

PHI Coaching ApproachSM Demonstration Yields Positive Outcomes for Employers

In 2006, with funding from the John A. Hartford Foundation and The Atlantic Philanthropies, PHI launched the **Center for Coaching Supervision and Leadership (CCSL)**. The purpose of this four-year initiative was to test and refine PHI's signature practice, the *PHI Coaching Approach to Supervision*. Through CCSL, provider sites strengthened management and supervisory practices, resulting in substantial gains for both workers and employers.

The PHI Coaching Approach teaches core skills that build healthy, well-functioning organizations. Beginning with organizational leaders and supervisors, staff learn and practice:

- **Active listening**—using body language, paraphrasing, and asking clarifying questions to listen attentively and ensure understanding;
- **Self-management and self-reflection** (“pull back”)—being conscious of assumptions and biases, and setting aside emotional reactions;
- **Clear, nonjudgmental communication**—communicating clearly and directly about expectations or concerns while using language free of blame and judgment;
- **Collaborative problem solving**—using critical thinking and communication skills to build effective teams, ensure accountability, and resolve problems; and
- **Participative leadership**—engaging and empowering staff at all levels to participate in envisioning and implementing a respectful, relationship-centered culture.

With these skills in place, change initiatives are more successful and sustainable.

The CCSL initiative involved 11 providers in the Northeast—five nursing homes and six home health agencies. PHI trained trainers from each participating organization to deliver the PHI Coaching Approach to Supervision two-day training. Six sites additionally trained non-supervisory staff in the core communication skills. Organizations received technical and financial support, including training, meeting facilitation, and leadership development (see box on page 3). A mixed-method evaluation included pre/post job satisfaction surveys, interviews with executive leaders and trainers, and focus group discussions with direct-care staff and cross-functional teams that each site established to support implementation.

“Before, people would say things and I would only be half there. Now I am really listening to what they are saying.”

—Supervisor, Loomis House

Key Evaluation Results

▶ **Trained supervisors are practicing coaching skills in the workplace**

In traditional training programs, trainees often do not put what they have learned into practice when returning to their place of work. In contrast, the CCSL adult learner-centered, skill-based training, accompanied by systems and supports established with and by employers, led to more than *three-quarters of trained staff reporting the use of coaching skills* at work approximately one year following the training.

- At one year, 77 percent of trained supervisors surveyed reported they often or always practice the PHI Coaching Approach to Supervision at work; 58 percent of trained supervisors reported that other supervisors often or always practice coaching skills.
- Trained supervisors reported an increase in the extent to which they practice active listening, pull back (managing one’s own emotional response), and holding individuals accountable for doing their job well. These changes were statistically significant (see figures 1 and 2).¹

▶ Job satisfaction increased significantly

PHI collected data on overall satisfaction and experience with supervision from nearly 1400 staff pre-intervention and 1500 post-intervention at participating CCSL sites. Six items comprised the overall satisfaction scale (including “I am very satisfied with my job” and “I would recommend this organization to others as a good place to work”). Similarly, six items comprised the supervision scale (including “My supervisor treats me fairly” and “My supervisor welcomes suggestions about how to solve problems at work”).

- Statistically significant improvements for direct-care workers registered on the satisfaction scale ($p < .039$) and the supervision scale ($p < .003$) pre/post intervention at CCSL participating sites.
- The percent of staff agreeing or strongly agreeing with each item of the supervision scale and five items of the satisfaction scale increased, including: “I would like to continue to do this job at this organization for the next two years” (from 60 to 70 percent); and “My supervisor informs me about issues that are important” (from 74 to 80 percent).²

▶ CCSL employers registered improved efficiencies

Improvements in communication skills empower workers and allow for problem solving to take place closer to the resident or client.

- Supervisors and managers participating in CCSL reported in interviews that the time they were spending solving others’ problems had decreased, and that this freed them to focus on other responsibilities.

Figure 1

Supervisors report practicing “pull back” (n=240)

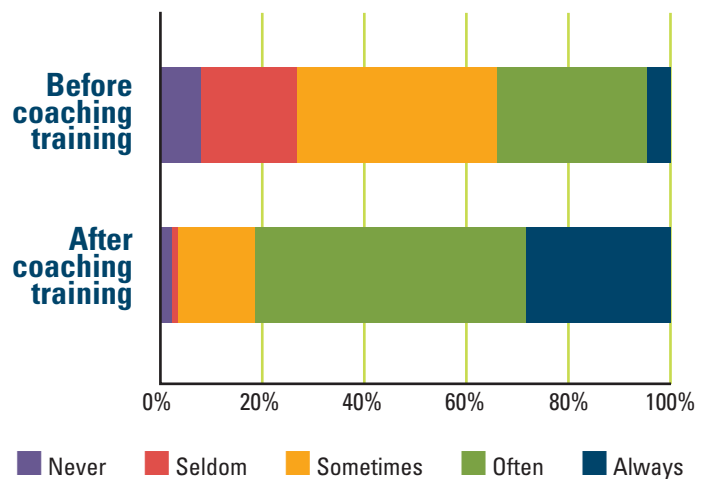
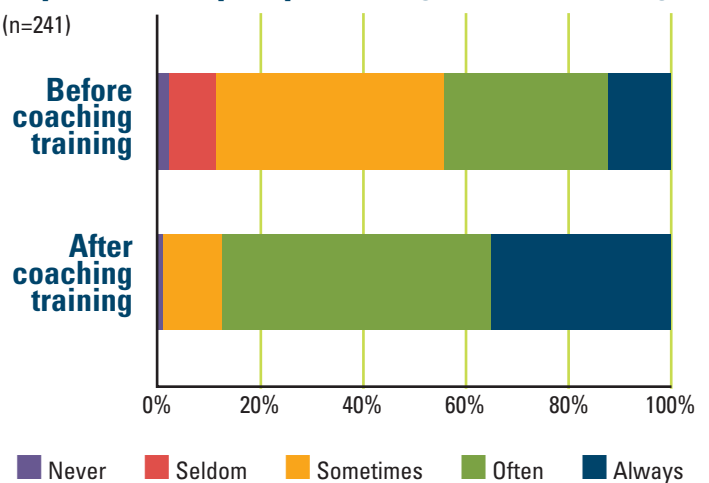


Figure 2

Supervisors report practicing active listening (n=241)



- In surveys, 30 percent of supervisors indicated that the time spent solving other employees’ problems decreased (48 percent indicated it remained about the same).
- 25 supervisors reported a total of 75 hours saved per week following training in the PHI Coaching Approach to Supervision. This translates, on average, to nearly 4 weeks of time saved annually per supervisor.

▶ Providers report improvements in quality of care

With improvements in communication and problem-solving skills comes the ability to communicate more effectively with clients and families, as well as

“As an executive director, I cherish the gift of time. My staff have learned to work together to solve problems at the appropriate level, leaving me the ability to focus on strategic issues...”

— Margaret Franckhauser, CEO,
Central New Hampshire VNA & Hospice

to observe and communicate changes in health status with co-workers and supervisors. Qualitative data provide examples of the effect of coaching on quality care.

- Marion Nugent Cowan, director of hospice at the VNA of Indiana County, noted that coaching “promotes a feeling of mutual respect. When you do that, trying to understand where people are coming from, not making assumptions, it applies not just to staff but also to patients and families.”
- Deb Symonds, director of nursing at Orchard Cove, linked the empowerment staff experience as a result of learning new skills and the quality of the care they provide: “Because CNAs are more confident, they can provide better care for their residents.”

In fact, Orchard Cove showed marked improvement in clinical outcomes.

- From June 2008 through July 2010, it recorded a downward trend in the prevalence of falls, urinary tract infections, high-risk residents with pressure ulcers, and residents who have become more depressed or anxious.

► Provider organizations invest in sustainability

Organizations that have put the time, resources, and thought into how to sustain coaching as an organizational practice are most likely to succeed, according to

“Coaching Supervision has helped a lot because I was the type that wants to try to solve all the problems. Now I step back and empower the staff to come up with the solutions.”

— Supervisor, Beth Abraham Family of Health Services

The Intervention: Key elements of the Center for Coaching Supervision and Leadership

Executive Leader Training. Two-day coaching seminars introducing leaders to the program and clarifying their leadership role in a high-involvement change process.

Train-the-Trainer Program. A nine-day training program conducted by PHI staff covering all aspects of the PHI Coaching Approach to Supervision and preparing attendees to conduct in-house two-day trainings for supervisory staff at their sites.

Cross-Functional Team Development. PHI supported development of cross-functional teams that included staff from senior management, supervisors, coaching trainers, and direct-care staff from across departments. These teams were responsible for determining how best to “roll out” training and how to sustain coaching within organizations.

PHI Coaching SupervisionSM Training. Conducted by site trainers, with PHI’s assistance, this two-day seminar introduced supervisors and managers to the language, skills, and philosophy of the PHI Coaching Approach.

Booster Sessions. PHI staff worked with on-site trainers to provide refreshers, or “boosters,” to participants who had previously completed the two-day training. Booster sessions reinforce the core coaching skills, ensuring that their use is sustained.

Communication Training. Six sites trained non-supervisory staff in a one-day seminar that introduced participants—through interactive, skill-based training—to the core communication skills needed to strengthen teams, enhance leadership, and improve caregiving relationships. These skills include active listening, paraphrasing and asking clarifying questions, self-awareness, pulling back, and giving and receiving feedback.

evaluation respondents. Participating sites developed specific strategies intended to “keep coaching alive” within their organizations. These included structures and systems to ensure ongoing training and “boosters” for staff.

Having sufficient numbers of staff trained and using coaching skills is important, respondents stress, because it allows staff to have and use a common language related to communication, and to remind,

“One of the things we’ve made a concerted effort to do is to make [coaching] a part of the whole organizational culture.... There is more recognition that in order for us to grow as an organization we need to use so many of the coaching skills.... We’ve made it a part of leadership development.”

— Kathy McConnell, VP of Affiliate Operations,
Visiting Nurse Association of Central Jersey

support, and reinforce one another in the practice of coaching. Organizations also embedded the PHI Coaching Approach into organizational policies (such as job descriptions, orientations, and performance evaluations), continued to support cross-functional teams (including establishing clear roles, responsibilities, and membership policies), and put into place mechanisms that ensured executive leaders continued to be engaged in discussions and decision making (for example, regular meetings between coaching trainers and executives, or a cross-functional team member liaison to the executive leadership who can report regularly on coaching activities).

The PHI Coaching Approach Helps Transform Organizational Culture

The **PHI Coaching Approach** helps providers in the eldercare/disability field to build the core skills necessary to deliver relationship-centered care within their organizations. CCSL participating organizations have demonstrated a shared commitment to communication and collaborative problem solving that supports transformation of their organizational cultures. Such an approach brings benefits to the employer organization, its staff, and the individuals they serve: the evaluation of the CCSL initiative documented ongoing use and practice of key communication skills, increased job satisfaction, improved efficiencies, and improvements in quality of care.

For more information about the PHI Coaching Approach and PHI Training and Organizational Development services, see www.PHInational.org/training

To learn more about the evaluation of PHI initiatives, go to: www.phinational.org/what-we-do/evaluation/

Endnotes

- 1 These “statistically significant” results are represented by a “p” value of less than .001, which signifies that there is less than .01% chance that the differences in the responses are due to chance alone.
- 2 The sixth satisfaction item, “My work gives me a feeling of personal accomplishment,” remained the same at 85 percent of respondents agreeing or strongly agreeing.



PHI (www.PHInational.org) works to improve the lives of people who need home and residential care—and the lives of the workers who provide that care. Using our workplace and policy expertise, we help consumers, workers, employers and policymakers improve long-term care by creating quality direct-care jobs. Our goal is to ensure caring, stable relationships between consumers and workers, so that both may live with dignity, respect, and independence.

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