

#### Health Center Leadership Best Practices & Expectations

These tips will help healthcare leaders cultivate positive change as they introduce SyncTimes to their care teams. These practices are a product of the SyncTimes team's years of experience training and implementing in large and small organizations

with a variety of cultures. We encourage leaders to carefully consider how these ideas can be best tailored as we implement SyncTimes.

# OVERCOMMUNICATE WITH CARE TEAMS

**Health center leaders should begin and end with the "Why"** – the benefits of SyncTimes to the staff and to
patients. By the time SyncTimes is implemented, care
teams should be able to easily restate the "Why" behind
the initiative.

**Effective leaders communicate the "Why"** 3 times in 3 ways, which may include:

- 1. Email introduction to SyncTimes System
- 2. All-staff meeting reviewing the "Why"
  - During daily huddles
  - In 1:1 conversations with providers
- 3. Through recorded videos posted on internal website

## 2 BOOTS ON THE GROUND

#### Health centers achieve their goals when leaders:

- Spend time every week among clinical staff, in the health center(s).
- Appoint an owner of the implementation at each site/ department, involve this owner in implementation meetings, and expect that this owner coaches, trains, and supports their site's team members.

**The most important days** of the SyncTimes implementation are the 3–5 days after SyncTimes' implementation team leaves.

- Monitor Flowstations and ask with a spirit of curiosity when patient flows seem inefficient, then work with staff to initiate improvements.
- Spend time seeking feedback on new workflows from care teams

### AVOID DATA ALTITUDE SICKNESS

The most effective health centers teach care teams how to access and interpret SyncTimes data and share what data they've found meaningful to drive improvement. These health center leaders:

- Regularly (daily or weekly) meet with care teams and share the data directly. The site/department champion leads this effort.
- Do not fear the realities of clinical workflows. They invite clinical teams to help improve those workflows and achieve results.
- Data Altitude Sickness:
  This occurs when SyncTimes data
  (or any other data) is only put
  to work at the upper levels of
  the organization, and not in
  communication with the care teams.
- 3. Combat emotion-driven disagreements with cold, hard data.

**Tip:** Analytics can be accessed directly from dedicated Flowstation displays for daily huddles.

 Leaving care teams to wonder what data is being captured & why, rather than explaining clearly.  Initiating discussions with staff about seemingly inefficient workflows when there isn't an established relationship of trust.

 Analyzing data for "analysis' sake", rather than to spark conversations and improve decisions in workflows, scheduling, staffing, and room utilization.

Remember: SyncTimes data **dies** in administration and **lives** among the care teams.

 Expecting a new, inexperienced leader to have the tools to drive change without coaching from experienced leadership.

COMMON PITFALLS