|  | WORKSHEET Sponsor Working Agreements |
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|  | **OVERVIEW**  Unit-based team sponsors must complete a sponsor working agreement in order for the UBT to progress beyond Level 1 on the Path to Performance. This document will serve as that agreement, once all team sponsors have come together to answer the questions below and sign the agreement. Regional LMP Councils will determine the appropriate ratio of teams per sponsor. Regional LMP Councils will also determine the process for ensuring labor sponsors are released for sponsor activities.  **Sponsorship Levels on the Path to Performance**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Level 1** | **Level 2** | **Level 3** | **Level 4** | **Level 5** | | * Sponsors are identified and introduced to team. | * Sponsors trained. * Charter completed. * Sponsor agreement completed. | * Sponsors regularly communicating with co-leads *(minimum monthly communication).* | * Sponsors visibly support teams *(minimum monthly contact plus quarterly  in-person visit).* * Minimal outside support needed. | * Sponsors holding teams accountable for performance and reporting results to senior leadership. |   **Role of a UBT Sponsor**   * Review the team’s progress on department’s UBT goals * Promote the use of the Rapid Improvement Model (RIM) to improve department performance * Support full team engagement * Remove barriers and assist, as needed, with attaining data for team’s performance improvement (PI) projects * Recognize the team’s accomplishments * Spread successful practices |
|  | **AGREEMENTS**  **Sponsor Names and Contact Information**   |  |  |  | | --- | --- | --- | | **Management Sponsor(s)** | | | | **Name** | **Phone Number** | **Email** | |  |  |  | |  |  |  |  |  |  |  | | --- | --- | --- | | **Labor Sponsor(s)** | | | | **Name** | **Phone Number** | **Email** | |  |  |  | |  |  |  |  |  |  |  | | --- | --- | --- | | **Physician Sponsor** (if applicable) | | | | **Name** | **Phone Number** | **Email** | |  |  |  |   **Unit-Based Team(s)**  We work in partnership to sponsor the following unit-based team(s):   |  | | --- | |  |   **Communication and Support**   |  |  |  |  | | --- | --- | --- | --- | | **How will we (sponsor to sponsor) communicate with each other?** | | | | | **Phone** | **Email** | **Meetings** | **Other** | | **More information** (for example, how often will you meet? Who will arrange these meetings and set the agenda?): | | | |  |  |  |  | | --- | --- | --- | | **How will we communicate with our UBT co-leads and the other team members?** | | | | * We will communicate via email with our UBT co-leads regarding improvement goals and activities at least once a month. | | | | * We will meet in person with our UBT co-leads: | | | | **Monthly** | **Bimonthly** | **Quarterly** | | * We will attend UBT meetings: | | | | **Bimonthly** | **Quarterly** | **Other** |   **Partnership and Decision-Making**   |  | | --- | | **How will we model working in partnership?** (e.g. use consensus decision-making and interest-based problem solving; attend trainings together; jointly develop meeting agendas) | |  | | **How will we make decisions?** | |  | | **How will we handle issues or differences of opinion?** | |  |   **Team Accountability and Recognition**   |  |  |  |  | | --- | --- | --- | --- | | **We have reviewed the team’s charter:** | | | | | **Yes** | **No** |  | | | **If no, we will review the team’s charter by (date):** | | | | | **How and what do we want our UBTs to communicate with us?** | | | | | **Phone** | **Email** | **Meetings** | **Other** | | **More information** (for example, do you want progress reports, results on tests of change, etc.): | | | | | **How will we encourage, reward and celebrate success?** (e.g. breakfast with leadership, presentation at regional LMP council, team celebration, certificates of appreciation) | | | | |  | | | |   **For Sponsors of High-Performing Teams**   |  |  |  | | --- | --- | --- | | **We will report on UBT progress to senior leaders:** | | | | **Monthly** | **Quarterly** | **Other** | | **We will report out at the following meeting(s):** | | | |  | | |   **SIGNATURES**   |  |  | | --- | --- | |  |  | | SIGNATURE/TITLE | DATE | |  |  | | SIGNATURE/TITLE | DATE | |