

Joseph Brant Memorial Hospital



Best People. Best Care. Healthiest Community.



Objectives

- Share JBMH's Journey into Positive Deviance
- Update on the progress of the pilot unit
- Share challenges and successes
- Understand how Positive Deviance can be used at a community hospital



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The Journey

- Project Leads Identified
- Developing a Core Team
- Positive Deviance Tailgate Event
- Confusion and Resistance
- Volunteers? Anyone?
- Selecting a Pilot Unit



3 East PD Project

- Discovery and Action Dialogue sessions:
 - Identified champions on unit wanting to make a change
 - Revealed many challenges/problems to try to find a solution
 - Agreement to take action on sustainable solutions “one barrier at a time”



3 East PD Project

- Weekly 20 min session involving Discovery and Action Dialogue technique
- Improv – used as a visual for staff not present and other involved teams to understand the problem
- Social Network Mapping
- Coaching the Champions



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DAD on 3E



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Solution Focused

- Initial solution focus selected by front-line staff and piloted by front-line staff
- Examples: stocking of isolation carts, inconsistent swabbing of new patients, visiting hours, alcohol hand based rub



Poster Board 3E



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Challenges

- Resistance to getting involved (same old, same old)
- Lack of trust
- Fear of change
- Organizational changes
- Lack of time



Successes

- Engagement of front-line staff
- Change in behaviour from the unusual suspects
- Small changes in other procedures
- “Nothing about me without me”
- Inter-departmental dialogue and relationship building



*Learn from the people
Plan with the people
Begin with what they have
Build on what they know.
Of the best leaders
When the task is accomplished
The people all remark
We have done it ourselves*



Lao-Tzu's Tao Te Ching
(6th Century BCE)



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