Building a Culture of Continuous Performance Improvement

Nancy Jaworski, B.Comm, MHA, IA, Queensway Carleton Hospital
Queensway Carleton Hospital introduced LEAN as an improvement methodology 2009.

- Focused on large projects for breakthroughs in performance.
- Often engaged consultants for technical expertise.

- Over time, the need to build greater internal capacity for LEAN improvement was recognized.
- Began training leaders in 2011.
What is LEAN?

LEAN is:

A quality improvement methodology and management philosophy that focuses on maximizing customer (patient) value while minimizing or eliminating waste and complexity in work processes.

Based on the Toyota Production System
The Goal of LEAN

1. Eliminate Waste
   Remove or redesign any steps in the process that don’t “add value” to the customer.

2. Improve Flow
   Address any constraints or barriers that impede the smooth flow of people, information or materials through the process.

3. Limit Variability
   Create standard work to ensure consistency and predictability.

4. Improve Flexibility
   Create the ability to adjust based upon customer demand.
The Key to LEAN Improvement

A typical day

Eliminate Waste and Minimize Non-Value

Create Capacity

Maximize Value-Add

Value Adding Activity

Necessary Non-Value Adding Activity

Waste

Value Adding Activity

Necessary Non-Value Adding Activity

Waste

Value Adding Activity

Necessary Non-Value Adding Activity

Waste
Our Challenge

- Improvement work was episodic
- Few people were involved
- Performance breakthroughs were difficult to sustain
The Sustainability Barrier
The Improvement Imperative

- Health resources are finite – no new $$$
- Funders and tax-payers demand greater accountability - public reporting of performance indicators
- Patients expect and deserve better
- Staff and physicians are frustrated

We need to be making improvements continuously!
Different Types of Problems

- Very few large issues
- Few medium issues
- Many small issues

Improvement Projects (e.g. ED LOS)

Problem Solving

Daily Continuous Improvement

Adapted from: “The Toyota” Way Fieldbook, Liker and Meier
Humble Reflection

Systems for managing the business were not in alignment with the expectations for continuous performance improvement.

- No one way to manage the business
- No way to measure / monitor unit performance
- No consistent way to solve problems
- No connection between hospital strategic goals and improvement efforts at the front line
Performance

Respect for People

LEAN Management approach

Application of LEAN Improvement Tools

Culture of Continuous Improvement

Time
LEAN Management Objectives

Aim: To develop our people to solve problems and improve performance.
LEAN Management in a Nutshell

- A different way of managing the business
- Aligns front line staff with the strategic goals of the hospital
- Develops staff as problem solvers so that they can make continuous improvements
- Makes the work visible
- Requires flexible regimentation
- Leaders as coaches and facilitators
- Transformational change
In a LEAN Culture

- Front Line Staff
- Team Leader
- Managers
- Directors
- VPs
- CEO

- Servant Leadership
- Problem Solving
- Coaching
- Accountability
ThedaCare is a health care delivery system serving Appleton, Wisconsin and the surrounding area.
Continuous Performance Improvement System

- Status Exchanges
- Daily Performance Improvement
  Huddle
- Unit Leadership
  Team
- Monthly Scorecard
- Unit Flow & Waste
  Removal
- Leader Standard
  Work
- Structured Problem
  Solving using PDSA
- Monthly Performance
  Review Meetings
- Visual Management
- Training and Observing to
  Process Standard Work
1. Leaders as coaches
2. Staff and physicians as problem solvers
3. Performance made visible
4. Work processes standardized
The key to cultural change is..... changing leader behaviours.
LEAN Management...A New Mental Model

Help others develop their ability to solve problems so that they can improve their individual and collective performance, and improve our ability to deliver exceptional patient/family care
Show Respect and Grow Respect

- LEAN Leaders mentor and coach thus inspiring others to engage in critical thinking to solve problems.
  - Leaders have to learn how to **NOT** take on the problems themselves or provide all the answers
  - Through their actions in **Gemba**, leaders demonstrate their commitment to continuous improvement.
  - Provide feedback (positive and constructive)
  - Foster discipline – observe standard work
Gemba is a Japanese term meaning "the place where value is created" or "where the service provider interacts directly with the customer."
Going to Gemba

- Go see
- Ask questions
- Seek to understand
- Show respect
- Coach

The role of leaders in a culture of continuous improvement
Use the Socratic Method

Providing direction removes staffs’ ownership of the issue.

Ask questions to develop staffs’ critical thinking.
Coaching is a Critical Enabler

- Developing people is a pillar of LEAN Management.
- Leaders must understand, teach, mentor and coach LEAN principles.
- Leaders must get their hands dirty – they must join the team and model the way to help problem solve in **gemba**.
- Leaders create stability and trust by helping their teams see variation and defects daily – without blame.
Foundations of LEAN Management

1. Leaders as coaches
2. Staff and physicians as problem solvers
3. Performance made visible
4. Work processes standardized
What is Structured Problem Solving?

- A framework for thinking through a problem using the “scientific method”
- Ensures consistency and rigour
- Prevents jumping to solutions
- Is data (evidence) driven
- Promotes transparency
It is not about...

Focus on the problem itself, not who caused it.
It is about...

FOLLOWING THE EVIDENCE
Root Cause Analysis

Need to sort through all the possible causes to identify the root causes of the problem.
Root Cause Analysis

- Helps to prevent a symptom management approach to problem solving.
- Helps to target solutions.
- Helps to create alignment and focus around the core problem to be addressed.
PDSA Cycle

Act
- What changes are to be made?
- Next cycle?

Plan
- Objective
- Predictions
- Plan to carry out the cycle (who, what, where, when)
- Plan for data collection

Study
- Analyse data
- Compare results to predictions
- Summarise what was learned

Do
- Carry out the plan
- Document observations
- Record data
Small-scale tests of change enable us to increase our degree of belief as we extend our change over a wider set of conditions.

Minimize the cost of failure.

Build organizational readiness and commitment.
Daily Improvement Huddles

- A brief (15 minute), structured, stand-up meeting of all staff working in the department.
- Identify and prioritize problems to work on and receive updates on improvement efforts.

- Connect the work of the unit to the hospitals’ strategic priorities.
- Review daily performance on unit driver metrics.
LEAN improvement and strategy deployment intersect at the Area Improvement Centre.

Opportunity flows left to right
On Generating Tickets

- Patient experience
- Barriers to flow
- Work-arounds
- Defects
- Non-value-added activities (waste)
Learning to See as a Team
Dirty Laundry?

Patients and visitors appreciate the transparency.

We know we have a problem and we are working to address it.
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Monthly Scorecard

- A compilation of monthly performance data on key unit indicators.
- Indicators are selected based on their strategic importance.
- The scorecard reports the trends and overall performance of the unit.
What is Visual Management?

Tools used in the work environment to make the work more visible.

- Cue for the next step in the process
- Identify errors / abnormalities
- Highlight what is important

“Blink and Think”
The gas gauge displays how much fuel is left in the tank...

...a warning sign is displayed when the fuel drops to a certain level with a message of what to do.
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What is Process Standard Work?

- Step by step instructions on the current best known way to complete a task to achieve a desired outcome.
- Used for tasks that need to be highly reliable.
- Must develop the standard, train to the standard and then observe to the standard regularly to ensure the team is consistently working to the standard.
“Without standards, there can be no improvement.”

- Taiichi Ohno
To reduce variation and drive improvement: Standard Work is the glue that holds it all together

When we encounter a problem, we should always ask:

- Is there Standard Work?
- Have staff been trained on the Standard Work?
- Is the Standard Work being followed?
- Is there a process to improve the Standard Work?
Create value for customers

• True North
• Strategy deployment
• Alignment of systems
• Consistent leadership behaviours

Structured problem solving
• Identify and eliminate waste
• Stabilize and standardize processes
• Integrate improvement with work

Involve everyone
• Develop people
• Build teamwork
• Ensure safe environment
Tangible Results

- 20% improvement in patient satisfaction with pain control in the Emergency Department
- 50% improvement in discharge teaching on the Medicine Units
- 40% improvement in patients being up for meals on one Medicine Unit

Over 360 improvement ideas have been implemented across six clinical areas in just one year!
Improved Staff Satisfaction

- 24% increase in staff perception that Senior Management is both aware of frontline issues and will act on staff feedback
- 17% increase in staff confidence that they are able to make suggestions to improve their work
- 26% increase in staff perception that they are consulted about changes that affect their team