked, had the highest employee satisfaction scores and it was observed as the go-to unit for change initiatives and pilot interventions. It was truly a pleasure working in such a positive culture and high performing system.

DR. SIMPSON:

Thank you for the great example. And it's so important again, like you said, that being a support and a resource where stuff feel that trust to come to you. So that's really important as a member of the microsystem. I want to go onto the next question, Dr. Hockin. What is a micro system analysis or assessment? I do an assessment basically, and what are the tools that are available to our students in their role as a CNL?

DR. HOCKIN:

To improve outcomes, it's important to understand that health care micro systems are complex adaptive systems which require insight and analysis and nontraditional decision-making. Because of the complex nature decision-making is difficult as systems issues are often multifaceted with intertwine components affecting different units within the microsystem. So, it is very important for the clinical nurse leader to understand the organization at the process level in order to determine where change is needed. The Institute of Healthcare Improvement, or again the IHI, has a clinical microsystems action guide, which is a helpful tool to provide an assessment of the microsystem. It offers insight into asking questions about the organization and specifically looks at why things are being done the way they are, and what are the steps needed to make improvement changes. As outlined in this tool, one of the first steps is to look at the organization as a whole and consider all perspectives such as financial, social, Information Systems, Infrastructure, politics, et cetera. So, this assessment can then be done with a visual presentation using the five Ps, which is a framework for assessing the microsystem in order to determine where change is needed. The five P's stand for Purpose, Patients, Professionals, Processes and Patterns. There are other assessment tools available such as staff surveys, personal skill assessments, and activities surveys. So, once you have completed and assess the five Ps, the next step is to look at your microsystem metrics. Dartmouth has a 'Metrics that Matters' tool that helps you consider what metrics are important to your organization, and step-by-step tools to determine performance data and targets, as well as what will work and what is working and what needs improvement. So, after reviewing the metrics, the next step is to determine an area for improvement. And lastly, develop a plan for change. So, in previous coursework, students may have developed their action plan using the John Hopkins tool. So, these tools, many of them are available for free and you do not need special permissions through the IHI, and you can find those at IHI.org, would be the website for that. And then we also have tools found within our MSN toolbox that correlate with the John Hopkins model.

DR. SIMPSON:

Such great information for our students with these great tools. Thank you so much. So just provide us an experience you've had with the process of a micro system analysis or assessment.

DR. HOCKIN:

I have used the clinical microsystem assessment tool through the IHI. And again, this tool is free to use, and it does not require any permissions. The tool encompasses leadership, organizational support, staff focused education and training, interdependence, patient focus, community market focus, performance results, process improvement, information, and information technology. So, as you can see, there's a lot of components to that assessment and is very thorough and detailed. And after using the tool a few times, you kind of are able to memorize the major points of the content. And really as a CNL, you get to the point where you're just continually assessing the microsystem in a mental facet while you are working on the unit. So, you really had all of these components in mind and you're constantly looking at all of these items as you're out on the unit, working with patients and staff. And again, this continual assessment is really necessary to keep the microsystem at a high functioning level. And these tools, again, whether it's through the IHI, or you choose to use a different tool, the major components that are included are really the components of a high performing micro system. So, the goal is to get your microsystem to that level.

DR. SIMPSON:

That's great information. Was there any area on that tool that maybe took a little more getting used to as you became more familiar? Just based on your experience, you may not have any answer to that, but there's something I was wondering, you know, utilizing this, as students go through this, was there any area on that toll that took some getting used to?

DR. HOCKIN:

Well, one area that I had to kind of get creative with and sort of struggled has to how we were meeting that component as the community and market focus. Especially working in the hospital setting, you don't really have a lot of experience with community outreach and market at the micro system level. That's typically something the organization as a whole does. However, because our unit really was general medical in nature, but we had a large population of geriatric patients, and we were geriatric certified for the hospital. So, I really tried to help develop some community discussions where we would talk about adverse medications for the geriatric population, and we've talked about some community resources, and brought a social worker in. And so, when that one area I struggled with was that community or market focus and try again to get creative on how we could reach out and have that community connection. Thank you for that question.

DR. SIMPSON:

Thank you for that feedback. That's excellent. As our CNL students are going to be looking at graduation upon completion of their practicums. What would you recommend a new CNL look for, or ask in an interview when determining the microsystems setting, they are considering for employment?

DR. HOCKIN:

As a new CNL, it would be great to land a job on a high-performing microsystem. But if not, do not

worry, there is a lot of gratitude working within a micro system to bring it to the level of high performing. So, I would use some of the content in a micro system assessment tool to discuss, perhaps during an interview. And it's never a bad thing to ask questions of those who are interviewing you to get a better idea of the culture on the unit. So, for example, you could ask about the leadership style and the unit. Do the leaders promote autonomy and innovation? What personal characteristics to the leaders find most important in working with the staff? Another example of an area to focus maybe on the staff. So, what is the orientation process on the unit? What are the expectations of staff in terms of continuing education and professional growth? And a great question to ask interviewers is just simply what they love about their jobs on the unit. So, you could really learn a lot from the individuals and the attitudes on the unit. Just, again, simply asking what, what's positive in their own jobs. And that can really, again, that's an open-ended question that can garner a lot about the culture in the workplace. And so, after reviewing a microsystem and assessment tool, there may be areas of the tool that are more or less important to you as an individual. And so, I would encourage you to ask questions from the areas that you hold most important.

DR. SIMPSON:

Dr. Hockin, I really appreciate your time and answering these great, great questions for practicum students in NR663. I would just like to ask if you could just provide a brief summary of some of the key points you would like for them to take away from this podcast.

DR. HOCKIN:

Yeah, so again, all of us are going to work in some sort of microsystem, whether it's a microsystem within the hospital setting or within a university or educational setting, or maybe you're an outpatient clinic. But the microsystems are present everywhere. And it's those individual systems that really add to that organization and make the organization as a whole what it is and how effective it is and that leads to positive patient outcomes. So again, the microsystems, while you are working within your own microsystem, you don't want to work in silos, so you have to look at, again that organizational picture and collaborate with your other microsystems. Again, we really are shooting to have a high performing microsystem, a group of high performing microsystems that can then add to the success of the organization. And by doing those analysis or assessment over and over, almost like a PDSA type plan, do study act, in the way that you're doing those assessments, really helps to keep that microsystem in shape. It helps to keep it high performing. And then it gives you, as the CNL, you always have an idea of where you are in terms of that spectrum. From just getting by to being high performing. And again, you will learn the areas and components of those assessments and be able to do them just simply in your in your head after a certain time, which is great because again, that's a continual process. And when the CNL is looking for a job as a newly out of school, again, it's great to be in a high-performing microsystem, but there's a lot of satisfaction from working with a microsystem to bring it to the level of high-performing. So, either way, the CNL has a pivotal role in the microsystem. And I thank you so much for the opportunity to discuss the characteristics of a microsystem and sharing my perspective of working as a CNL within the micro system environment.

DR. SIMPSON:

Oh, we are so happy that you were able to join us today and discuss these very important pieces of the microsystem and support for CNL students. And I wish all our students the best look as they continue in their practicum journey. Thank you.

DR. HOCKIN:

Thank you.