



The Power of Partnership

"Our partnership just changed Tauranga hospital."

Lynne Hansen, Worksite Convenor, New Zealand Nurses Organisation

The return on investment:

- The return on the partnership investment in reducing absenteeism is conservatively estimated to be 1150 percent
- Sick leave reduced from 13 days on average per employee to eight days over a 12-month period
- Labour turnover has steadily reduced falling from 9.5 percent to 7.8 percent over a 24-month period
- Staff engagement improved over 17 percent between 2007 and 2009

In addition, the partnership enabled the successful implementation of the Releasing Time to Care programme which in turn enabled significantly more face-to-face time with patients.

A workplace partnership has "transformed" the Bay of Plenty District Health Board's workplaces. The lessons learned by the DHB are relevant to organisations large and small, and in all sectors.

■ BACKGROUND

Tauranga and Whakatane hospitals are regular destinations for health sector managers searching for the secret of lasting and effective workplace relationships with staff.

The hospitals stand out for the way a partnership-based resolution to long-standing employment relations issues was seized upon to introduce a culture change throughout the organisation.

An "us and them" confrontational relationship has been transformed into a whole-of-organisation partnership that has unlocked latent potential to improve services and cut costs.

For example, for the three months from November 2011 to January 2012, the DHB's hospitals cared for 875 more acute patients while keeping bed utilisation at 2008 levels.

The original workplace partners at the hospitals – the Bay of Plenty District Health Board (DHB), which runs the hospitals, and the New Zealand Nurses Organisation representing the DHB's nurses – say there is no secret: success comes from commitment, investment and constant attention to their relationship.

And they tell their visitors that the partnership is still a work in progress. Managers say its 75 percent towards where they want it to be; nurses feel there are still outstanding issues to be resolved.

But both parties agree their relationship has come a long way since 2007 when DHB management took its initial steps to confront its adversarial employment relationship with nurses that had dogged the hospitals for as long as anyone could remember.

Work began by engaging external facilitators who brought together management and senior nursing union representatives to scope the "current reality" at the hospitals with the aim of getting all cards on the table – good and bad.

The partners were then put through a training programme focusing on possible joint solutions rather than hard-and-fast answers. They next agreed on processes to find solutions.

Nurses representatives admit to being sceptical about management's partnership proposal (they didn't trust managers and saw the proposal as a "waste of money"), but by lunch on the first day of their meetings with management they believed it could work.

The new environment produced quick dividends with reduced sick leave and improved staff engagement.

This early relationship building laid the groundwork for extending the partnership under a pilot programme that originated in a





national employment agreement between nurses and DHBs. This agreement sought to balance nurses' expectations regarding workload and pay, management calls for greater efficiency and joint concerns about patient care.

■ Moving to the next level

The programme gave the Bay of Plenty DHB the tools and framework to take its partnership to the next level, to operationalise the partnership. How could the DHB improve capacity at its hospitals by having the right staff available at the right time and ensuring safe patient care?

To do this, the partners leveraged their now-positive relationship to jointly identify and fix outstanding issues in hospitals' wards. Key among these were reviewing base staffing and workplace flexibility (responding to workload demand by transferring nurses to where they were more urgently needed) and ensuring electronic reporting on patient care needs by nurses was accurate and acted upon by management.

At this stage, the DHB was still focused on the partnership between nurses and management. It was also seen as a human resources/employment relations undertaking.

But the partners were realising that what they had on their hands was capable of much more. They were only tapping into a fraction of the power of the partnership model.

They wanted to use it to manage a culture change throughout the DHB. In fact, different parts of the organisation, including other unions and business units such as finance, also wanted to be counted in after seeing what was being achieved.

This resulted in the partnership being extended beyond nurses and management to one that encompassed the whole organisation, using the principles that had served the original partners so well. These principles include trust, joint decision making, sharing of information, shared ownership of problems and pushing decision making down to the lowest possible level of the organisation.

All activities were tested by the question: "How does this improve the patient journey?"

The HR team has now been joined by senior DHB leadership, including the chief executive, chief operating officer and chief financial officer as active contributors to the partnership.

The results have been dramatic.

A key ongoing focus for the enlarged partnership is to maintain momentum for change and in particular not letting relationships stagnate through being taken for granted or not worked on.

Healthy relationships are at the heart of the DHB's success.

■ More information

Bay of Plenty District Health Board: www.bopdhb.govt.nz

New Zealand Nurses Organisation: www.nzno.org.nz

Department of Labour: www.dol.govt.nz/er

■ Lessons

Define your relationship. Set out a shared vision, and what you want to achieve, and then document your progress.

Total commitment is required from the start. Commitment-phobes do not belong in successful workplace partnerships. Find the right people who will support partnerships in spirit as well as in word. The Bay of Plenty DHB partners, after initial leaps of faith, have been "dogged" in their commitment.

But feel free to say what you think. Be transparent. Unions should back their members and managers need to manage. Create an environment where inevitable conflicts are depersonalised and everyone focuses on the issues.

Invest in the partnership. The DHB and nurses committed time and money to make sure their partnership was a success. This includes hiring facilitators, attending workshops, training and meetings and buying IT to share information.

Recognise that getting started can be tough. "You have to eat your broccoli before dessert." Allow time for the full potential of a partnership to be realised.

But get early runs on the board. To build trust in both the partnership and its processes, quickly show that a genuine and long-term partnership can produce results. At the DHB an early win was a reduction in absenteeism.

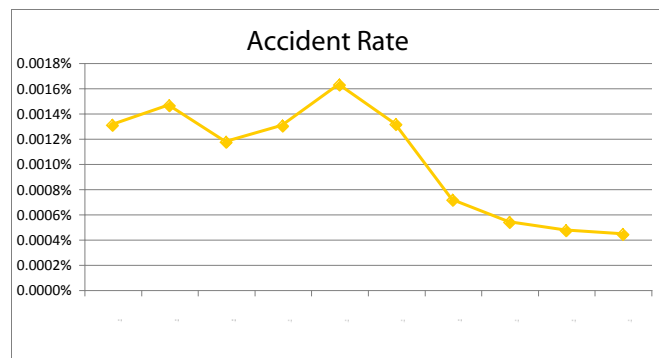
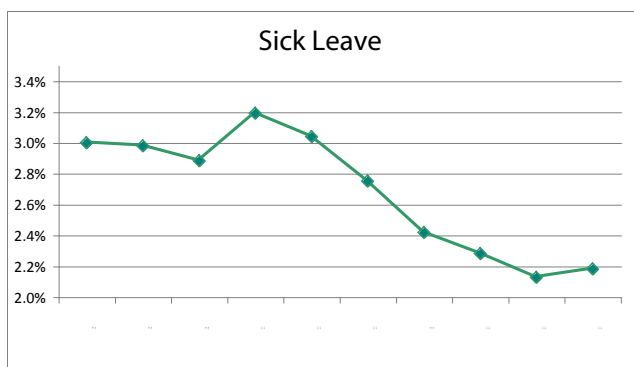
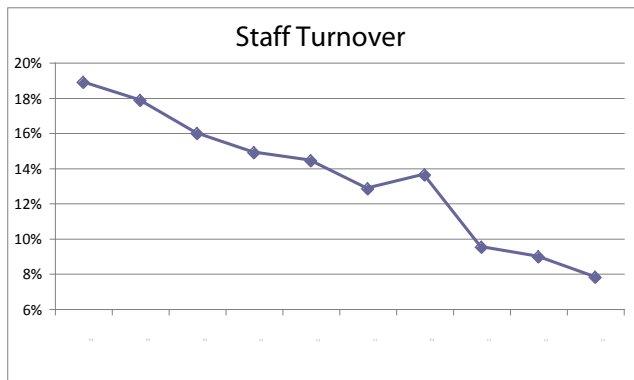
Bring in outside help. Use an external facilitator who can provide impartial advice and at the same time ask hard questions. Facilitators experienced and knowledgeable in employee engagement and union-employer relationships keep everyone focused.

Stay focused. There are lots of distractions in relationships including new people coming on board, issues not related to the partnership arising and success can lead to neglect. Continuously work on the relationship to prevent it going backwards. The DHB has held a partnership "refresh".

Little things matter. Don't fixate on "big issue" processes and meetings. Simple acts like staff and management sharing a ride in a taxi or stopping to talk in the cafeteria make a difference.

Workplace partnerships offer more than just improved employment relations. Partnerships can unleash the full potential of organisations. The DHB's experience has been that it has achieved more by collaborating than by having "everyone stuck in their corner".





3.3.3 Bay of Plenty DHB

