Opening Your Staff’s “Waste Eyes” with Waste Walks / Lean Walks
• Welcome / Introductions

• Background Catholic Health Partners (CHP)

• Waste

• Lean Walks
  – Hospital Units
  – Physician Offices

• Wrap-Up
Linda Dodge

- **CHP/St. Rita’s Medical Center**
  - 26 years in various roles

- **Prior**
  - 8 years with Bluffton Hospital and Blanchard Valley

- **Education**
  - Associate of Applied Science at James Rhodes State College
  - Bachelors of Business Administration (BBA) at Mount Vernon Nazarene College
  - Masters of Business Administration (MBA) at Tiffin University

- **Professional**
  - Registered Respiratory Therapist
  - Master Level Tobacco Treatment Specialist
  - Certified Lean Leader
  - Trained Black Belt

- **Personal**
  - Married for 32 years with two children and two grandchildren
  - Legend of St. Rita’s Award in 2012
Janell Vickers

- CHP
  - 2.5 years Lean/Six Sigma Black Belt, Physician Practices
  - 3 years Project Manager / Transformation Specialist, IT

- Prior
  - Owens Corning for 32 years in various roles

- Education
  - MBA from Bowling Green State University (BGSU)
  - Bachelors of Science in Computer Science & Math from BGSU

- Professional
  - Certified Six Sigma Black Belt and Certified Lean Green Belt
  - Associate Certification in Project Management
  - Certified Computing / Systems Professional
  - Association for Systems Management Leader role 12 years

- Personal
  - Married 38 years with three children
  - Designated one of Owens Corning's top 10 volunteers for 2 years
Ice Breaker

- Study the Dinosaurs

- What characteristics describe dinosaurs?

- How does this relate?
• Catholic Health Partners

• 24 hospitals
• 30,000 employees
• 7 regions
• 2 states
• $5.4 billion in assets

Catholic Health Partners sites

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
Northern Market

- 7 hospitals
- 1500 medical staff member
- Over 250 physicians and mid-level providers employed by Mercy Medical Partners
- Over 200 residents plus medical students
- Mercy College
- Over 7000 employees
- 2 Master Black Belts
- 2 Black Belts
- 10 Trained Green Belts
- Over 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
Our 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
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 and Service

In 2012, CHP contributed $385 million to communities
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

Before

Lead Time / Cycle Time

After

Work... Value Add Time
Wait / Waste... Non Value Add Time

Lean attacks waste here

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
- What are we trying to accomplish?
- How will we know that a change is an improvement?
- What change can we make that will result in improvement?

PDSA - “Tests of Change”
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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Defects</strong></td>
<td>Time spent doing something incorrectly or fixing errors</td>
</tr>
<tr>
<td><strong>Overproduction</strong></td>
<td>Doing more than what is needed by the customer or sooner than needed</td>
</tr>
<tr>
<td><strong>Transportation</strong></td>
<td>Unnecessary movement of the patient</td>
</tr>
<tr>
<td><strong>Waiting</strong></td>
<td>Waiting for the next step to occur</td>
</tr>
<tr>
<td><strong>Inventory</strong></td>
<td>Excess inventory costs, spoilage, expiration, wastage</td>
</tr>
<tr>
<td><strong>Motion</strong></td>
<td>Unnecessary movement by employees in the system</td>
</tr>
<tr>
<td><strong>Over processing</strong></td>
<td>Doing work that is not valued by the customer</td>
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</table>
# Waste Modules Foci

<table>
<thead>
<tr>
<th>Module</th>
<th>Focus</th>
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<tbody>
<tr>
<td>Ward Module</td>
<td>Room utilization and patient flow</td>
</tr>
<tr>
<td>Diagnosis Module</td>
<td>Testing that is viewed as “routine”</td>
</tr>
<tr>
<td>Patient Care Module</td>
<td>Unnecessary monitoring, tests, medications, therapies</td>
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<tr>
<td>Treatment Module</td>
<td>Order set utilization and best practice models</td>
</tr>
<tr>
<td>Patient Module</td>
<td>Patient interviews were conducted regarding patient’s perception of delays in care or discharge</td>
</tr>
<tr>
<td>Process Module</td>
<td>Evaluated the process flow in the nursing unit</td>
</tr>
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</table>
### Documentation Example

**Ward Module:**

<table>
<thead>
<tr>
<th>Unit:</th>
<th>Date &amp; Time of Review:</th>
<th>Reviewer(s):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Waste*</th>
<th>WASTE STREAMS</th>
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<tbody>
<tr>
<td>Room</td>
<td>Account No.</td>
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*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**
## Hospital Inpatient Waste Identification Tool Worksheet: Process Module

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<th>Area or Room</th>
<th>Frequency 1 (occasionally) 5 (5+ per day)</th>
<th>Severity 1 (Low Impact) 5 (Large Impact)</th>
<th>Type of Waste Noticed</th>
<th>Description:</th>
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<tr>
<td></td>
<td>1 2 3 4 5</td>
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# 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
Simulation Team Exercise

2 Teams: Inpatient and Waste Walk Team

Quick Registration
Triage
Full Registration
Treatment
Discharge
Transport / Supplies
Observers

Objectives: To understand current state and waste through simulation
Debrief: Designed to determine level of understanding of waste and potential improvement opportunities
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<td></td>
<td>TOTAL PATIENTS OR AREAS REVIEWED</td>
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</table>
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
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 Walk Team Input

Capture Potential Opportunities
Prioritize & Focus on 3-5

Perform PDSA's Test of Change For Improvement

Practice Staff Ideas + Lean Walk Team Input Together

Results

Act Plan
Study Do
## Lean Walk Modules

<table>
<thead>
<tr>
<th>Module</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Flow</td>
<td>Follows Patient with entire experience; even in exam room (asks first)</td>
</tr>
<tr>
<td>Front Office Flow</td>
<td>Observes check-in, check-out, scheduling, collections</td>
</tr>
<tr>
<td>Clinical Flow</td>
<td>Focuses on Clinicians (Nurses, Medical Assistants)</td>
</tr>
<tr>
<td>Physician Flow</td>
<td>Follows Physician / Mid-Levels - looking for waste before &amp; after Patient Exam</td>
</tr>
<tr>
<td>Supply Chain</td>
<td>Focuses on inventory management</td>
</tr>
<tr>
<td>Patient Satisfaction</td>
<td>Patient’s perception of their visit</td>
</tr>
</tbody>
</table>
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.
**Physician Office Waste Identification Tool Worksheet:  Patient Flow Module**

<table>
<thead>
<tr>
<th>Process</th>
<th>Frequency</th>
<th>Severity</th>
<th>Type of Waste Noticed</th>
<th>Description</th>
<th>Index Total S + F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check-In Registration</td>
<td>1</td>
<td>1</td>
<td>Over Production Inventory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rooming</td>
<td></td>
<td></td>
<td>Over Processing Motion</td>
<td></td>
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</tr>
<tr>
<td>Exam</td>
<td></td>
<td></td>
<td>Defect</td>
<td>Waiting</td>
<td></td>
</tr>
<tr>
<td>Procedure</td>
<td></td>
<td></td>
<td>Transportation</td>
<td>Clutter</td>
<td></td>
</tr>
<tr>
<td>Check-Out Signage</td>
<td></td>
<td></td>
<td>Over Production Inventory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Best Patient Experience*</td>
<td>5</td>
<td>5</td>
<td>Over Processing Motion</td>
<td>Defect</td>
<td></td>
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<td></td>
</tr>
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</table>

# 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:** [Redacted]  **Date & Time of Review:** 8/2/12  **Reviewer:** [Redacted]  **Total Patients or Areas Reviewed:**

<table>
<thead>
<tr>
<th>Process</th>
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<tr>
<td>Check-in Registration</td>
<td>1 (Occasionally)</td>
<td>1 (Low Impact)</td>
<td>Over Production</td>
<td>Inventory</td>
<td>8</td>
</tr>
<tr>
<td>Rooming Nursing Assessment</td>
<td>5 (5+ per day)</td>
<td>5 (Large Impact)</td>
<td>Over Processing</td>
<td>Motion</td>
<td></td>
</tr>
<tr>
<td>Exam Testing</td>
<td>1 2 3 4 5</td>
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<td>Transportation</td>
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<tr>
<td>Check-out Other</td>
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<td>Check-out Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- 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
- 2 open Iodolaine bottles in room 15 - no date on when to discard or when it was opened in a cupboard. 1 open
- 2:12P pt walked out by Dr. Vanan. 2:25P - discharge instructions, follow up appt, left
Waste Examples

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

<table>
<thead>
<tr>
<th>Potential WASTE - Area to Address</th>
<th>Priority (H-High M-Medium L-Low)</th>
<th>WHAT - Change to be made</th>
<th>WHO- Responsible for Change</th>
<th>WHEN - Targetted Completion Date</th>
<th>Status</th>
<th>Type</th>
<th>Impact / Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Front Office Printer Location</td>
<td>L</td>
<td>Move printer in between</td>
<td>Kathy G. (Gerdeman)</td>
<td>not changing</td>
<td>NC</td>
<td>P</td>
<td>Minimal time</td>
</tr>
<tr>
<td>Scanning Driver's License so data auto populates</td>
<td>L</td>
<td>Patient's insurance card always needs scanning; at same time - ask for driver's license</td>
<td>Front office Staff</td>
<td>Immediately</td>
<td>Complete</td>
<td>G</td>
<td>Minimal time / revenue risk (since don't always ask for insurance card)</td>
</tr>
<tr>
<td>Pharmacy Questions re: Meds (mostly Physician errors-Epic Med List complex)</td>
<td>H</td>
<td>Ask other practices if they receive the same and how they handle these.</td>
<td>Janell</td>
<td>4/30/2013</td>
<td>Complete</td>
<td>A</td>
<td>High amount of time; Patient risk</td>
</tr>
<tr>
<td>Obtain a wheel chair-have to walk across building to get one</td>
<td>M</td>
<td>Ask other practices if have extra; maybe a patient would donate one</td>
<td>Kathy G.</td>
<td>3/13/2013</td>
<td>Complete</td>
<td>C</td>
<td>Saves wasted travel time; immediate access to a wheel chair</td>
</tr>
</tbody>
</table>

### Clinical / Patient Flow

| 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 |

| 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 ??

Thank You !!