Using Nominal Group Technique to Tackle Wicked Problems in Healthcare Culture

Authors: Drs. Matthew Lipinski, Victor Do, Kordan Harvey, Lyn Sonnenberg, Jerry Maniate

Introduction

Purpose of this Tool

This tool is designed to help medical education professionals apply the Nominal Group Technique (NGT) to address complex, systemic, or "wicked" problems in healthcare culture. It draws on our experiences using this process.

Why Use NGT?

NGT is a structured, inclusive, and action-oriented consensus-building method that allows groups to generate ideas, refine them collaboratively, and prioritize them effectively. It works especially well in healthcare environments where diverse perspectives must be balanced and power dynamics or organizational structures can sometimes impede open dialogue.

What Are Wicked Problems?

Wicked problems are deeply entrenched, multifactorial issues that have no clear solution and often evolve over time. Examples include burnout, inequities in professional advancement, lack of psychological safety, or fragmented communication between departments.

Grounding Considerations

Grounded in the principles of the Okanagan Charter and physical, psychological, and cultural (PPC) safety, this toolkit aims to foster respectful, inclusive, and health-promoting environments. We recognize that language and processes in healthcare and education are not neutral, and we strive to use approaches that help dismantle systemic barriers. Facilitators and participants are encouraged to adapt this resource to their own contexts, attend to power dynamics, and co-create spaces where all voices are valued.

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What is the Nominal Group Technique?

Overview

NGT is a five-step process that supports structured brainstorming, encourages equal participation, and leads to consensus on priorities.

The 5 Steps of NGT

1. **Introduction & Explanation:** Present the problem and process.
2. **Silent Idea Generation:** Participants brainstorm privately and write down their ideas.
3. **Round-Robin Sharing:** One idea per person per round, with no debate. This is repeated until no new ideas are generated.
4. **Clarification & Discussion:** The group clarifies each idea for mutual understanding. They then group duplicate ideas into single ideas.
5. **Voting & Prioritization:** Participants vote on the most impactful or feasible ideas using a weighted vote method (e.g., you can rank your top 5 ideas, and this weighted ranking across participants results in the final rank order).

Customizing NGT for Your Own Context

Adapting the Process:

NGT is highly customizable. Start by:

- Tailoring the framing question to your specific issue or audience
- Identifying the relevant interest-holder group(s)
- Choosing the right format (in-person vs. virtual, large vs. small groups)

Sample Framing Questions:

- "How can we improve psychological safety in our department?"
- "What changes would make our residency program more inclusive and supportive?"
- "What systemic barriers are preventing staff from thriving in our organization?"
- "How can we operationalize the Okanagan Charter in our clinical environment?"

Lessons Learned & Tips

Do's

- Create an accountable space from the outset.
- Ensure equal participation (consider using structured turns).
- Document ideas clearly and visibly throughout the process.

Duration: Plan for 60 to 90 minutes total

Don'ts

- Don't allow debate during the initial idea-sharing phase.
- Don't merge or remove ideas without explicit group agreement during clarification.
- Don't skip the final voting step, which transforms discussion into actionable priorities.