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Overview of Lean Thinking:
Techniques, Concepts and Tools

Outline of Discussion

- Provide an introduction to lean thinking
- Discuss the concept of waste in healthcare
  (focus on typical HME operation)
- Introduce specific lean tools, techniques, & concepts
- Provide you with an understanding of how lean thinking can benefit a HME operation

Introduction

- This is an overview of lean – some of the topics and concepts we are going to review could be full day workshops by themselves
- Think about your core business processes as you go through today's seminar:
  - ❖ Intake processes
  - ❖ Insurance verification and documentation
  - ❖ Distribution, equipment management
  - ❖ Billing and reimbursement

Defining Lean

- A performance improvement concept designed to improve processes
- *Lean thinking focuses on four areas:*
  - *1) Improving efficiency and optimizing workflow*
  - *2) Eliminating non-value added steps, activities*
  - *3) Effective workplace organization & visualization*
  - *4) Work simplification and improving processes*

Maximizing value while minimizing waste

Lean Misconceptions

- It's not about working harder
- It's not about working faster
- Not a program or short-term cost reduction program –it's the way a business operates
- Not only for manufacturing (and not just for hospitals)

BP hopes to turn page with new CEO, leaner company
AP Associated Press

~~LEAN = MEAN~~

You get *TO* lean by improving your processes- you don't *GET* lean by reducing your workforce

Not about "trimming the fat"

Successful Lean Businesses…

- Achieve fewer defects
- Use less time to complete work
- Have minimal rework
- Are more consistent
- Achieve greater customer (patient) satisfaction
- Solid profit and market performance

HME Examples

- Formed process improvement teams – typical results:
  - *Improved timeliness of order-to-delivery*
  - *Improved timeliness of insurance verifications*
  - *Decreased front-end errors (reduced rework)*
  - *Better, more consistent staff performance*
  - *Reduced pending revenue*

Lean Can Help Drive Results

- Too often, process improvement projects fall short
- Typical to achieve some early success, but results usually don't last
- We often find ourselves addressing the same old issues
- *Improvement fatigue can set in*
- Little structure and discipline around our PI efforts

Lean provides a more *structured*, *focused*, and *disciplined* framework for conducting process and performance improvement work

Think About Your Processes…

- Do people spend too much time completing paperwork?
- Do people spend time searching for information, supplies, equipment, etc…
- Does work get completed that contains missing or inaccurate information?
- Do different people approach similar work in different ways?
- Do you get inconsistent results?

More Than Anything Else, Lean is About Reducing Waste Within Processes

Waste in Healthcare

- Any healthcare service that consumes resources yet does not add value to the patient/customer
- Non-value added tasks and activities
- Think of waste as anything you produce within your processes that a customer (or payer) isn't willing to pay for

Will You Give Me More Money…. Medicare?

"Hello Medicare, I need to bill you an extra $50 because I had to wait six days to get the paperwork back from the field before I could submit the claim"!

***T**ransportation*
***I**nventory*
***M**otion*

***W**aiting*
***O**ver processing*
***O**ver production*
***D**efects*

TIM WOOD

Common Waste in a HME Operation

- Incomplete information collected at intake
- Incorrect information/missing information on claims
- Tracking down paperwork from the field
- Searching for equipment, parts, charts, supplies, paperwork, etc.
- Backorders- customer waiting for product
- Incorrect items shipped

Does waste exist in your processes?

Waste Identification Exercise

TIM WOOD

- Use the Waste Identification form
- *Think of your business and the many processes within the operation*
- Select a specific type of waste from at least one of the seven waste categories
  - What is the specific waste?
  - What category does the waste fit into?
  - Why is it considered waste?

How Does Waste Affect Me?

- ✓ Causes *physical fatigue*
- ✓ Causes *emotional fatigue*
- ✓ Increases *frustrations*
- ✓ Increases *stress*
- ✓ Causes you to *blame others*
- ✓ *Steals* <u>your</u> *time*

What other examples can you think of from your work?

Our Findings

- Takes 4-5 minutes to locate and retrieve a file
- Work tends to spend a lot of time waiting
- 480 available minutes per 8 hour shift
- Only have 410 actual minutes devoted to work
- Intake and billing staff spend about 35 minutes per day (each) doing rework or non-value added tasks
- Intake staff are interrupted 3-6 times per hour

Interruptions

- An interruption is known as a “random arrival” in lean lingo
- Referred to as a "random arrival" because people's reaction to them is often random and non-standardized
- Instances where staff must stop their work to deal with issues that are not a part of the core process in which they are working in

Examples of “Random Arrivals”

- Phone calls
- Questions from staff
- Urgent e-mails (requests, questions, etc…)
- Walk-in clients & others

Interruptions and Work Habits

- Workers are interrupted in their tasks every 11 minutes
- Constant interruptions reduce efficiency by 20% to 40% so office work is not getting done as fast as possible
- Workers are losing 45 minutes a day due to poor work habits
- Calculates to 4 ½ work weeks a year

Source: Dan Markovitz, TimeBack Management

Key Points About Interruptions

- Interruptions are often controllable- key is to understand their nature, frequency, and duration
- The use of a log can uncover surprising information and patterns that can be used to modify a process in order to reduce random arrivals

Interruption and Random Arrival Log

Name: Will L Tool Available Month: December 2008

Department: Customer Service Job Title or Function: Intake

No.	Date	Start Time	End Time	Name	Discussion Topic Notes
1	12/01/08	9:55 AM	10:15 A.M.	Bill Smith	Phone call, called wanted to know status of nurse visit – called scheduling to check status
2	12/01/08	10:16 AM	10:20 A.M.		Phone call, called wanted to know status of wound care supply delivery – called warehouse to check

An Example of Managing Interruptions

- Warehouse staff assumed a majority of calls received from customer service staff were related to requests for product information/pricing
- Interruption log revealed that 52% of all calls were about delivery status
- Created an electronic delivery log that allowed staff to check on status without having to call
- Required delivery staff to contact PT with expected delivery time and backorder status/notification

Controlling Interruptions

- If someone is being constantly interrupted due to their ability, skill, and knowledge, then cross-training should be pushed
- If interrupts are considered a necessary and unavoidable part of the process, then develop standards to better contain and control non-essential interrupts
- Limit non-essential interrupts (info not needed in real-time) to a certain time frame

More Examples of Waste

- Common examples of process waste incidents in organizations include:
  - *Accidents*
  - *Downtime*
  - *Material waste*
  - *Absenteeism*
  - *Equipment damage*
  - *Product damage*
  - *Customer complaints*
  - *Lost customers*

Examples of Waste in a Typical HME Operation

Over Processing	**Multiple paper hand-offs, rechecking for signatures, authorizations, repeat paperwork, excessive paperwork**
Waiting	**Waiting for authorizations, signatures, physician orders, Rx, paperwork return, approval from others, system downtime, etc.**
Defects	**Missing signatures, missed/late deliveries, incorrect items shipped**
Inventories	**Excessive inventory, paperwork awaiting further processing, (confirmations, Rx processing, etc.)**
Movement & Motion	**Missing charts (searching for files), searching for supplies and equipment**

Lean principles can make it difficult for people to make mistakes-or make it difficult to forget to perform key steps within their processes

Two types of errors in healthcare

Errors of commission and errors of omission

Understanding waste, identifying it, and managing it can help reduce the *hidden costs of inefficient processes*

TIM WOOD exercise with staff

The waste we see …is just the tip of the iceberg.

"The most dangerous kind of waste is the waste we do not recognize".
~Shigeo Shingo

Typically, management is aware of less than 5% of the actual waste

Identifying Waste In Your Process

Complete a Gemba (Waste) Walk

This is done simply by:

- Going to the place the process is being performed
- Observing the process, walking in its footsteps
- Talking with the people performing the process

Record observations using:

- Written Notes (Time Observations)
- Video Taping
- Taking pictures

Waste only adds cost & time to a process

Waste can be found:

- *In areas with lots of rework*
- *Areas experiencing long wait times*
- *Process steps requiring multiple reviews and revisions*
- *Areas where multiple handoffs occur within and across departments*

People in downstream processes waiting for the completion of upstream processes

Example:

- ✓ Distribution/delivery waiting for a ticket to print
- ✓ Billing/reimbursement waiting for paperwork/confirmation

The Common Handoff

- Working on something and then passing off to another person/area for another segment of work to be completed:
  - *Intake form- passed on to another area for insurance verification*
- Handoffs will usually result in instant waste
- *The receiving person will almost always set-aside the work for later*

Payer Qualification Team

- Provider wanted to reduce handoffs –linked number of handoffs to increased errors
- Assessed intake process

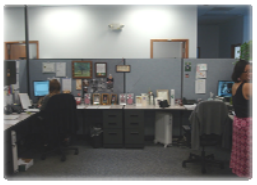
A Best Practice Example

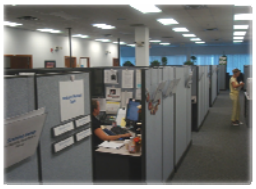
- Documented each time a task, form, or other work was "handed-off" to someone else or another area *(document tagging)*
- Created team used to pre-qualify all orders – staff sat in close proximity to each other – reduced number of handoffs – and errors!

Redesigned Cells

Minimized need for coordination meetings

Improved customer satisfaction





Combined insurance authorization and intake tasks and created teams

Reduced process redundancies

"U" shaped work cells

Improved task coordination

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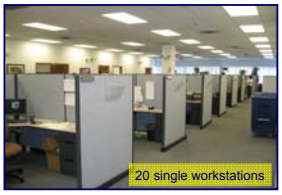
Segmented Intake Process

Low Communication (walls)

Excessive Rework



Intake/Customer Service –Pre Redesign

Weak Teamwork

Excessive paperwork handoffs

Low First-Time Quality

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Lean is a way of thinking – it is a mindset and not just a program focused on cost-cutting

Beyond Basic Cost Cutting

- Lean is an alternative to finance-driven cost-cutting initiatives
- Cost cutting and efficiency gains –not the same
- Lean looks beyond basic cost-cutting exercises to create a culture focused on *waste elimination* and *operational excellence*
- *Process management*

Brilliant Process Management

"At Toyota, we get brilliant results from average people managing brilliant processes – while our competitors get average results from brilliant people managing broken processes".

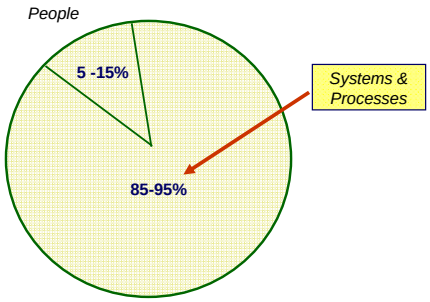
- Taichi Ohno

People Problem or Process Problem?

- People want to perform well and do a good job
- Good people trapped in bad or sub-optimal processes*

*We classify employees as High, Middle, and Low performers – typical to have about 9% of workforce classified as *"Low Performers"*

Opportunities for Improvement



Four Dimensions to Our Work

1. **People**
2. **Technology**
3. **Supplies**
4. ***Process*** *– the way you have designed your workflow*

Process – A Definition

- A process is:
  - ✓ *A set of activities, tasks, exceptions, and work-arounds that have over time, evolved into the way work gets done*
  - ✓ *Work often gets done is some informal, undocumented manner*
- If formal documentation does exist –it may exists only in the heads of the people doing the work

Question:

What does a good process "look like?

7 Critical Success Factors

1. Standard work
2. Performance standards
3. Use of metrics
4. Effective front-line leaders
5. Real-time problem-solving
6. Training that never ends
7. Customers (identification and requirements)

The Workaround Culture

- People create workarounds because a process or system does not support the work that the process/system is supposed to create
- People are often credited for their ability to create workarounds – they are said to be "creative thinkers"
- Not really creative thinking
- *It's "trade-off" thinking*

How can we reduce variation, decrease waste, and reduce rework?

How can we help people perform better within processes?

Standard Work

Standard Work

"If you can't describe what you are doing as a process, you don't know what you're doing."

--W. Edwards Deming

Standard Work - Background

One of the foundational concepts of lean thinking

Definition of Standard Work

- Simple written description of the highest quality, most efficient way known to perform a particular process or task
- It describes the only acceptable way to perform the process or task
- The standard is expected to be **consistently** followed
- It's about approaching similar work in a similar manner – formalizing the informal

Show Me Ten Intake People

- And…. I'll show you at least six different ways to process an new referral
- Individuality is a good thing, but not when is comes to managing a process!

When you have different people doing the same job, they will usually come up with their own method of getting the work done

Usually end up with different results and/or inconsistent results

Common Non-Standard Conditions

- Failure to perform an activity
- Failure to perform an activity at a required point in time (work sequence)
- Taking longer to perform an activity than it should
- Performing an activity in a way that will have a negative impact on a downstream process

HME Examples

- Failure to obtain the proper authorization
- Failure to obtain the authorization prior to committing to (or shipping) the order
- Taking 35 minutes to enter inventory items on a delivery ticket when it should take less than 10 minutes
- Creating individual techniques/methods for getting work done

Standard Operating Procedure

- Businesses will often say:
  "We already have standard work"
- What they really have is a detailed work procedure often referred to as a "Standard Operating Procedure" (SOP)
- SOP is not a replacement for standard work
- SOP is much more detailed than standard work – SOP used initially to train staff

Communicating Standard Work

- Use different standard work documents
- Visual aids:
  - *Checklist*
  - *Workflow diagrams*
  - *Standard work instructions*
- Provides a mechanism to consistently communicate standard work
- Brings the standard work to life - helps guide actions of those working in the process

Standard Work Document: Key Points

- Tools or visual cues to help remind people – not "forms" that have to be turned in
- Includes only the key parts of a process
- It includes information on work sequence
- Any other elements to ensure that an activity is performed in a consistent way overtime *(tips, important reminders, "must dos" etc…)*
- It is a tool to help achieve consistent quality of the "output" of the process

Tips for Displaying Standards

- All of the key elements of the work are present, visible, and easy-to-read
- General rule is that standard work for a process be described on a one page document
- Display in area where the work actually takes place
- Avoid "books" of information/procedures (remember - not creating a SOP)
- Should be professionally printed, well-designed (good readability)

The Power of the Humble Checklist

- Can improve adherence to process standards and key process requirements:
  - ✓ *Adherence to standards of care went from 36% to 68%*
  - ✓ *Some as high as 100%*
- Checklists are not intended to be another piece of paper or form to be filled-out
- They are simply guides or visual reminders of the main steps that staff should follow each and every time

Decreased Shipping Errors by 15%

SAMPLE CHECKLIST

STOP!

Final Shipping Point Checklist

- ☐ 1. Special Instructions Followed
- ☐ 2. Ship-To Address Verified
- ☐ 3. Ship-By Date Noted
- ☐ 4. Inspection Completed
- ☐ 5. Proper packaging, labeling
- ☐ 6. Paperwork placed in return bin
- ☐ 7. Back-Order Status Noted
- ☐ 8. Back-Order Status Communicated

Goal: 100% Accurate Orders

Problem with Accurate Paperwork

- Missing signatures
- Missing dates

Service Technicians

- Special instructions not followed or missed altogether
- Delayed return of completed paperwork
- *Leadership engaged- worked with staff to design & deploy checklist*

Service Technician Paperwork Checklist

STOP

Incomplete paperwork cannot be confirmed which results in delayed billing and delayed cash collection

- ☐ Serial number(s) correctly noted
- ☐ Lot number(s) correctly noted
- ☐ Signature(s) present
- ☐ Date present
- ☐ If unable to make delivery – CS notified
- ☐ Special instructions followed
- ☐ Paperwork turned in within 24 hours

Goal:100% complete, accurate, timely paperwork

45 Days After Implementing Checklist

- Amount of paperwork complete and accurate increased from 84% to 96%
- Percent of paperwork returned within 24 hours increased from 68% to 89%
- Missing signatures and missing dates reduced by 7%
- Everyone followed the same process

Example of Standard Work Instructions

Standard Work Instruction

Name of Process: _____

Task	Key Points	Time / Timing	Visual References
1. Enter Order	- Enter demographics (name, DOB, ht, wt,	2-4 minutes	
2. Prepare order	- Enter Rx info, enter physician/referral info	2-4 minutes	

Intake, billing, shipping area, etc…

Use diagrams or screen shots here

Typical Benefits of Standard Work

- Productivity and efficiency improvements of 10% to 25%
- Greater flexibility to respond to changes in:
  - ✓*Demand*
  - ✓*Activity patterns*
  - ✓*Staffing changes* *(unplanned absences, turnover)*
- Improved customer service
- Reduces rework and errors
- Improved staff satisfaction

Rules-in-Use: Standard Work

- All work activities are clearly specified as to:
  - *Content……* Actual tasks and work
  - *Sequence…..* When they are to be performed
  - *Timing……* Ideal time to complete tasks
  - *Outcome….* Expected results

Process Improvement
What / Who Matrix

Project Title: _____ Date: _____

WHO						
WHAT						
WHY						
HOW						

Future State Considerations:

Review – What/Who Matrix

Process Improvement
What / Who Matrix

Project Title: Intake Process Assessment **Date:** _____

WHO	Intake Team					
WHAT	*Complete initial intake form*					
WHY	First step in process of creating a new order					
HOW	Phone, fax, PC (software)					

Future State Considerations:

Consolidate current separate functions as much as possible in order to minimize handoffs

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Standard Work – More Benefits

- Improved patient, resident, staff safety
- Enhanced process flow
- Clarifies roles
- Provides a good baseline or starting point for training new staff
- Reduces task ambiguity

Key Point

- Creating standard work conditions may seem like a straight-forward concept, but:
  - *Lack of standard work and a commitment to adhere to standard work is a significant source of variation in processes*

About 20 days

Want standards to become habit

Variation = Waste!

- Variation that often shows up in the form of:
  - *Delayed billing*
  - *Rejected claims*
  - *Longer than optimal DSO*
  - *Patient dissatisfaction*
  - *Errors*
  - *Rework*

Something to Think About

- Without specific focus and standardization, processes tend to:
  - *Degrade over time*
  - *Performance decreases*
  - *Increase in complexity*
  - *Tasks become less coordinated*
  - *Increased potential for errors*

Review and Discuss:

Leaders Guide to Implementing and Maintaining Standard Work

Process Characteristics

- In most processes, work spends a majority of its time WAITING around
- Inconsistency (variation) has a dramatic impact on lead times and capacity
- Poor quality (errors) drives “rework” (“do-overs”)

5S

5S Introduction

- The 5S system establishes a culture that is focused on creating a clean, neat, and safe work environment through:
  - *Waste (and clutter) elimination exercises*
  - *Visual controls*
  - *Effective workplace organization techniques*

The 5S method is a concept intended to create a highly organized workplace

The Warehouse, Equipment Processing Area, and Office Areas are Ideal Places to Implement a Robust 5S Program

Five S Terms – Definitions

- *Sort* -keep only what is needed, de-clutter work area
- *Straighten* – make sure everything has a place
- *Sweep/Shine* – clean areas to help expose abnormal conditions
- *Standardize* – develop method to monitor and maintain the first three S’s
- *Sustain* – use self-discipline to maintain the 5S workplace

5S is an effective method of organizing the workplace to minimize the waste of time

Some Results of 5S Implementation

- ✓ Establishing standard work practices & more organization:
- ✓ Improved quality
- ✓ Freed up wasted floor space
- ✓ Eliminated searching for items
- ✓ Reduce clutter
- ✓ Reduced inventory
- ✓ Changed culture
- ✓ Effective work teams
- ✓ Reduced costs

Process Mapping

The Process Mapping Concept

- When you map out your processes, you are seeking to identify, and hopefully eliminate as many steps, tasks, and activities that *do not add value* to your process

Waste

Assessing the Process

- Consider the steps within the process that:
  - *Create value for the customer*
  - *Create no value but are required*
  - *Those that create no value and are not required*

HME Providers & Processes

- A HME provider has between 10-14 individual core business processes
- Several sub-processes
- Remember - as a healthcare provider, you deliver services and products through a series of processes

Operations = Processes

- How many processes in a HME business?

1. *Intake/customer service*
2. *Documentation*
3. *Insurance verification*
4. *Equipment management*
5. *Purchasing*
6. *Inventory management*
7. *Distribution*
8. *Billing/reimbursement*
9. *Patient care (CPAP/BiPAP®, clinical operations, etc.)*
10. *Hiring, training, marketing…..and more!*

Idea Behind Process Mapping

Before you can improve a process, you have to understand it – you have to be able to "see" the process

A process map helps us to better understand a process

Three Versions of a Process

1. What you think the process is
2. What the process actually is
3. What the process should be

The Power of Seeing

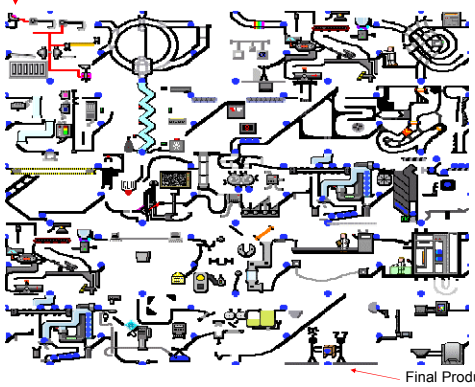
- Process maps are powerful visual tools
- Enables us to see quickly those process steps that we must eliminate in our drive for work simplification and the reduction of waste
- We are visual creatures – much easier to learn looking at a "drawing"

The Process Map

- Low-tech, visual representation of every step within a process
- The work (current state) becomes visible
- Understand how work flows
- Provides a "blueprint" or plan for future improvement
- Provides an effective, new way to "see" a process

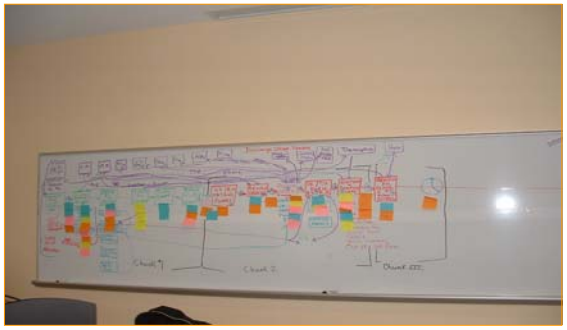
First Input

Process Visualization



Final Product

Examples of Mapping Exercises



Always Begin With the As-Is Process

- Don't map-out the ideal or planned process – map the "current state"
- Select a process with a manageable and logical start/end point
- Gather people that work in the day-to-day process
- Can't simply ask people how the process performs

They will almost always tell you how the process is supposed to work

Go to the Gemba

Planning and Doing

- Find a suitable room and suitable wall surface
- Typical to schedule mapping sessions in segments of 2-3 hours each for 2-3 days
- Day one – intro, begin mapping, 2-3 hours
- Day two – continue mapping, 2-3 hours
- Day three – complete work as needed, 2-3 hours – display map for others

Scoping the Process

- Need to select logical process boundaries
- Starting point – where does your process begin?
- Tendency to think it begins some place upstream
- Need to select an end point – where does it end?
- Tendency to think process ends some place downstream

Tips on Scoping

- Your process boundaries are generally a function of what is and isn't in your control
- Intake
- Process begins when order/referral is received
- Where is a logical end point?

Process End Point – *Intake Process*

- End point could be printed delivery ticket
- Even though there are many other tasks and steps associated with getting a product/service to a patient once the ticket is printed…..
- Intake staff can't really control what happens once the delivery ticket is printed

When you scope a process for start points and end points- think about what is and isn't under control of the process you are mapping

You could scope very broadly – map out entire referral receipt to cash process – but better to narrow your focus

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More Tips on Scoping

- You could have a much broader scope
- An endpoint further downstream and/or a start point further upstream
- It really depends on personal preference, but;
- It will be easier to manage, monitor, and impact initiatives with a more narrow scope
- A larger scope usually results in bigger, more cluttered process maps
- Easier to get short-term success with a tighter scope

- Think about process start and end points:
  - ✓ *Intake/Customer Service*
  - ✓ *Insurance/Documentation*
  - ✓ *Distribution (shipping)*
  - ✓ *Distribution (receiving & inventory Mgmt.)*
  - ✓ *Confirmation*
  - ✓ *Billing & Reimbursement*
  - ✓ *Cash posting*
  - ✓ *Hiring Process*
  - ✓ *Training Process*
- Scoping is an important part of mapping

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Complete the SIPOC

- All process design and improvement should be built around the customer
- All processes have customers – internal and external
- A SIPOC is a preparatory exercise
- Helps to think about our processes in terms of suppliers, inputs, outputs, and customers

SIPOC

Suppliers	Input	Process	Output	Customer
		Title: **Start Point:** **End Point:** **Main Process Steps:**		Stakeholders:

SIPOC- Intake Process

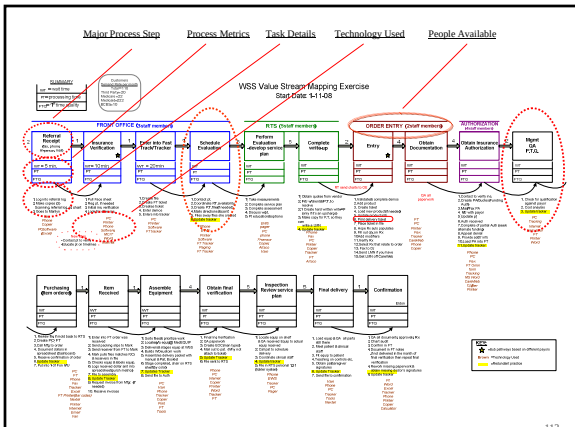
Suppliers	Input	Process	Output	Customer
Referrals Patients Families Other providers Others within organization	Demographics, insurance info, Rx info, physician, Dx, etc.	**Title:** Intake Process **Start Point:** Order/call received **End Point:** Completed, accurate order is printed **Main Process Steps:** ✓Order/call received ✓Data entered into system ✓Rx obtained ✓Insurance auth. obtained ✓Product/service entered ✓Ticket printed	Completed delivery ticket with all required information	Referral, patient, next group in the organization (distribution area) Stakeholders:

Basic Steps: Process Mapping

- Identify all main process steps in proper sequence
- Identify more detailed tasks that take place at each process step
- Identity any tools used at each step
- Identify technology used and people used at each process step
- Identify process-level metrics where ever possible

Process-Level Metrics

- First Time Quality (FTQ)
  How often you complete a step in a process without requiring rework
  Example: Amount of claims successfully submitted
- Process (or cycle) time
  Time it actually takes to complete a task within the process
  Example: Filling out a form, entering PT. demographics
- Wait time
  Step within process, being worked on, not yet complete
  Example: Waiting for insurance authorization or paperwork
- Lead time
  Cycle time + wait time



Lessons Learned From Mapping Exercise

- Eliminated an entire step that added 5-7 days onto lead time *(order received until equipment delivered)*
- Combined the previous separate steps into one process step *(reduced hand-offs)*
- Every hand-off almost always results in a new queue forming *(waste)*
- Lots of disagreement about timing & sequence

A Few Observations

- "Depends on who is doing it"
- "This is how I do it"
- Lots of disagreement about timing & sequence
- Unclear on what method of communication to use
- Lots of disagreement on content – what to say, how to say

Process Mapping:
Learning to See

- "Aha" moments:
  - I never knew this is how it worked!
  - I can't believe what a mess this process is!
  - No wonder we're frustrated!
  - It's a miracle a patient ever gets through it!

Those who assume they know the process, without having mapped it, will probably find surprises when they map the process

Analyzing the Process Map

- Once you have completed the current as-is value stream map, identify waste:
  - ✓*Rework loops*
  - ✓*Handoffs & Bottlenecks*
  - ✓*Excessive waiting*
  - ✓*Low first-time-quality*
- Assess technology – does it help or hinder?
- Seek to reduce steps, digitize forms, combine or eliminate forms

Question Your Process

- Who is involved in each activity?
- Why does the activity need to be undertaken?
- What is the impact of not undertaking each activity?
- What guidelines/procedures need to be established at each step?
- How will you define/measure success and progress? – think "lean metrics"
- How do you know work/document status?

Simple Process Flow

- All process steps occur in tight sequence (continuous flow), with little or no waiting
  - *Reduce # of touches*
    - One person, one sitting, one touch
  - *Reduce # handoffs*
  - *Eliminate rework or backflow loops*
  - *Eliminate batching and use one piece flow when possible*

Reduced "Batching"

- Batching results when work or requests are allowed to pile-up before someone begins to process or work on tasks(s)
- Provider was batching authorization requests – ran requests in batches of four or more
- Implemented one-in and one-out standard
- Process one as soon as it is received
- No more need to work in quick bursts in order to play catch-up

The best batch size is the one that makes sense

Concept is called "work-leveling"

Not processing large piles of work at a fast pace over a longer period of time

Processing smaller piles over a longer period of time

Use of Trigger Points

- Trigger points are the actions from an upstream process that "trigger" the beginning of a process downstream
  - Can be electronic, verbal, physical or visual (or a combination)
- When identifying and optimizing trigger points, ask:
  - *How do you know when to start a process step?*
  - *Where and how will you trigger or sequence work?*
  - *How much work will you trigger?*
  - *Can you have one trigger point with uninterrupted process flow?*

Process Flow

- Bottlenecks and inefficient process flow are a function of:
  - ✓*Lack of standard work*
  - ✓*Waste (errors, rework, handoffs)*
  - ✓*Uneven work (batching)*
  - ✓*Lack of cross-training (flexibility)*
- A process will always move at the pace of the bottleneck

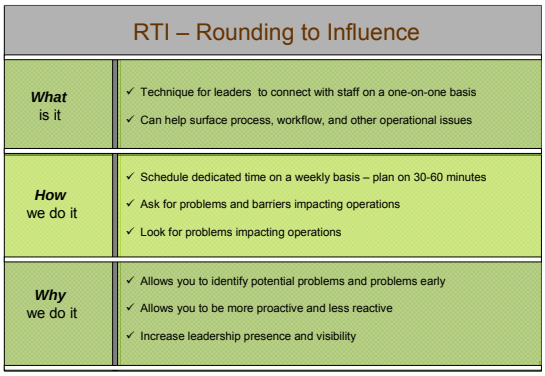
The Role of Leadership

Front-Line Leadership

- Typical for leaders' attention and focus to be mostly on expectations and results
- High-performing processes and companies have leaders that are more focused on consistency of practice
- Also focused on maintaining discipline to defined processes
- Results will flow from these focus areas – they always do

Rounding to Influence (RTI)

- Staff tend to "normalize" operational problems
- Accept problem or create workarounds to the extent they don't recognize it as a problem
- Tend to not point an issue out as a problem
- When rounding, look for signs of "hidden" or unspoken problems
- "No problem is problem"



Front-Line Leadership

- Technically sound team leads and supervisors are essential to effective front-end operations
- Need solid, consistent leadership skills
- Minimal "leadership variance"
- One of the most important factors – it's not just about workflow and process
- Leadership is the glue that holds processes together

Essential Leadership Behaviors

- Do regular *Gemba* walks
- Conduct routine process audits to ensure standards are consistently followed
- Leaders ensure that actual practice (the reality of the process) matches process definitions
- Someone is assigned to ensure standard work is updated as needed

Words Matter

- When we use the word "Mandatory", 98% of staff understands that this means the MUST do the behavior
- When the word "Required" is used, only 68% of staff recognize that they must do the desired behavior
- When word "Expected" is used, only 26% of staff understands they must do desired behavior

Have You Made it Clear That the Behavior is Mandatory?

- Behavior must be stated as “mandatory” and not optional
- Research shows that the words we use to create “mandatory-ness” really matter
- Survey of over 2,000 healthcare leaders from within and outside the HME industry

Where in the process do you see variation – inconsistent results?

Questions?

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