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OhioHealth Mayo Well-Being Collaborative: Driving Associate Culture, Resilience, and Efficacy of Practice

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Bethany Gwinn, ACSM EP-C

Introduction

OhioHealth Provider and Associate Well-Being:

The Mayo Well-Being Index is a validated nine-question self-assessment tool that enables individuals to better understand their overall wellbeing. The Mayo Well-Being Index is 100% anonymous, and users can take assessments as often as once a week. The Mayo Well-Being Index provides individualized feedback with access to local and national resources through the tool at any time. Additionally, three process improvement questions are asked at the end of each assessment, allowing the users to share their feedback on topics such as the drivers of stress in the workplace, additional resources desired, etc. OhioHealth utilizes both qualitative and quantitative data from the Mayo Well-Being Index to identify teams in high distress as well as opportunities for improvement.

Site Supervisor:

Dr. Laurie Hommema, MD, Medical Director, Provider and Associate Well-Being

Goals

- Experiential learning opportunities to expand knowledge and applicability of Lean Sigma
- Enhance creativity in problem solving
 - Thoroughly understand strategies for responding to changing demands of OhioHealth providers and associates.
- Further understand Mayo Clinic Well-being Index and evaluation tools
- Expand leadership development skills
- Ability to analyze and interpret data collection processes
- Knowledge development by utilizing evidence based practice and practice-based evidence
- Network and mentoring opportunities with OhioHealth executives, providers, and associates.

Activities

Data Analysis Standardization:

- Qualitative Data:
 - Process improvement questions are used to obtain feedback or suggestions from associates across the organization.
 - This involved the creation of standard work to provide a step by step for analyzing and tagging data to share with stakeholders.
 - 20 buckets with specific key words were compiled to ensure standardization data tagging. After tagging the data, it is entered into a spreadsheet that classifies the data by care site, department, and data buckets to identify trends.
- Quantitative Data:
 - Identifies the percentage or mean distress levels among departments, care sites, or system wide. Quantitative data is helpful for targeting engagement- the total number of users or reassessments. The quantitative data points are compared to a national sample (N>6300) of US working adults. Individuals with a Well-Being Index score of > 2 (higher score=greater risk) were at greater risk for a number of adverse outcomes including:
 - 2.9 fold higher risk of burnout
 - 1.8 fold higher risk of severe fatigue
 - 2.1 fold higher risk of suicidal ideation
 - 2.3 fold higher risk poor overall quality of life
 - On an organizational level, the percent of distress is a key data point to review. Additionally, employee resources accessed is an indicator that the organization can use to drive change.
 - The primary quantitative data utilized on the department level revolves around engagement: number of users in the department and how many individuals have reassessed.

Standardizing Report Requesting and Generating Reports:

- Created a standard request process for individuals within OhioHealth to gain access to Mayo Well-Being Index Reports.
- Used the Mayo Well-Being Index to generate reports for both the organizational level and team, unit, and care site.

Mayo Well-Being Index Action Plan Guide:

- Creating the Mayo Well-Being Index Action plan began by providing a background of what *well being is the optimal state of physical, mental and social wellness, not simply the absence of burnout.* (WHO, 2018). In the workplace, well-being is influenced by the balance of job demands and job resources at an individual, local (tam, unit, care site) and system level. Optimal well-being leads to professional fulfilment and lasting engagement. The OhioHealth Well-Being Framework provides a holistic approach to understanding and supporting the well-being of associates and providers.
- While designing human recovery action plans, it is recommended to use the qualitative data from the Mayo Well-Being Index to identify leading indicators and drivers of distress within departments. This provides insight for more personalized action plans.
- Other metrics collected within OhioHealth can be used in addition to the Mayo Well-Being Index. These supporting measures include turnover, open positions, average length of time to fill an open position, missed lunches, working outside of regular hours, overtime, patient safety events, and Associate Engagement Survey.
- In order to create an action plan, leaders must be able to identify the drivers of stress.
 - This requires understanding results
 - Why did the problem occur? And can be addressed by planning team meetings, one-on-ones, or implementing group listening sessions.
 - Measuring success includes reviewing the Mayo Well-Being Index Engagement Reports and analyzing supporting measures.
 - The recommendation to drive change is using a PICK chart and /or driver worksheet.

Results

The Mayo Well-Being Index has gained a great amount of momentum and incorporation to OhioHealth as an organization and department based approach.

Insight and feedback was gained from valuable stakeholders within OhioHealth.

This work will be continuous, however, it has made a great impact on providing resources to OhioHealth providers and associates.

Goals Achieved:

- Creation of standard work and action plans expanded my knowledge and provided insight on the applicability of Lean Sigma within healthcare.
- Evaluating problems on both an organization level and department level provided a unique perspective to problem solving and action planning. One size does not fit all.
- Utilizing the Mayo Well-Being Index on a daily basis running reports, tagging data, and compiling action plan information thoroughly covered the evaluation tools of the Mayo Well-Being Index
- I expanded my leadership development skills by leading monthly collaborative meetings, leading standard work development, and action plan creation.
- Evidence based practice was utilized for creating action plans and staying informed on well-being tactics to apply in the healthcare setting.
- This practicum provided the ability to network with individuals from the Lean Promotion Office, OhioHealth Physician Group, Associate and Provider Engagement, Associate and Provider Well-Being Collaborative, Benefits and Wellness, and Employee Assistant Program.