MultiCare Health System Imaging Division:

A Management System using Lean and Strategy Deployment

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Presented by Jim Sapienza
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Co-Leader Lean Implementation



Presenter Introduction

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Administrator, Imaging Services



Mr. Sapienza leads imaging services at Washington State's MultiCare Health System consisting of 5 hospitals, 6 A&E's, 20 outpatient clinics and 3 outpatient imaging joint ventures. He is the co-leader of MultiCare's LEAN process improvement program. He earned his BA at Dartmouth College, MA at Indiana University, and an MBA/MHA from the University of Minnesota. He is a Fellow of the American College of Health Care Executives (ACHE). He teaches quality, marketing and leadership at Bellevue College.

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What do you worry about everyday?

- Your People?
- Service to your patients?
- The Quality of their care?
- Your Costs in your expense budget?

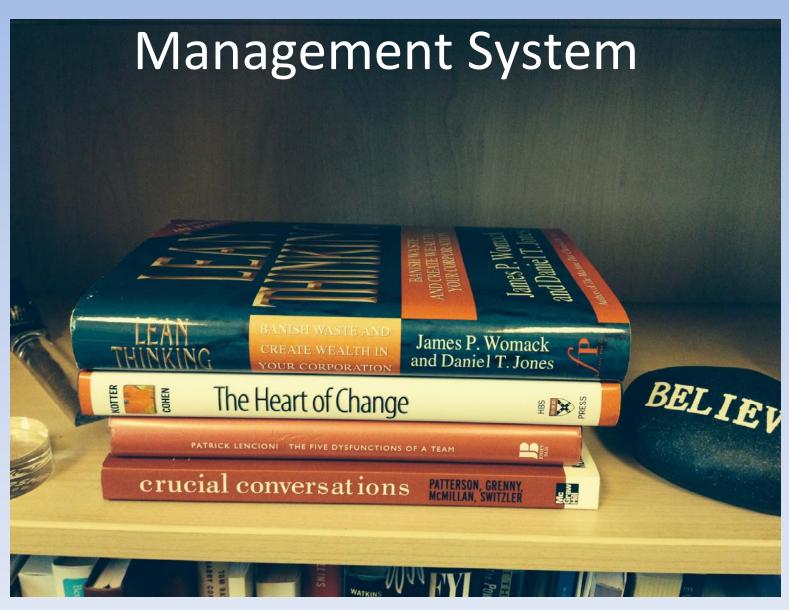
 Identify your top concern in these areas at your table.

Objectives

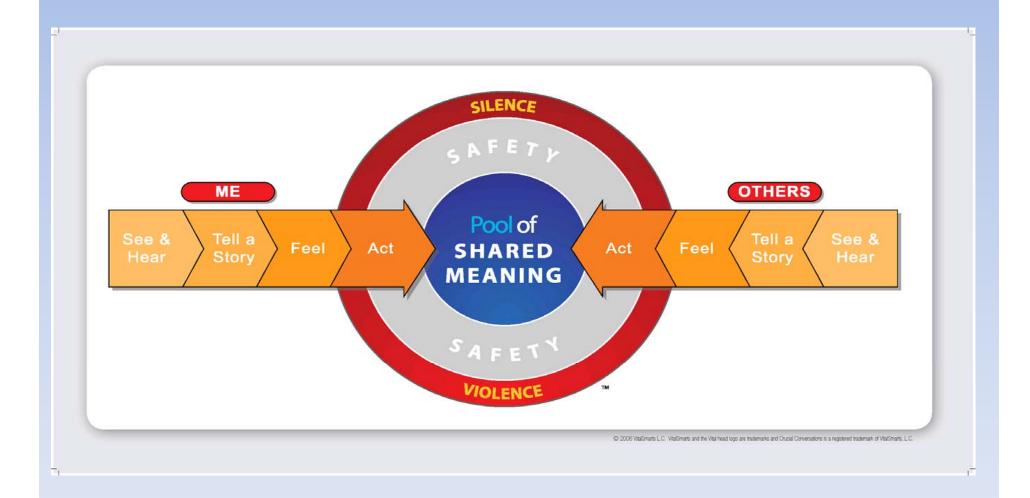
- Overview of a Management System
- Identify Core Components of Lean
- Explain Elements of Strategy Deployment (SD)
 - Alignment with Lean
 - A3 Thinking
 - The Strategy A3
 - Role of Thought Leader
 - Catchball
 - Checking and Management Process

Strategy Deployment = transformational leadership

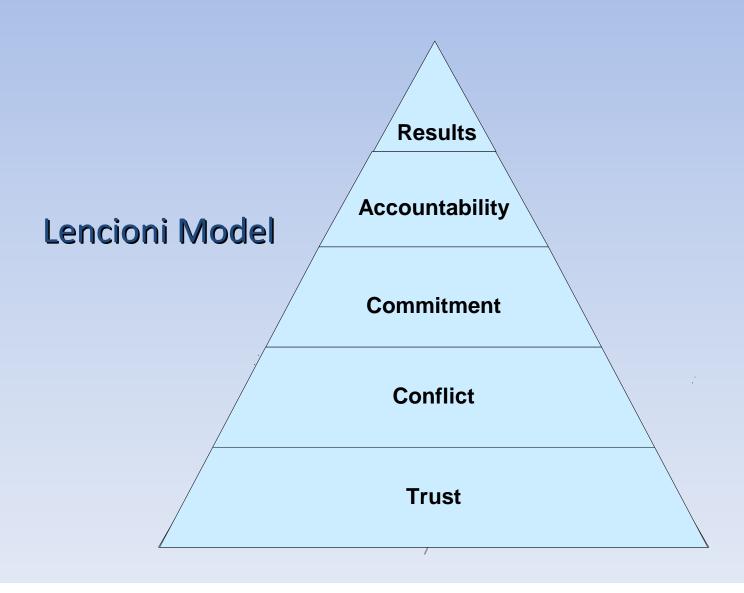
Core "texts" of the



Crucial Conversations



Teambuilding



Change Management

Kotter Model



Lean

- Respect for People
- Standards
- Pathways
- Connections
- Hoshin Kanri

Lean

- Respect for People: Workers and Customers
- Standards: 5S, Leader Standard Work, Standard Process
- Pathways: Kaizen, Flow
- Connections: Value Stream
- Hoshin Kanri: Strategy Deployment
- Lean Tools: The Waste Wheel, PDCA/4-Step Problem Solving

What is Hoshin Kanri? (AKA Strategy Deployment)

The discipline of *Hoshin Kanri* helps an organization:

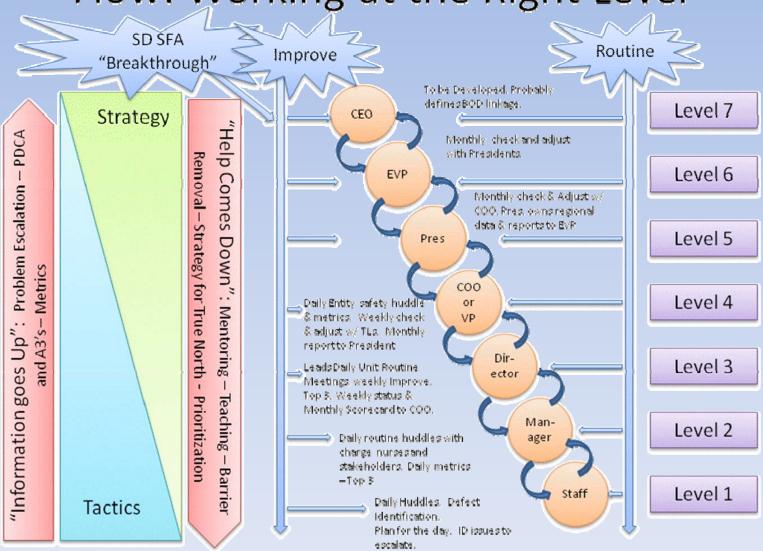
- Focus on a shared goal.
- Communicate agreed upon goals to all leaders.
- Involve all leaders in planning to align and achieve the goals.
- Hold participants accountable for achieving their part of the plan.
- A management process that aligns an organization's functions and activities with its strategic objectives. Goals and plans are cascaded up and down in an organization – senior leadership to middle management to frontline staff and back up for repeated review, input, actions and revisions.



SD creates:

Focus
Alignment
Quick response

Strategy Deployment and Flow Flow: Working at the Right Level



Development of "True North" = the Head and the Heart

- Mission Vision Values
- The Journey to Excellence
- •The MultiCare Difference

Hoshin Kanri: head and the heart

Responsibilities:

- -Business Results
- -Build Capability
- -Reinforce Values

Leadership



Head (Analysis)

Focused Business Results

Strategy Deployment

-Focused Breakthrough Improvement Lean-trained Leaders

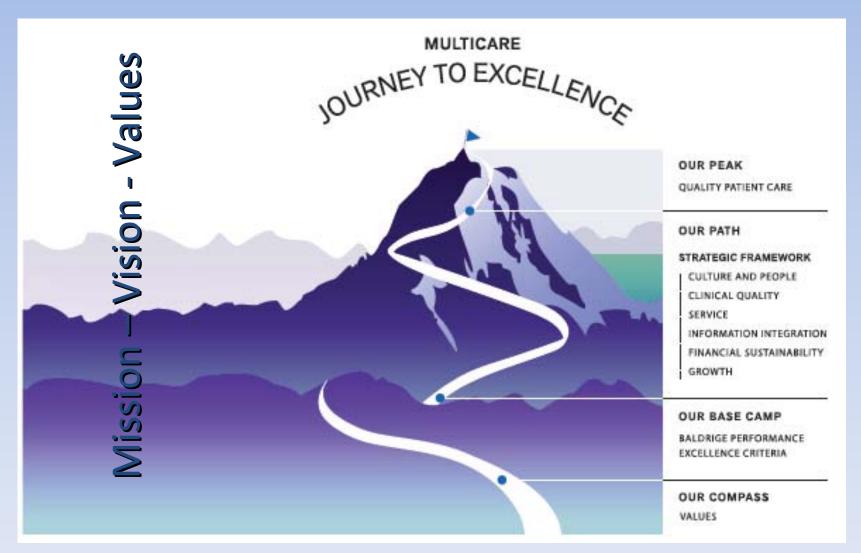
Promotes:

- -Lean Thinking
- -Shared Learning

Heart

(Intuition)

-Kaizen Spirit



The MultiCare Values

Respect: We affirm the dignity of each person and treat each individual with care and compassion.

Integrity: We speak and act honestly to build trust.

Stewardship: We develop, use and preserve our resources for the benefit of our customers and community

Excellence: We hold ourselves accountable to excel in quality of care, personal competence and operational performance.

Collaboration: We work together recognizing that the power of our combined efforts will exceed what we can accomplish individually.

Kindness: We always treat everyone we come into contact with as we would want to be treated.

The MultiCare Difference



Mission and Vision

Mission: Quality Patient Care

Vision:

MultiCare Medical Imaging connects patients and providers through innovative and integrated technology in a caring and compassionate environment supporting excellent clinical outcomes.

What can you do about your top concerns in these areas everyday?

- Your People.
- Service to your patients.
- The Quality of their care.
- Your Costs in your expense budget.

 Identify your top priority action in each of these areas at your table.

A3 Thinking

- The point is not the piece of paper
 - Analysis + Intuition --> Story
 - A story-telling approach to planning
 - A3 thinking is the antidote to common

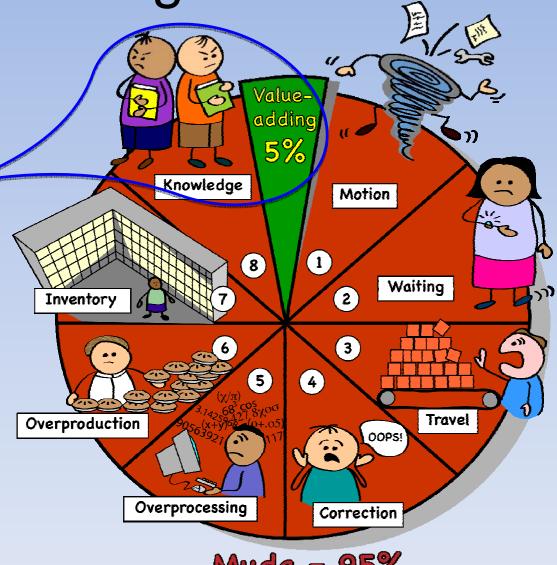
communication problems:

- No standard
- PowerPoint junk



Knowledge Waste

A3 thinking reduces waste by ensuring knowledge is shared.



Muda = 95%

A3 Writing

- Less is more
- Pictures create meaning
- Make it easy to read
- Story: Mark Twain's letter
- Rehearse your presentation



Complexity is a crude state.

Simplicity marks the end of a process of refining

A3 Layouts

- Logic flows from top left to bottom right
- Allot space according to item's importance
- Put signature boxes
- Put author, date, and version number
- Use
 - Dynamic titles
 - Simple words
 - Charts



Strategy A3 – the foundation of Strategy Deployment

Focus: Quality, Safety	Dept.
I. Last Year's Results/This Year's & Midterm Target	V. Action Plan (Milestone Chart)
Use visual data: graphs etc. Minimize words. Provide benchmark data. Provide historical context (both company and industry). Critical Business Need	Milestone chart showing actions, responsibilities & timelines. MS Project is useful tool in this regard but not essential. For each activity provide a SMART goal. Make realistic timelines. Our plan to implement our hypothesis A good rule of thumb: Have no more activities than you can count on
II. Reflection on last year's activities and results.	the fingers of one hand.
Assess each activity according to SMART goals. Provide both target and actual results, and relevant comments. Reflectio ns: head and heart	Share your strategic plan with those who it may affect. Amend based on their feedback (nemawashi). Do not be surprised if there are 4 or 5 iterations.
III. Analysis/Justification to This Year's Activities	
Provide reflection on last year's results	
Identify new factors (environmental changes) & their effect	VI. Follow-up (optional)
Summarize key activities & rationale. Our grasp of the situation and hypothesis	Unresolved issues & actions to address them How & when will you check effects? How will you report findings? When will you report findings? When will you report findings? What might go wrong and how might we handle it?
Signatures Position	Author Version & Date

FINAL 3/19/2013

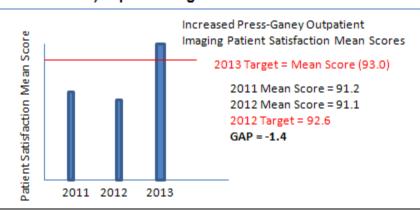
Strategy A3

True North: Connecting Patients and Providers

Thought Leader: C. Miller Team Members: B. Thompson, C. Weist,

R. Boyd SFA: Service

Performance, Gaps and Targets



Entity: MHS - Imaging Services

Reflection on last year's activities and results

- Minimal to no patient and family rounding by imaging management
 No accountability
- 2. Patient and family rounding inconsistent across all imaging sites.
- Outpatient world considered to be more difficult to round with than inpatient world.
- 4. Current Press Ganey Survey not tailored to imaging
 - 1. Not imaging specific (not one size fits all)
- 5. Surveys differ at different MultiCare locations.
- No evidence that we've built in sustainability for system service initiative such as AIDET and LEARN.

Rationale for this year's activities

If we...

- Increase patient and family rounding by management by setting a goal of 10 patients/month/manager to round based on core patient population...
- Have a better understanding of the patient's experience in our facilities...
- Use the data collected from patient and family rounding to help improve our departments by tracking common issues and following up on patient concerns...
- 4. Maintain and focus on current and previous systeminitiatives... ... then we can improve our patient satisfaction scores .

2013 Action Plan (milestone chart)

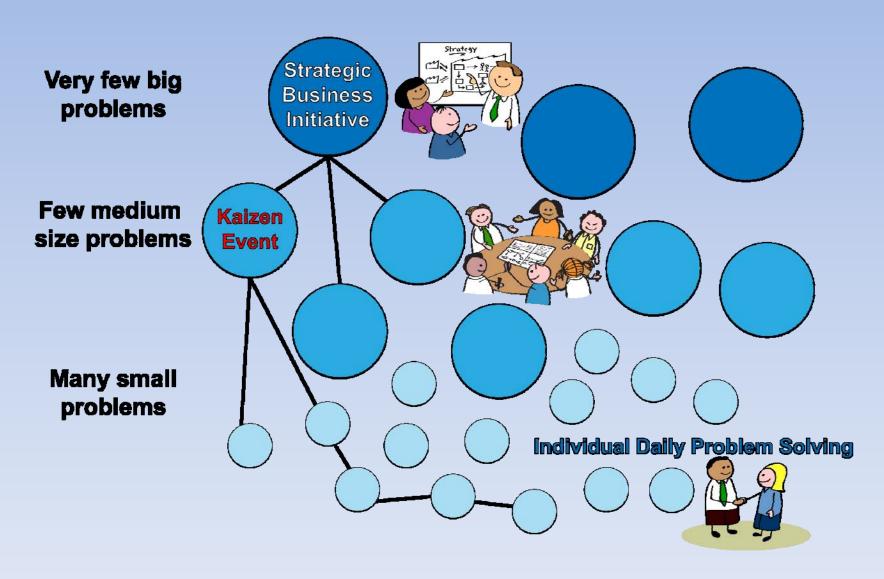
- Established a management performance goal of 10
 patients/month/manager to round with based on core patient
 population.
 - 1. Outpatient
 - 2. Inpatient
 - ED Patients
- Utilize the standard patient rounding form to document findings, research, follow up, and resolution.
 - Managers to retain rounding forms in a standard rounding binder.
 - Data will be shared through weekly ruddles and tracked on the weekly stoplight report.
- Managers to share patient and family rounding experiences and trends with staff during monthly department meetings so staff are made more aware of the patients perspective on their experience.
- Create workgroups within each facility to address common trends and themes within each facility comprised of frontline staff.
 - Each workgroup to select and implement two best practices either created or from Press Ganey Solution Starters.
 - Improved work will be measured by an increase of ten percentile points in the area of focus.
- Each site will establish a process for ensuring sustainability of system service initiatives such as AIDET & LEARN.

Follow-up / Unresolved issues

If we...

- 1. Do all managers currently utilize Press-Ganey Solution starters?
- 2. Should this rounding activity be included in manager performance reviews?
- 3. Can we do this? Can we commit to this?

Types of Problems: Boulders vs. Pebbles



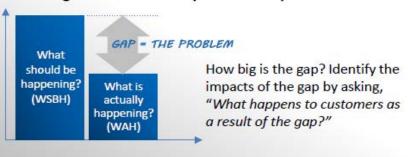
4-Step Problem Solving Approach



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STEP 1: GRASP CURRENT SITUATION

Is it a vague concern or a quantifiable problem?



Vague Concern I



Quantifiable Problem

STEP 2: UNDERSTAND THE PROBLEM

Do root cause analyses using Cause and Effect (Fishbone), 5 Whys and Pareto.

5 Whys Analysis

Identify the biggest sources of the problem and prioritize (Pareto) them.

Root causes typically fall into one of 3 categories:

- 1. Inadequate STANDARD or process (i.e. unclear expectations/Service Level Agreement)
- Inadequate ADHERENCE to a standard or process
- Inadequate SYSTEM (collection of processes working together)

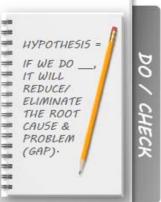


IDENTIFIED POTENTIAL ROOT CAUSE

STEP 3: DEVELOP & TEST COUNTERMEASURES

Define the hypothesis and test countermeasures that will reduce or eliminate the root causes.

- A countermeasure is not a solution. It's action taken, aimed at addressing the root cause of a problem to close the gap.
- Perform small tests of change.



STEP 4: CONFIRM OVER TIME THAT COUNTERMEASURES ARE SUCCESSFUL

Check implementation and ensure performance is sustained.

Ensure sustainment by hard-wiring the "Check the Checker" process.

- Who is responsible for checking that the countermeasure is working? (the checker)
- Who is responsible for "checking the checker?"

Adjust countermeasures if performance is not sustaining.



ADDITIONA Go to MHSnet Effectiveness a

ADDITIONAL INFO & RESOURCES:

Go to MHSnet > Departments > Organizational Effectiveness and click "Tools and Templates"

Rev. date: 1/14/13

CHECK / ADJUST

Management Process

1. Develop the plan

- Where are we going? (What's True North?)
- How do we get there?
- A3 strategies

2. Deploy the plan

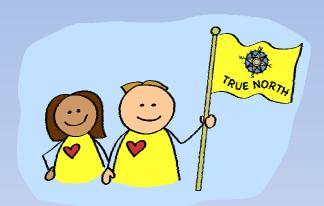
- Catchball
- Deployment leader ("Key thinker") concept
- Baby A3 strategies

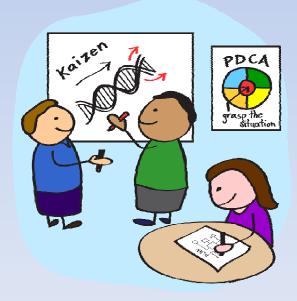
3. Monitor the plan

- Check/Adjust process
- Management standardized work concept
- Dashboards and other check tools

4. Improve the system

- Reflection and learning points
- Year-end status A3
- "Book of knowledge" or database concept





Critical Concepts for Success

- Identify and Grow your Thought Leaders
- Learn effective Catchball
- Focus on the Checking (the C of PDCA)
- Connect all actions to measurable results
- Report out regularly and visually, in Cadence

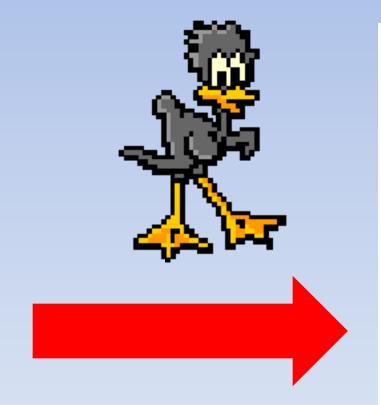
Thought Leaders

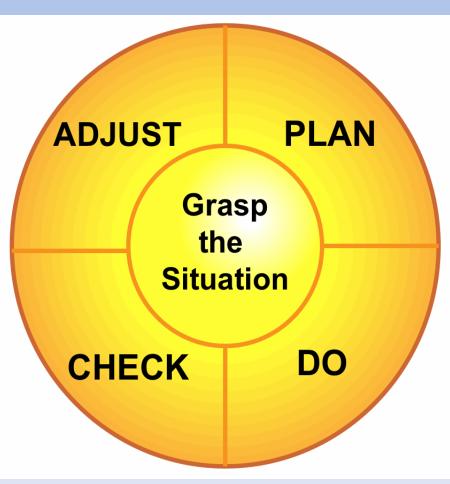
- Are Chief scientists
- Develop profound knowledge of their 'zone'
- Make connections that elude others
- Drive action planning
- Ensure cross-functional alignment
 - -Individual efficiency ≠ overall efficiency
- Tracking progress of specific goals and tactics
 - -Attempts to understand why it is or is not working

Catchball

- A3 stakeholder feedback sessions
- Report out A3 in 3 minutes,
 questions/comments for 7 minutes
 - other team meetings
 - other1on1 meetings
- Accept graciously, "thank you"
- Thought Leader revises A3

PDCA Check – The Ugly Duckling



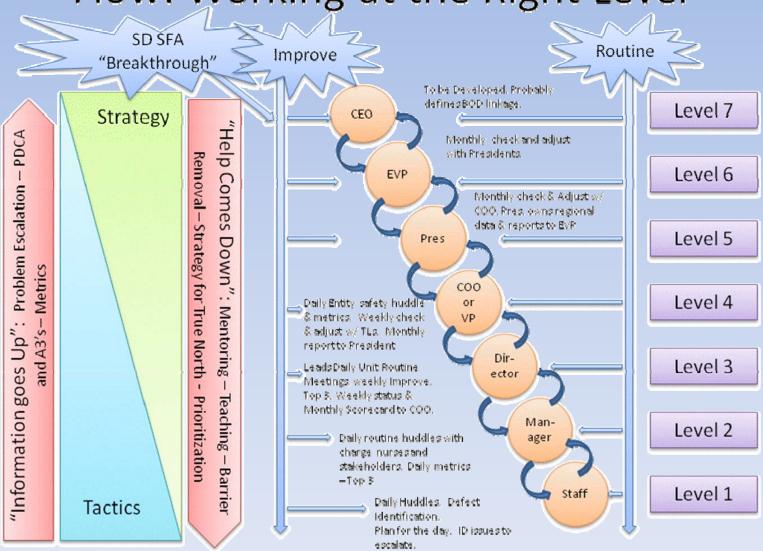


Checking is the Ugly Duckling of Management

- If there's no 'check', there's no Scientific Method.
- Checking show's respect for each team's activity.
- With checking, we confirm a good condition and emphasize the standard.
- Weekly / Daily check at tactical level.
- Monthly check at planning level at Cadence meetings.

Check = Target. Actual. Please explain.

Strategy Deployment and Flow Flow: Working at the Right Level



Dashboards

- Help to create 'status at a glance'
- Everyone is on the same page
- Prepares for Exception Management

Dashboards

- Develop the right metrics for your Strategy A3s
 - Both process metrics and end-of-pipe
- Use Visibility / Huddle Boards
 - level 1, level 2, level 3...level 7(brings connected checking to life)

Key Takeaways/Learning Points

- A Management System includes feedback skills, teambuilding, change management and improvement methods
- Lean offers a model for focusing on the basic business results and pursuing improvement
- Strategy Deployment (SD) is the Lean supported approach to developing strategy and deploying throughout the enterprise. Core elements include:
 - True North
 - A3 Thinking
 - The Strategy A3
 - The role of the Thought Leader
 - Catchball
 - Checking and the Management Process

Strategy Deployment = transformational leadership

Questions?

Discussion...