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# Increase Employee Engagement by Using the "Finding Joy at Work" Framework to Identify and Remedy Items that "Remove Joy" from our Work Life

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**Project:** Increase employee engagement by using the “Finding Joy in Work” framework to identify and remedy items that “remove joy” from our work life.

**Last Updated:** 10/6/18



**Executive Sponsor:** Gina Quinn Skillings

**Facilitator:** May Robb



**Team Members:** Anne-Marie Toderico, Heather Vickerson, Karen Waycott, Martine Eon, Joan Ingram

**Problem/Impact Statement:**

Improving engagement scores within MaineHealth Corporate has been a focus for a number of years. The most recent data has shown a marked improvement from 2014 to 2017, moving us to the 49<sup>th</sup> percentile, but the MaineHealth goal is to bring us to the 75<sup>th</sup> percentile so there is still work to be done. The Institute for Healthcare Improvement offers training in “Finding and Creating Joy at Work”, a framework for identifying “pebbles in your shoes” that detract from your joy at work, finding and addressing the underlying root causes. We would like to use that framework to find and alleviate things that remove joy in our daily work lives in our department, therefore improving engagement and happiness at work.

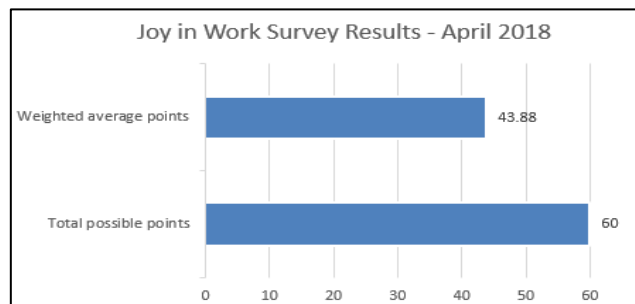
**Scope:**

The Acute Care, Chronic Disease, Pharmacy Enterprise, Advanced Primary Care Strategy and Telemedicine departments within Center for Health Improvement (23 staff).

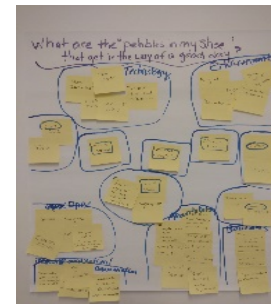
**Goal/Objective:**

Improve engagement survey scores (done within the department, not the system-wide engagement survey) by 10% by August 2018.

**Baseline Metrics/Current State: March-April 2018**



Affinity Diagram of “What are Pebbles in Your Shoes” (what things get in the way of engagement)



**Root Cause Analysis:**

Team Multi-voting to identify top 3 improvement topics

Brainstorming on potential solutions for “No process for getting workflows built into SeHR” using 5 why’s

One “Just Do It” and one KPI defined “100% of the time I know which governance group to take my clinical and operational ideas for vetting.”

**Countermeasures**

**Just do it: Solution to “How do I know where I am in the queue?”**  
**Action taken:** Create documentation on Footprints process so all staff know how to check status and request updates to their tickets. **Owner:** May Robb **Due date:** June 15, 2018 - **Status:** Completed

“Vetting Change” KPI Results: 20% of the time staff need assistance figuring out where to take their clinical and operational ideas for vetting. Often there was a venue, they were just not aware of it.

Reconfiguring KPI questions and pre-defining answers to choose from to better help us interpret results into areas we can focus improvements on.

Potential test of change: Develop a matrix of known governance groups. Gain input on this from across CHI, Supply Chain, MHACO. Publicize across MaineHealth. Status: In Process, holding for re-run of KPI



Do

**Outcomes**

Still to be done after PDSA cycle is completed, planning to re-run the governance KPI and perform a follow up survey to compare to the initial engagement survey.

Study

**Next Steps**

Document process, highlight outcomes, ID areas to try this methodology (plans to standardize, sustain, spread)

Act

Plan