Road Map to a Safety Culture

For Patients, Residents, and Clients

Justice

Specific Action(s)	Audit Questions
Effective Process Improvement (EPI) Work Plan	1. The steps for identifying a specific action plan and measure of success for Justice are completed. 2. The work group has devised a structured implementation plan for Justice. 3. Structured roll-out strategies for Justice are in place. 4. A plan is in place to sustain implementation progress and spread of Justice.
1. Support a culture that is Just.	1. The organization's senior leadership formally supports a culture that is Just by adopting the MAPS statement of support.
2. Engage key stakeholder groups in a Just process.	2a. Education is provided on the key Just principles, such as system design and recognition of at-risk and reckless behavior, for senior leaders, managers, human resources, all health care providers and students. 2b. Managers/supervisor/leaders with direct report responsibility are educated and trained on the application of the established process to evaluate and respond to staff behavioral choices. 2c. The organization identifies and engages key external stakeholder groups, such as unions, through early discussions for key projects and process changes to promote collaborative efforts/common expectations/understanding.
3. Incorporate Just principles in policies and processes for human resources.	3a. A structured process is in place to assist managers in evaluating staff behavioral choices. 3b. A structured process is in place outlining responses to at-risk or reckless staff behaviors (e.g. coaching/mentoring vs. disciplinary action). 3c. The process to evaluate staff behavioral choices focuses on the behavior rather than the outcome of the behavior. 3d. The process to evaluate staff behavioral choices includes a balanced focus on system design and individual behavioral choices. 3e. Job descriptions incorporate Just principles in outlining behavior expectations and the organization's response to behavior issues. 3f. Just principles are incorporated in employment/practice agreements (e.g. physician code of ethics/behaviors, labor agreements). 3g. Human Resources is involved in incorporating Just principles in human resources processes.
4. Just principles are incorporated into the Root Cause Analysis and Peer Review Process.	4a. A process is in place to communicate to staff involved in a root cause analysis that the RCA session will focus on systems vs. individual behavior. 4b. A system is in place to support physicians and employees that have been involved in an adverse event, (e.g. facility provides opportunities for peer-to-peer counseling.) Just principles are incorporated into the peer review process including, at a minimum: 4c. A process is in place to communicate to individuals involved in peer review that the organization follows a Just approach, (e.g. focus includes evaluation of error related to system issues as well as individual accountability.) 4d. System issues versus individual disregard for following protocol or policy are identified. 4e. Decisions are based on Just principles. 4f. There is a process to develop actions to address identified system issues and address individual behaviors that may denote reckless behavior.

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5. Just principles are incorporated into clinical practices.	5a. A process is in place to identify and communicate at-risk and reckless behavioral choices, as appropriate, for clinical practices, (e.g. not conducting a Time-out prior to a non-emergent invasive procedure would be considered reckless behavior.) 5b. Policies and procedures outline clear expectations for staff behavioral choices. 5c. Each situation is reviewed to determine at-risk or reckless behavioral choices vs. human error.
6. Just principles are hardwired throughout the organization.	6a. Management/front-line supervisor meeting agendas routinely include actual and mock case studies that demonstrate application of Just principles to respond to employee issues. 6b. A standard process is in place to identify and report instances of reckless and at-risk behavior including disruptive behavior. 6c. A standard process is in place to review and respond to reckless/at-risk/disruptive behavior reports. 6d. Individuals are acknowledged and celebrated for "speaking up" about possible patient safety issues or disruptive behavior. 6e. Case studies involving application of Just principles are routinely reviewed at medical staff executive committee meetings and at department/service line meetings.