MultiCare Health System
Imaging Division:
A Management System using Lean and Strategy Deployment

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Presenter Introduction

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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 Management System
Crucial Conversations
Teambuilding

Lencioni Model

- Trust
- Conflict
- Commitment
- Accountability
- Results
Change Management

Kotter Model

1) Increase urgency
2) Build guiding teams
3) Get the vision right
4) Communication for buy-in
5) Enable action
6) Create short-term wins
7) Don’t let-up
8) Make it stick

Implementing & sustaining the change

Creating a climate for change

Engaging & enabling the organization
Lean

• Respect for People
• Standards
• Pathways
• Connections
• Hoshin Kanri
Lean

- Respect for People: Workers and Customers
- 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

SD SFA “Breakthrough”

Strategy
“Help Comes Down”, Mentoring – Teaching – Barrier Removal – Strategy for True North - Prioritization

Tactics

“Information goes Up”: Problem Escalation – PDCA and A3’s – Metrics

Strategy

Deployment and Flow

CEO
Monthly check and adjust with Presidents

EVP

Pres
Monthly check & Adjust with COO, Pres, gen regional data & report to EVP

COO or VP

Director

Manager
COO

Staff

The Goals:
- Daily Executive Safety huddles & metrics. Weekly check & adjust w/ TLA. Monthly report to President
- Leads Daily Unit Routine Meetings, weekly improve. Top 5 Weekly stat & Monthly Scorecard to COO
- Daily huddles with change nurse and stakeholders. Daily metrics – Top 5
- Daily Huddles. Define defect identification. Plan for the day. ID issues to escalate.
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

**Head** (Analysis)

**Focused Business Results**

**Heart** (Intuition)

**Lean-trained Leaders**

**Promotes:**
- Lean Thinking
- Shared Learning
- Kaizen Spirit

**Strategy Deployment**
- Focused Breakthrough Improvement

**Leadership**
Mission – Vision - Values
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 \(\rightarrow\) Story
  
  - A story-telling approach to planning
  
  - A3 thinking is the antidote to common communication problems:
    
    - No standard
    - PowerPoint junk
A3 thinking reduces waste by ensuring knowledge is shared.
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

<table>
<thead>
<tr>
<th>Focus: Quality, Safety…</th>
<th>Dept.</th>
</tr>
</thead>
</table>

I. Last Year’s Results/This Year’s & Midterm Target

Use visual data: graphs etc. Minimize words. Provide benchmark data. Provide historical context (both company and industry).

II. Reflection on last year’s activities and results.

Assess each activity according to SMART goals. Provide both target and actual results, and relevant comments.

III. Analysis/Justification to This Year’s Activities

Provide reflection on last year’s results. Identify new factors (environmental changes… ) & their effect. Summarize key activities & rationale.

IV. Action Plan (Milestone Chart)

Milestone chart showing actions, responsibilities & timelines. MS Project is a useful tool in this regard but not essential.

For each activity provide a SMART goal. Make realistic timelines.

A good rule of thumb: Have no more activities than you can count on the fingers of one hand.

Share your strategic plan with those who may affect you. Amend based on their feedback (nemawashi). Do not be surprised if there are 4 or 5 iterations.

V. Follow-up (optional)

Unresolved issues & actions to address them. How & when will you check effects?

How will you report findings? When will you report findings?

VI. Action Plan (Milestone Chart)

Critical Business Need

Reflections: head and heart

Our grasp of the situation and hypothesis

What might go wrong and how might we handle it?

Signatures
Position

Author
Version & Date
**Performance, Gaps and Targets**

- **Increased Press-Ganey Outpatient Imaging Patient Satisfaction Mean Scores**
  - 2013 Target = Mean Score (93.0)
  - 2011 Mean Score = 91.2
  - 2012 Mean Score = 91.1
  - 2012 Target = 92.6
  - GAP = -1.4

**Reflection on last year’s activities and results**

1. Minimal to no patient and family rounding by imaging management.
   1. No accountability
2. Patient and family rounding inconsistent across all imaging sites.
3. 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.
6. 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...

1. Increase patient and family rounding by management by setting a goal of 10 patients/month/manager to round based on core patient population...
2. Have a better understanding of the patient’s experience in our facilities...
3. 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 system initiatives...
   ...then we can improve our patient satisfaction scores.

**2013 Action Plan (milestone chart)**

1. Established a management performance goal of 10 patients/month/manager to round with based on core patient population.
   1. Outpatient
   2. Inpatient
   3. ED Patients
2. Utilize the standard patient rounding form to document findings, research, follow up, and resolution.
   1. Managers to retain rounding forms in a standard rounding binder.
   2. Data will be shared through weekly ruddles and tracked on the weekly spotlight report.
3. 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.
4. Create workgroups within each facility to address common trends and themes within each facility comprised of frontline staff.
   1. Each workgroup to select and implement two best practices either created or from Press Ganey Solution Starters.
   2. Improved work will be measured by an increase of ten percentile points in the area of focus.
5. 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

Very few big problems

Few medium size problems

Many small problems

Strategic Business Initiative

Kalzen Event

Individual Daily Problem Solving
4-Step Problem Solving Approach

**Step 1: Grasp Current Situation**
Is it a vague concern or a quantifiable problem?

- What should be happening? (WSBH)
- What is actually happening? (WAH)

GAP = THE PROBLEM

How big is the gap? Identify the impacts of the gap by asking, “What happens to customers as a result of the gap?”

**Vague Concern ➔ 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)
2. Inadequate ADHERENCE to a standard or process
3. Inadequate SYSTEM (collection of processes working together)

**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.

**Hypothesis - If we do X, it will reduce/eliminate the root cause & problem (GAP).**

**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.

**Additional Info & Resources:**
Go to MHSnet > Departments > Organizational Effectiveness and click “Tools and Templates”
Rev. date: 1/14/13
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

Pascal Dennis, *Getting the Right Things Done*,
(Massachusetts, Lean Enterprise Institute, 2006)
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

Pascal Dennis, *Getting the Right Things Done*,
(Massachusetts, Lean Enterprise Institute, 2006)
Catchball

• A3 stakeholder feedback sessions
• Report out A3 in 3 minutes, questions/comments for 7 minutes
  – other team meetings
  – other 1on1 meetings
• Accept graciously, “thank you”
• Thought Leader revises A3

Pascal Dennis, *Getting the Right Things Done*, (Massachusetts, Lean Enterprise Institute, 2006)
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

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Daily routine huddles with change nurse and stakeholders. Daily metrics - Top 5

Daily Huddles: Defect Identification. Plan for the day. ID issues to escalate.

Level 7

Level 6

Level 5

Level 4

Level 3

Level 2

Level 1
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...