

To the Gemba and More: A Walk to See the Waste

Opening Your Staff's "Waste Eyes" with Waste Walks

**Linda Dodge and Janell Vickers
Catholic Health Partners
March 27, 2014**



Today's Program



- Welcome
- Introduction of MBB Webcast Series
 - Ellen Milnes, MoreSteam.com
- Presentation: Waste Walks
 - Linda Dodge and Janell Vickers, Catholic Health Partners
- Open Discussion and Questions



MoreSteam.com

- Founded in 2000
- Trained 400,000 Lean Six Sigma professionals
- Served over 2,000 corporate customers (including 50+% of the F500)
- First firm to offer the complete Black Belt curriculum online
- Courses reviewed and approved by ASQ and PMI
- Academic Partnerships with Ohio State University, Cal Poly and George Washington University

Select Customers:



Today's Presenters



Linda Dodge

CHP/St. Rita's Medical Center

- *26 years health care experience*
- *Registered Respiratory Therapist*
- *Black Belt, Certified Lean Leader*
- *A.A.S. from James Rhodes State College, B.B.A. from Mount Vernon Nazarene College, and M.B.A. from Tiffin University*



Janell Vickers

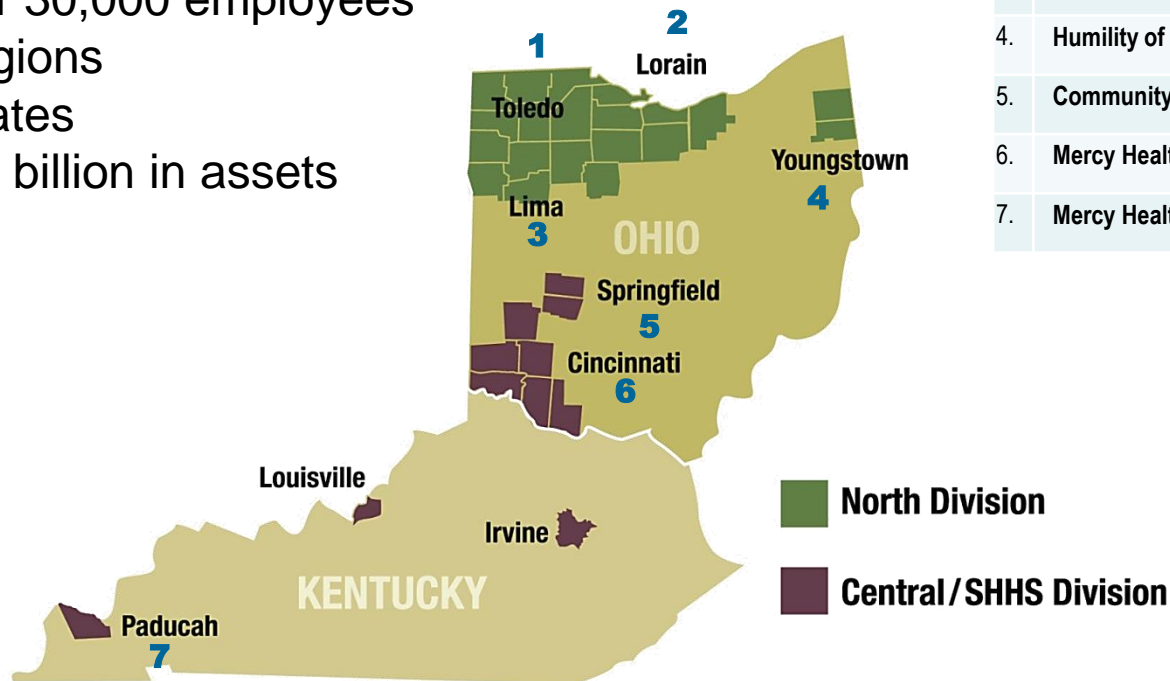
Catholic Health Partners

- *Focused last 3 years on physician practices*
- *Prior experience: 32 years with Owens Corning*
- *Certified Lean Green Belt and Six Sigma Black Belt*
- *B.S. in Computer Science & Math and M.B.A. from Bowling Green State University*

Who are we?

Catholic Health Partners

- 23 hospitals
- Over 30,000 employees
- 7 regions
- 2 states
- \$5.4 billion in assets

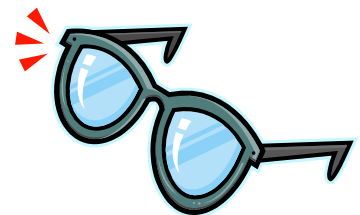


Catholic Health Partners Markets

1. Mercy – Northern Market
2. Mercy – Lorain
3. St. Rita's Health Partners
4. Humility of Mary Health Partners
5. Community Mercy Health Partners
6. Mercy Health – SW Ohio Market
7. Mercy Health Partners – Kentucky

CHP Background

- Largest Healthcare System in Ohio
- 4th Largest Employer in Ohio
- Largest Healthcare System with Standardized Epic Platform
- Commitment to Community
- Faith-Based
- Founded by Nuns Over 150 Years Ago
- Teaching Facilities



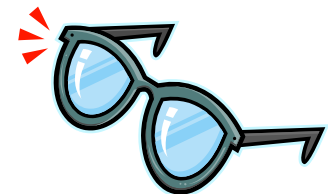
CHP Mission

Extend the healing ministry of Jesus by improving the health of our communities with emphasis on people who are poor and underserved.

Committed to demonstrate behaviors:

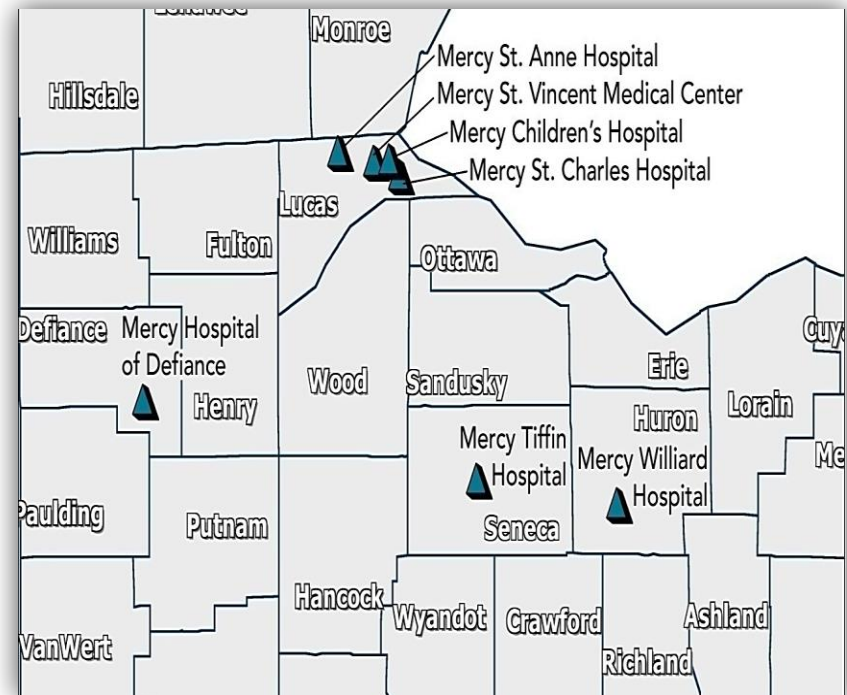
- Compassion
- Excellence
- Human Dignity
- Justice
- Sacredness of Life
- Service

In 2013, CHP contributed \$375 million to communities.



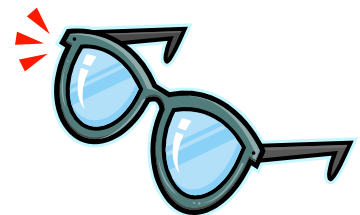
CHP Northern Market

- 7 hospitals & Mercy College
- 1500 medical staff members
- 300+ employed physicians and mid-level providers
- 200+ residents & medical students
- Over 7000 employees
- 2 Master Black Belts
- 2 Black Belts
- 10 trained Green Belts
- 200+ trained Lean Leaders





- 425 bed facility covering a 10 county area
- 1 Black Belt; 3 Green Belts
- 41 Certified Lean Leaders
- Two Waste Walks performed in 2012



Lean in Healthcare

...the relentless pursuit of the perfect process through waste elimination ...

What is Lean ?

- “Increasing customer value by eliminating waste throughout the value stream”
- The goal is to remove or reduce “Non-Value added” activity from our work processes.

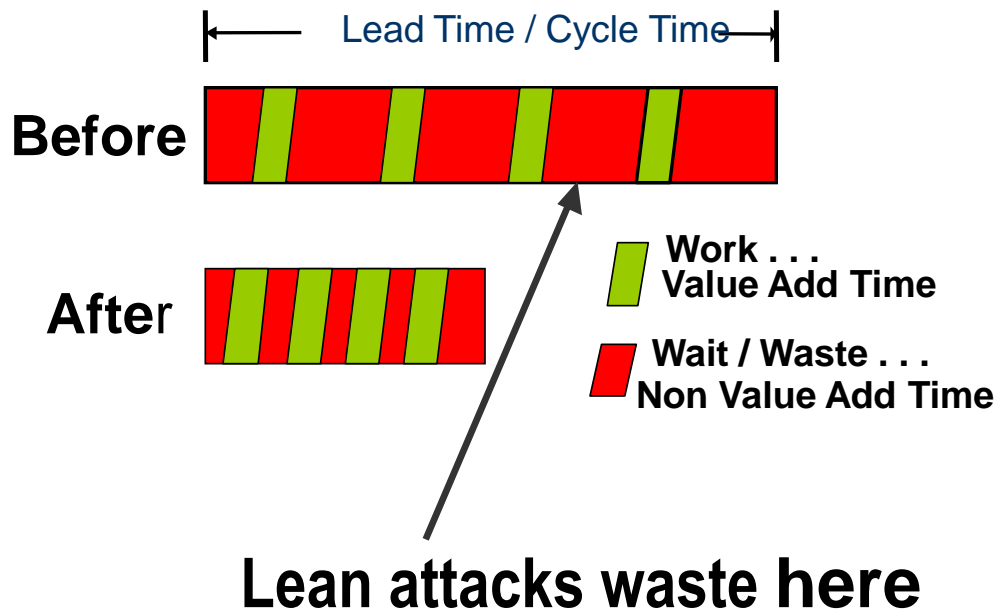
*Excerpted from *Lean Thinking*, Womack and Jones, 1996

“In healthcare it is about shortening the time between the patient entering a care facility and the patient leaving by eliminating all non-value-added time, motion, and steps”

Based on definition in the book *Lean Thinking*, Womack & Jones, Simon & Schuster

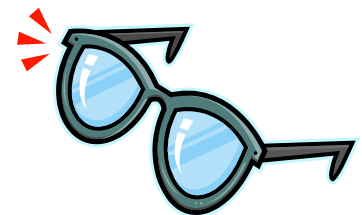
Lean Concepts

... Any process or value stream



Benefits

- Higher customer satisfaction
- Reduced cycles
- Better delivery
- More capacity
- Better quality
- Productivity



Our Improvement Methodologies

6 SIGMA

Define

Measure

Analyze

Improve

Control

Focuses on Variation

LEAN

Identify Value

Understand the
Value Stream

Eliminate Waste

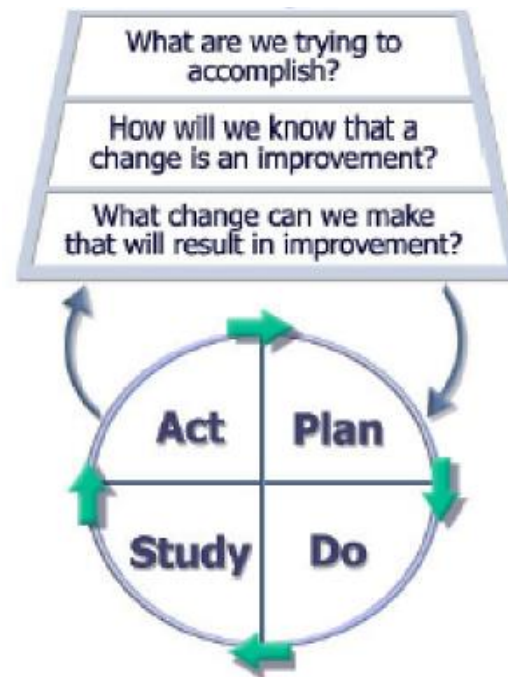
Establish Flow

Enable Pull

Pursue
Perfection

Eliminates Waste

PDSA



PDSA - "Tests of Change"

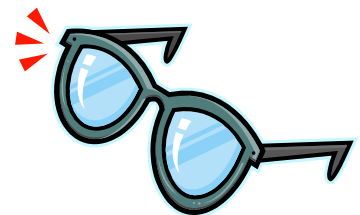
A pair of hands, rendered in a light grey, semi-transparent style, are shown from the front, cupping a small globe of the Earth. The globe is centered on the Atlantic Ocean, with North America visible on the left and South America on the right. The text 'Waste Walks' is overlaid in a large, bold, black font across the upper portion of the globe. The background is a plain, light grey color.

Waste Walks

Hospital Units

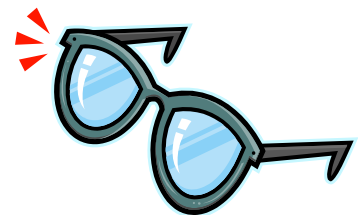
Waste Walk Goals

- Engage & educate staff to facilitate cultural change
- Must easily identify waste with minimal training
- Allows for rapid transition into lean projects
- Increase efficiency, safety and customer satisfaction while reducing the cost of care



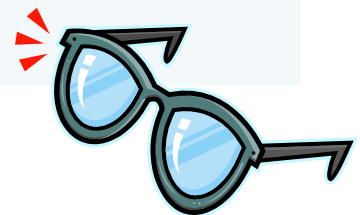
The Beginning

- Assembled a team of Certified Lean Leaders
- Reviewed IHI's Waste Walk materials
- Modified the materials to fit St. Rita's Environment and needs
- Presented the concept to Lean Steering Committee
- Chose one nursing unit to trial concept and recruited RNs



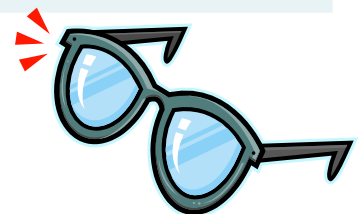
Definitions of Waste in Health Care

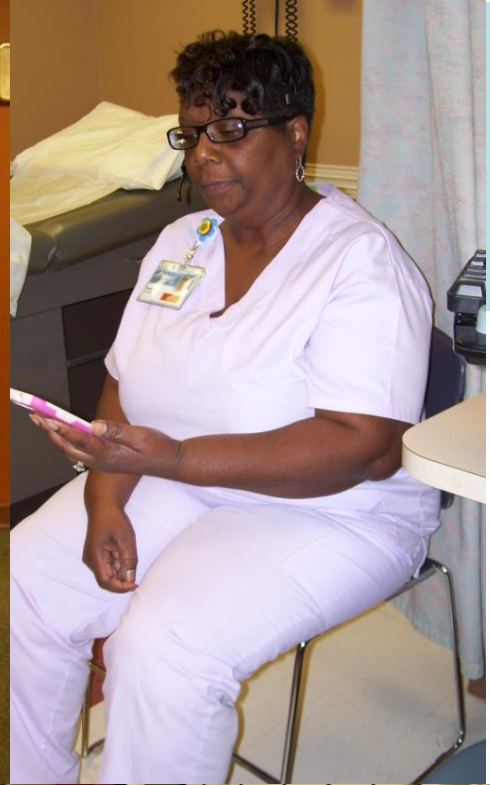
Defects	Time spent doing something incorrectly or fixing errors
Overproduction	Doing more than what is needed by the customer or sooner than needed
Transportation	Unnecessary movement of the patient
Waiting	Waiting for the next step to occur
Inventory	Excess inventory costs, spoilage, expiration, wastage
Motion	Unnecessary movement by employees in the system
Over processing	Doing work that is not valued by the customer



Waste Modules Foci

Ward Module	Room utilization and patient flow
Diagnosis Module	Testing that is viewed as “routine”
Patient Care Module	Unnecessary monitoring, tests, medications, therapies
Treatment Module	Order set utilization and best practice models
Patient Module	Patient interviews were conducted regarding patient’s perception of delays in care or discharge
Process Module	Evaluated the process flow in the nursing unit







Documentation Example

Ward Module:

Unit: _____ Date & Time of Review: _____ Reviewer(s): _____

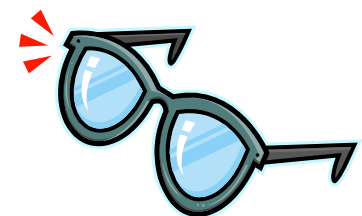
Room	Account No	Last Name	Waste*		WASTE STREAMS							Comments	
			Yes	No	Bed Empty & Not Staffed	Bed Occupied or Used Inappropriately	Healthcare-Associated Infection	Adverse Drug Event	Procedure Complication	Unnecessary Hospitalization	Flow Delay		Clinical Care Delay
TOTALS													

*If any waste stream is checked, note YES for waste.

Beds or patients with any waste identified _____

% of total beds and patients reviewed _____

TOTAL BEDS & PATIENTS REVIEWED _____

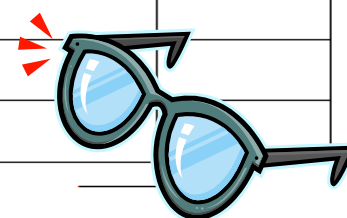


Documentation Example

Hospital Inpatient Waste Identification Tool Worksheet: Process Module

Area/Unit: _____ Date & Time of Review: _____ Reviewer: _____ Total Pts. Or Areas Reviewed: _____

Area or Room	Frequency 1(occasionally) 5(5+ per day)	Severity 1(Low Impact) 5(Large Impact)	Type of Waste Noticed	Description:	Index Total S + F
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		
	1 2 3 4 5	1 2 3 4 5	Over Production, Inventory, Over Processing, Motion, Defect, Waiting		

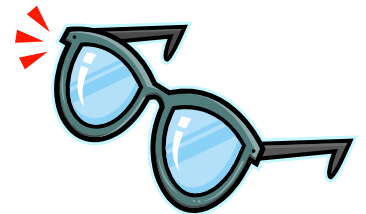


Patients or Areas with any waste identified _____

TOTAL PATIENTS OR AREAS REVIEWED _____

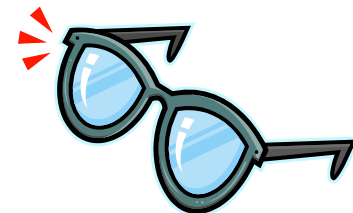
Work Unit Preparation

- Contacted the Unit Manager
- Met to explain the concept
- Reached out to staff for volunteers
- Set the date



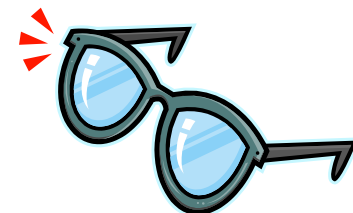
Highest Rated Opportunities

- Test over utilization
- Staff interruptions from phone calls
- Order Sets not utilized consistently
- Excess motion to obtain patient supplies
- Level of care provided higher than required



Key Realizations of the Team

- Much more waste found than expected
- RN's involved were amazed at:
 - Amount of waste in the day to day work that they do
 - Impact to a patient's length of stay
 - how waste impacts St. Rita's financial well being
- Physician participation would have been beneficial
- This concept could be applied to other areas of St. Rita's Health Partners

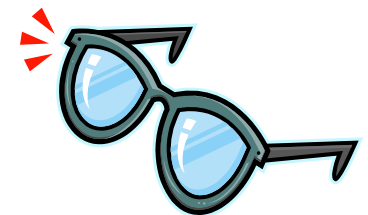


A pair of hands, rendered in a light gray, semi-transparent style, are shown holding a small, colorful globe of the Earth. The globe is centered on the Atlantic Ocean, with North America to the west and South America to the east. The text "Lean Walks" is written in a large, bold, black font across the upper middle of the globe, and "Physician Offices" is written in a similar bold, black font across the lower middle. The background is a soft, out-of-focus light gray.

Lean Walks
Physician Offices

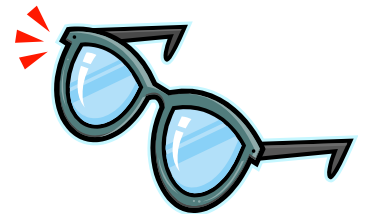
Lean Walks

- St. Rita's Professional Services (SRPS) – Lima
 - 20 Physician Practices
- Medical Physician Partners (MMP) – NW Ohio
 - 90 Physician Practices
- Led by Black Belt and Lean Leaders
- Focus on Patient Experience and Wait Times



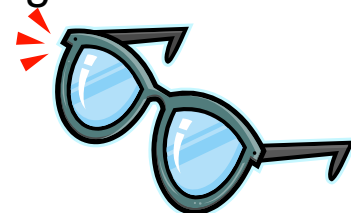
Lean Walk Structure

- Teams of 4-6
 - Black Belt, Lean Leaders, Certified Epic Trainer, Practice Peers, Staff
 - Time commitment 3.5 hours
- Pre-work and Follow-Up required:
 - Education, support and communication with Practice
 - Capture ideas before and after Walk
 - Time Commitment 1.5 hours
- Changes implemented using PDSA cycles
- Share best practices via newsletters

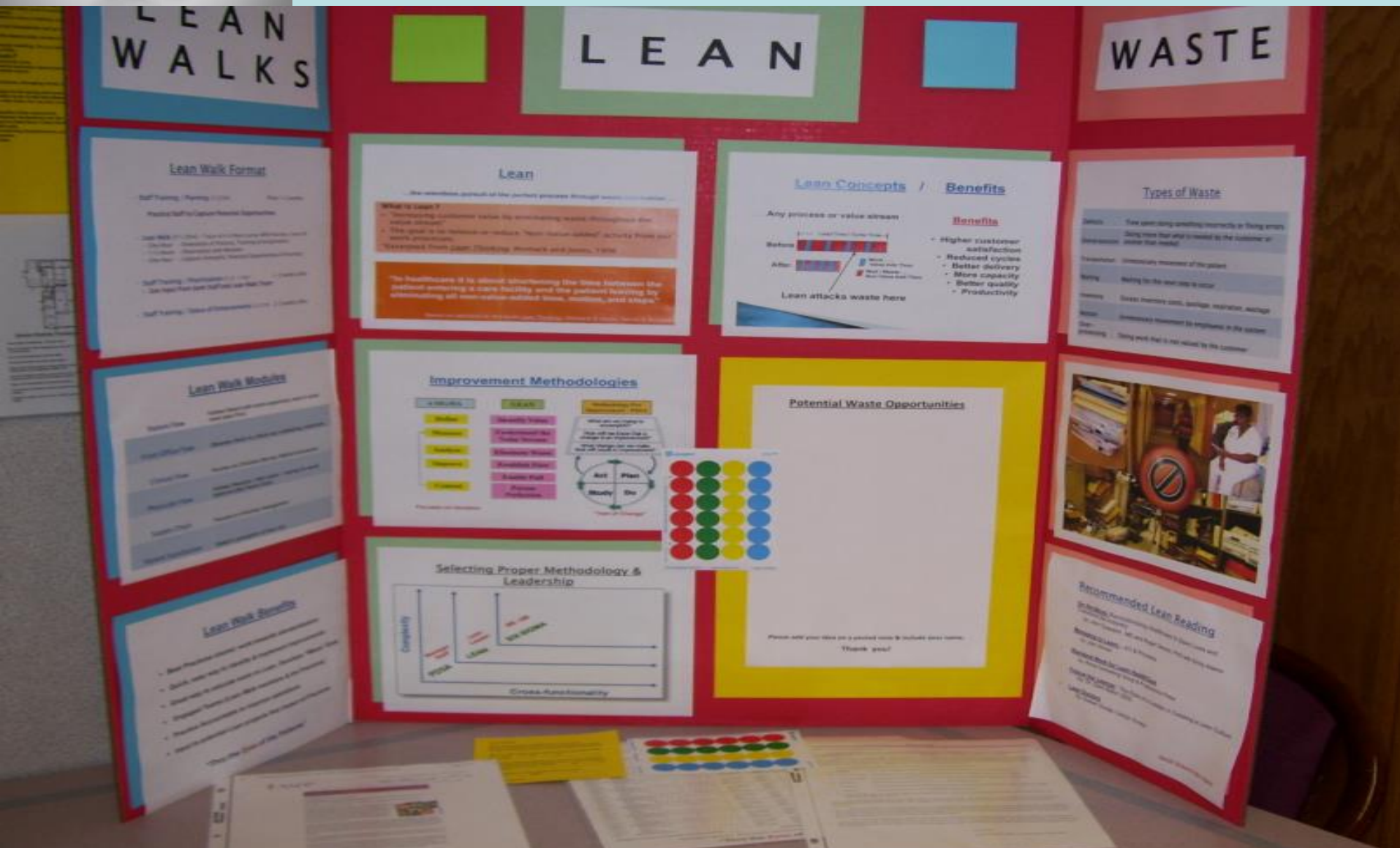


Lean Walk Schedule

- **Kick Off / Staff Training**
 - 1-2 weeks before event
 - Education session utilizing Tri Fold Model
 - 30 minutes duration
- **Lean Walk**
 - 1 hour for training and role assignment
 - 1.5 hours for observation collection
 - 1 hour debrief
- **Follow Up and Staff Training**
 - 1 week later and again in 2-3 weeks
 - Provide finalized data with Lean Walk Team and staff input
 - Prioritize work and make assignments
 - Staff training on improvement methodology PDSA & Lean Management
- **Results**
 - Practice manager reports on progress of work and results



Lean Training Tri-Folds



Results



Practice Staff Ideas

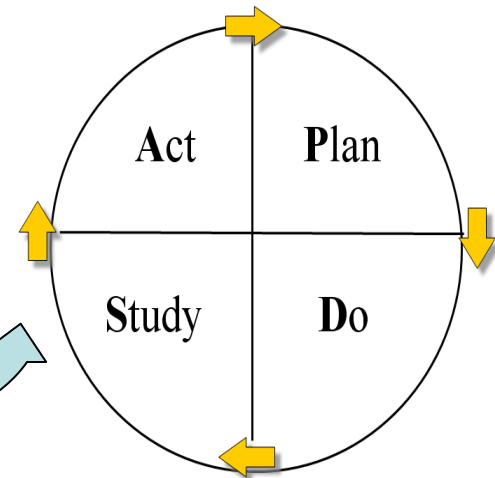
+



Lean Walk Team Input



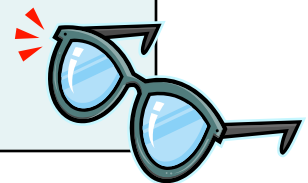
**Capture Potential Opportunities
Prioritize & Focus on 3-5**



**Perform PDSA's
Test of Change
For Improvement**

Lean Walk Modules

Patient Flow	Follows Patient with entire experience; even in exam room (asks first)
Front Office Flow	Observes check-in, check-out, scheduling, collections
Clinical Flow	Focuses on Clinicians (Nurses, Medical Assistants)
Physician Flow	Follows Physician / Mid-Levels - looking for waste before & after Patient Exam
Supply Chain	Focuses on inventory management
Patient Satisfaction	Patient's perception of their visit





Patient Satisfaction Cards

Dear Patient,

We appreciate your feedback to help us improve our services. Please complete this form about your visit today.

At any time during today's visit, did you wait longer than expected? No Yes

If yes, when and how long? _____

Did anything happen during your visit that did not address your concerns today? No Yes

If yes, what was it? _____

Did anything happen during your visit that would not improve your health? No Yes

If yes, what was it? _____

How satisfied are you with your visit today?

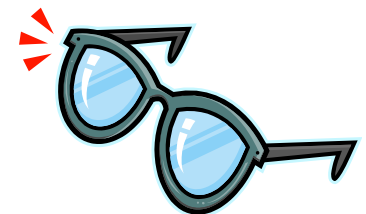
Not at all _____ Completely

How can we improve? _____

Please return the card before you leave. Thank you.

- Bright Colored Card Stock
- Check-In provides card
- Collection basket at Check Out Point
- Feedback provided in the moment

** Redesigned process and form.
Help from Mo Gotee, Vocumen LLC.

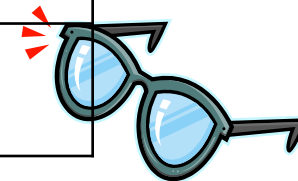


Documentation Example

Physician Office Waste Identification Tool Worksheet: Patient Flow Module

Physician Office: _____ Date & Time of Review: _____ Reviewer: _____ Total Pts. Or Areas Reviewed: _____

Process		Frequency 1(occasionally) 5(5+ per day)	Severity 1(Low Impact) 5(Large Impact)	Type of Waste Noticed		Description:	Index Total S + F
Check-In	Registration	1 2 3 4 5	1 2 3 4 5	Over Production	Inventory		
Rooming	Nursing Assessment			Over Processing	Motion		
Exam	Testing			Defect	Waiting		
Procedure	Scheduling			Transportation	Clutter		
Check-Out	Signage						
Other	Best Patient Experience*						
Check-In	Registration	1 2 3 4 5	1 2 3 4 5	Over Production	Inventory		
Rooming	Nursing Assessment			Over Processing	Motion		
Exam	Testing			Defect	Waiting		
Procedure	Scheduling			Transportation	Clutter		
Check-Out	Signage						
Other	Best Patient Experience						
Check-In	Registration	1 2 3 4 5	1 2 3 4 5	Over Production	Inventory		
Rooming	Nursing Assessment			Over Processing	Motion		
Exam	Testing			Defect	Waiting		
Procedure	Scheduling			Transportation	Clutter		
Check-Out	Signage						
Other	Best Patient Experience						
Check-In	Registration	1 2 3 4 5	1 2 3 4 5	Over Production	Inventory		
Rooming	Nursing Assessment			Over Processing	Motion		
Exam	Testing			Defect	Waiting		
Procedure	Scheduling			Transportation	Clutter		
Check-Out	Signage						
Other	Best Patient Experience						
Check-In	Registration	1 2 3 4 5	1 2 3 4 5	Over Production	Inventory		
Rooming	Nursing Assessment			Over Processing	Motion		
Exam	Testing			Defect	Waiting		
Procedure	Scheduling			Transportation	Clutter		
Check-Out	Signage						
Other	Best Patient Experience						



Patients, Processes or Areas with any waste identified _____

Total # Patients, Processes or Areas Reviewed _____

- Best Patient Experience - Warm Greeting, Setting Expectations, Forms, Answering Phones 8 am-5 pm, Accessibility, Wait Times

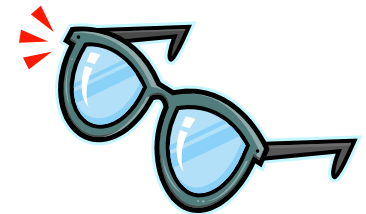
Completed Module Example

Physician Office: _____ Date & Time of Review: 8/2/12 Reviewer: _____ Patients or Areas Reviewed:

Process		Frequency					Severity					Type of Waste Noticed		Description	Index Total S+F
		1 (Occasionally)					1 (Low Impact)								
		5 (5+ per day)					5 (Large Impact)								
Check-in	Registration											Over Production	Inventory	2 open Iodocaine bottles in room 15 - no date on when to discard or when it was opened in a cupboard. 1 open	8
Rooming	Nursing Assessment											Over Processing	Motion		
Exam	Testing	1	2	3	4	5	1	2	3	4	5	Defect	Waiting		
Procedure	Scheduling											Transportation			
Check-out	Other														
Check-in	Registration											Over Production	Inventory	Patient 1: 1:38P brought pt in weighed by him, then to Rm 3. 1:50P - CMA out of room, 2:05P - door open slightly, 2:19P Dr. Vanan to see pt, 2:32P - Dr Vanan walked pt to surgery scheduling, 2:56P - pt left	5+
Rooming	Nursing Assessment											Over Processing	Motion		
Exam	Testing	1	2	3	4	5	1	2	3	4	5	Defect	Waiting		
Procedure	Scheduling											Transportation			
Check-out	Other														
Check-in	Registration											Over Production	Inventory	2:12P pt walked out by Dr. Vanan. 2:25P - discharge instructions, follow up appt, left	1
Rooming	Nursing Assessment											Over Processing	Motion		
Exam	Testing	1	2	3	4	5	1	2	3	4	5	Defect	Waiting		
Procedure	Scheduling											Transportation			
Check-out	Other														

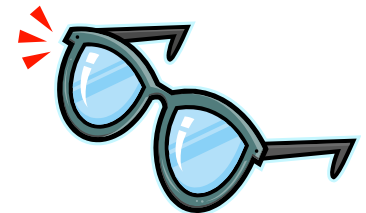
Waste Examples

- Frequent interruption for prescription refill calls
- Paper charts still utilized in EMR environment
- Batching of patient calls from physician
- Wheelchair inaccessibility
- Long lines at check in and check out point
- Date stamping incoming faxes



Other Opportunities

- Standardized Processes not being following
- Handicapped Items
- Safety / Privacy Concerns
- Supply Chain – materials; expirations; process
- Marketing and Sign-Up Patient Portal
- Office Environment – clutter, signage, warmth, cleanliness



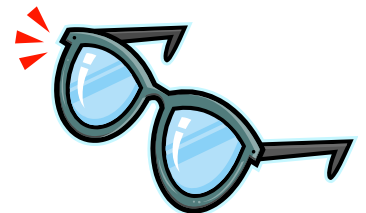
30 days, 60 days, 90 days Reporting Example

Potential WASTE - Area to Address	Priority (H-High M-Medium L-Low)	WHAT - Change to be made	WHO- Responsible for Change	WHEN - Targetted Completion Date	Status	Type - G-Go Do; C-Capital Needed; A-For All Practices; P-Planned P- Practice to decide	Impact / Benefits
Front Office							
Front Office Printer Location	L	Move printer in between	Kathy G. (Gerdeman)	not changing	NC	P	Minimal time
Scanning Driver's License so data auto populates	L	Patient's insurance card always needs scanning; at same time - ask for driver's license	Front office Staff	Immediately	Complete	G	Minimal time / revenue risk (since don't always ask for insurance card)
Pharmacy Questions re: Meds (mostly Physician errors-Epic Med List complex)	H	Ask other practices if they receive the same and how they handle these.	Janell	4/30/2013	Complete	A	High amount of time; Patient risk
Obtain a wheel chair-have to walk across building to get one	M	Ask other practices if have extra; maybe a patient would donate one	Kathy G.	3/13/2013	Complete	C	Saves wasted travel time; immediate access to a wheel chair
Clinical / Patient Flow							
Using Smart Phrases more - Physician (ex. PCMH)	L	Clinical staff feels the Dr. has own, effective smart phrases	Dr. Klass	4/1/2013	Complete	P	Ensures compliance with PCMH; consistent with other SRPS practices
Double Clicking for PCMH Questionnaire in Exam Room with Patient	L	WW Team shared the double clicking	Clinical staff	3/11/2013	Complete	G	Minimal

Lean Walk Benefits

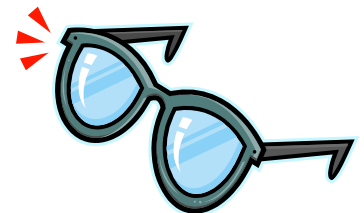
- Best Practices shared; work towards standardization
- Quick, easy way to identify & implement improvements
- Great way to educate more on Lean. Develops “Waste” Eyes
- Engaged Teams (Lean Walk members & the Practices)
- Practice Accountable to improve operations
- Input to potential Lean projects that impact all Practices

“Thru the *Eyes* of the Patients”



Our Next Steps

- Continue to include Staff Training
- Use PDSA's to implement change
- Share Best Practices – Monthly Newsletters
- Include Lean Walk Team Pictures
- Initiate Lean projects across practices as surface



Questions



File View Help

Attendee List (2 | Max 201)

Attendees (1) Staff (1)

NAMES - ALPHABETICALLY

Corena Bahr (Me)

Search

Audio

Audio Mode: Use Telephone Use Mic & Speakers

MUTED

Audio Setup

Talking: Suzie Smith

Questions

Questions Log

Q: Is there a volume discount?

Type your question here.

Send

Webinar Now
Webinar ID: 731-938-951
GoToWebinar™

Master Black Belt Program

- Offered in partnership with Fisher College of Business at [The Ohio State University](#)
- Employs a [Blended Learning model](#) with world-class instruction delivered in both the classroom and online
- Covers the [MBB Body of Knowledge](#), topics ranging from advanced *DOE* to *Leading Change* to *Finance for MBBs*



Thank you for joining us

Questions? Comments about today's program?

Linda Dodge, St. Rita's Medical Center
ladodge@health-partners.org

Janell Vickers, Mercy Health Partners
JVickers@health-partners.org

Ellen Milnes, MoreSteam.com
emilnes@moresteam.com



Join us next month: April 29th – Remote Coaching

Archived presentations and other materials: <http://www.moresteam.com/presentations/>