

RELATIONAL COORDINATION
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TRANSFORMING RELATIONSHIPS FOR HIGH PERFORMANCE

Transforming Relationships for Organizational Change

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Challenges we face

- ◆ Pressure in every industry to deliver *better* quality and *more* innovation at lower cost
- ◆ First in manufacturing, then transportation, then service sector
- ◆ Now in healthcare, social care and education
- ◆ Need to do more – but with less
- ◆ Is this even possible?



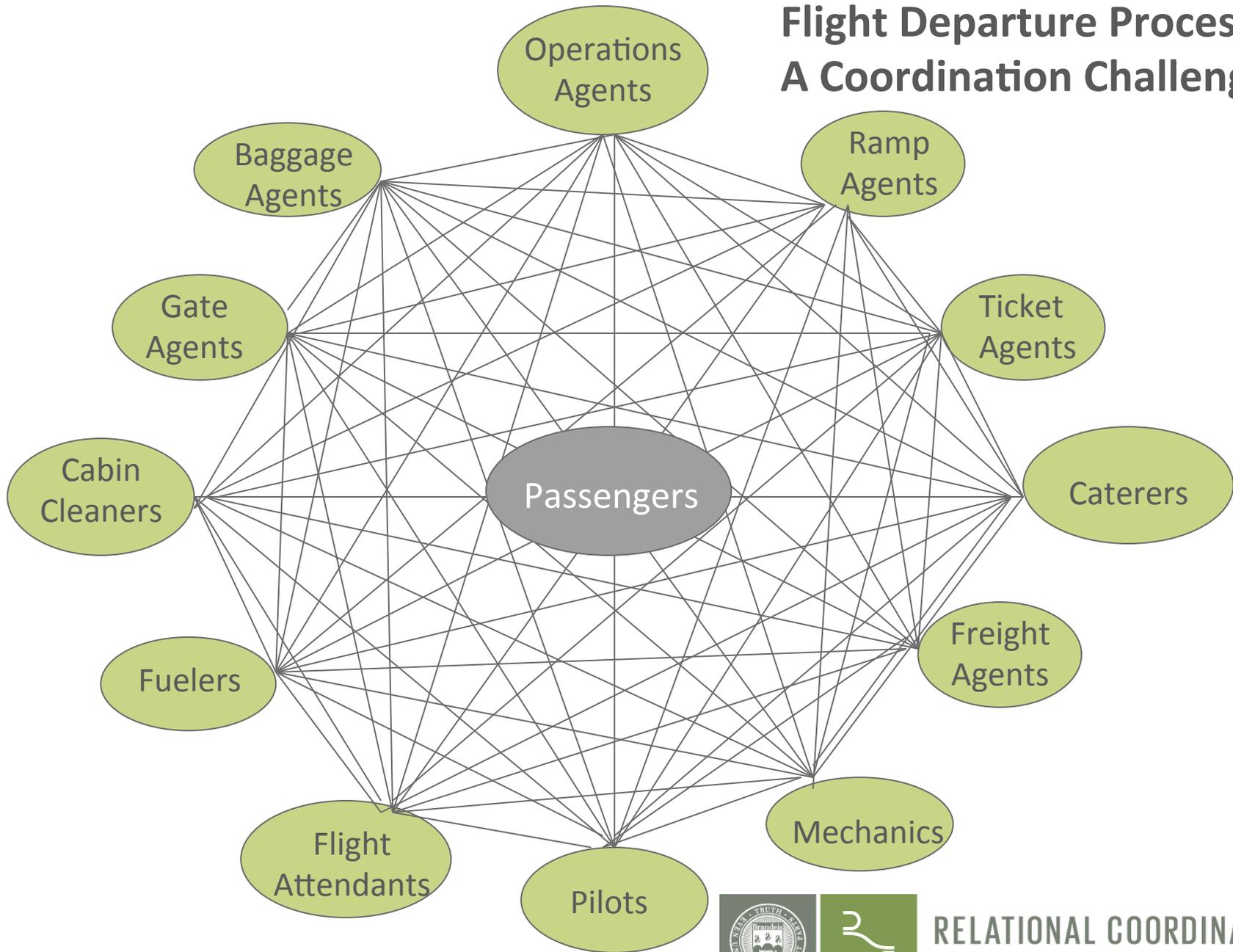
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May be possible by
coordinating our work
more effectively



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Flight Departure Process: A Coordination Challenge



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AMR: Frequent and timely communication

“Here you don’t communicate. And sometimes you end up not knowing things...On the gates I can’t tell you the number of times you get the wrong information from operations...The hardest thing at the gate when flights are delayed is to get information.”



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SWA: Frequent and timely communication

“Here there’s constant communication between customer service and the ramp. When planes have to be switched and bags must be moved, customer service will advise the ramp directly or through operations... Operations keeps everyone informed. It happens smoothly.”



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AMR: Problem solving

“If you ask anyone here, what’s the last thing you think of when there’s a problem, I bet your bottom dollar it’s the customer. And these are guys who work hard everyday. But they’re thinking, how do I stay out of trouble?”



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SWA: Problem solving

“We figure out the cause of the delay. We don’t necessarily chastise, though sometimes that comes into play. It’s a matter of working together. Figuring out what we can learn. Not finger-pointing.”



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AMR: Shared goals

“Ninety percent of the ramp employees don’t care what happens. Even if the walls fall down, as long as they get their check.”



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SWA: Shared goals

“I’ve never seen so many people work so hard to do one thing. You see people checking their watches to get the on-time departure. People work real hard. Then it’s over and you’re back on time.”



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AMR: Shared knowledge

Employees revealed little awareness of the overall process. They typically explained their own set of tasks without reference to the overall process of flight departures.



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SWA: Shared knowledge

Employees had clear mental models of the overall process -- an understanding of the links between their own jobs and the jobs of their counterparts in other functions. Rather than just knowing what to do, they knew why, based on shared knowledge of how the process worked.



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AMR: Mutual respect

“There are employees working here who think they’re better than other employees. Gate and ticket agents think they’re better than the ramp. The ramp think they’re better than cabin cleaners -- think it’s a sissy, woman’s job. Then the cabin cleaners look down on the building cleaners. The mechanics think the ramp are a bunch of luggage handlers.”



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SWA: Mutual respect

“No one takes the job of another person for granted. The skycap is just as critical as the pilot. You can always count on the next guy standing there. No one department is any more important than another.”



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Relationships shape the
communication through which
coordination occurs ...



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For better...

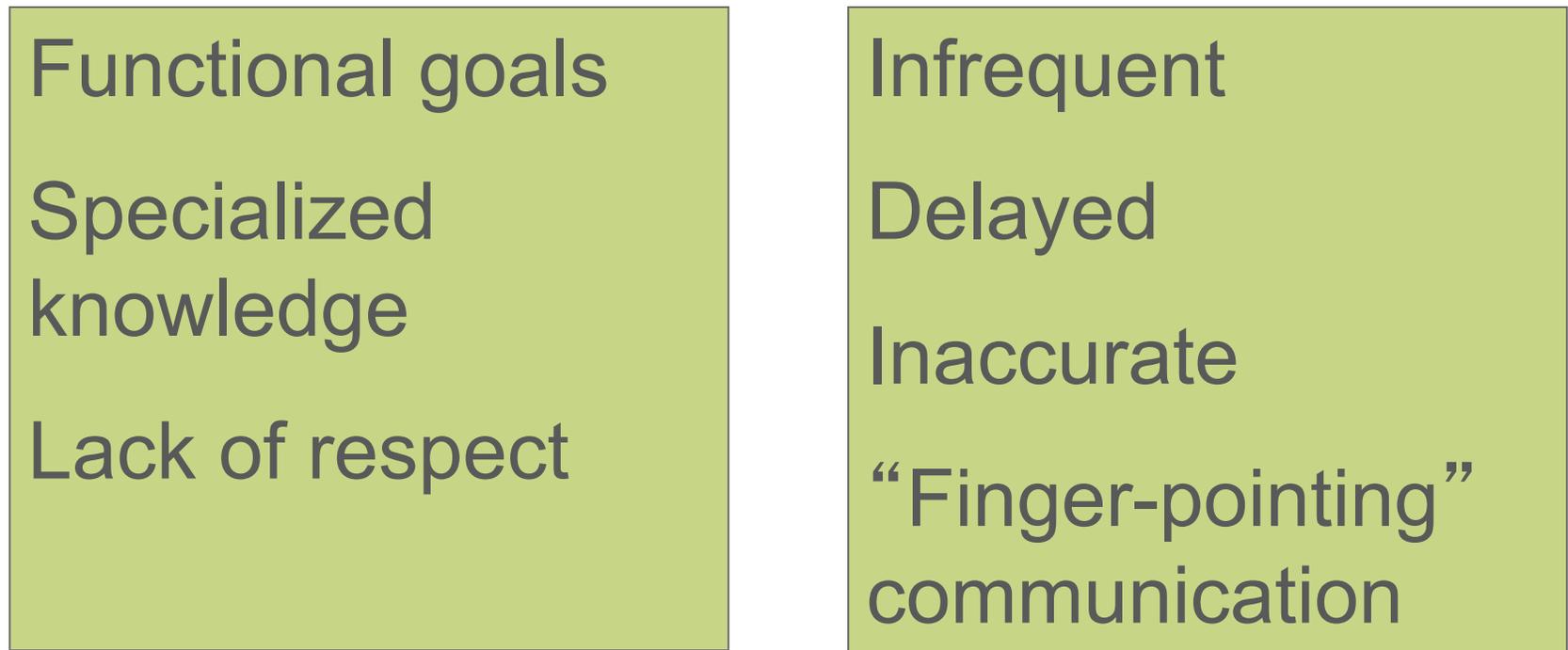
Shared goals
Shared knowledge
Mutual respect

Frequent
Timely
Accurate
Problem-solving
communication



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... Or worse



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This process is called

relational coordination

“Communicating and relating
for the purpose of task integration”



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Investigated performance effects of relational coordination

- Nine site study of flight departures over 12 months of operation at Southwest, American, Continental and United
- Measured relational coordination among pilots, flight attendants, gate agents, ticket agents, baggage agents, ramp agents, freight agents, mechanics, cabin cleaners, fuelers, caterers and operations agents
- Measured quality and efficiency performance, adjusting for product differences



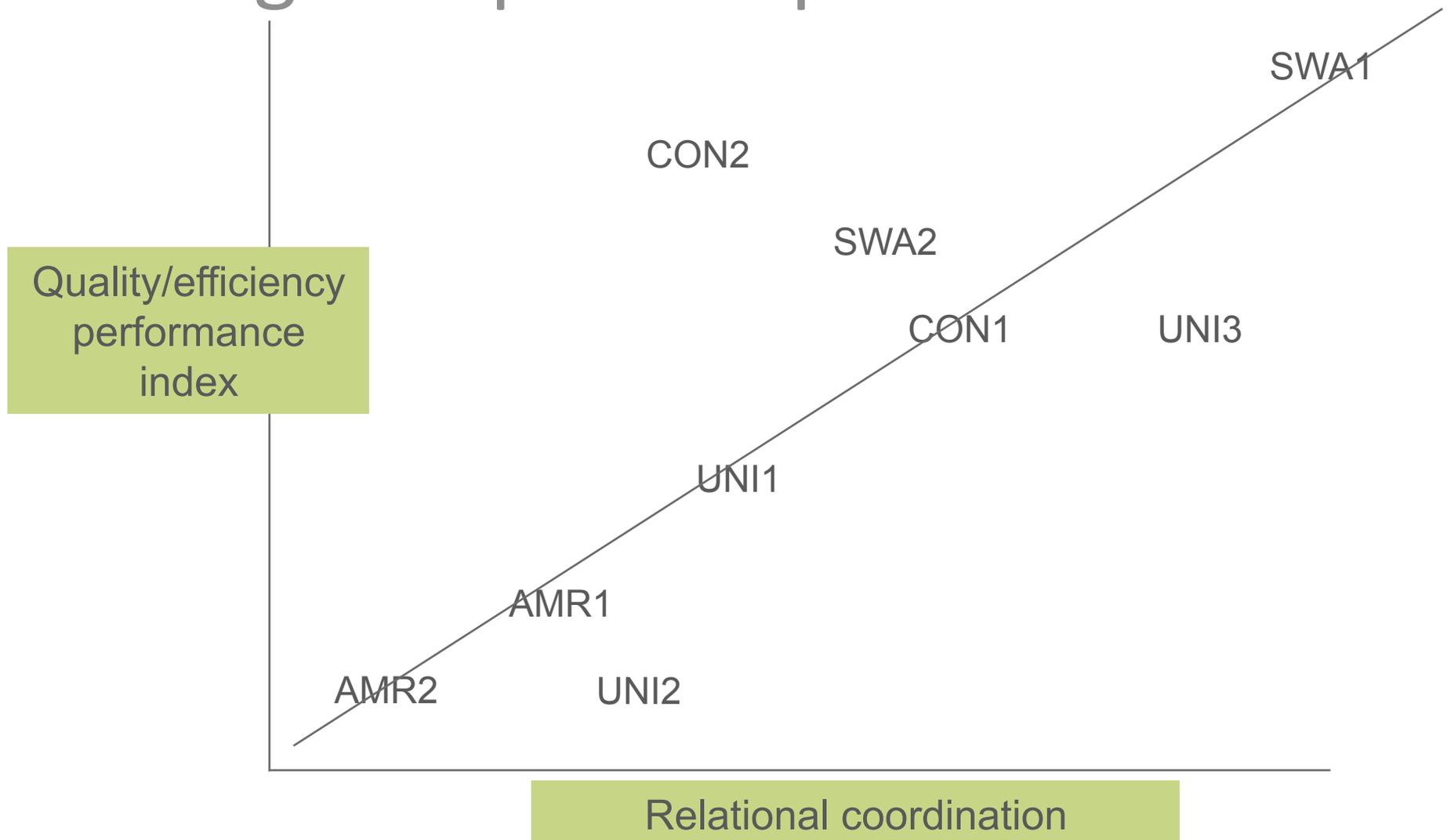
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Relational coordination drives flight departure performance

	Efficiency		Quality		
	Gate time/ flight	Staff time/ passenger	Customer complaints	Lost bags	Late arrivals
Relational coordination	-.21***	-.42***	-.64***	-.31*	-.50**
Flights/day	-.19***	-.37***	-.30***	.13	-.22+
Flight length, passengers, cargo	.79***	.45***	.13	.12	-.54**
Passenger connections	.12**	.19**	.09	.13	.00
R squared	.94	.81	.69	.19	.20



Relational coordination drives flight departure performance

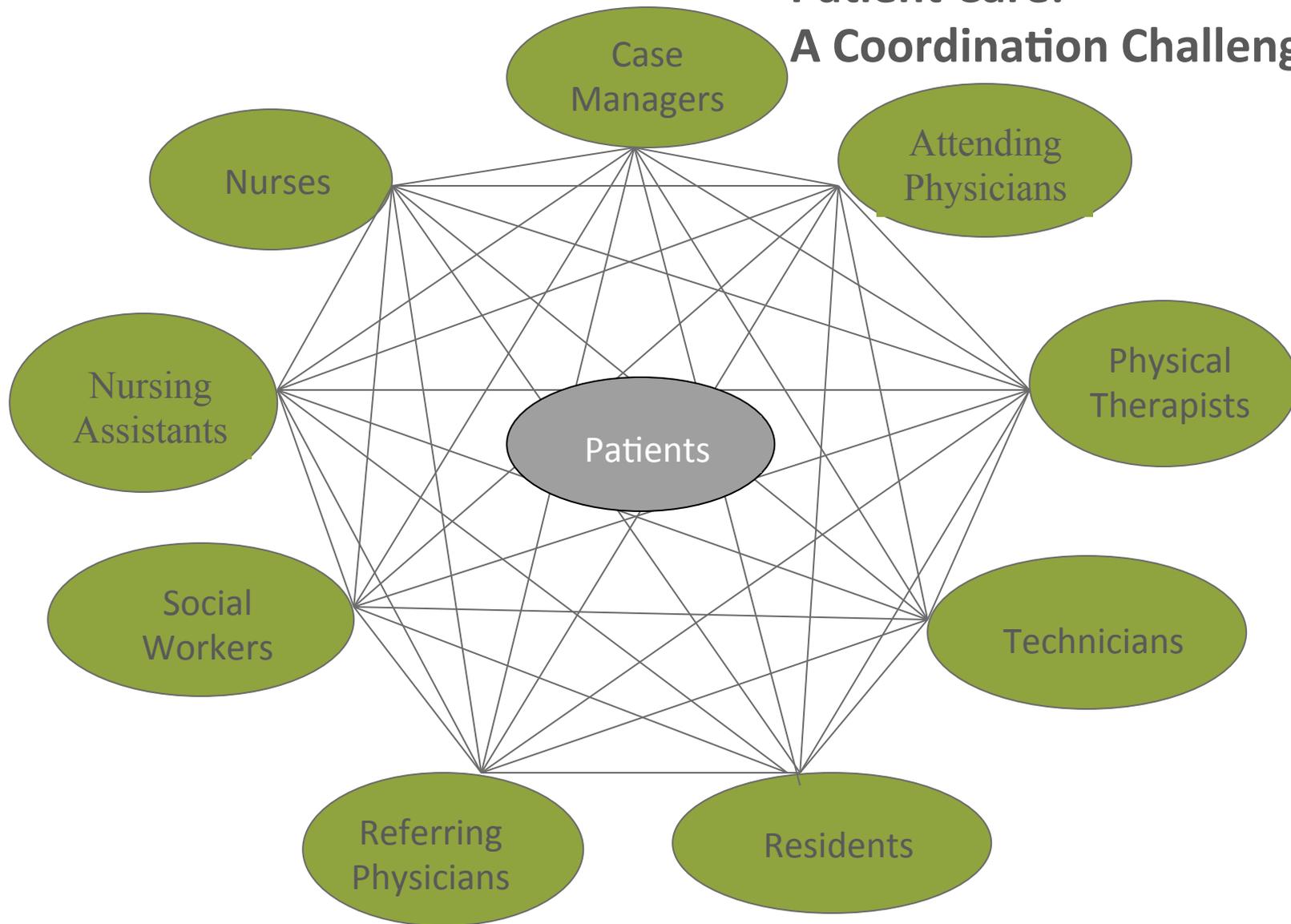


Does relational
coordination matter in
other industries?



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Patient Care: A Coordination Challenge



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Same study conducted in surgical setting

- Nine hospital study of 893 surgical patients
- Measured relational coordination among doctors, nurses, physical therapists, social workers and case managers
- Measured quality and efficiency performance, adjusting for patient differences



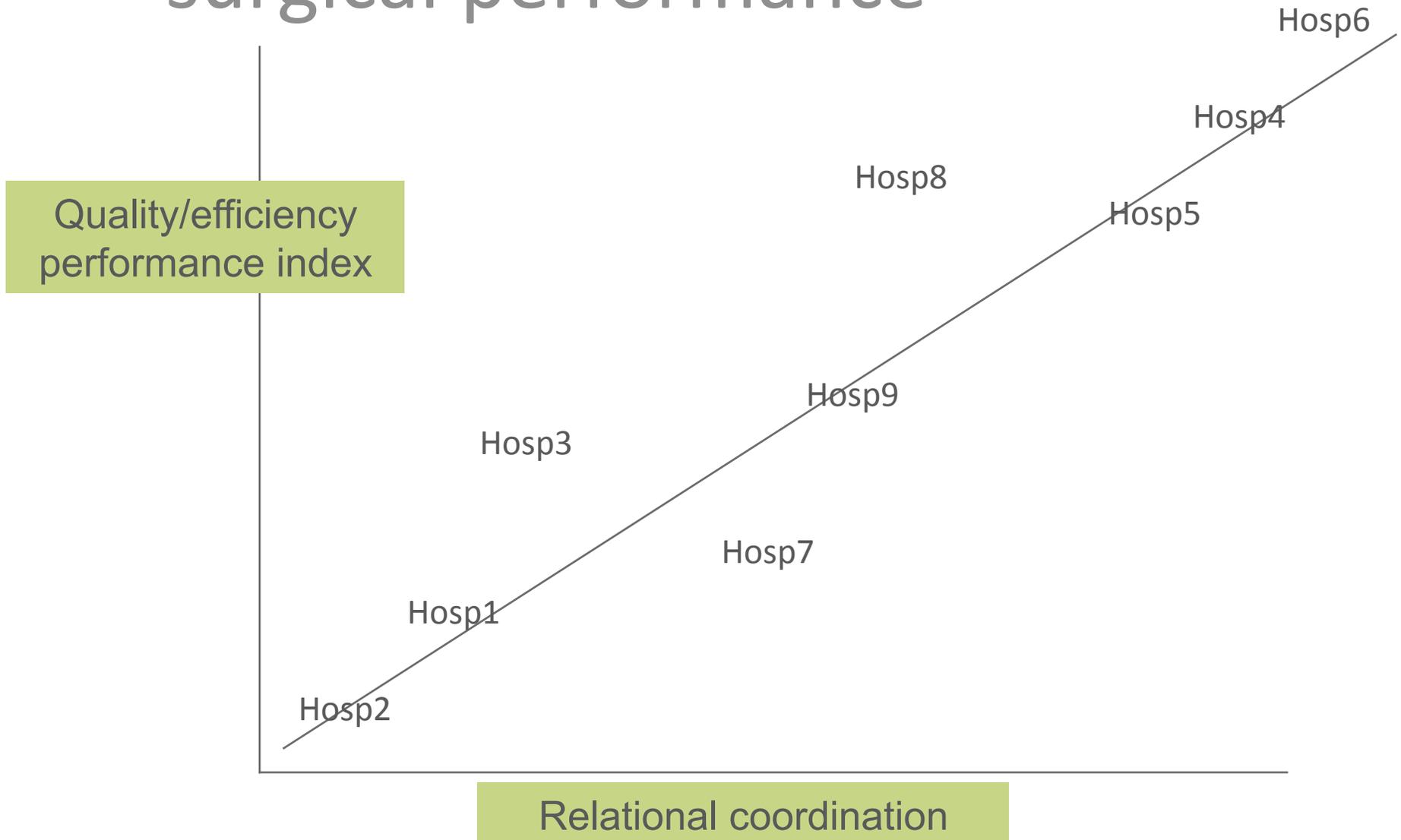
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Relational coordination drives surgical performance

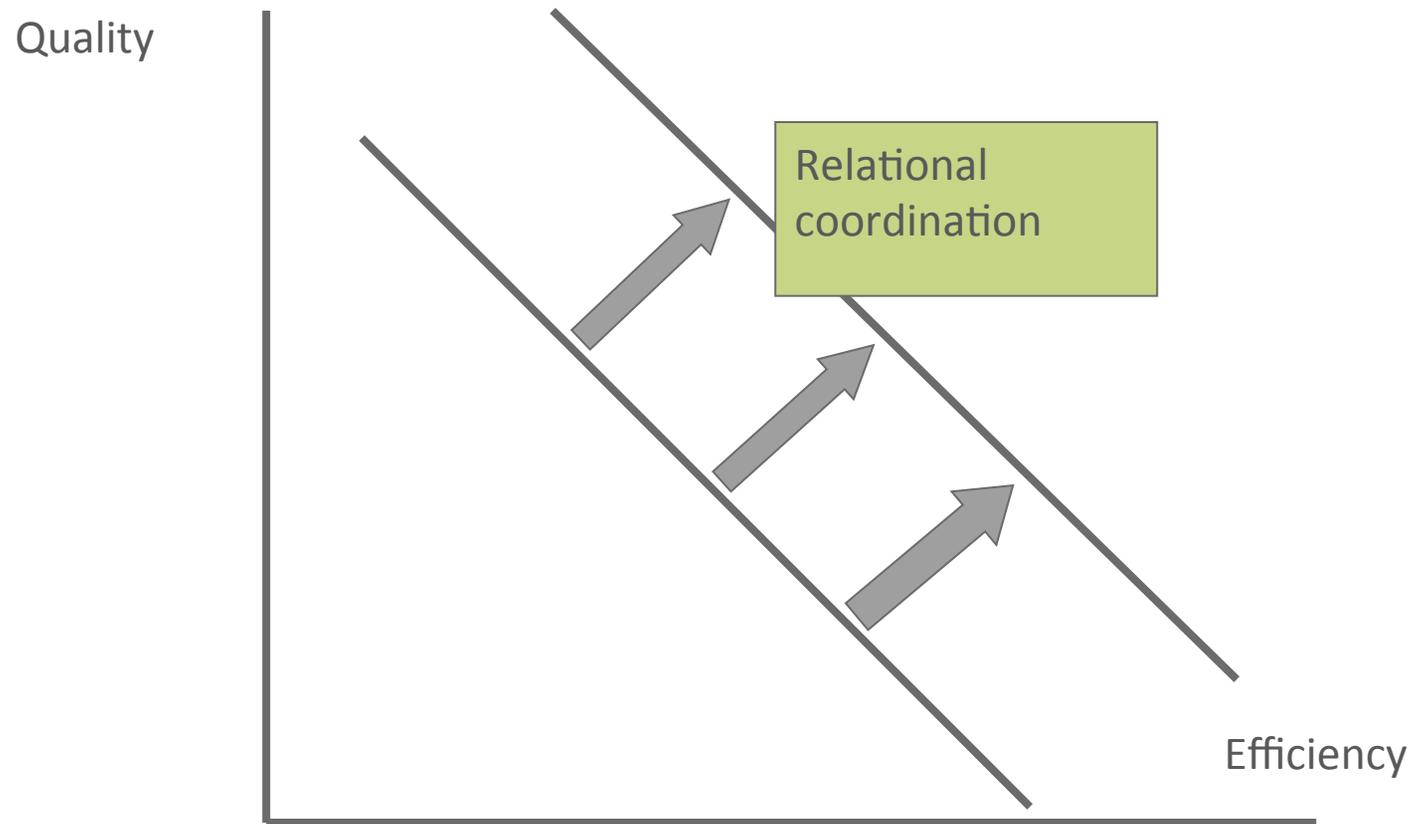
	Length of stay	Patient satisfaction	Freedom from pain	Mobility
Relational coordination	-.33***	.26***	.08*	.06+
Patient age	.02	.00	.01	.04
Comorbidities	.09*	.07	.01	.04
Pre-op status	.03	.01	.20***	.28***
Surgical volume	.11**	.10*	.06+	.03
R Squared	.82	.63	.50	.22

Observations are patients (n=878) in hospitals (n=9). Model also included gender, marital status, psychological well-being and race. Standardized coefficients are shown.

Relational coordination drives surgical performance



Relational coordination *shifts out* the quality/efficiency frontier, creating greater value



RC has been studied in many contexts

- Airlines
- Software
- Banking
- Pharmaceuticals
- Early intervention
- Early childhood education
- Long term care
- Surgery
- Med/surg
- EDs
- ICUs
- Maternity
- Peri-operative
- Primary care
- Chronic care



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Quality and efficiency outcomes -- but also positive worker outcomes

- Job satisfaction
- Career satisfaction
- Engagement
- Less emotional exhaustion
- Psychological safety
- Learning from failure
- Collaborative knowledge creation
- Innovation



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There are *other* useful responses to coordination challenges...

- ◆ Reengineering
- ◆ Total quality management
- ◆ PDSA
- ◆ Redesigning work flows
- ◆ “Lean” / six sigma



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Addressing technical issues is necessary but not sufficient

“We’ve been doing process improvement for several years, and we think we’re on the right track. But we’ve tried a number of tools for process improvement, and they just don’t address the relationship issues that are holding us back.”

- Bob Hendler, Tenet Healthcare Systems



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Why do relationships matter?

Relationships of shared goals, shared knowledge and mutual respect provide the *organizational culture* for process improvement or “lean



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Why do relationships matter?

Relationships of shared goals,
shared knowledge and mutual respect
enable participants to connect across
functional and organizational boundaries

So they can coordinate “on the fly”



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When does relational coordination matter most?

- ◆ Task interdependence
- ◆ Uncertainty
- ◆ Time constraints



Validated measurement tool

- Validated tool to measure relational coordination
 - Within workgroups
 - Across workgroups
 - Across highly distributed networks
 - Can include customers and suppliers
 - Can be measured at any level of leadership and across levels of leadership



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Dimensions of relational coordination

RC dimensions	Survey questions
1. Frequent communication	How <i>frequently</i> do people in each of these groups communicate with you about [focal work process]?
2. Timely communication	How <i>timely</i> is their communication with you about [focal work process]?
3. Accurate communication	How <i>accurate</i> is their communication with you about [focal work process]?
4. Problem solving communication	When there is a problem in [focal work process], do people in these groups blame others or try to <i>solve the problem</i> ?
5. Shared goals	Do people in these groups <i>share your goals</i> for [focal work process]?
6. Shared knowledge	Do people in these groups <i>know</i> about the work you do with [focal work process]?
7. Mutual respect	Do people in these groups <i>respect</i> the work you do with [focal work process]?

Also a diagnostic tool

- “Putting the elephant on the table”
- “Looking into the mirror”
- A starting point for conversations
- Helps to inform innovation and change



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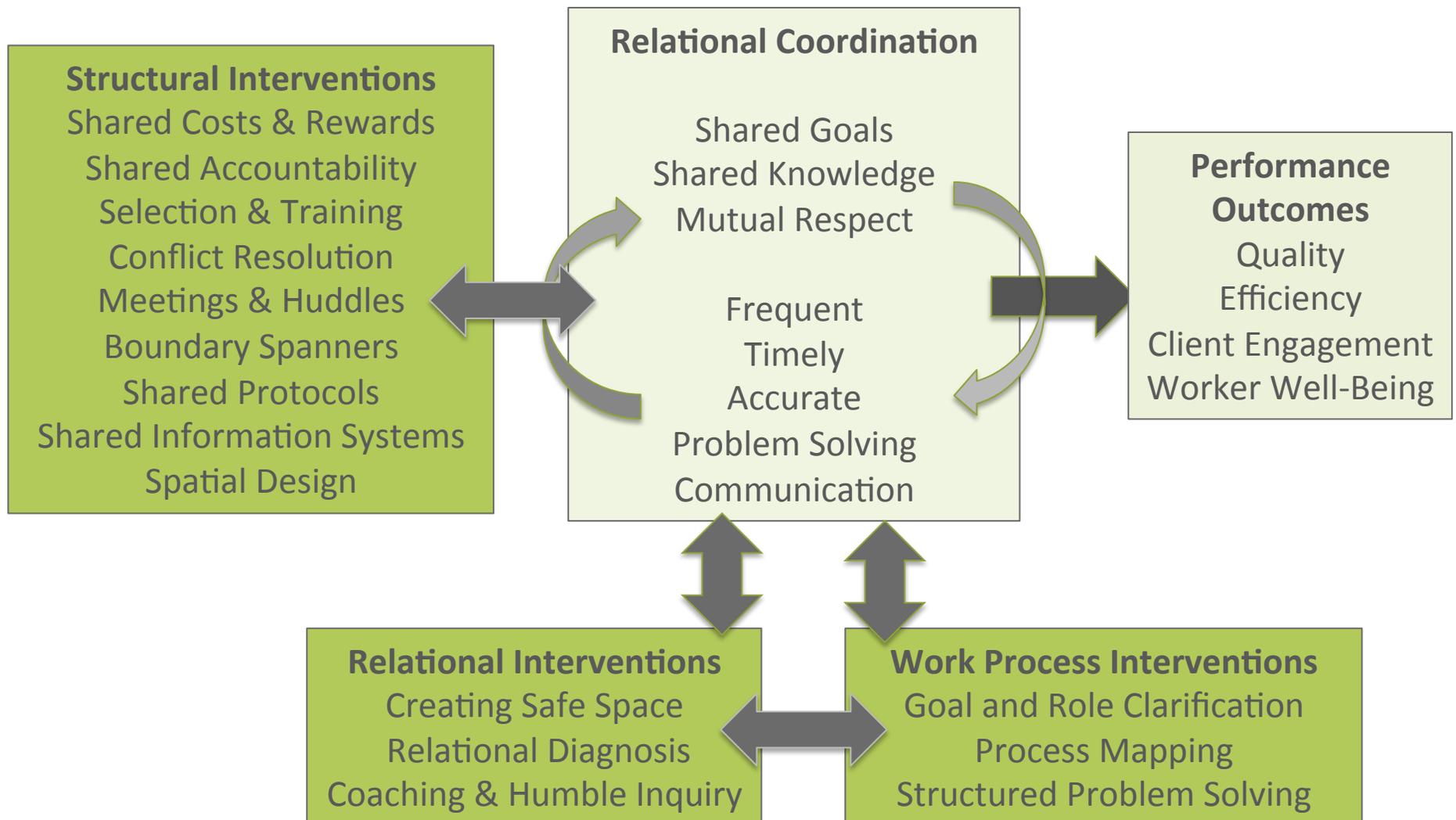
But where to start?

- Relationship patterns are deeply engrained in organizational cultures and professional identities
- Starting with new structures may not work
- New structures may feel imposed and inadequate
- People won't know how to use them



Relational model of organizational change

(Gittel, Edmondson & Schein, 2011)



Case studies in change

- Group Health Cooperative in Washington
- Varde Municipality in Denmark
- Dartmouth Hitchcock in New Hampshire
- Billings Clinic in Montana

Group Health Cooperative

- Integrated health system in Pacific Northwest
- Grew out of the post-WWII cooperative movement to provide care for fixed price
- Historic strength in primary care
- Significant financial/management/workforce challenges in early 2000s

Group Health Cooperative

- Implemented lean successfully in 26 primary care clinics
- Lean methods used to standardize work and eliminate waste
- Quality, efficiency and workforce outcomes improved – but some limitations were found

Group Health Cooperative

“With lean, we found that people got better at performing their own standard work, but when they had to go beyond and connect with each other in response to a patient need, it was not consistent.”

-Rob Reid, Group Health Research Institute

Group Health Cooperative

- For Medical Home 2.0, decided to integrate lean tools with relational coordination
- Members of the Primary Care Leadership Team got trained in relational coordination interventions then became the coaches
- Selected 6 clinics and randomly assigned 3 to “do RC”
- Employees participated in RC survey with response rates near 100%

Group Health Cooperative

”After our RC kickoff we had a little pushback from people saying ‘it’s the organizations fault that we are not a good team.’ But once they got their RC results none of the teams got stuck there. They went right to their working relationships.”

-Janice Wharton, Nursing Leader, Primary Care

Group Health Cooperative

"It's been very different than what we've done in the past, where the teambuilding has been more touchy feely and talking together about working together as a team. Whereas RC helped us focus on getting results as a work team, not just liking each other in the workplace."

-Janice Wharton, Nursing Leader, Primary Care

Group Health Cooperative

"In all the clinics, shared knowledge was low and so was timely communication... Without shared knowledge timely communication won't happen. Understanding what each other does and when it's supposed to happen helps them figure out what timely communication means for each role."

-Janice Wharton, Nursing Director, Primary Care

Group Health Cooperative

“They don’t have a lot of time to communicate in these clinics – but now they are using a yellow slip system in their huddle so they can bring a specialist in by phone when the patient is still in the room. They have really specific plans about improving communication – to make it more timely and problem-solving. ”

-Linda Boatman, Primary Care Project Director

Group Health Cooperative

“We made this visual that’s a tree, with the roots having the different elements of RC – shared goals, shared knowledge, mutual respect, etc. Each team has 50 leaves where they can write down when they’ve observed RC behaviors and they can recognize others and put those leaves on the tree.”

-Linda Sager, Clinic Operations Manager

Group Health Cooperative

”After the RC meeting, their homework was for each person to have two conversations of interdependence and to put leaves on the tree. Also to see what is in the inbox at the end of each day to make sure the patients flow through on time.”

-Janice Wharton, Nursing Leader, Primary Care

Group Health Cooperative

“The RC concepts resonate with people and help to change the conversation in useful ways. It’s not overly complex, and it makes sense.”

- Paul Fletcher, Medical Director, Primary Care

Next steps

”RC has been a good addition to lean. But it’s not enough to have coordination in primary care, it’s got to happen across the board. We have high goals and high expectations. If primary care is not coordinated with specialty care, we are not going to get there.”

- Linda Sager, Clinic Operations Manager

Varde Municipality

Varde Municipality

- ◆ Danish municipalities are responsible for elder care, care for children and youth, home care, drug abuse, homeless, handicapped, workforce development, cultural activities and infrastructure
- ◆ Consolidated from about 300 municipalities to 98 in 2007 to handle their responsibilities
- ◆ Now accountable for 20% of healthcare costs if citizen is hospitalized or visits a doctor

Varde Municipality

“Some cities are setting up a body within the municipality to coordinate across professionals or bringing together professional groups to address the needs of a particular population – the elderly or troubled kids, or troubled families. Healthy Cities will require everyone working together in a new way.”

- Carsten Hornstrup, Organizational Consultant

Varde Municipality

Current efforts:

- ◆ Wellness visits to all citizens 78 and older
- ◆ Outreach and support for citizens with depression, joblessness, handicaps, drug abuse
- ◆ “It doesn’t work to say do it because I am the nurse and I said so. It has to connect to something the citizen cares about.”

— Margit Thomsen, Director of Health Promotion

Varde Municipality

“Say you had a stroke - we know it’s better to have exercise. That is part of this change - that you take responsibility for your own health. You cannot just go to the doctor and say, 'Cure me.' Instead it's 'take responsibility for your own life.’”

- Kirsten Myrup, Head of Health and Rehabilitation

Varde Municipality

“We also do rehabilitation for those who are out of work. If you lose your work, you lose your connections with work. Within six months it is very tough to get you back into work. It’s our job to get them healthy and get them back to work again. This takes a lot of collaboration between different people.”

- Erling Pedersen, CEO

Varde Municipality

“Now we have the challenge of working across sectors and we don’t know how to do it yet. These people have to get along and work together. Sometimes it works – especially at the beginning of the week [much laughter around the table]. They need to have a good relationship between each other and a good dialogue - they need to know what is going on in the other silos. Otherwise nothing works.”

- Erling Pedersen, CEO

Varde Municipality

“We also need to coordinate with the GPs and the hospitals. It is a real challenge for us. We each have our own budgets and our own goals – we are not clear about our shared goals and we don’t have enough knowledge of what each other does.”

- Kirsten Myrup, Head of Health Board

CEO's perspective

"This map and the red ties we see here just reflect the way we told our employees to work. We tell them you have to go and work and do your job. *We think* we tell them to work together – but that's not what they are hearing from us."

Erling Pedersen, CEO

Frontline leaders

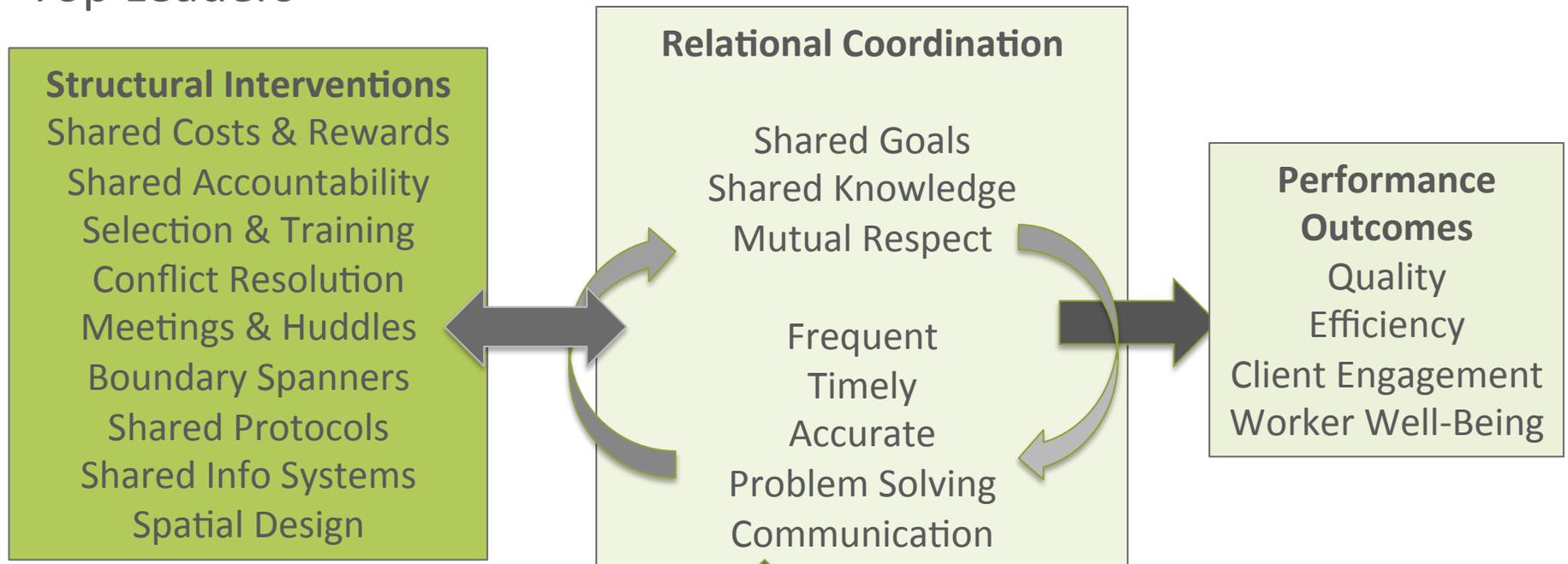
"We discussed the map with the frontline leaders and simply brainstormed possible initiatives that could handle this thing. Now we're talking about two different things - role clarification, and building spaces for cross professional collaboration. Those are the two main things they identified to work on."

- Carsten Hornstrup, Consultant

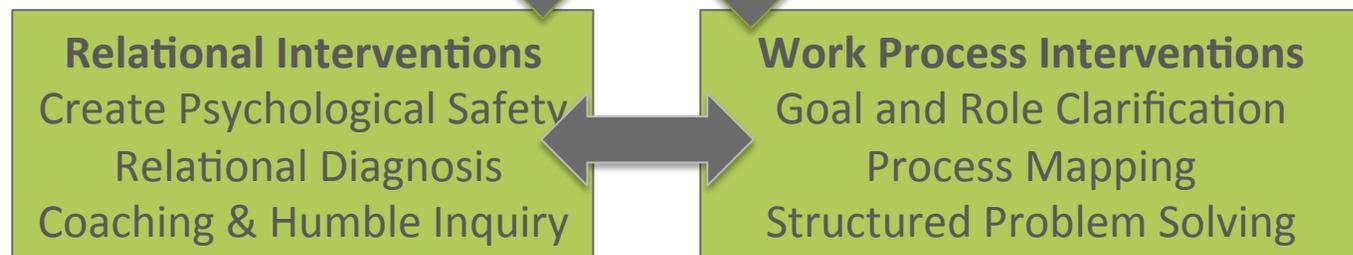
Relational model of organizational change

(Gittel, Edmondson & Schein, 2011)

Top Leaders



Frontline Leaders &
Workers



Responding to the challenge

- ◆ Relational coordination helps organizations achieve better quality and more innovation at lower cost
- ◆ Change process is not easy
- ◆ It's not about getting rid of silos but about connecting *between* them
- ◆ Leadership support may be essential – and a new way of leading



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Supporting relational coordination with relational leadership

