

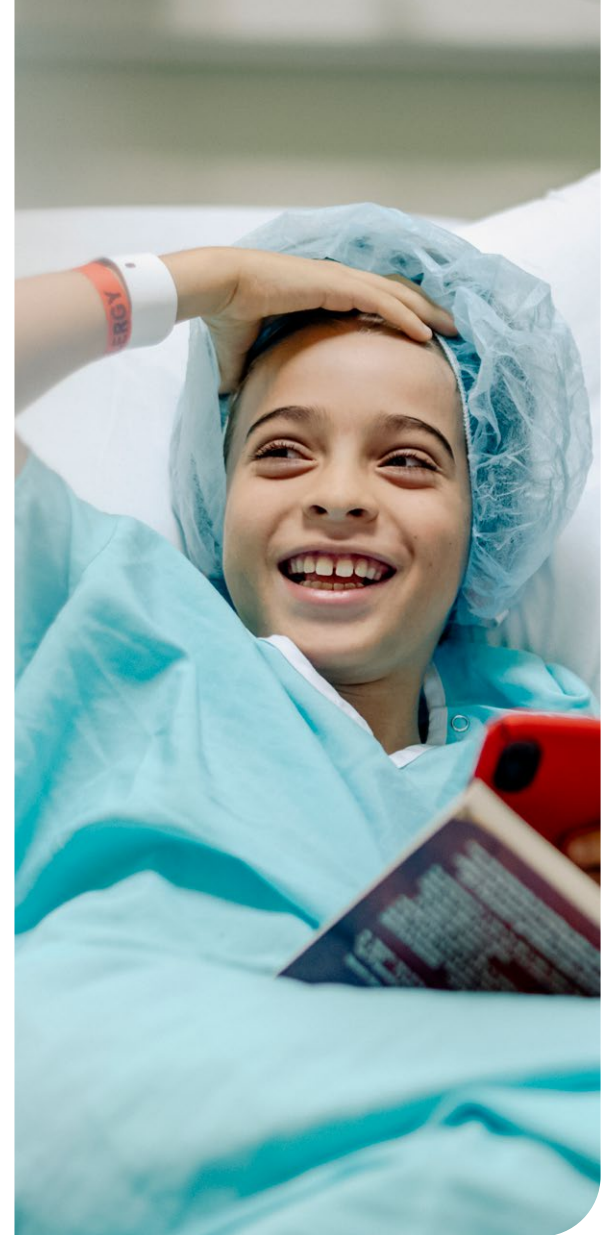


**EQUITY PARTNERSHIP**

DIVERSITY, EQUITY, AND INCLUSION

**Integrating safety  
culture and DEI to  
deliver high-quality,  
compassionate patient  
care for all**

a **PG Forsta** company





## Who

The leadership team of a medium-sized, Magnet®-certified health system had elevated its focus on diversity, equity, and inclusion (DEI) to address instances of bias, microaggression, and incivility, with the end goal of improving workforce engagement, safety, quality, and, ultimately, patient experience. The system had been on a high reliability organizing (HRO) journey for five years and previously received training on safety behaviors, but it had not yet focused on DEI in a meaningful way.

# What

The organization engaged Press Ganey to develop a solution for one of its departments, which needed help creating a culture of belonging for all. It was important for them to also reinforce safety behaviors that staff had already been trained on and adopted. Press Ganey began this process by assessing staff and leader perceptions around DEI to gain a baseline understanding of individuals' attitudes and the department's climate. It then customized a solution using safety behaviors as one way to address bias, microaggression, and incivility within the department.

The safety behavior toolkit leveraged the components of "CUS" (which stands for "I have a Concern; help me Understand; Stop the behavior") as well as universal behaviors and tools—like speaking up for safety and belonging, questioning the status quo, and operating as a team. All leaders, caregivers, and providers then underwent training to establish a launchpad for continued work in DEI. Press Ganey also made recommendations for learning beyond the classroom and sustaining the program through activities like rounding, huddles, and learning boards.

# Why

The findings suggested biased behaviors existed in the department related to race, position, perceived power, and, in some cases, patient diagnosis—though the perception of these biases differed by role and level within the organization. For example, staff observed biases related to socioeconomic status or specific medical issue (e.g., substance abuse disorders), whereas leaders and providers perceived biases around race, ethnicity, and tenure of nurses.



## How

Staff leaders from the department and the safety team came together with Press Ganey Strategic Consulting to develop and implement a staff and provider training session focused on two high-level objectives: (1) understanding how biases, microaggressions, and systemic racism affect caregivers' abilities to deliver safe, high-quality, compassionate care, and (2) creating a collaborative working environment where all are welcomed and treated with respect. The DEI training program included a refresh of the organization's safety behaviors, while integrating concepts related to diversity, equity, inclusion, bias, microaggression, and systemic racism. The alignment of safety behaviors with DEI reinforced prior learnings and supported DEI as a solution to reduce biased behaviors by leaning into safety behaviors. Press Ganey also used this opportunity to emphasize and broadly socialize DEI work currently in development across the organization.



# Impact

These sessions have been eye-opening for staff, providers, and leaders. For staff, using safety behaviors as a tool to address instances of bias, microaggression, and incivility has been revelatory. And leaders feel the climate within the department is more collegial as a result. Caregivers, providers, and leaders have expressed interest in going deeper than the training provided by their organization. Training alone doesn't change behavior: It takes a strategy for learning beyond the classroom by setting expectations, communicating nonnegotiables, reinforcing learnings during rounding and huddles, and being transparent about measuring outcomes against objectives.



## Advancing equity in healthcare

To learn more about our commitment to equity in healthcare for all, visit:

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