



CHAMPS Staff Wellness Best Practices Podcast Series
Episode 2: Interview with Diana Hornung, MD and Amanda Arnold
From Northwest Colorado Health
Interview Date: February 11, 2020

Yael Holzman Castellands: Hello, welcome to the second episode of the Staff Wellness Best Practices Podcast Series, produced by [Community Health Association of Mountain/Plains States](#), or CHAMPS. I'm your host, Yael Holzman Castellands, the CHAMPS Programs Coordinator for Workforce and Communications.

In this series we're highlighting interesting and innovative ways that health centers and Primary Care Associations [PCAs] in Region VIII are addressing staff wellness as a component of supporting employee satisfaction, engagement, and retention. We think the best way to share these ideas is to speak directly with the health centers and/or PCAs who are providing these services and running these programs.

In our second episode, we'll hear from two employees from Northwest Colorado Health and discuss how they developed a comprehensive plan to implement staff wellness into their organization. I'm pleased to welcome Dr. Diana Hornung and Amanda Arnold from [Northwest Colorado Health](#). Thank you both so much for being here!

Diana Hornung and Amanda Arnold: Thanks for having us!

Yael Holzman Castellands: Yeah, it's great to have both of you here! So, to start off, can both of you talk a little about Northwest Colorado Health and the communities that you serve?

Diana Hornung: We are in northwest Colorado. We serve rural and frontier communities within Routt County and Moffat County. We have two medical clinics, a community health center in Routt, in Steamboat Springs, and a community health center in Craig, Colorado. We have a dental clinic that's separate within Craig, Colorado, and then we have a dental clinic in Oak Creek.

Amanda Arnold: Our communities vary based on ranching as well as tourism and energy, so a lot of coal mines and powerplants.

Yael Holzman Castellands: And could both of you explain your role at Northwest Colorado Health?

Diana Hornung: This is Diana, I'm the Medical Director of the community health center.

Amanda Arnold: And I'm Amanda, and my title is the Senior Director of Quality and Human Resources.

Yael Holzman Castellands: And, how did both of you get involved in addressing staff wellness at your health center?

Diana Hornung: In the winter of 2016, our CEO at the time, I believe had actually gone to a CHAMPS conference, had come back and said to me, Diana, I just, I went to a presentation about provider burnout and did you know that medical providers are burned out? And I said, well yes, I do know that, and I think for me it was very much, a, a shock to the system to think that, nobody, or my CEO, did not realize that and did not, did not understand that there was a burnout issue. So that was um, she gave me a charge and said I want you to start working on provider burnout at the time is how we framed it. And over the course of, from 2017 until now, we've shifted what we call it I guess to provider wellness. But, so that, that winter, January of 2017, I did a, I used the [Zero Burnout Program Survey for Clinicians from the AMA](#) [also referred to as the "mini Z"] and I gave

that to our eight providers, including one of our behavioral health providers and they filled it out and from that, in about March of that year, we analyzed the results, just within our organization and pulled out the two top issues, and the first issue as everyone probably already knows is EMR [Electronic Medical Record], frustration with the EMR. The second issue that came out on the top was a connection to our, connection to our leadership, our organizational leadership. So the way that we started, the EMR frustration actually, worked well with a grant that we were looking into at that same time from HRSA, so it was, we were able to coordinate a EMR specialist to kind of come out, work with us over the next year on how to best maximize the use of our EMR. And then, from there, in addition, over the next couple years we focused on what does it mean, the second piece to that, what does it mean to have connection to our leadership and how does, how does that look for our providers. And so, when, you know I'm guessing that the people who are listening to this podcast, have already, identified this as a, as an issue within their health center and want to start doing something. And I think, from my perspective, I started just with providers and provider wellness and provider burnout and as we have grown, we have incorporated that into entire staff wellness. So, I think you have to start small where you can and use the support that you have to grow that, so that's where Amanda, Amanda joined our, our team.

Amanda Arnold: Yeah, so I joined in middle, in the middle of 2018, and one of the first things that I did was look at our employee survey results that had just been done and that was agency-wide, and noticed a trend in there that we really had some work to do on wellness, retention, attracting employees as well as of course like I said, retaining them. And we started focusing on how we could impact those things. We began a WISE committee, which stands for Wellness, Inclusion, Support, and Equity, and that is a group of employees that represent the different departments as well as the different levels in the agency which meet monthly, come together and the first few meetings, they reviewed the survey results and chose some areas to focus on. So, we used that work, within the WISE committee to really start making an impact on joy in work and wellness for our employees.

Yael Holzman Castellands: Great, and were there any specific resources that either of you used? And I know you mentioned some sort of funding, but were, did you get any other funding or work with any community members to kind of help build this program?

Diana Hornung: Yeah, definitely. So, when we started, when I started, I looked into different survey options and the [Zero Burnout Program Survey for Clinicians from the AMA](#), I used as our free resource. And because there's only eight of us, it was, we didn't really have any other funding to help analyze that data, we just did that on our own. The eCW, our EMR grant, I believe was HRSA. And then, we also during that time, worked with [Colorado Health Foundation](#) and got a grant to do a team-based care initiative for three years which was absolutely huge. The other resources that I really found to be helpful in my search as I was kind of doing this on my own, was the [Executive Leadership and Physician Well-being](#) paper by Shanafelt. And I think, we, as part of our connection to leadership, we actually had our whole leadership team read that paper and go through and talk about questions that they have, specific to, to the items that were brought up in that paper. The other thing is, as an organization, we were involved with [Institute for Healthcare Improvement](#) and used their [Joy in Work](#) paper and their Joy in Work Wheel. Because really, when you're, when you're talking about Joy in Work, there are many different levels of responsibility, so I think, the, there's the individual responsibility of how do we, what are we responsible for from, from ourselves within our own work, what is our supervisor's responsibility to us and to the organization, and what is our leadership's responsibility. And I guess, I would take this one level further, as well as a health care, within the healthcare state of being, and the whole nationally and potentially internationally, and I think we need to look at the, the systems that we have in place, from a, I think, from an organizational level with healthcare, from a national level, I think we need to look at how we can fix the system of healthcare that we are living in at, at this time, and I think a lot of that is through advocacy and we have worked with our organization within Colorado to really advocate for community health centers within the state, within our region, and I only see advocacy for healthcare as a national, a national issue.

Amanda Arnold: I think advocacy nationwide is important, for health centers but healthcare in general, advocacy should be a priority so that we can figure out how to make the systems better.

So a resource that we used for the WISE committee was a grant that we got from the [The Colorado Trust](#) with equity work that they're doing, so it was a health equity grant and we had a consultant come up and help us get our WISE committee started. And so some of the questions that we focused on, at first, were: I know what is expected of me at work, in the last seven days I have received recognition or praise for doing good work, and in the last six months someone has talked to me about my progress. So, the first question that the team decided to try and have an effect on is: in the last six months someone at work has talked to me about my progress. We had check-ins but came to realize that they weren't being used as often as they should have been and there were even some team members or people that worked here that weren't getting them at all from their supervisors. And so, we revamped that tool and also put in an expectation into place that every employee receives a check-in at least twice a year and then HR follows up if those are not completed. That just gives our employees, every employee, the opportunity to have feedback from their supervisors. So, I would say that the consultant really helped us figure out how to take the questions and start making a move on how we can better satisfy our employees and making sure they get what they need while they're here at work.

Diana Hornung: And I would say, one other, one other resource, as a provider group, we actually worked with Kristen Race from [Mindful Life](#) to create a mindfulness course for medical professionals which is very individualized, right? And you can't tell people to be mindful and then that's all the joy in their work that they get. So, Kristen really worked with us to create this as just another resource and another tool.

Yael Holzman Castellands: Great. And so while both of you were, you know, building the committee and kind of putting all this, this, these plans into action, did you face any barriers or try anything that didn't work?

Diana Hornung: Yes, we did. And I think that, part of the first steps in starting to address joy in the workplace is being open to the fact that things may not work out immediately. So, we, within our team-based care program, we tried to have monthly meetings with each of our teams, meaning taking them out of clinic, having team growth time. And while that worked for team cohesion, it took people out of clinic and it took, it, it removed access to care, if you will, so we weren't able to sustain that. So we have to think about different ways to carry this forward and I think we're currently reassessing how we want to do that and I don't think we're, we're there yet and how we want to make sure we have healthy, healthy teams. So, more to come on that.

Amanda Arnold: I would say that a barrier that we ran into, as I said we used staff surveys to gauge where we were and what we needed to work on, and I would say one barrier was trust and something that we need to build within our employees. There were definitely employees that didn't feel comfortable honestly answering the survey because they were worried that, that survey would be linked back to them and what if they gave a bad review or, or you know, what would the repercussions of that be. And so, trying to focus, or, put some energy into making sure employees know that we're only looking at that data as an aggregate and it's only being used to help us be better and building that trust within them to be able to answer one hundred percent honestly.

Yael Holzman Castellands: And I know we discussed the survey, but could you go into more detail about how the organization has been measuring the impact of the program and what are the other changes you have seen internally?

Amanda Arnold: So, from an agency-wide perspective, we do that survey, that same survey annually so we can gauge what things are coming up or going down and we can realign our work to that, and then we take those surveys and we pick questions to work on, so a couple of other outcomes that have come from this is we started a wellness program for our employees where a week in the summer we spent each day focusing on a different

area of wellness. So, we focused on physical, mental, financial, environmental, and relationship. We're hoping to do that again this winter, and then also we created an idea lab because employees didn't feel like their voices were being heard or that their ideas mattered, and so really giving them the platform to give an idea and not only give the idea but receive feedback as to if their idea is going to be implemented and if not, why not, not just no.

Diana Hornung: I would add to that, is, is loop closure – communication, we've been working on, and I think, I think everybody can continuously forever work on communication, and so I don't think that, that's ever something that, that dies. And I think that we have really been trying to find different forums to figure out how to best communicate, how to close loops with communication – I think that's been a huge benefit to this program.

Amanda Arnold: Yes, we also measure staff turnover which unfortunately through some of our changes, has, staff turnover, we've maybe had more staff turnover than we'd like, just because when you're changing a culture and you're changing the way an organization functions, for some people, that's just not a fit for them, but it's something definitely that we measure. We've also measured internal promotions, we've been increasing the amount of employees internally that are promoted, which is something that we really want to grow, our own employees and set them up for their next adventure. And so that's something I'm really proud of, is the amount of employees that we've been able to grow and promote within our organization.

Yael Holzman Castellands: And what does the future look like for the program and what advice do you have for other health centers that are trying to incorporate staff wellness into their workplace?

Diana Hornung: For, for me, I strongly believe that this is a cultural shift and I think that it takes commitment. So, my biggest ask of those clinics who really want to focus on this, is making sure that it is within the strategic plan of your organization. We have a board that supports this one hundred percent, it is within our strategic plan, it is within each of our program plans, highlighting, how, what, what does joy in work mean to us and how do we get there. And it's going to be very specific to your organization about what it means, what it means to you, but I think we have incorporated, really, that quadruple aim into our strategic plan and have highlighted that within our joy in, joy in work for our employees. So, I would say, strategic planning, put it into your program plans, specifics of what that means to you.

Amanda Arnold: Yeah, and I would say we're going to continue our, you know, our long-term goals to continue this work. It's sometimes slow progress, but when you look back you realize how much you've accomplished and so, don't be discouraged and just celebrate the small wins. Our long-term goal is to continue serving our employees, to continue our WISE committee, and continue to work on us as an employer. We want, we want to be a place where people choose to work, where they want to be. We also, you know, want to continue working on things like compensation and benefits, career ladders, those are things that are still on the horizon that we know we have work to do in and that our goal is to, is to accomplish that and make sure employees want to be here.

Diana Hornung: And I think, specifically for, within the community health center, looking at our EMR, we're constantly trying to find better ways to use our EMR, to have billing and coding training for our providers, to ideally have seventy five percent of our charts completed by the time we leave the office for the day, and so there's specific items, line items to try and make that happen. I think as Amanda said, career ladders for all of our staffing. When I started this back in 2017, it was specifically for providers and I think, we are a small organization, it grew to actually, we grew to have an HR department which is huge for us and, and, and that has been, one of things that, our, I believe our employees are looking for and asking for.

Amanda Arnold: Yes I would say, before, I wasn't here obviously, but before we had an HR department some of these things were harder to focus on and so for those smaller sized community health centers that aren't, that don't have an HR department, I would encourage you to make that a priority because I feel like once we had, we only have two people in our HR department, but once we had those people focusing on this type of stuff, it really propelled the work that we can do so I would recommend making that a priority.

We would be glad to share any of the resources that we have. We have a [charter from our WISE committee](#) that might be helpful, we also, I'd be glad to share the questions that we ask our employees [annually in the survey](#).

Diana Hornung: And I think that, if, anybody is really starting to put this into practice and they're just wondering how to start or next steps, I would be very happy and willing to sit down and talk with anybody so feel free to reach out to, to either Amanda or I.

Yael Holzman Castellands: That would be fantastic. Thank you both so much for sharing that advice with our Region VIII health centers and for joining us today for our second episode of the CHAMPS Staff Wellness Best Practices Podcast Series.

Diana Hornung: Thank you for having us!

Yael Holzman Castellands: Of course! This episode is available for free to download at CHAMPSonline.org. A typed transcription of this episode is also available. If you're interested in recording an interview for our series, please let us know by sending an email to Yael@CHAMPSonline.org. As always, thank you so much for listening.