

AUSTRALIAN INSTITUTE  
OF HEALTH INNOVATION

Faculty of Medicine, Health  
and Human Science



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# Resilience in Healthcare and the Role of Leadership and Teams

National Patient Safety Conference

Oslo, Norway

November 23<sup>rd</sup>, 2023

Workshop from 3:45 – 5:00 pm

10-15 minute presentation

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**Adjunct Professor**

Western Norway University of Applied Sciences

**Honorary Professor**

Australian Institute of Health Innovation



# Tooling, Leading, Teaming and Dreaming – an Australian perspective



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# Tooling



# Some of our tools for a more resilient workplace

# Resilience – Ideas, tools to help

## SIMULATION



[Patterson and Deutsch, many chapters and papers, 2013-now]

[<https://www.ecu.edu.au/schools/medical-and-health-sciences/our-facilities/ecu-health-simulation-centre/overview>]

# Resilience – Ideas, tools to help

## RESILIENCE ASSESSMENT GRID (RAG)

**Learn**

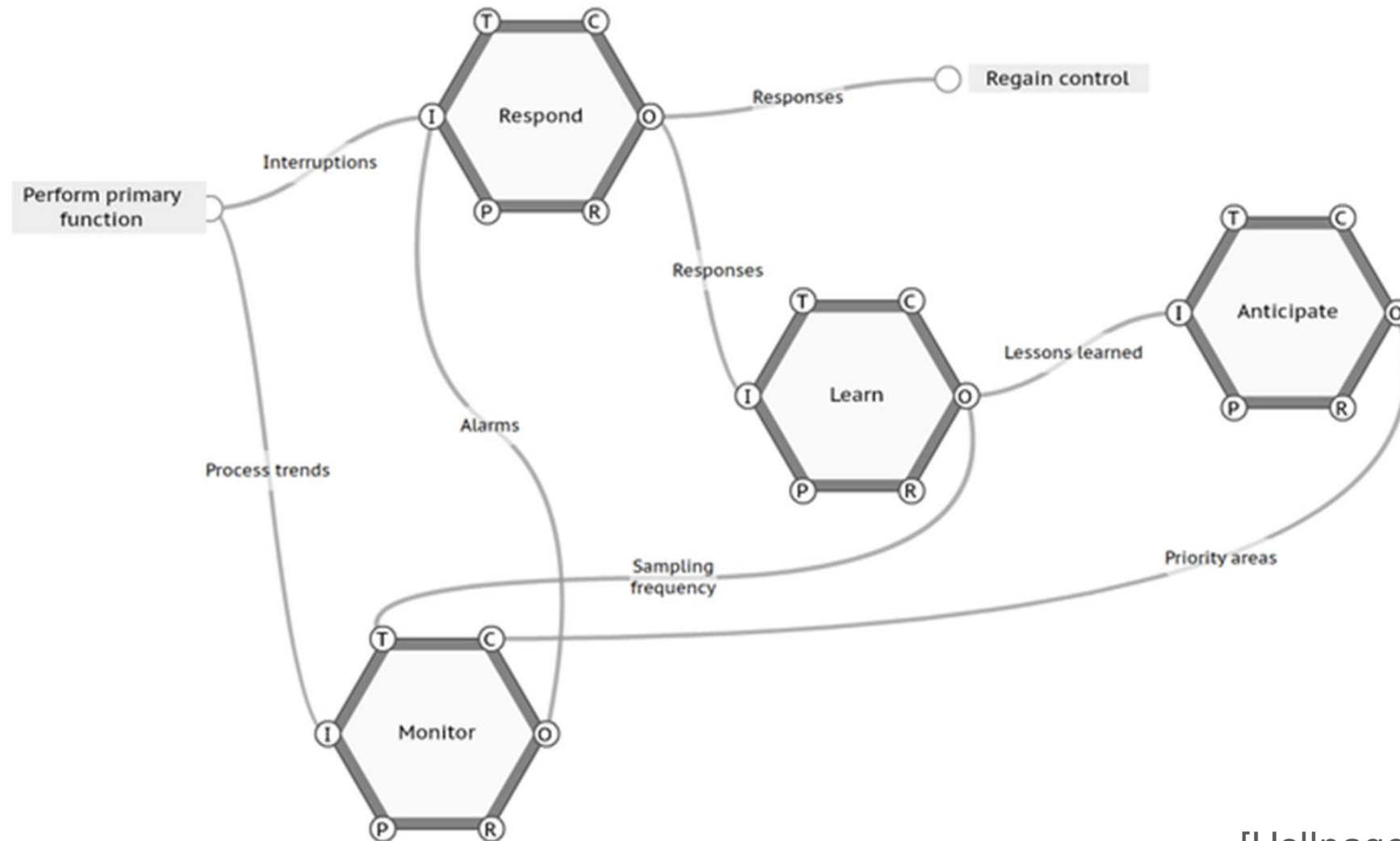
**Respond**

**Monitor**

**Anticipate**

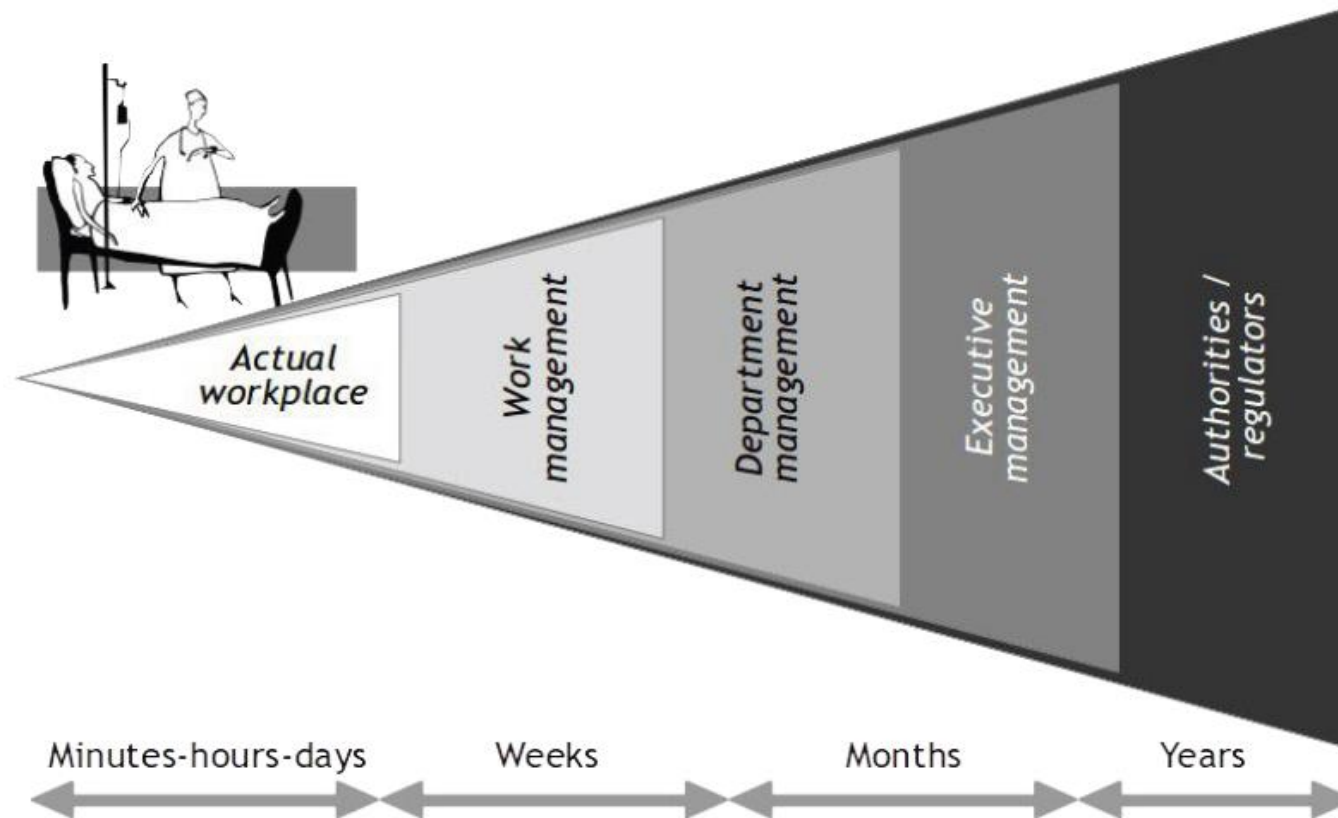
# Resilience – Ideas, tools to help

## FUNCTIONAL RESONANCE ANALYSIS METHOD (FRAM)



# Work-as-imagined (WAI) and Work-as-done (WAD)

The sharp  
end:  
work-as-  
done



The blunt  
end: work-  
as-  
imagined





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# Leading



# Ideas to support leading for a more resilient workplace

# Leading for resilience

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Look at what goes right, not just what goes wrong. When something goes wrong begin by understanding how it (otherwise) usually goes right.

## From Safety-I to Safety-II: A White Paper

Professor Erik Hollnagel  
University of Southern Denmark, Institute for Regional  
Health Research (IRS), Denmark

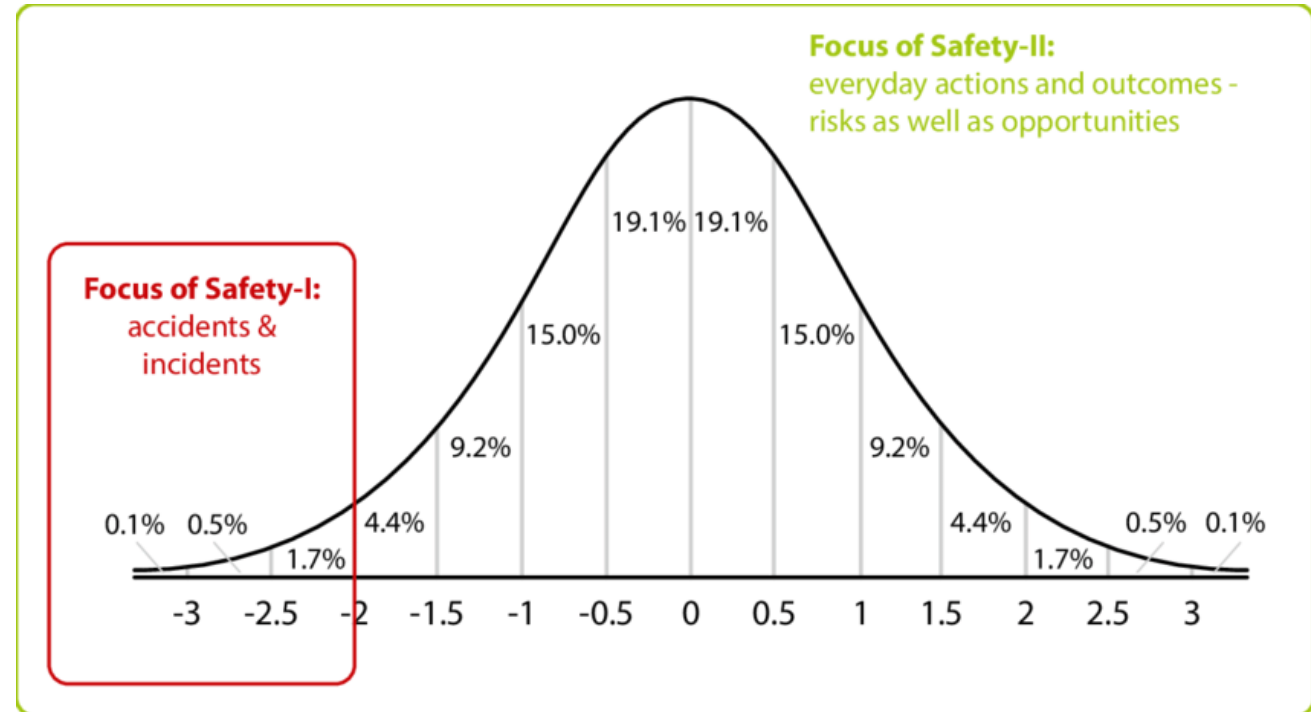
Professor Robert L Wears  
University of Florida Health Science Center Jacksonville,  
United States of America

Professor Jeffrey Braithwaite  
Australian Institute of Health Innovation, Macquarie  
University, Australia

[[https://www.researchgate.net/publication/282441875\\_From\\_Safety-I\\_to\\_Safety-II\\_A\\_White\\_Paper](https://www.researchgate.net/publication/282441875_From_Safety-I_to_Safety-II_A_White_Paper)]

# Leading for resilience

Focus on frequent events, rather than just severe ones.

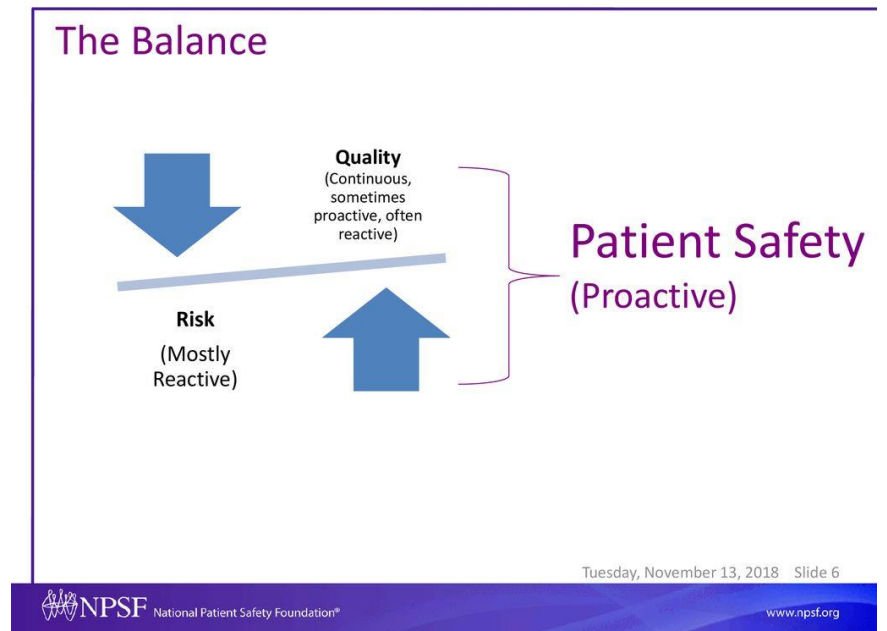


[[https://www.researchgate.net/figure/Focus-of-Safety-I-and-Safety-II\\_fig4\\_282442036](https://www.researchgate.net/figure/Focus-of-Safety-I-and-Safety-II_fig4_282442036)]

# Leading for resilience

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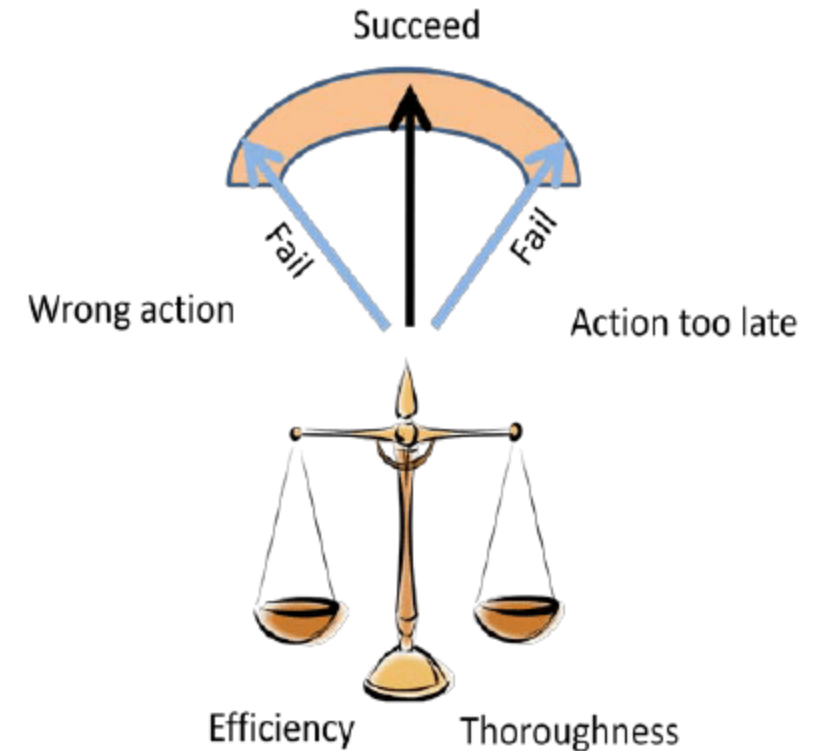
Be proactive about safety - try to anticipate developments and events.



# Leading for resilience

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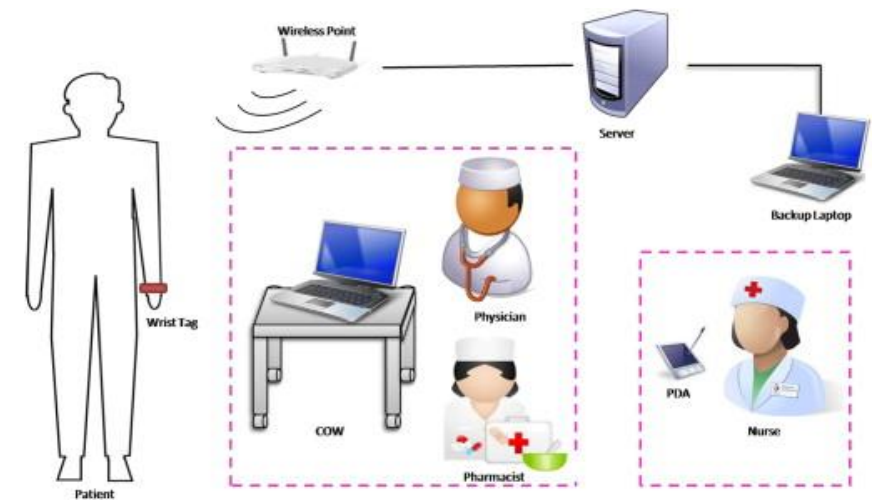
Be thorough, as well as efficient (the ETTO principle).



# Leading for resilience

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Learn about work-in-practice, including “intelligent adjustments” i.e., workarounds.





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# Teaming



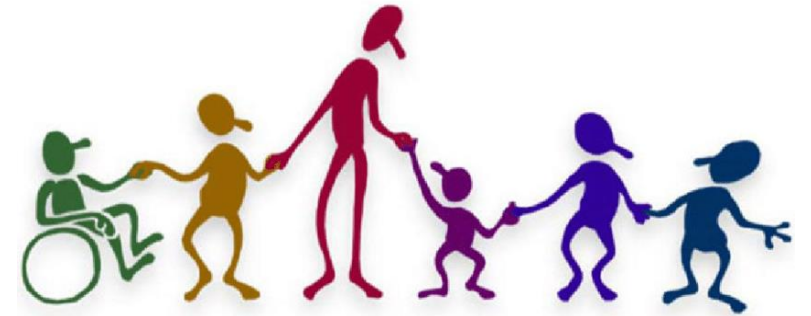


# Ideas to support teamwork for a more resilient workplace

# Teaming for resilience

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Encourage diversity of perspectives, including patients and families.



[[https://www.researchgate.net/figure/The-people-perspective-illustrated-by-the-diversity-of-the-patient-and-carer-population\\_fig16\\_327503422](https://www.researchgate.net/figure/The-people-perspective-illustrated-by-the-diversity-of-the-patient-and-carer-population_fig16_327503422)]

# Teaming for resilience

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Develop trust, reciprocity  
and knowledge-sharing across  
stakeholder groups.



[<https://www.shrm.org/hr-today/news/all-things-work/pages/knowledge-is-best-shared.aspx>]

# Teaming for resilience

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Collaboratively develop flexible and effective procedures, systems with “slack”.



# Teaming for resilience

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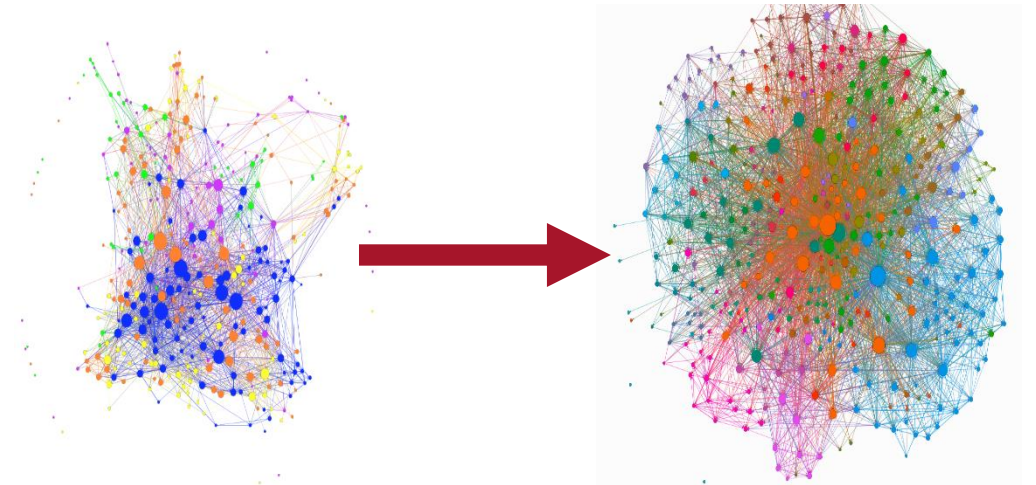
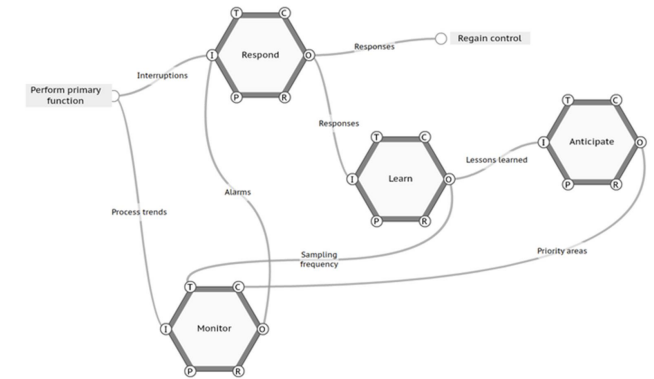
Use simulation.



# Teaming for resilience

Apply systems tools together – e.g.,

- the RAG
- FRAM
- network analysis.





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# Dreaming



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**We dream of a  
better, more  
resilient health  
care  
ecosystem**



# Resilience

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## Normal meanings of resilience:

- Prevent something bad from happening
- Or the ability to prevent something bad from becoming worse
- Or the ability to recover from something bad once it has happened

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“Resilience is the intrinsic ability of a system to adjust its functioning prior to, during or following changes/ disturbances in order to sustain required operations under expected or unexpected conditions”

# A healthcare workplace that is:

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- Quick to respond
- Adaptive rather than “tough”
- Effective at monitoring of the situation
- Resilient, built in the DNA of the organisation
- Comfortable with workarounds
- Willing to improvise, be flexible, have the capacity to manoeuvre