CHAPTER 2

2. DATA COLLECTION AND RESULTS

2.1 INTRODUCTION

This study started with the initiation of an analysis phase, to identify the required changes the Physiotherapy Department needed to make. This chapter explains the data collection procedure, some of the results obtained during the analyses phase as well as conclusions.

2.2 PROCEDURE

The researcher facilitated workshops with the entire Physiotherapy Department of the Johannesburg Hospital. Each workshop was held on a Friday during a two-hour session. A vision, mission and the core values were identified for the department in addition to the fifteen most pressing or frustrating problems. Techniques used during the workshops were Facilitation, Brainstorming (Reicher, 1999) and the Nominal Group Technique (Delbeck and Van den Ven, 1971).

During the second workshop, the group agreed to complete timesheets to provide information on the available capacity. The supervisors assisted in the development of the timesheets. Statistical analyses were performed to determine standard times for treatments, whether work could be standardised across treatment areas within the Physiotherapy Department and what the load and required capacity was over a sixmonth period.

2.3 FACILITATION

To ensure optimal use of time, the use of specific facilitating skills assisted the researcher in the running of these workshops. The facilitator's role is to ensure that the group reaches a specific goal as required for a specific intervention. The facilitator assists the group in keeping the focus on the goal and to ensure that all individuals are involved. The facilitator therefore plays an essential role in the smooth running of the workshops. All individuals should be involved to ensure commitment to the decisions taken and to obtain the best possible input (Reicher, 1999).

At the start of the workshops, the group agreed to adhere to specific workshop rules.

The reason for defining specific rules is because of the group size. It is much easier to manage a large group if some ground rules are in place.

These rules for the workshops were:

- No criticism of ideas
- Listen to the person talking
- Confidentiality
- Not too much dialogue
- Not to answer the beeper or cell phones unless a medical emergency occurred.

The group consisted of the eighteen physiotherapists, six part time physiotherapists, five physiotherapy assistants, the head of the department as well as the secretary. There were five supervisors; the rest of the physiotherapists differed in age and

experience. The physiotherapists worked in different treatment areas, these areas

operated independently of each other. Although all were able to do the work in all the

treatment areas, due to preference and experience they only worked in a treatment

area, other than the usual, if there was an emergency. During the workshops, the

observation was that there was a tendency for individuals to want to protect their

treatment area. This made the need for the department to focus on a central goal even

more important and to make the physiotherapists aware that the focus is on improving

circumstances for all.

Facilitation of the group was difficult due to the size of the group as twenty-nine

individuals attended each session. It may have been beneficial to break the group up

into smaller groups. This was difficult due to the fact that groups would then have to be

scheduled at various times and there were time constraints from the physiotherapists'

side. It would also have been far more difficult to obtain a consensus decision if the

physiotherapists were not all together when making the decisions. Originally, it also

seemed like a good opportunity to bring everyone together as a team.

2.4 DEFINING VISION AND CORE VALUES

The reason for firstly defining the vision and core values was to ensure a common

understanding and a common objective for the department as a whole. To define the

vision as a department, physiotherapists had to focus on what they saw as the goal of

10

the department, and what the essential contribution of the department was. They defined a vision based on how they would like to see the department develop.

According to Chase and Aquilano (1995), the two essential messages to communicate to the employees are, first to make it clear that there is a need for action and secondly the vision should be clear. In the Physiotherapy Department, it was clear to all, that there were many problems and a need for change. Therefore, the starting point was to define the vision. Ideally, the objectives for reengineering should be included in the vision. The objectives of reengineering in this instance would be to ensure optimal physiotherapy treatment under the present external conditions.

The application of brainstorming techniques helped the definition of the vision and core values. When using the brainstorming technique the group generates as many as possible ideas in a short period (Reicher, 1999). The facilitator explained the reason for the brainstorming session as well as the technique. Participants then gave ideas for the vision and core values, the facilitator wrote them down on a flip chart but did not allow any discussion of any of these ideas at this stage.

The department defined their core values to clarify as a group the manner in which they wanted to deal with each other, with patients, other hospital staff and the community. Values help to direct decisions and actions. The department agreed on what the culture should be based on, within the department.

There is a critical relationship between human resources and change and the

achievement of goals. The process of the group defining the vision and core values as

well as identifying major concerns within the department was also conducive to

developing a greater sense of belonging to a group and to working together.

2.4.1 Vision

The Physiotherapy Department's vision is:

To provide through teamwork in a good working and learning environment, the best possible, most effective physiotherapy service

This vision was a consensus vision, the group having decided on it together. The head of the department thereafter had posters made with the vision. At the year-end function, several of the retired physiotherapists that had a significant influence on the department before retirement were invited. The hospital director overseeing the Physiotherapy Department was also invited. This event launched the vision. The vision is on display in the department at important locations.

2.4.2 Core Values

Eleven core values were identified. They were:

- Respect for individuals
- Empathy
- Integrity honesty

- Accountability
- Ethical Conduct
- Commitment
- 7. Role Models to the community and the students
- 8. Respect for cultural diversity
- 9. Effective communication
- Acknowledgement of performance
- Responsible and reliable physiotherapists

2.4.2.1 Description of core value

- Respect for individuals To have regard for each other and oneself, to consider opinions and differences and to treat each other with dignity and without judgement.
- Empathy To sympathise with and be compassionate to patients, to help and be merciful with patients. Treat the patients holistically and with dignity. Extending empathy to staff members and being understanding of their problems.
- Integrity honesty. Keeping promises and admitting mistakes. Direct all the
 actions of the physiotherapists in the department at upholding the departmental
 name and ensuring that members of the department are reliable and that
 outsiders see the physiotherapy profession as such. When it is not possible to
 keep a promise, notify affected parties.

- Accountability Accept responsibility for the success of the department.
 Prepared to account for one's own conduct
- Ethical behaviour Morally correct behaviour
- Commitment To pledge, involve or bind oneself to the department and to provide the best possible service
- Role models for students, patients and each other Setting an example with regard to the conduct as a physiotherapist and as physiotherapy assistants.
 Instruct the students in these values as well.
- Respect for cultural diversity Acknowledge language barriers, different behaviour norms, and unfamiliar religious customs of all cultures. Realise that culturally diverse teams have strength. Make an effort to get to know the behaviour norms of each other, discuss differences. Extra time may be required to acquire these skills.
- Effective Communication Communicate regularly and openly, listen to each other irrespective of position. Clear communication channels should be established and be obvious to everyone. Sub-ordinates should say what they really think. Communication should be in a clear and understandable manner. Attempt to understand each other.
- Acknowledge performance recognise, show that performance has been noticed, express appreciation of individuals publicly (e.g. at departmental meetings). Better performance should be encouraged

 Responsible and reliable individuals – Accountable, well grounded, trustworthy, dependable and providing a quality service.

2.5 KEY ISSUES IN THE DEPARTMENT

After establishing the vision and the core values, the next step was to identify the key issues within the department. The technique used in the workshop to identify these issues was the nominal group technique (Delbeck and Van den Ven, 1971).

Nominal group technique is one of the seven tools associated with a quality improvement cycle. The selection of this technique for this specific workshop was because of the supervisors, physiotherapists and the physiotherapist assistants as well as the head of the department were together in the workshop and participation from all parties was required. Time was also very limited as the physiotherapists were very busy and needed to interrupt work to attend workshops. With the nominal group technique it is possible to overcome some of the problems related to group problem solving, such as:

- Too strong a leader dominates the group
- · Certain members do not participate because others dominate
- Some members are shy
- Some members use persuasive politics
- Time is wasted by unnecessary discussion
- A certain way of thinking is followed that is totally off-course
- Cultural differences hinder the discussion.

The issues that were apparent during the workshop were non-participation and some unnecessary discussion. Cultural differences were also apparent during the workshops. During open discussion, not all the individuals present in the workshop participated. By using the nominal group technique, it was possible to obtain the input of all the individuals. Unnecessary discussion was not possible when using the nominal group technique as the ideas are not discussed but merely given and captured on the flip chart.

The group followed strict procedures to ensure effective decision-making in terms of time and creativity. It is possible to address only one problem at a time, when this technique is used.

Benefits of the technique are (Delbeck and Van den Ven, 1971):

- Thoughts are stimulated and structured
- It reduces group interaction and saves time
- It assists in finding creative solutions
- It assists in reaching consensus decisions
- Good ideas are easily separated from the rest
- It prevents the position and authority of a person as well as politics from confusing the decision making process

The group leader has specific duties when using this technique and should be careful not to play too strong a role (Delbeck and Van den Ven, 1971). In this instance the

group leader had no personal involvement in the department and could easily remain uninvolved and stick to the defined role of the group leader. The specific duties of the group leader include, keeping time for every step, to keep record of every idea given by the group and to ensure that ideas are to the point. The leader needs to ensure that discussion and critique of ideas do not hamper the process. The leader should explain the voting procedure, keep count of the score and summarise the results of the exercise.

The specific steps followed in the workshop were:

- Each participant received a set of cards for the purpose of the exercise.
- Each participant wrote down a list of ideas on areas that needed improvement.
- The leader then recorded each person's ideas on a rotation-basis and each idea was numbered.
- Every participant submitted one idea per round.
- Participants removed the ideas from their own list, as they or others in the group submitted same ideas.
- The facilitator recorded all ideas that were similar to ensure that the originator should not feel embarrassed and withdraw from further discussion.
- All ideas recorded were visible to all participants present.
- After ensuring that all the ideas were exhausted, the facilitator needed to ascertain whether the members all understood the meaning of each idea.

Most ideas were very clear and no further explanation was required.

17

Time did not permit the discussion of the various ideas. Combination and rephrasing some ideas eliminated some points. This only happened when all participants were comfortable with the results. Other ideas remained although they were similar to ensure that no one withdrew from the discussions. Time was also a limiting factor and discussion of some points was not possible in the available time. These points remained as the group leader felt it would be best to leave them rather than lose the group's interest in the exercise.

Each participant then used the cards originally handed out. They wrote each idea on a separate card. They then wrote the number of the idea in the topmost left corner of the card. The participants then rated ideas from the most important to least important. The most important idea got the highest number, corresponding with the number of ideas generated e.g. for 10 ideas generated, the most important idea is assigned a 10, the worst idea is given a 1.

As time was limited, it was not possible to determine the most important issues in the workshop. The cards were gathered and analysed outside of the workshop. From the listings of the participants, it was possible to obtain the fifteen major areas for improvement. The ideas with the highest scores were most important. If ideas had the same score, the idea with the most single votes was the more important idea.

The fifteen major areas that required improvement according to the participants were:

- 1. Salary
- 2. Staff Shortage
- 3. Leave
- 4. Blocked telephones
- 5. Low Motivation
- Work over weekends and overtime is badly planned not optimised.
- Not enough time to give best service or more than adequate service.
- 8. Implementation of decisions/solutions. Not everyone is involved.
- Inadequate time and opportunities for learning. No time for individual professional growth or interests.
- Lack of equipment not repaired, dirty and not maintained.
- 11. Dirty environment not because of a shortage of staff.
- 12. Stress.
- 13. Teambuilding exercises, courses and congresses.
- 14. Communication staff do not always know what is going on.
- 15. Career development of assistants.

Issues 2, 7, 9, 12 and 15 are directly related. It is due to staff shortages that there is no back up in the event of individuals being unable to be at work due to circumstances out of their control e.g. sick leave. Staff shortages are also directly responsible for the lack of time to provide the best service to patients and for staff to spend time on learning and individual professional growth. It also makes it difficult to help assistants to develop

their careers. The shortage of staff and the related constraints is probably the largest

contributor to stress. From personal interviews with individuals, it became clear that

one of the main reasons why physiotherapists apply for a position at the Johannesburg

Hospital is because they still believe it to be an excellent opportunity for learning. That

is also why it is especially frustrating to individuals when they do not find time to learn

and grow professionally as they could be earning a lot more elsewhere.

2.6 CONCLUSION

This chapter discussed the human issues in the Physiotherapy Department. It described the method of identifying the most pressing issues. The chapter also covered various techniques available to ensure optimal input from groups and their effective use in the workshops.

Ensuring common vision and core values provide direction for the department to focus on for the future and the principles this would be based on.

Based on the workshops it seemed as if the biggest problem was insufficient capacity. This would also have an impact on several other issues such as low motivation, leave, lack of communication and a feeling of not being part of a team. Further investigation was therefore essential to determine whether there really was a shortage of staff and if not then to determine the actual cause of the problems.