

# “EMPLOYEE PLANNING DAYS”

*An Event Sponsored by an Oregon Facility Encourages Brainstorming on the Part of Staff Members*

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In February 2002, more than 300 employees of Providence Portland Medical Center, Portland, OR, gathered around tables in the facility's conference center to discuss ways they could improve both their jobs and their patients' health and safety. At one table, a security guard recommended replacing hand-held phones with speakerphones in the facility's fleet cars. One nurse asked about replacing broken and outmoded equipment. Another nurse, joined by a supply-and-distribution clerk, talked about simplifying supply-ordering procedures. Four hours later, the dozen small groups in the room had made several lists of recommendations. In the months since then, many of these recommendations have been implemented.

That meeting was the first of a series of annual events that the medical center calls "Employee Planning Days." The event was modeled by Providence Portland's leaders on a program created by Providence Hospital, Washington, DC. Some of us who work at the Oregon facility learned about this "best practice" during our participation, during 2000-2001, in the CHA-sponsored benchmarking collaborative that focused on employee involvement in decision making, a follow-up effort to the publication of *Living Our Promises, Acting on Faith: A National Program of Performance Improvement for the Catholic Health Ministry* (Catholic Health Association, 2000).

The Employee Planning Days idea sounded like a good fit for Providence Portland, which operates a hospital and outpatient and satellite services. Providence Portland is sponsored by Providence Health System, Seattle. Our employee satisfaction rate, like that of Providence Hospital, was already high (4.12 on a 5-point scale). Our administrators, like those of the Washington, DC, institution, were open and accessible and had worked to create supportive

environments for patients and employees. Indeed, Providence Portland had already sought employee input through suggestion boxes and informal lunches and "cookies and comments" get-togethers with the facility's administrator, Dave Underriner.

But the Employee Planning Days approach promised to engage far more employees, many of whom do not normally have a voice in day-to-day operations. Even better, we saw it as an opportunity to deepen our commitment to our values, employees, patients, and community. As one expert has written, "When a facility has stated values and operates from a position of living its values, the employees themselves feel more valued and more willing to stay with the organization. They also judge the hospital as a more effective organization. The impact of values on these organizations is powerful, significant, and compelling" (Diane Fassell, "Effective Organizations Are Driven by Values," *Health Progress*, September-October 2002, pp. 35-36, 51).

When Rene Campagna, one of this article's two authors, presented the Employee Planning Days idea to Underriner, he supported it immediately, although he was aware of its likely costs and potential risks. "Getting employees involved always has been a big challenge, because we're a large organization," he now says, looking back on the project's beginnings. "This was a good opportunity to improve the organization, create a better mechanism to discuss our strategic vision and generate ideas in a forum we typically don't have, and hope our staff would reflect a sense of being listened to and valued, which would improve our employee satisfaction and retention."

## SETTING THE WHEELS IN MOTION

In preparing our first Employee Planning Days, we borrowed several features from the Provi-



dence Hospital program. We decided, for example, that we would

- Create a forum in which people throughout our organization could give suggestions and honest feedback

- Invite to the sessions staff members only (not managers, doctors, or administrators)

- Arrange the agenda items around three themes: our mission, organizational performance, and quality issues

However, we also adapted the Providence Hospital model to fit our institution's unique conditions. For instance, Providence Hospital is a stand-alone facility; Providence Portland is part of the larger regional Providence system, which includes three hospitals in the Portland area. Also, employees of the Washington, DC, facility actually establish their goals and priorities for the coming year during their Employee Planning Days. During Providence Portland's Employee Planning Days, we seek employee input about implementing the hospital's *existing* goals.

The coauthors of this article were chosen to lead the first Employee Planning Days effort, scheduled for February 2002. Because this was a new and complex program, we began meeting in October 2001. To help us, we formed a six-person planning committee that included representatives from the nonmedical or ancillary staff, nurses, and administrators. This group met three times before the event. We consulted with our friends at Providence Hospital.

As Catholic health care providers guided by the *Ethical and Religious Directives for Catholic Health Care Services*, we paid particular attention to Directive 7, which says that employees should be treated "respectfully and justly" and that the workplace should promote "employee participation." Given these precepts, we decided that our Employee Planning Days should:

- Educate staff about Providence Portland's evolving goals and priorities
- Ensure that administrators hear employees' recommendations
- Include employees' input in efforts to achieve the goals
- Help our staff have a sense of being valued
- Have 400 employees participate
- Facilitate, listen to, and apply employees' input.

We decided that the Employee Planning Days would comprise four four-hour sessions: two of them on one day in February and two on another.

Next, we selected 400 employees, drawing them at random from each of the hospital's job

classifications and shifts, and invited them to participate in the event. We had already asked department managers to allow their staff members to participate. Of course, it was a challenge to arrange for so many people to take so much time off from their regular work. To make the event cost-neutral to the departments, we encouraged managers to charge the participating employees' wages to the facility's Quality Management Department budget.

Karen Legasse, director of environmental services, was one of the managers affected. "I have more than 150 employees," she said, "and 12 par-

## How to Make Employee Planning Days Work

I've seen at first hand the many benefits of tapping our employees' creativity and practicality through Employee Planning Days. I was impressed by staff's willingness to be serious, thoughtful, and honest. This effort is helping us become an even more responsive, inclusive, effective, and successful organization.



Underriner

I've been asked what makes the program work so well at Providence Portland Medical Center and how other organizations might implement something similar. I think it really comes down to fostering a culture that values new ideas from every employee and encourages them to be open and participate freely. If

we don't fundamentally believe in that, this effort will fall flat. You have to create a culture in which people feel valued and that they make a difference. In such a culture, people want to work here (recruitment), accomplish their job well (performance), and stay with our organization (retention).

Here's what I recommend:

- Have an open-door policy. Care about your employees and create an honest, two-way conversation with them. Hold forums, ask employees for suggestions, walk the halls, listen, respond quickly, and respect people's opinions.
- Have a strong management team, because their departments are where the real work happens every day.
- Dedicate team members' time to plan, implement, and follow up on the new ideas.
- Invite employees to participate; the personal touch makes a difference.
- Assure employees that every idea and perspective is important and will make a difference.
- Be realistic about what your organization can afford.
- Be prepared; have current information on-hand.
- Implement the groups' suggestions and report regularly about your progress.
- Have fun.

—Dave Underriner

Administrator, Providence Portland Medical Center  
Portland, OR



ticipated. Some had to say no because of schedule conflicts, but others were eager and excited and appreciated the personal invitation." Gordon Eddington, RN, a nurse in our coronary intensive care unit, agreed. "It was flattering that my manager asked me to represent my co-workers," he said. "I took that responsibility seriously and I also raised others' concerns, regardless of my own opinions."

Legasse and Eddington were referring to the invitations each participant received from Underriner. In it, the administrator asked participants to take time before the sessions to explore with their co-workers possible answers to two questions:

- What ideas do you have for making our environment safer for our patients or for you as an employee?

## "Wow! Ideas" from Employee Planning Days

The following are some of the ideas suggested in the course of Providence Portland Medical Center's first Employee Planning Days session in February 2002.

### Concerning Employee Retention

- Improve accessibility to the facility's Employee Health Services (health assessment, tuberculosis screening, and medical referral) by increasing its hours of operation
- Improve resources for medical transcriptionists by providing online reference materials for those working at home
- Provide information about community volunteer opportunities for employees
  - Offer employee discounts in the hospital's pharmacy and cafeteria
  - Upgrade the "Extended Illness Time" and "Paid Time Off" (PTO) policies for employees (by, for example, allowing employees to access their PTO earlier in their tenures, roll over PTO into their retirement accounts, or cash out unused time once a year)

### Concerning Patient Safety

- Provide color-coded hospital maps to patients and their family members and other visitors
- Increase violence-in-the-workplace and management-of-aggressive-behavior training to improve the staff's ability to deal with difficult people
- Upgrade patient room equipment by providing more comfortable chairs for visitors
- Improve maintenance of the hospital's aging elevators

### Concerning Employee Safety

- Clearly mark call boxes in the parking garage
- Improve security at hospital entrances
- Provide a back-safety program for employees who lift heavy patients

- What things are important to make employees want to stay working here at Providence Portland Medical Center?

## THE EVENT

When the day set for the first session arrived, we were ready. Of the 400 invited, 332 employees participated. We grouped them randomly, with seven or eight employees per table. We also recruited "employee facilitators" for each table, to help keep the people gathered there focused on the two questions. Because few staff members had acted as facilitators before, we gave them a brief orientation and script just before the sessions began.

To kick it off, Underriner and the facility's finance director and its quality management coordinator introduced the process, summarized the facility's financial reports, and described the local and national health care environment. Underriner's openness seemed to impress the participants. As Ellen Hillman, the hospital's preadmission coordinator, noted, "Dave placed himself in a very vulnerable position and responded openly, even as he faced a few hostile employees. And he was well prepared; he answered our questions completely and, when necessary, promised to research answers and get back to us."

After the introduction, Underriner asked participants to discuss ways the hospital might be improved for themselves, co-workers, and patients. Underriner encouraged them to be creative but realistic. Eddington said later that the administrator helped participants understand that, on one hand, they shouldn't "paint the hospital in polka dots" but also, on the other, that he would welcome their suggestions and would implement as many as possible.

After that, participants got to work brainstorming answers to the questions. As the day progressed, the synergy built. Participants overcame their initial skepticism and shyness. For many, this was the first time they had met people from the other departments, let alone discussed their jobs with a group of strangers. Their enthusiasm was palpable. "When people brought up a concern, I thought, 'Yes! I'd never thought about that!' and suddenly that would move to the top of my list," Eddington said. "It was amazing that people spent more time discussing improving patient care, and less time on employee issues, like pay and benefits, which were my priorities. For example, a woman security officer wanted more support for patients who had been victims of abuse."

"The day was exciting," Hillman said. "Some people seemed skeptical at first. But as the day



went on, people got more excited, expressing ideas that were important to the whole hospital." "Participants all were compassionate in their concerns," added Sheryl Osterman, RN, a resource nurse.

By the end of the session, each group had come up with dozens of ideas, which they sorted into three categories: employee retention, patient safety, and employee safety. Eventually, each table picked four to five especially good notions (we called them "wow! ideas") to present to the entire group during a final one-hour discussion. That produced an astounding 11 pages of "wow! ideas (see **Box**, p. 42)." Many of these were quite concrete and could be implemented immediately; Underriner approved several of them during the meetings. Others were more involved, requiring further study.

After the Employee Planning Days sessions, Underriner met with the facilitators for lunch and, with their help, narrowed the priority list down to 10 top ideas. Those ideas the facilitators then presented to a four-hour managers' meeting, following which the managers offered their opinions on the priorities involved. This article's co-authors then coordinated discussions with both the session facilitators and the hospital's managers to determine the order in which we should address the suggestions. The facility's Oversight Committee, which includes Underriner, developed an action plan consisting of "fast track" items (those that could be dealt with quickly), "around the bend" ideas (those that would take longer to resolve), and "future destination" suggestions (the most complex issues).

But doing this was not enough. We wanted employees to know that they had been heard. We therefore created an Employee Planning Days newsletter, which we call *On Track*, to update them on our progress. Three issues of the newsletter have been published so far; they are posted throughout the hospital and on the facility's intranet site. We've also distributed a year-end report concerning progress made on the various suggestions. We consider the newsletter and report "booster shots" for the program.

### WHAT WORKED

Employee Planning Days truly is opening "doors." It is fostering inter- and intra-departmental understanding and communication and improving the quality of the hospital's care and the safety of its patients and employees. Frankly, it's working even better than we had anticipated. Participants have told us that the experience was exceptional. In fact, they rated the sessions 4.25 on a 5-point scale. And they offered suggestions

on how we might make subsequent Employee Planning Days even better.

Some of the recent ideas offered around the hospital were very practical. Legasse said, "Participants from my department heard how their work affects other departments. For instance, nurses asked us to accelerate the cleaning and preparation of rooms for new admissions and to improve communication between the housekeeping and nursing staffs. Our team is working on both," Eddington said, "Communication between our unit and supply and distribution and processing staff began to improve immediately. Before, sometimes I'd order something by a name that wasn't quite right. With Employee Planning Days, we all became better informed and they delivered what we needed more quickly."

But Employee Planning Days was not simply a utilitarian exercise. Something much deeper happened, something that began among the session participants and is now rippling through our organization. For some participants, Employee Planning Days was the first time they were encouraged to tell their stories. For others, it was a chance to explore a new forum, form new friendships, and get answers to long-sought questions. As Hillman said, the sessions were "like a giant 'we' discussing large issues, rather than small groups of individuals wanting something for themselves. I was on the Employee Planning Days planning committee, and we'd hoped for that. The people who participated were voices for their whole departments—and for higher ideals."

"I believe it helped some employees feel more connected to others, and less isolated," said Osterman. "It's actually more of a family here than when I started working here more than 15 years ago."

Legasse noted that "my staff includes many people who tend to be shy about speaking up in information-sharing sessions, including several people for whom English is a second language. [Employee Planning Days] have boosted their morale. They aren't as skeptical and are more likely to come forward with their ideas. They feel they are part of the overall team, and they're being heard. When employees used to come to me with a concern, they'd say, 'This needs to be taken care of.' Now they recommend solutions and want to implement them."

### THE 2003 SESSIONS

Given the success of the first round of Employee Planning Days, we immediately began discussing a second round. Using feedback from participants in the 2002 sessions and from various posi-



tive experiences that occurred during the following year, we decided to try to make the 2003 sessions similar to—though, we hoped, even better than—the earlier ones.

We planned two four-hour sessions, again in early February. The schedule was roughly the same, although we condensed the introductory presentations, to give participants more time for brainstorming, and added a review of the 2002 sessions and their continuing impact.

Since we want to engage as many hospital employees as possible in the process, we decided this year to invite only employees who had not participated in the 2002 sessions. Happily, our “alums” encouraged their co-workers to attend this year and to share their ideas. Of the 400 employees we invited, 310 agreed to participate. We again asked them to discuss with their co-workers several questions and to bring their suggested answers to the sessions. The topics discussed and the questions asked were the following.

**Patient Satisfaction**

- How can we provide outstanding service to our patients?
- How can we improve our response to patients who have concerns or complaints?

**Employee Satisfaction**

- What do you need to do your job more effectively?
- What ideas do you have to help resolve conflicts in the workplace?
- How would you implement your ideas?

This year’s participants arrived ready to work. As before, they broke up into randomly selected small groups, each of which was led by a randomly selected facilitator. We then asked them to discuss one question from each category. Again, they came up with hundreds of good ideas. Among these were the following.

**Patient Satisfaction**

- Make follow-up phone calls to discharged patients concerning medical issues (pain management, diet, resumption of normal activities) and their opinion of the treatment they received from nurses while in the hospital
- Appoint members from one department to spend time “shadowing” the members of another, thereby increasing interdepartmental cooperation
- Train staff members to deal with patients’ complaints

**Employee Satisfaction**

- Train staff members to resolve conflicts among themselves directly and effectively before reporting problems to managers and administrators
- Institute a mediation service to teach employees conflict-resolution techniques

There were a few surprises this year. For example, participants requested massage services for employees, patients, and visitors throughout the hospital. They also recommended a tram transport system to link the parking garage and the hospital. They also asked for sabbatical leaves after 10 years of employment. Following a review process similar to that used in 2002, Providence Portland is now implementing some of the best of these suggestions, including acquiring the services of a volunteer massage therapist, who will be available to employees four hours a week every other week.

According to evaluations, the 2003 sessions were successful. Of those employees who attended, 87 percent filled out an evaluation form. They ranked the second round of Employee Planning Days 4.30 on a 5-point scale.

Providence Portland hopes to continue to merit such support as it implements suggestions to make the facility an even better place for both patients and employees.

**A CATCHY IDEA**

So far, Providence Portland Medical Center is the only CHA member organization to have implemented an Employee Planning Days program based on Providence Hospital’s model in Washington, D.C. We encourage others to join us. As Underriner has said:

Employee Planning Days is a great way to involve a lot of people in a very constructive dialogue around key issues. About 20 percent of our work force has participated so far. When we get to 50 percent, the program will start to take on a life of its own, creating a culture of people who help shape ideas. I would recommend this model, or something like it, to other facilities hoping to engage their employees. It really moves to the ‘next level’ of employee communication and is an incremental and important component of demonstrating that we value our employees. □

*Marnie McPhee, a Portland, OR, freelance writer, provided editorial consulting services for this article.*

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

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