

Where's the Why?

By Dr. Shyr Chui

3pm last Friday and the weekend was almost palpable. But instead of easing into it and thinking about my Friday evening cocktail, I was focused, deep into my last breast biopsy case, my 14th of the week.

Recalled after her screening mammogram 2 days earlier, my patient had attended the breast unit today for more detailed mammographic images and an ultrasound scan. We'd found a mass and she needed a biopsy to confirm or exclude cancer.

We could have sent her away after her initial scans, to return and have her biopsy at a later date but she was from out of town and used a walker. I had explained the findings to her and the need for a biopsy. Meanwhile our unit clerk made an urgent phone call to get paperwork and the ultrasound technologist shifted some cases around so we could squeeze her in at the end of our day.

And there she was, on the couch, her breast numb from lidocaine but otherwise wide awake with me poking and prodding her breast with a plethora of devices, needles and probes to obtain the tiny thread-like tissue samples that would determine her future. She was optimistic and making jokes but clearly nervous. Her hesitant voice and clipped sentences gave her away. While scanning her armpit earlier she told us her sister had had breast cancer. Despite her brave face, she knew this procedure was more than just precautionary.

Later, on leaving our unit, she expressed her gratitude to us, for getting her in quickly, for squeezing her in for a same-day biopsy and for saving her, and her ride, a return trip back to town. I wondered how long the next 7 days ahead would feel for her, waiting on the final pathology result. The big C or not the big C? The only question dominating her entire world view until then. We sometimes refer to a patient's bravery when what we really mean is how they face their inner demons when subjected to the trials of modern healthcare and threats to their existence.

In his first book 'Start with Why' [1], Simon Sinek argues that organizations and individuals who learn and understand **why** they do what they do, find much more fulfillment and become more effective in their work. In the health sector, care for our patients should be **our** why, but oftentimes, we lose sight of this. Faced with organizational challenges and limited resources, patients have become depersonalized, faceless names on a long waiting list or worse, numbers on a dashboard.

But what can we do? Our current problems seem so large, complex, and intractable and the solutions so invisible.

If we are to consider solving any complex problem involving patients, then we must put their voice, their needs front and center and build solutions from there. If the solutions have remained hidden from us thus far, it probably means we're looking in the wrong place.

We need new ways of thinking, new paradigms and perspectives. An evidence-based, patient-centric, Quality Improvement approach could provide this perspective. But a QI approach is a leap in the dark because it relies on the solutions becoming apparent only after the process has started and after the problem has been fully defined. This is why individuals and organizations alike are reluctant to invest their time and effort in such a strategy because the solution is not visible nor guaranteed at the outset.

Unfortunately, the current alternatives are not looking tempting. Waiting times for assessment and treatment have never been higher, staff morale never lower and the system is approaching, if not breaching, a tipping point. Risk assessments on potential courses of action should always consider both the risks of a new intervention vs. those of keeping things the same. It's tempting to double down, stay the course, and keep 'business as usual' but the balance of risks is changing and now may be the right time for a radically different approach. The case for radical over incremental change has never been stronger.

In the meantime, let's not forget for whom all this benefits. Not the organization nor the taxpayer but the patient, only the patient. If they are brave enough to seek our help, can't we build a service worthy of that bravery? Let's start there and see where it takes us.

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If you'd like to learn more about how a Quality Improvement approach can address a quality or safety issue in your area of work contact your local QI team and set up a meeting.

Ref.[1]. Start with Why: How Great Leaders Inspire Everyone to Take Action. Simon Sinek, Portfolio, 2011.