# La sécurité psychologique, facteur No 1 de prédiction de la performance d'équipe

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## Projet de recherche Aristote chez Google

■ Etude de 180 équipes sur 2 ans 3 - 50 membres (median 9)



Question posée :

## "Qu'est-ce qui rend une équipe performante chez Google?"



## Résultats : 5 aspects plus différenciants

### 1. Sécurité psychologique

"Je peux montrer ma vulnérabilité."

#### Fiabilité

"Quand mes coéquipiers disent qu'ils vont faire, ils font."

#### 3. Structure et clarté

"Notre équipe dispose d'un processus décisionnel efficace."

#### 4. Signification

"Le travail que je fais pour notre équipe est significatif pour moi."

#### 5. Impact

"Je comprends comment le travail de notre équipe contribue aux objectifs de l'organisation."



#### **Psychological Safety**



#### Dependability

Team members get things done on time and meet Google's high bar for excellence



#### Structure & Clarity

plans, and goals.



#### Meaning

Work is personally important to



#### **Impact**

Team members think their work matters and creates change.





## Résultats : 5 aspects plus différenciants

1. Sécurité psychologique





## Psychological Safety

Team members feel safe to take risks and be vulnerable in front of each other.

5. Impact - Raison d'etre "Je comprends comment le travail de notre équipe contribue aux objectifs de l'organisation."



#### **Impact**





## La sécurité psychologique est définissable



La sécurité psychologique est la **conviction** que **personne** ne sera **puni ou humilié** pour

- □ ses idées
- ses questions
- ses préoccupations
- ses erreurs



## La sécurité psychologique est mesurable

### Echelle de 1 (aucune sécurité) à 5 (totalement sécurisé)

- 1. Je peux faire une erreur sans que mon équipe la retienne contre moi;
- 2. Les membres de mon équipe sont capables de soulever des problèmes et questions difficiles;
- 3. Les membres de mon équipe incluent les autres même s'ils sont différents;
- 4. Il est possible de prendre des risques dans mon équipe;
- 5. Il est facile de demander de l'aide aux autres membres de mon équipe;
- 6. Un membre qui sabote mon travail sera réprimandé;
- Dans mon équipe, mes compétences et talents uniques sont valorisés et utilisés.





## Et alors?

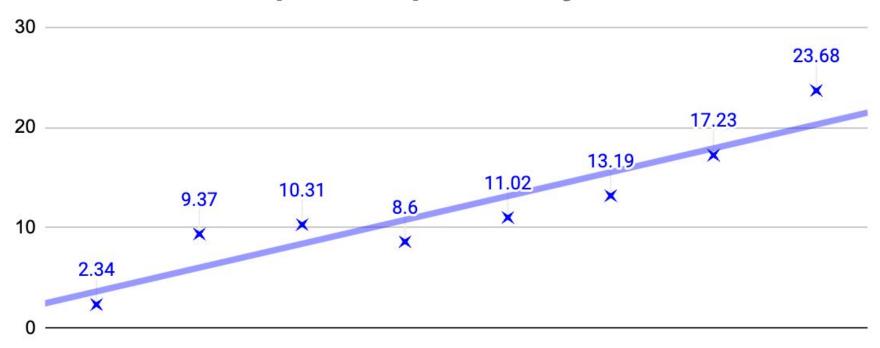
Quelque part, dans le milieu de la Santé...



Preventable and potential adverse drug events (ADEs) per 1000 patient days 30 23.68 20 10.31 9.37 10 2.34

Hospitals by decreasing order of psychological safety

## Preventable and potential adverse drug events (ADEs) per 1000 patient days



Hospitals by increasing order of psychological safety

- psy-sécu hôpitaux : questionnaire n = 183'879 employés
- ☐ signalerait erreurs : interviews n = 374 employés

Hopitaux	ne signalerait pas les erreurs	signalerait les erreurs
psyco-sécures	0%	91%

## "La sécurité psychologique est essentielle pour améliorer la sécurité des patients et réduire les coûts."

- 1 burnout engendre autres burnouts ou départs dans 82% des cas + coûts directs 2x salaire annuel
- + perte de confiance employeur et réputation >

#### Psychological Safety and Error Reporting Within Veterans Health Administration Hospitals

Rvan Derickson, Jonathan Fishman, Katerine Osatuke, Robert Teclaw, and Dee Ramsel

Objective: In psychologically safe workplaces, employees feel comfortable taking interpersonal risks, such as pointing out errors. Previous research suggested that psychologically safe climate optimizes organizational outcomes. We evaluated psychological safety levels in Veterans Health Administration (VHA) hospitals and assessed their relationship to employee willingness of reporting medical errors.

Methods: We conducted an ANOVA on psychological safety scores from a VHA employees census survey (n = 185,879), assessing variability of means across racial and supervisory levels. We examined organizational climate assessment interviews (n = 374) evaluating how many employees asserted willingness to report errors (or not) and their stated reasons. Finally, based on survey data, we identified 2 (psychologically safe versus unsafe) hospitals and compared their number of employees who would be willing/unwilling to report an error.

Results: Psychological safety increased with supervisory level (P < 0.001,  $\eta^2 = 0.03$ ) and was not meaningfully related to race (P < 0.001,  $n^2 = 0.003$ ). Twelve percent of employees would not report an error: retaliation fear was the most commonly mentioned deterrent. Furthermore, employees at the psychologically unsafe hospital (71% would report, 13% would not) were less willing to report an error than at the psychologically safe hospital (91% would, 0% would not).

Conclusions: A substantial minority would not report an error and were willing to admit so in a private interview setting. Their stated reasons as well as higher psychological safety means for supervisory employees both suggest power as an important determinant. Intentions to report were associated with psychological safety, strongly suggesting this climate aspect as instrumental to improving patient safety and re-

Key Words: psychological safety, error reporting, employee voice (J Patient Saf 2015;11: 60-66)

#### MEDICAL ERROR PREVALENCE AND PREVENTION

Health-care administrators strive to prevent or mitigate medical errors to promote public safety, reduce costs, and maintain the trust of their consumers. Despite these efforts, medical errors are an unfortunately persistent reality1 in contemporary health care that, by some estimates, annually injure more than 6 million patients and cost organizations approximately 17 billion dollars.2 Similarly, the Institute of Medicine3 found that more patients died

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or, in extreme cases, even death, Because of the high levels of skill specialization and

annually from preventable medical errors than from automobile accidents, AIDS, or breast cancer, Reducing these human and monetary costs is challenging, partially because errors can occur in many different aspects of treatment.4 For example, Bates and colleagues5 identified 10 potential failure points in the process from medication prescription to medication administration. This translates to untold millions of error opportunities annually within just one aspect of care delivery.

Because most errors are due to system failures rather than reckless or incompetent individuals,3 error prevention is best approached through systemic interventions, such as establishing an organizational climate where regular feedback and information exchange is rewarded.6 One promising avenue for such a systemic intervention involves increasing the psychological safety of health-care workplaces. Psychological safety refers to the degree to which one feels comfortable taking interpersonal risks in a group setting (e.g., asking questions, seeking feedback) without fear of retaliation.8

Veterans Health Administration (VHA) is the largest integrated health-care organization in the United States: annually, more than 280,000 employees serve approximately 5 million patients at 152 hospitals nationwide. To reduce errors and provide the highest quality care possible, VHA leaders actively support psychological safety research and intervention within VHA workplaces. The purpose of our study was to address preliminary and pragmatic research questions related to psychological safety measurement and correlates within VHA, specifically: whether there are demographic differences in psychological safety, what proportion of employees would report an error if they witnessed one, what factors from employees' perspectives enhance or diminish their willingness to report, and whether psychologically safe and unsafe environments are associated with different levels of employee willingness to report errors.

#### PSYCHOLOGICAL SAFETY FOSTERS LEARNING ENVIRONMENTS

Psychological safety plays an important role in the learning process of workplace teams.8 Learning in this context refers to activities of team members that allow the team to adapt and improve, such as interprofessional education,9 seeking feedback, sharing information, asking for help, talking about errors, and experimenting.10 These activities allow teams to detect changes in the workplace environment, learn about customer needs and concerns, and consider unintentional consequences. Learning also involves willingness to admit and learn from mistakes on the job.11 In the health-care industry, continuous learning is critical because implications of failure can include reduced quality of life

10

## Cas #1 - Equipe organisation (sur-)bienveillante

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			0.87			5 3 4 3		4 4 2	5 5 4	3 4 3		4.71 3.86 4.14 3.14	0.49 0.90 0.38 0.69
		4	3	4		4		5	5	4		4.14	0.69
		4	<b>0.87</b> 4 3 4 3			2		4	5	3		3.57	0.98
		4	3	4		2		4	5	3		3.57	0.98
		4	4	5		5		4	4	4		4.29	0.49
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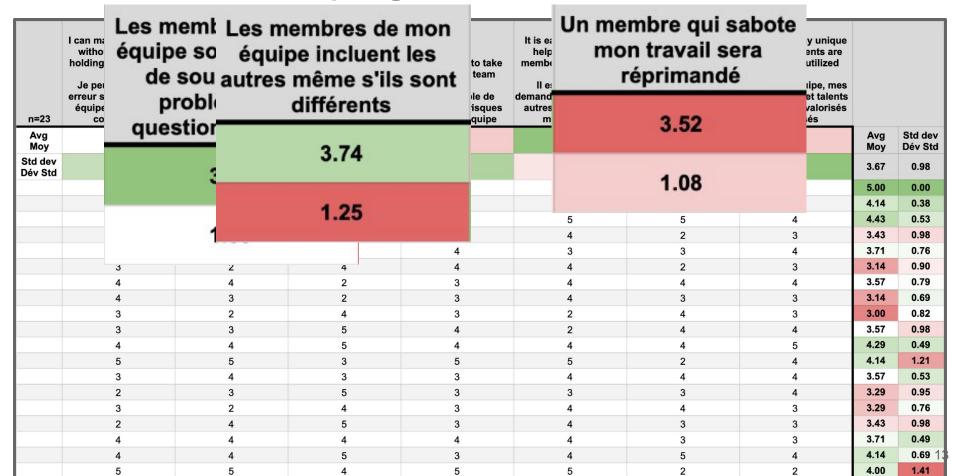


## Cas #1 - Equipe organisation (sur-)bienveillante

n=11	I can make a mistake without my team holding it against me Je peux faire une erreur sans que mon équipe la retienne contre moi	My team members are able to raise difficult issues and questions  Les membres de mon équipe sont capables de soulever des problèmes et questions difficiles	My team members include others even if they are different Les membres de mon équipe incluent les autres même s'ils sont différents	It is possible to take risks in my team Il est possible de prendre des risques dans mon équipe	It is easy to ask for help from other members of my team Il est facile de demander de l'aide aux autres membres de mon équipe	A member who sabotages my work will be reprimanded Un membre qui sabote mon travail sera réprimandé	In my team, my uniqu skills and talents are valued and utilized Dans mon équipe, me compétences et talen uniques sont valorisé et utilisés	s s		
Avg Moy	3.91	3.18	3.91	3.82	3.73	4.36	3.82	Avg Moy	Std dev Dév Std	
Std dev Dév Std	1.04	0.87	1.22	1.17	1.19	1.21	0.75	3.82	1.08	
	4	3	3	4	5	4	4	3.86	0.69	
	5	4	5	5	4		_			
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	1	1	1	5	1	2.1	4	1.9	5	
	5	4	5	5	4					
						4.5	7	0.5	3	



## Cas #2 - Offsite top mgmt



## Cas #3 - Grande organisation de médecine professionnelle

sp.geniuslife.me





## Cas #3 - Grande organisation de médecine professionnelle - donnés brutes recueillies sur scène

n=213 Avg	I can make a mistake without my team holding it against me Je peux faire une erreur sans que mon équipe la retienne contre moi	My team members are able to raise difficult issues and questions  Les membres de mon équipe sont capables de soulever des problèmes et questions difficiles	My team members include others even if they are different  Les membres de mon équipe incluent les autres même s'ils sont différents	It is possible to take risks in my team Il est possible de prendre des risques dans mon équipe	It is easy to ask for help from other members of my team Il est facile de demander de l'aide aux autres membres de mon équipe	A member who sabotages my work will be reprimanded Un membre qui sabote mon travail sera réprimandé	uniques sont valorisés et utilisés	Avg	Std dev
Moy	3.69	3.60	3.61	3.39	3.91	3.21	3.58	Moy	Dév Std
Std dev Dév Std	1.12	1.13	1.16	1.07	1.11	1.34	1.20	3.57	1.18
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	3	3	3	3	3	3	3	3.00	0.00
	3	5	4	1	2	1	1	2.43	1.62
	5	5	5	5	5	5	5	5.00	0.00
	5	5	5	3	5	4	4	4.43	0.79
	5	5	3	4	5	5	4	4.43	0.79
	2	4	1	1	2	1	1	1.71	1.11
	5	5	5	5	5	4	5	4.86	0.38
	5	4	3	5	5	5	5	4.57	0.79
	3	4	4	3	5	4	4	3.86	0.69
	4	4	4	4	4	2	4	3.71	0.76
	1	1	1	1	2	1	2	1.29	0.49
	2	1	3	1	2	3	2	2.00	0.82
	5	4	3	4	5	5	5	4.43	0.79
	5	4	5	4	5	5	5	4.71	0.49
	5	3	4	3	5	5	5	4.29	0.95

## Cas #3 - Grande organisation de médecine professionnelle - extrêmes mises en exergue

n=	I can make a mistake without my team holding it against me Je peux faire une le mon enne oi	without my team Iding it against me Les membres de mon de peux faire une  issues and questions Les membres de mon équipe sont capables		My team members include others even if they are differen  Les membres de m équipe incluent le autres même s'ils s différents  It is easy to ask for help from other they are different les from other deligible. It is easy to ask for help from other they are different les easy to ask for help from other les easy to ask for help from other the		A member who sabotages my work  In my team, my unique skills and talents are valued and utilized  Un membre qui sabote mon travail sera		е	
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	3	3	3					.00	0.00
	3	5	4					43	1.62
	5	5	5	5	5	5	5	5.00	0.00
	5	5	5	3	5	4	4	4.43	0.79
	5	5	3	4	5	5	4	4.43	0.79
	2	4	1	1	2	1	1	1.71	1.11
	5	5	5	5	5	4	5	4.86	0.38
	5	4	3	5	5	5	5	4.57	0.79
	3	4	4	3	5	4	4	3.86	0.69
	4	4	4	4	4	2	4	3.71	0.76
	1	1	1	1	2	1	2	1.29	0.49
	2	1	3	1	2	3	2	2.00	0.82
	5	4	3	4	5	5	5	4.43	0.79
	5	4	5	4	5	5	5	4.71	0.49
	5	3	4	3	5	5	5	4.29	0.95

## Cas #3 - Grande organisation de médecine professionnelle - interprétation

Analyse de la sécurité psychologique de 213 participants à ces journées.

Si ces réponses venaient d'une seule organisation, nous pourrions affirmer que :

- 1. l'environnement permet aux collaborateurs de demander de l'aide à leur entourage sans que le collaborateur-trice craigne d'être puni-e ou humilié-e;
- le sabotage du travail d'un collaborateur-rice par ses propres collègues n'est que peu réprimandé et paraît (trop) courant pour le bien-être des collaborateurs;
- 14% des répondants qualifient la moyenne de leur environnement en dessous de 2.5, ces personnes sont au risque de souffrance mentale et/ou départ de l'organisation.







Testez l'adéquation besoins employés



postes de travail

