
PROCESS IMPROVEMENT



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Process Improvement

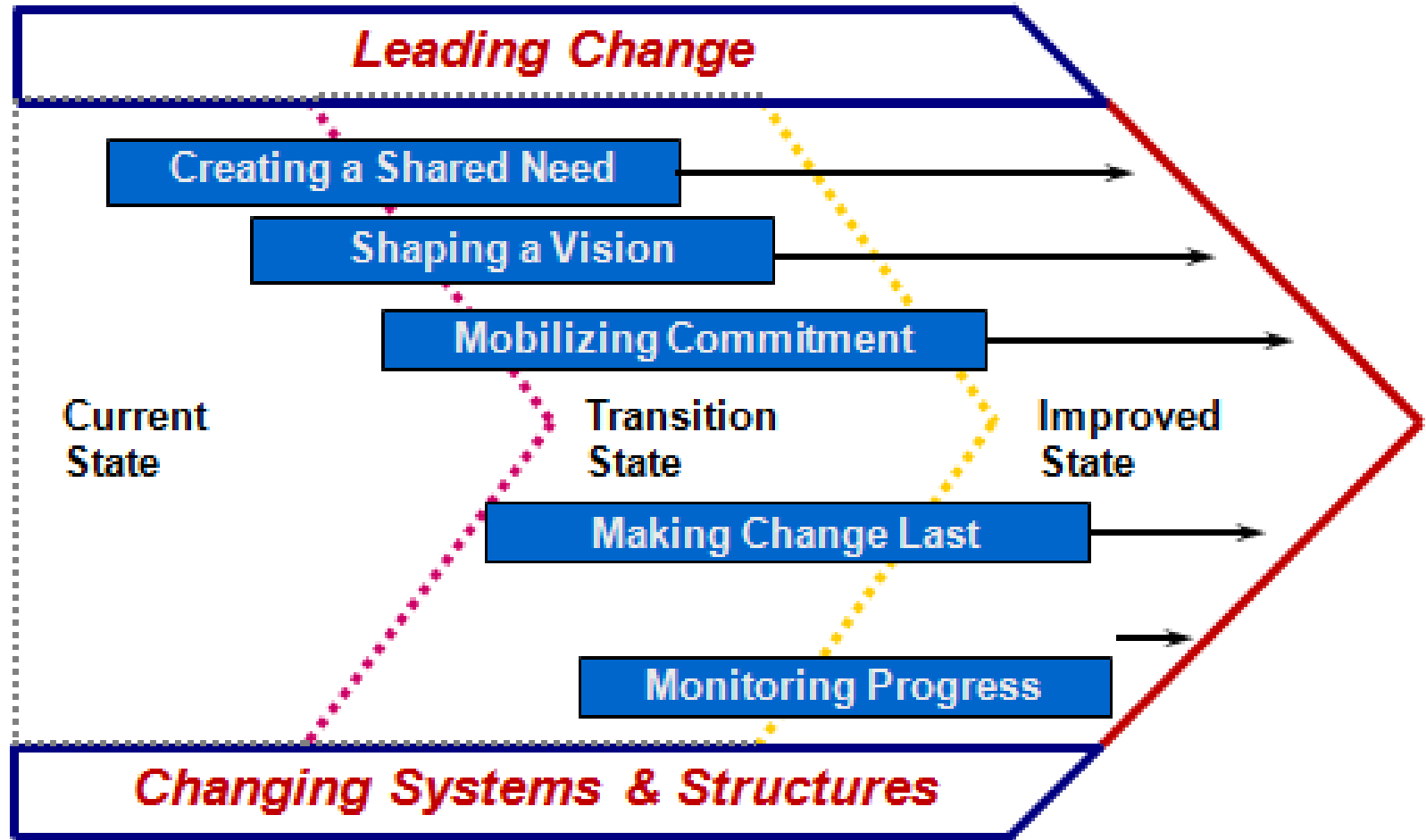
Process Improvement is a methodology that seeks to engage front line staff in the problem solving process.

Process Improvement can occur anywhere in our organization.

Process Improvement Methodology

- It is not about fighting fires or implementing known solutions or correcting performance or behavior problems
- All work can be viewed as a process
- Focus on process not people
- All processes can be improved
- Requires an organized effort

Change Acceleration Process



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CPiP: Clinical Process Improvement Leadership Program

Process Improvement Approach

- Make no changes until you understand the **Current Process** (e.g. Process Map)
- **Identify & Prioritize Problems** (e.g. Brainstorming Sessions)
- **Identify & Prioritize Solutions** (e.g. Brainstorming Sessions & Priority Payoff Matrix)
- **Develop Test Plans:** Standardize work and remove barriers (e.g. Test Plan template)
- **Implement Test Plans:** Multiple Plan-Do-Check-Act Cycles
PDCA
- **Monitor Results:** See results over time with run charts

Some Process Improvement Tools

Getting Started

Project Charter

Key Components:

- Sponsors, Project Leader, Team Members
- Problem Statement
- Aim Statement
- Scope
- Boundaries
- Affected Areas
- Measures of Success

Process Improvement Project Charter

Project Title:

Project Leaders:

Institution:

Team Members:

Project Sponsors:

Start Date:

End Date:

Problem Statement: *Describes what is wrong; describes the pain.*

Aim Statement: *Defines the team's improvement objective; what the team is trying to accomplish.*

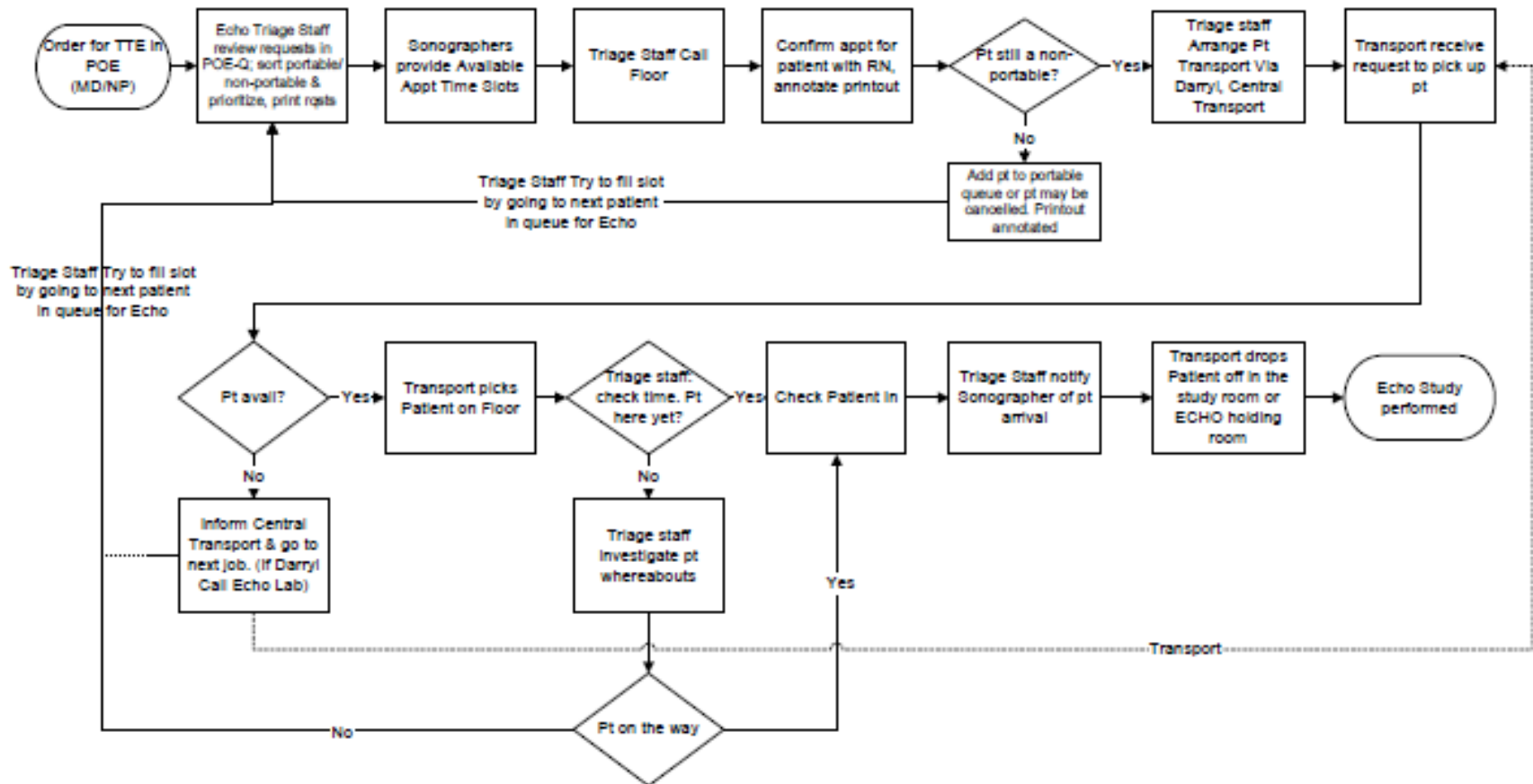
Scope: *What process will the project focus on?*

Boundaries: *What are the parameters that the team is given to work within? What is in and/or out?*

Affected Areas: *What people, departments or units are potentially affected by changes the team will make in the process?*

Measures of Success: *How will the team know that an improvement has been made? Measures should be tangible and readily and easily measured. Consider process, outcome and balance measures.*

Process Map Example



5 Whys Strategy

Why?

Why?

Why?

Why?

Why?

- A fundamental Lean principle used to identify the root cause(s) of problems in a process
- Helps identify and understand the relationship between different root causes of a problem
- Engages the team in the improvement process
- Simple and straightforward

5 Whys Example

Why were the patients not ready in the exam room?

They were late getting to the exam room from the waiting room.

Why were they late getting to the exam room from the waiting room?

The MAs didn't know the patients had arrived.

Why didn't the MAs know the patients had arrived?

The MAs didn't see or hear the signal for a patient arrival (patient labels printing).

Why didn't the MAs hear or see the patient labels print?

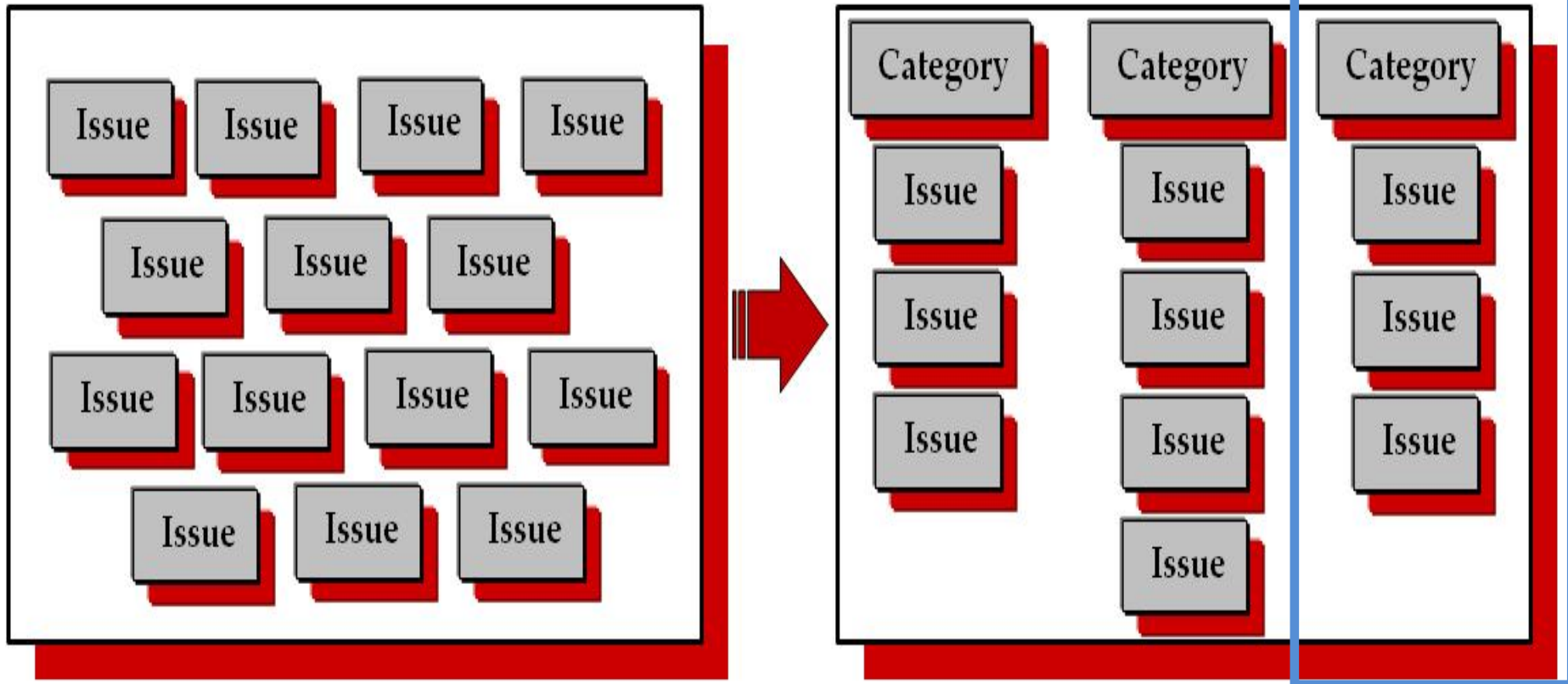
The patient label printer was far from where they work.

Why wasn't the patient label printer located in the MA area?

There was no computer line nearby to connect the label printer.

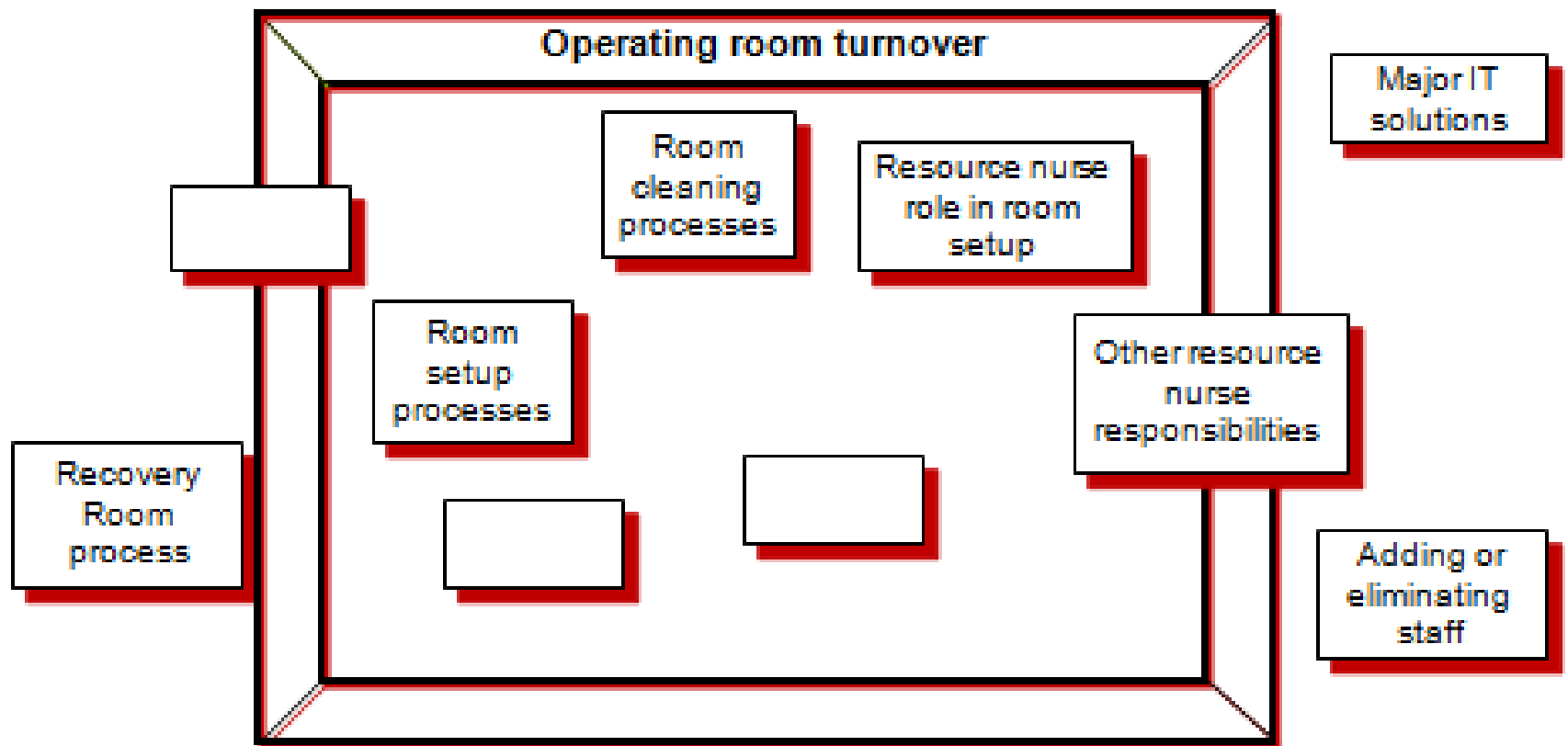
Brainstorm Issues

Reviewing, Categorizing & Grouping Issues



In & Out of Frame

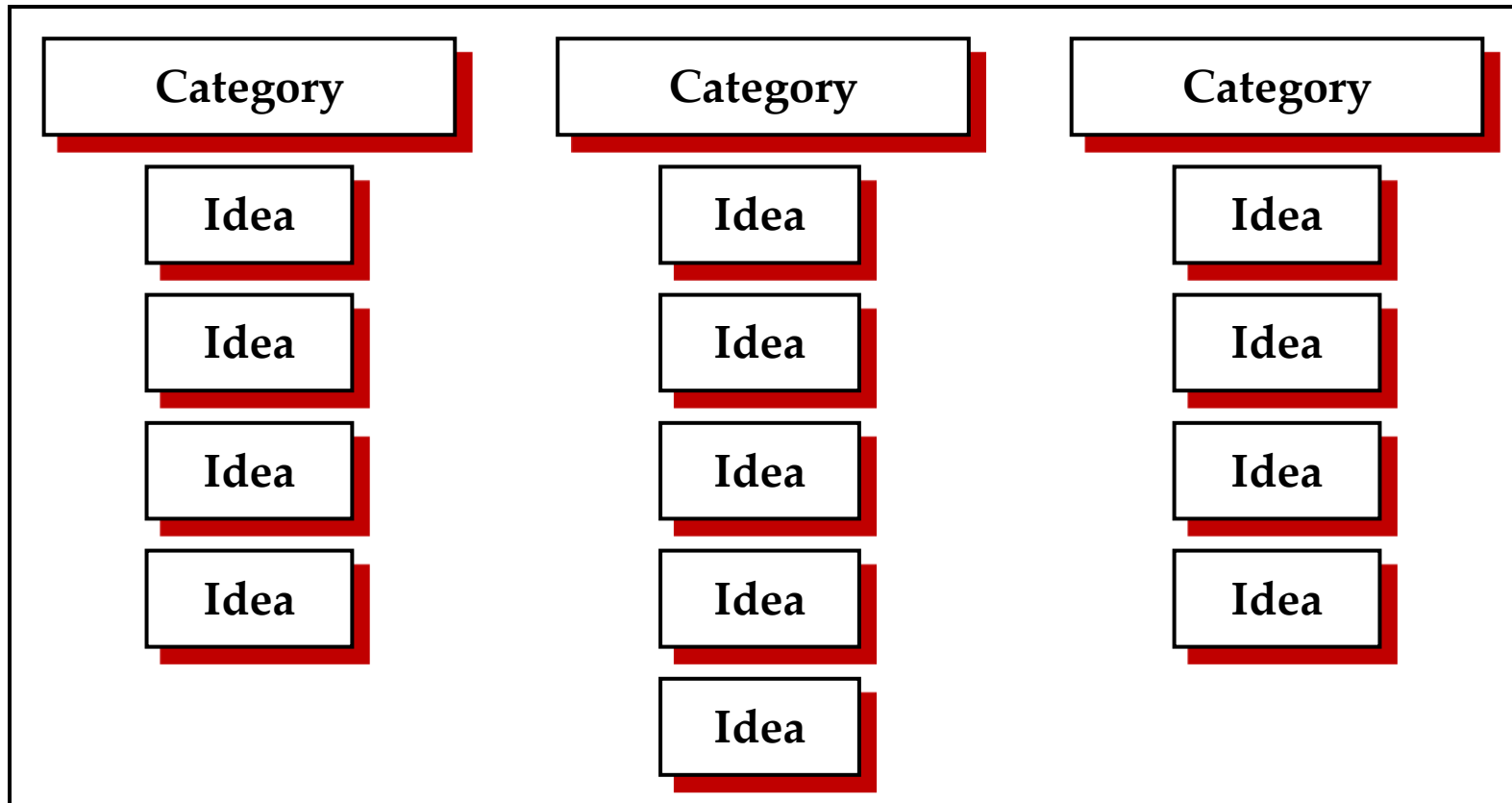
A method for filtering ideas based on what is within the team's scope and/or control.



Brainstorm Ideas

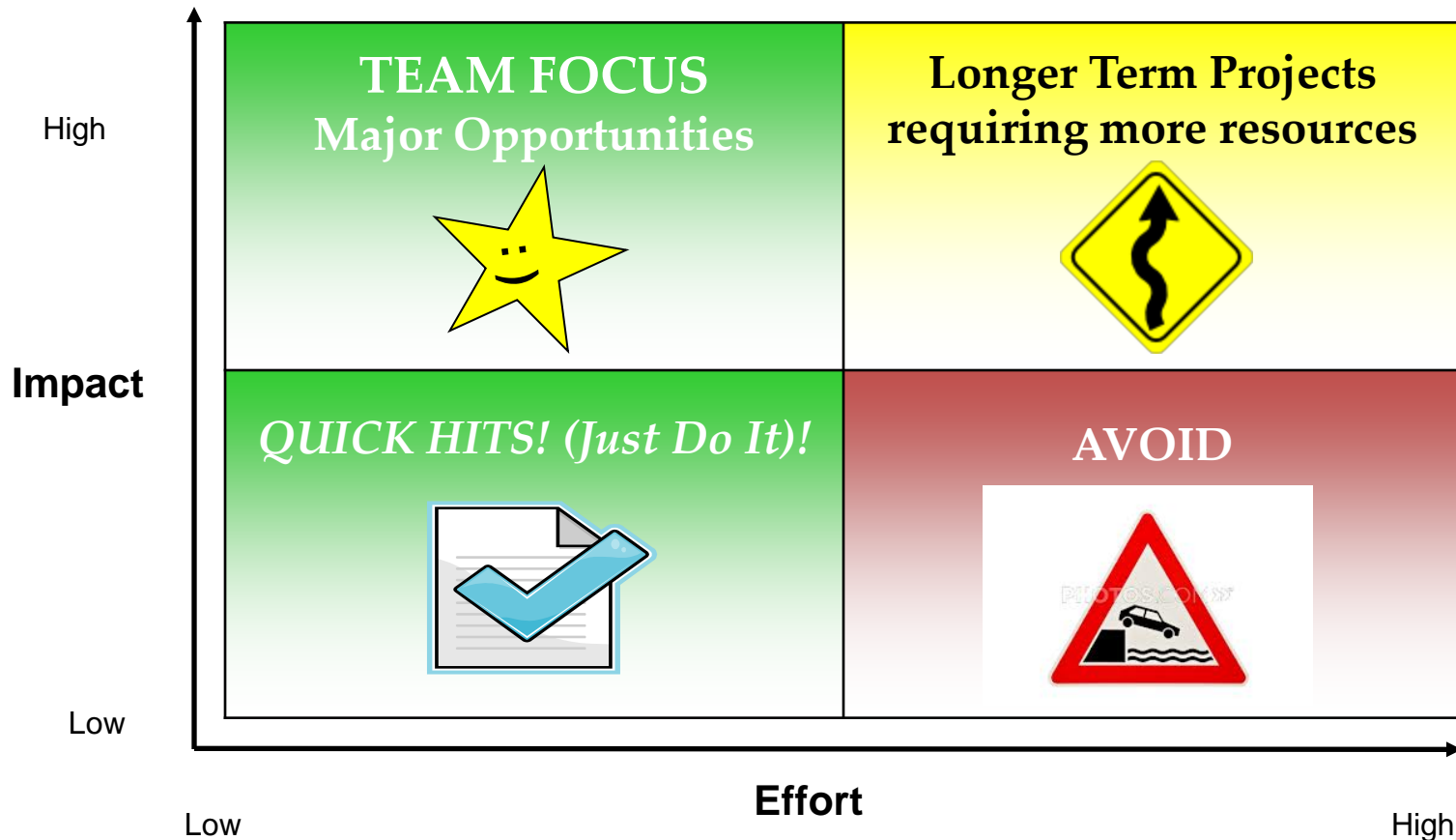
Categorizing & Grouping Solutions

Affinity Diagram: Similar ideas are grouped together
A highly visible process of evaluating and organizing information.



Prioritizing Solutions Tool

Priority Payoff Matrix



Focus on the high impact/low effort ideas and Just Do It's

Test Plan Template for Pilot

Improvement #1: Proposed solution

Documentation: A written test plan is crucial to support local learning and transferability of learning to other settings

Prediction-based test of change: Your hypothesis about why this change might work

Plan for data collection

Elements of a Test Plan

Project Name:

Problem Statement: *What specific problem are you trying to solve?*

Aim Statement: *What is the objective of this test? (Specific, Measurable, Actionable, Realistic and Time-bound)*

Proposed solution: *What are you going to do?*

Measures: *What process measures will determine if the test worked as expected?*

Predicted Outcome of Test: *The expected effect of the test*

Action Plan: *Steps needed to implement the test*

Who	will do What	by When

Outcome of Test: Process measures on a **run chart**

Next Step: Adopt, Adapt or Abandon the intervention

Elevator Speech

What is it?

An elevator speech is a short summary used to quickly and simply define a project and its value proposition.

A simple 4-part formula for your elevator speech:

“What our project is about”

“Why it is important to do”

“What success will look like”

“What we need from you”

Elevator Speech

Example: AMMP



What it is:

- AMMP is a volunteer organization of employees from the Massachusetts General Hospital, Brigham and Women's Hospital, Partners Health Care System and its entities, who are dedicated to achieving a common goal.
- AMMP is committed to the advancement, retention, recruitment, and development of multicultural professionals into leadership roles at all levels and areas of the Partners organization.

Why it is important:

- Proactive hiring, promoting and retention of a diverse workforce will enable Partners and its entities to meet the emerging needs of an increasingly diverse patient population. Such a commitment will enhance our strategic goals and position Partners as a global leader in the health-care industry.

What success will look like:

- AMMP will be recognized as an organized volunteer member group with supporting infrastructure that is diversified and committed to Excellence.

PDCA:

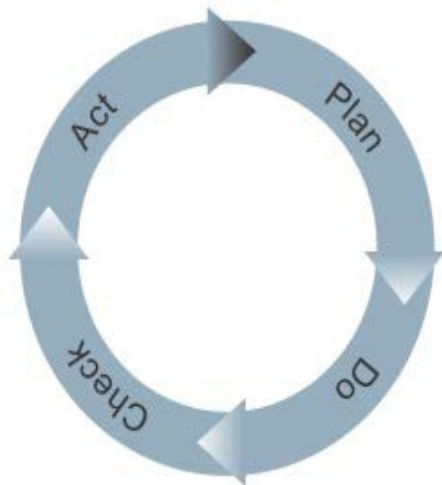
Small Tests of Change

The PDCA Cycle comes from the Model for Improvement:

1. The Three Improvement Questions

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

2. The PDCA Cycle



PLAN

Create a written test plan

DO

Carry out plan
Monitor closely
Measure

CHECK

Analyze data/results
Compare results to predictions
Summarize what was learned

ACT

Adopt
Adapt
Abandon

Resources

- **MGH Process Improvement:**
<http://sharepoint.partners.org/mgh/mghmgpoprocessimprovement/default.aspx>
- **MGH EED:**
http://www.mghpcs.org/eed_portal/Documents/PI_EBP/BASICS_model.pdf
- **CPIP:**
<http://sharepoint.partners.org/phs/clinicalprocessimprovementlead/default.aspx>
- **GBMP:** <http://gbmp.org/>
- **Lean Enterprise Institute:** <http://www.lean.org/>
- **UHC:** <https://www.uhc.edu/>
- **IHI Open School:** <http://www.ihl.org/offerings/ihlopenschool/Pages/default.aspx>

THANK YOU

APPENDIX

Next Steps: Action Plan

What, Who, & When

The **WWW** is a critical document and an organized way to track all action items. It details what will be accomplished, the name (s) of persons responsible and a time frame for completing the action step.

WHAT Action/Commitment	WHO Responsibility	WHEN Deadline

Suggested Reading

Improving Healthcare with Control Charts. Raymond G. Carey, ASQ Quality Press, 2003.

Handbook for Improvement: A Reference Guide for Tools and Concepts. Healthcare Management Directions, Inc., Executive Learning Inc. 2002

Lean Hospitals: Improving Quality, Patient Safety and Employee Satisfaction. Mark Graban, CRC Press, 2009

Leveraging Lean in Healthcare. Charles Protzman, George Mayzell MD & Joyce Kepcher, Taylor Francis & Group, 2011.

Measuring Customer Satisfaction: Survey design, Use and Statistical Analysis Methods. Bob E. Hayes, ASQ Quality Press, 1998

Measuring Quality Improvement in Healthcare: A Guide to Statistical Process Control Applications. Raymond G. Carey, and Robert C. Lloyd, ASQ Quality Press, 2001

On the Mend: Revolutionizing Healthcare to Save Lives and Transform the Industry. John Toussaint, Lean Enterprise Institute, 2010

Patient Satisfaction: Understanding and Managing the Experience of Care. Irwin Press, Health Administration Press, 2006

The Health Care Data Guide: Learning from Data for Improvement. Lloyd Provost and Sandra Murray, Jossey Bass, 2011

The Heart of Change: Real-Life Stories of How People Change Their Organizations. John Kotter, and Dan Cohen, Harvard Business Review Press; 2002

The Improvement Guide: A Practical Approach to Enhancing Organization Performance. Gerald Langley, et. al., Jossey-Bass, 1996

The Team Handbook: How to Use Teams to Improve Quality. Peter Scholtes, Joiner/Oriel, 2003

Resources

Useful links

- Intermountain Healthcare - <http://intermountainhealthcare.org/qualityandresearch/institute/Pages/home.aspx>
- University Health System Consortium - <https://www.uhc.edu/>
- American Society for Quality - <http://asq.org/index.aspx>
- Institute for Healthcare Improvement (IHI) - <http://www.ihl.org/Pages/default.aspx>
- Institute for Healthcare Optimization - <http://www.ihoptimize.org/index.htm>
- MGPO - <http://mgpo.partners.org/Quality-Safety.aspx>
- BWH - http://www.bwhpikenotes.org/Employee_Resources/ProcessImprovement/Default.aspx
- DFCI - <http://dfcionline.org/departments/qualityimprovement/lean/>

Learning opportunities

- MGH Leadership Academy - <http://www2.massgeneral.org/leadershipacademy/>
- Partners Clinical Process Improvement Leadership Program (CPIP) – <http://sharepoint.partners.org/phs/clinicalprocessimprovementlead/default.aspx>
- Greater Boston Manufacturing Partnership - <http://www.gbmp.org/training>
- LEI - <http://www.lean.org/Workshops/>
- MHA - http://www.mhalink.org/AM/Template.cfm?Section=Education_and_Events&Template=/Pages/Education.cfm
- IHI Open School - <http://www.ihl.org/offerings/ihlopenschool/Pages/default.aspx>

