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## Organizational Quality & Wellness Focus

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Although my comments are slanted toward organizations in the health care sector that deliver services - all of what I am going to outline has direct linkage to all sectors. I will discuss the implementation of a HW as part of an integrated approach to excellence, as a healthy workplace is essential to sustainability of productivity and quality, in all sectors. This implementation can be a roadmap for those with the courage and the vision to focus on workplace wellness and well-being.

The evolution of quality and healthy workplace systems has moved from an operational focus, for example on safety, through issues such as the application of preventative approaches with management involvement to an integrated system of managing an enterprise.

The issues and trends impacting continuous improvement are complicated, such as the pressure to improve, to reduce costs, manage a system, lowering variation within work processes, managing client and employee expectations, being an employer of choice and having a productive focus on wellness and well-being (including mental health issues).

To help management figure out continuous improvement principles/practices and what to think about on total quality, sets of quality criteria (widely used) are available around the world, such as the Canadian Quality Model, with a focus on leadership, planning, customer focus, people focus, process management and supplier/partner focus; a useful tool. To assist the understanding of the scope of a healthy workplace, national Healthy Workplace Criteria have also been developed and published, such as the criteria developed by NQI in partnership with Health Canada and others. It covers the Drivers for a HW: HW principles, leadership, planning & programs, people engagement, process management & risk management and results. It also covers the three elements of a HW, physical environment & OH&S, health & lifestyle practices, and workplace culture & supportive environment, with a focus on mental health, and for good reason: 58% of

employers say mental health is the top workplace concern. One in four Canadians suffer from depression, anxiety or other mental disorders and young people 14-24 are most likely to experience mental disorder. Depression is the leading cause of disability in the labor force, and we suffer with 35 million lost workdays each year in Canada due to mental health conditions, 49% of work lost time. We can no longer tip-toe around mental health in the workplace – we must do now what we know now, notably in health care institutions themselves, where unhealthy workplaces place patients and workers at risk. It's interesting to note that the average number of days lost due to illness or disability is 1.5 times greater for workers in healthcare than the average for all workers.

This is part of my challenge to you reading this article – to do something about workplace wellness, this is not only ethical it's also very good for the bottom line.

The challenge in developing a HW is that it's about workplace culture, about the system people work in not just about the people. It's about respect, dignity and fairness, about continuous improvement and having a constancy of purpose on it, not about jumping around from one program to another. To help make it all happen I would like to talk with you about a leading edge approach focused on quality improvement and HW, a focus that gets results. I believe it's time we reinvented the word quality, to encompass HW as an integral part of continuous improvement. How can there be excellence without having a HW? There is need for strategic criteria to assist our thinking and this is what we have put together.

No one is against improvement, or against a HW, the issue is what we do starting Monday morning. A progressive implementation approach nurtures a culture of excellence.

There are 4 levels we need to consider, a start up phase, a foundation phase, transition phase and a level that sustains organizational performance. The NQI has published two versions of this roadmap, one for health care institutions, and one for municipalities and very shortly one for the business sector. A good criteria is helpful, it enables us to look through the right lens back at our own organization and through assessment establish the right goals. So let's briefly review this journey: As I outline this journey to you I want you to consider a couple of things a) what is your organization doing on this matter, and by what method are you doing it, and b) to what extent are you doing it.

Firstly, support for the right principles is part of Level 1, these principles being leadership involvement, integrated management approach, primary focus on internal community - patients/clients & work teams, co-operation, teamwork & continuous learning, assessment & evaluation, focus on continual improvement and innovation and fulfillment of obligations to community and society at large. Level 1 raises some key questions, for example: what is the aim of your organization and how is this communicated? Do you have policies on quality/HW? Is HW part of your decision making? Are you compliant with OH&S? Who are your clients? How do you measure client and employee satisfaction and well-being? If you have gaps on such issues then they should be closed before you move on to the next level (this is achievable, you're probably more than half way there). This will help you get ready for the next level of implementation; you must focus on building a HW culture otherwise you will simply get overwhelmed with the whole exercise.

Level 2 raises other questions, all building on level 1.

**Leadership & Planning:** Do you have a business plan? Do you have key quality & HW goals set against: current state, all three HW elements and a HW needs assessment? How do you cascade plans/goals? And, how do you plan to measure progress/results?

**On Client Focus,** how do you analyze client needs? Is it easy for clients to provide input & seek assistance?

**On People Engagement:** what is the span of your HW programs? Are employees engaged and participating in the HW focus? How do you recruit/select and manage performance? How do you encourage ideas?

**On Process Management:** are work procedures documented and accessible? Have you identified and mapped key processes? Are processes assessed for health impacts? How do you monitor stability? How do you analyze process problems? How do you ID/erase root causes? Do you document/communicate changes to work processes?

**On Supplier/Partner Focus:** how do you select suppliers/partners to work with? Do you include worker input on selection? and how do you assess health and productivity impacts? These are all key things you need to ask and get right to have a solid foundation for a HW, and apply an approach that will nurture a HW and quality culture.

Level 2 reinforces what I call strategic linkage, ensuring a linkage of key improvement actions to a quality/HW plan that reinforces the strategic intent and direction of the organization. This is a key thing to consider, otherwise it all becomes wishes and hopes and a spasm of enthusiasm ensues with no constancy of purpose. Achieving Level 2 recognition builds strategic linkage.

Level 3 and 4 build on other levels, for example Level 3 has a focus on evaluation of progress and continuous improvement (building on system stability achieved at Level 2), and Level 4 has a focus on trends and sustainability of a strategic focus on quality and HW.

I believe there is a need for such an implementation roadmap. The subject of a HW is deceptively simple and endlessly complicated. The application of a formal progressive implementation approach (as I have outlined) is a practical approach to chunking an improvement journey into a manageable format; there is no need to feel overwhelmed. You can get copies of the organizational quality and wellness criteria I have outlined today, as well as other criteria sets (for example separate versions of the quality criteria and the HW criteria) direct from NQI.

I trust that each of you, as George Bernard Shaw said, will choose to become unreasonable people, because it's unreasonable people that have the vision to get results, progress is not achieved by people who simply accept the status quo. My wish for each of you is that you become totally unreasonable on HW issues. The fact is we need to have better places to work in Canada, the time is right for change and you can do it.

This article is based on a keynote address given by John Perry at a conference in Vancouver BC.

John Perry developed a deep interest in the concept of progressive implementation of quality and healthy workplace principles/practices from his many years in senior line management, and seeing the real need for practical and manageable implementation methods to get desired results. This focus, which he started putting into action in the 1980,s, led to the winning of the first national quality award in the service sector in North America, and over the past few years the publication of a number of progressive criteria sets for NQI covering various sectors (for example in business, public sector, education, federal public service, hospitals), assisting numerous Canadian organizations on their improvement journey.