"Facilitating in a better way"

Presenters:

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Tori Algee

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Schematic of the components of a process
AKA a Rapid Process Improvement

• “kaizen”
• Focus on streamlining work
• 2-5 day continuous work session
• Facilitator and a staff work team
• Improvement ideas are tested
• Recommendations doable within the week or under 30 days

Explanation of a kaizen/RPI
FACILITATION involves two views (at the same time)

The macro view

The micro view
1. Laying the foundation

2. Understand current state

3. Improve: Clean up the current process

4. Pause: workshop quality check

5. Improve: Workflow coming in

6. Improve: Workflow going through

7. Improve: Work methods

8. Improve: Process supports

9. Pause: ‘Land this 747!’

10. Report Out/Continuous Improvement
THE PATH: WHAT IS DIFFERENT?

• Laying the foundation.

• Improve right away: clean up the process. Improve the flow in all parts of process.

• Pause...Review the charter again.

• Improvements tied to Continuous Improvement efforts.
THE JEEP VIEW

This is the DETAIL:

WHAT IS TO HAPPEN AT EACH STEP IN THE WORKSHOP
What’s different?

- Process thinking review
- Give team context.
- Data collection map
- Plan, Do, Study, Act Forms
EXERCISE: ICEBREAKER ROLE PLAY (partial)

Facilitator (F): Please tell the group your job title and the main thing that you do in your job. I want you to think about what you do that is repetitive, not just one-time tasks.

Team member (TM): My job title is “provider data entry clerk” and the main thing I do is sit at the computer all day and key in information from filled-out forms.

F: That’s great. Let me help you think about this in terms of a process. Remember, I said there was a beginning to a process? The “thing” that begins your work is a form. We call that the input. And I said that something comes out at the end of the process and we call this an output. The output is delivered to the customer.

Now let me ask you another question: do you know who your customer is?

TM: We don’t have customers!

F: Ah, but you do. The term “customer” is something we are not used to. Think of it as the person who receives the service or piece of paper. If you are a provider data entry clerk, then I imagine that your customer at the end of this whole process is a provider.

TM: Oh, that’s right. All of us working next to each other know somehow that our work is getting doctors and hospitals into the system so that they can be registered and then paid. Etc...
TO EXPLAIN WHERE THE WORK OF THE RPI FITS
A LISTING OF DATA TOOLS FOR THE RPI TEAM

The Seven Quality Tools: cause and effect diagram, check-sheet, histogram, pareto chart, flow chart, run chart
Plan, Do, Study, Act (PDSA) Form
(please use for all improvements, even though some of the improvements are low-hanging fruit.)

Plan (What could be the most important accomplishment of this team? What changes might be desirable? What data are available?) to test an improvement idea?

Name the improvement. Plan what you are going to do to test it?

Do-Carry out the test decided upon, on a small scale.

Study - Observe the effects of the test. Did things improve, get worse, or stay the same?

Act - Study the results. What did we learn? Should we implement organization-wise?
a. Walk the process  
b. Make spaghetti, handoff charts  
c. Backlog  
d. Estimate times

What’s different?  
• Backlog plan
<table>
<thead>
<tr>
<th></th>
<th>Current State</th>
<th>Future State</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Planning Handoffs</td>
<td>13</td>
<td>10</td>
<td>(3)</td>
</tr>
<tr>
<td>Production Handoffs</td>
<td>9</td>
<td>4</td>
<td>(5)</td>
</tr>
</tbody>
</table>
EX. OTHER INFORMATION COLLECTED DURING THE WALK-THRU
<table>
<thead>
<tr>
<th>BUCKETS</th>
<th>BACKLOG</th>
</tr>
</thead>
<tbody>
<tr>
<td>223- Redeterminations</td>
<td>18 days out</td>
</tr>
<tr>
<td>15- 859 A's</td>
<td>8 days out</td>
</tr>
<tr>
<td>504- Changes &amp; Misc.</td>
<td>25 days out</td>
</tr>
</tbody>
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EX. DATA COLLECTED ON THE BACKLOG

Example of data about backlog - Medicaid Provider Unit RPI

- North Valley Processing Center RPI
Example: 425 applications in the backlog; all the while new applications are coming.

1. Gather data

   • # of pieces of paper (e.g. applications or requests) in the backlog.

2. Measure cycle time for one unit.

   • Pick both the high producer and the low producer workers in the process. Conduct time observations (at least 5 cycles; then average) of each. Then get an average cycle time from the two workers. (one worker takes 30 minutes average; the other takes 60 minutes average = 45 minutes. ) Example: it takes 45 minutes to process one application.

3. Calculation: cycle time for one app=45 minutes. Hours in the workday = 7.5 hours. Convert to minutes (7.5 x 60) = 430 minutes.

4. Number of apps that can be completed in one day by one worker = 9.1 apps. (430/45 = 9.1).

5. Number of days to eliminate current backlog = estimated 46 days. (425 / 9.1 = 46+ days for one person.

6. Want to clear up backlog quicker? Two people can do 18 apps per day (425/18 = estimated 24 days.)
a. Conduct step-by-step analysis
b. Note times between steps
c. Cause of loopbacks

What’s different?
• Questionnaire for step-by-step analysis
EX. THIS IS WHAT THE TEAM DOES IN A STEP-BY-STEP ANALYSIS
NEW TOOL: HELP THE TEAM DETERMINE HOW TO LABEL THE STEPS IN THE PROCESS

ABOUT THE QUESTION
Note: the whole point of the questions is to see if the step ‘moves the product or service through’ the process to get it to its final form before it gets delivered to the customer.

Questions to ask:
Value of a Step?

Q.1....a. Is this step necessary because of a law or regulation?
b. Does this step physically change the product or service going through the process?

a. keep the step in the process
b. Keep the step in the process

ABOUT THE ACTION
About the Answer YES
Note: Keeping these steps in may suffice for now, but there is more improvement waiting. The step could be moved in its sequence or combined with other steps. For now, all we want is to remove the steps that are of obvious no value.

About the Answer NO
Note: For every step that the answer is ‘no’ to, make sure that if you eliminate it, that it doesn’t adversely affect another part of the pro-

B. For example, this means someone ‘touched’ it and wrote on it, separated it or attached it to something. Rather, it didn’t just sit idle. The litmus test is ‘did this step move the piece of paper closer’ to the final form it should be? If no, these are probably steps that say ‘file’ or ‘pend it’, etc. If so, then our process is not moving toward ideal, or the process would have continuous flow and work would be completed on the same day it came in.
What’s different?
• Pausing to review the charter
### Example: Charter from Crook County Health Clinic RPI

<table>
<thead>
<tr>
<th>Team Leader (for Implementation and Evaluation):</th>
<th>Nelda, RN</th>
<th>Facilitator: Paddy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Team Members</strong></td>
<td>Nelda, Karen, Kris, Wendy, Mariah, Jessica</td>
<td></td>
</tr>
<tr>
<td><strong>Sponsor(s)</strong></td>
<td>Muriel, RN</td>
<td></td>
</tr>
</tbody>
</table>
| **Problems/Need for WS:** (1-3 bullets):      | • Long exams increase costs.  
• Decreased revenue.  
• Wait time is so extensive, clients drop-out. |
| **Primary goal of WS:**                      | To improve customer service.  
Reduce cost, through increased efficiency. |
| **Scope:**                                    | Clinic flow from time clients seek service to when they leave with prescription or treatment plan. |
| **Baseline data:**                           | None at this time. |
| **Key Dependencies:**                        | Dependent on resources: staff, supplies, computers. |
| **Expected Benefits (Qualitative):**         | More people successfully accessing the services.  
Public image improved.  
Employee morale increased. |
| **Targets:**                                 | Increase number of clients seen by 75%.  
Decrease exam process time by 25%.  
Decrease clinic visit cycle time by 25%.  
Increase revenue by 50%. |
<p>| <strong>Major Deliverables:</strong>                      | Improvements in establishing standards for exam flow and containing evidence of increased revenue due to increased influx of clients. |
| <strong>Timing and Logistics:</strong>                    | <strong>Event</strong> | <strong>Date/Time</strong> | <strong>Location</strong> |
|                                              | WS       | Aug. 1&lt;sup&gt;st&lt;/sup&gt; + |
|                                              | Planning | 9-5, Oct. 27; 8-11:30, Oct. 28 |
|                                              | Conduct: | 30 days post WS |
|                                              | Followup: | Track one measure: goal of 2.5 clients per hour through the clinic. Two time studies have been completed, complete time studies monthly following the WS. |</p>
<table>
<thead>
<tr>
<th>Consideration</th>
<th>1-day</th>
<th>4-day</th>
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<tbody>
<tr>
<td><strong>Scope</strong></td>
<td></td>
<td></td>
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<tr>
<td>• Is the problem small or well understood where future state could be solved in a day?</td>
<td></td>
<td></td>
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<tr>
<td>• Will the future state involve merging multiple current states or have implications on multiple processes / sub-processes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Is structured problem solving required due to multiple solution options from multiple stakeholder groups and/or same stakeholder groups from multiple locations?</td>
<td></td>
<td></td>
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<tr>
<td><strong>Implementation</strong></td>
<td></td>
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<tr>
<td>• Can a “few” people implement the entire solution within a week without much stakeholder management and/or pushback?</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>• Will implementation involve multiple stakeholders with multiple action plan owners?</td>
<td></td>
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</tr>
<tr>
<td>• Will piloting, refinement, and/or standardizing processes be required?</td>
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<tr>
<td><strong>Sustainability</strong></td>
<td></td>
<td></td>
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<tr>
<td>• Are metrics already in place and/or readily available?</td>
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<td></td>
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<tr>
<td>• Will the implementation require defining metrics, creating a visual board, and/or performance huddles to ensure the actions are sustained?</td>
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</tbody>
</table>

**TOOL: TO DECIDE HOW LONG AN RPI CAN BE**
What’s different?
- Gatekeeper- segregate the work up front
EX. HOW TO ‘SORT’ INCOMING WORK!
What’s different?
• Challenges of takt time
EX. OF ALTERNATIVES TO TAKT TIME. WHITEBOARD SHOWS DAILY WORK SCHEDULES.
a. Research industry benchmarks
b. Standardization

What’s different?
• Getting to best practices
THREE DIFFERENT FLOWCHARTS FOR THE SAME WORK
**MAIN TASKS**

- **Check in client**
- **Determine needs**
- **Are they eligible?**
- **Client receives program benefits**

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**Best practices in each branch**

TEAM MEMBERS PUT THEIR BEST PRACTICES ON POST-ITS FOR EACH ACTIVITY
What’s different?
• People ‘miss’ the organization culture
Process supports-MATERIALS

EX. OF MATERIALS, FORMS.  39 DIFFERENT FORMS USED!
Lean requires cultural transformation.

“Lean strategies fail as a result of not recognizing this key element of success.”
CULTURE: Employee empowerment is the cornerstone of continuous improvement.
What’s different?

• PDSA forms: Impact/Difficulty Matrix
EXAMPLE: Financial Services RPI Matrix

This matrix is used to categorize different improvement recommendations.
a. Team members prepped
b. Oral presentation
c. Continuous improvement program

What’s different?
• Example of a daily management system
CONTINUOUS IMPROVEMENT

EX. PERFORMANCE BOARD FROM A DAILY MANAGEMENT SYSTEM
WHAT’S GOING ON IN MY FACILITATION MIND?

• Do I know the critical junctures/decision places in the workshop?

• Do I know when to pull back the team when they need to do more work?

• Do I know when tasks are too big for the group and need to make mini-teams?

• As the workshop progresses, am I able to start writing the final report ‘in my head’?
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RPI Navigation Path
Thank you!

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- Book, Lean for the Nonprofit can be ordered from https://inkwater.com/books/index.php?route=product/pr oduct&product_id=1450