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Let's Get Lean: Making Progress in Spite of the Challenges

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Technical Assistance

- Technical Assistance Telephone Number
 - 732-822-9948
- Question Submission for Q&A Session
 - Type your question into the Questions Box on the control panel on your screen

(PLEASE JOT DOWN THIS INFORMATION)

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Conventus Practice Resources

- Webinars and Podcasts
- Education
 - C.A.R.E. Certification Program – Modules I & II
- Practice Advice Hotline
 - 24/7
- Publications
 - e-News
 - Risk Alerts
 - Practice Success Tips

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Conventus Practice Resources

- Consulting Services
 - Practice Success Consultation & Plan
 - Practice Transformation and Quality Reporting Initiatives
 - EHR Consultation
 - Risk Assessment
- Strategic Partnerships
 - HIPAA, OSHA, Security Risk Analysis & more!
- Practice Management Resources
 - For Everyday Issues

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Owen J. Dahl

President

Owen Dahl Consulting

Owen J. Dahl, has been active in healthcare management for almost 40 years. He received his bachelor's degree from Concordia College, Moorhead, Minnesota, where he was a member of the first graduating class in the hospital administration program.

In 1993, Owen advanced to Fellow in the American College of Healthcare Executives with a paper on Total Quality Management and its application to the medical practice. He also received the distinction of becoming the first non-physician member of the Orleans Parish Medical Services Bureau Board of Directors.

Throughout his career, Owen has maintained a passion for education. He is also the original developer of the certification program for the Professional Association of Health Care Office Managers (PAHCOM) and the Institute of Certified Healthcare Business Consultants (ICHBC).

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Today's Program

- Define Lean Six Sigma
- Identify applications
 - How it works in today's medical practice
- Share outcomes

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MACRA

- Two Payment options
 - Merit-based Incentive Payment System (MIPS)
 - Streamlines three independent programs into one - Meaningful Use (MU) and Physician Quality Reporting System (PQRS) and Value-based Payment Modifier (VBPM)
 - Advanced Alternative Payment Model (APM)
 - A new level of Accountable Care Organizations (ACO)
- Performance Categories and Composite Score (1-100)
 - Quality = 50 (replaces PQRS and VBPM quality component)
 - Advancing Care Information = 25 (replaces MU)
 - Cost = 10 (replaces VBPM cost component)
 - Clinical Practice Improvement Activities = 15 (new activity)

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Efficiency starts with you
but does not come from
you!

To: Medical Practice Leaders



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Benefits of Improvement

- Decrease average time patient spends in clinic
 - Two hours to an hour or less
- Satisfied patients (customers)
- Eliminate duplicate duties
- More efficient use of staff & resources
- Increase efficiency
- Increase quality

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Culture Defined...

- Culture in its broadest sense is cultivated behavior; that is the totality of a person's learned, accumulated experience which is socially transmitted, or more briefly, behavior through social learning.
- A culture is a way of life of a group of people
 - The behaviors, beliefs, values, and symbols that they accept, generally without thinking about them, and that are passed along by communication and imitation from one generation to the next.

Source: <https://www.tamu.edu/faculty/choudhury/culture.html>

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What is Lean Six Sigma

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Combines the strengths of each system into one

➤ Lean ➤ Guiding principles based operating system ➤ Relentless elimination of all waste ➤ Creation of process flow and demand pull ➤ Resource optimization ➤ Simple and visual ➤ Efficiency	➤ Six Sigma ➤ Focus on voice of the customer ➤ Data and fact based decision making ➤ Variation reduction to near perfection levels ➤ Analytical and statistical rigor ➤ Effectiveness
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Continuous Process Improvement (CPI)

- A program of activities designed to improve the performance and maturity of an organization's process with regard to a set of goals
- The key to successful CPI
 - Finding the best approach to meet the business goals of the organization

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DOWNTIME Examples

Waste	Observation
Defects	Medication error. Wrong patient. Wrong procedure. Missing information. Redraws. Poor clinical outcomes
Overproduction	Drawing too many samples. Extra tests.
Waiting	Waiting for doctor, procedure, room, test results, lab results
Not using employees abilities	No empowerment. "Check your brains at the door" mentality. Unenlightened management. Poor hiring practices. Low or no investment in training. High turnover
Transportation	Moving samples, specimens, patients for testing, patients for treatment or equipment
Inventory	Pharmacy stock. Lab supplies. Samples. Specimens waiting analysis. Paperwork in process.
Motion	Searching for patients, medications, or charts. Gathering tools. Gathering supplies. Handling paperwork.
Excess processing	Multiple testing. Multiple bed moves. Excessive paperwork. Unnecessary procedures.

Source: "A pathway for patients", Mark L. Dean, QP, February 2014

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Voice of the Customer

- Process used to obtain feedback/requirements from the customer to provide them with the best service quality possible
- Proactive
- Captured through:
 - Interviews
 - Surveys
 - Focus groups
 - Observations
 - Complaint logs

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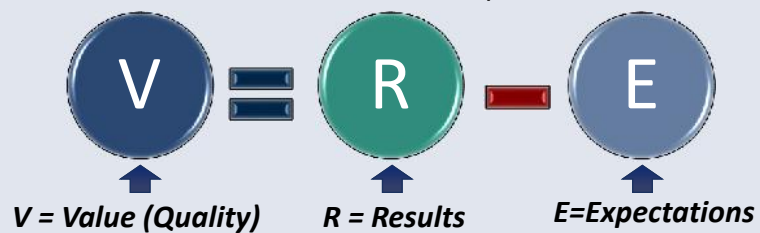
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Patient Experience of Care

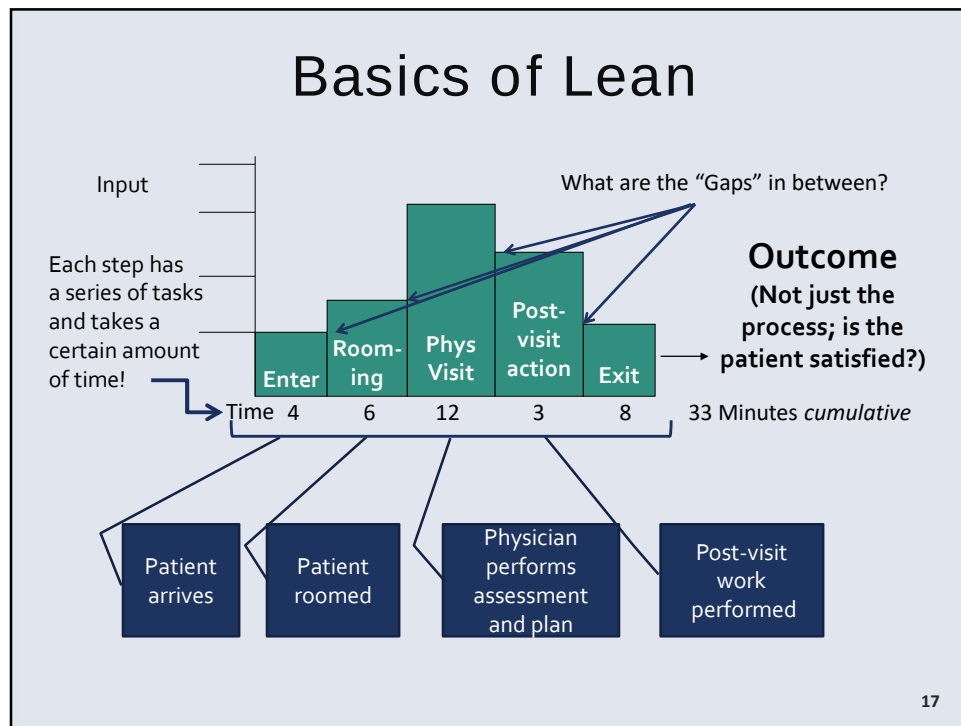
Meet “customer” expectation

- Service MUST meet customer expectation requirements
- Must understand the customer expectation

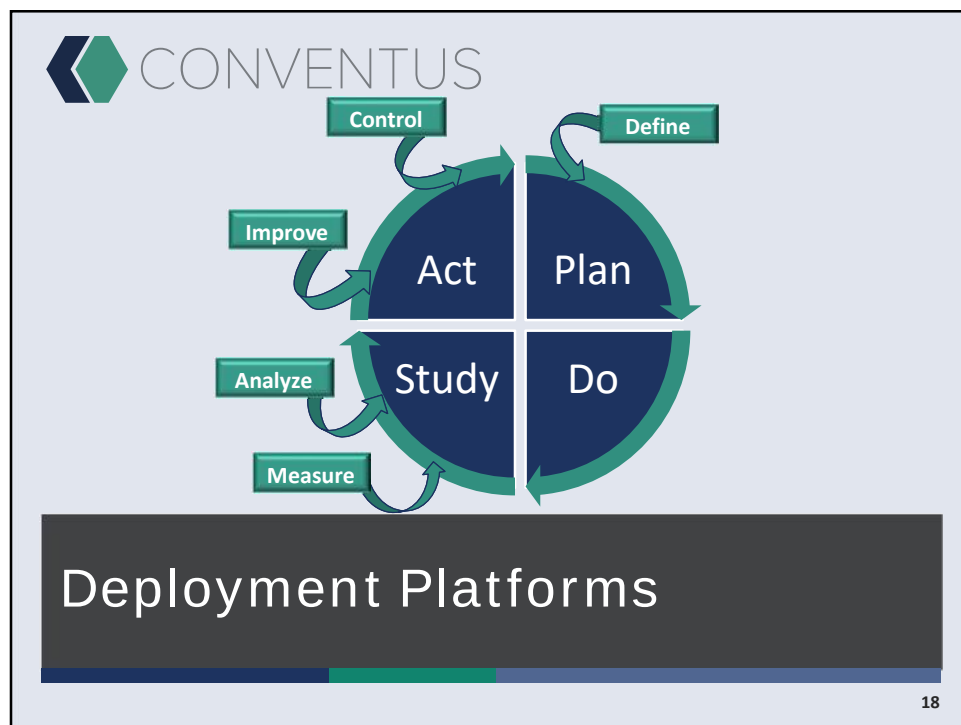


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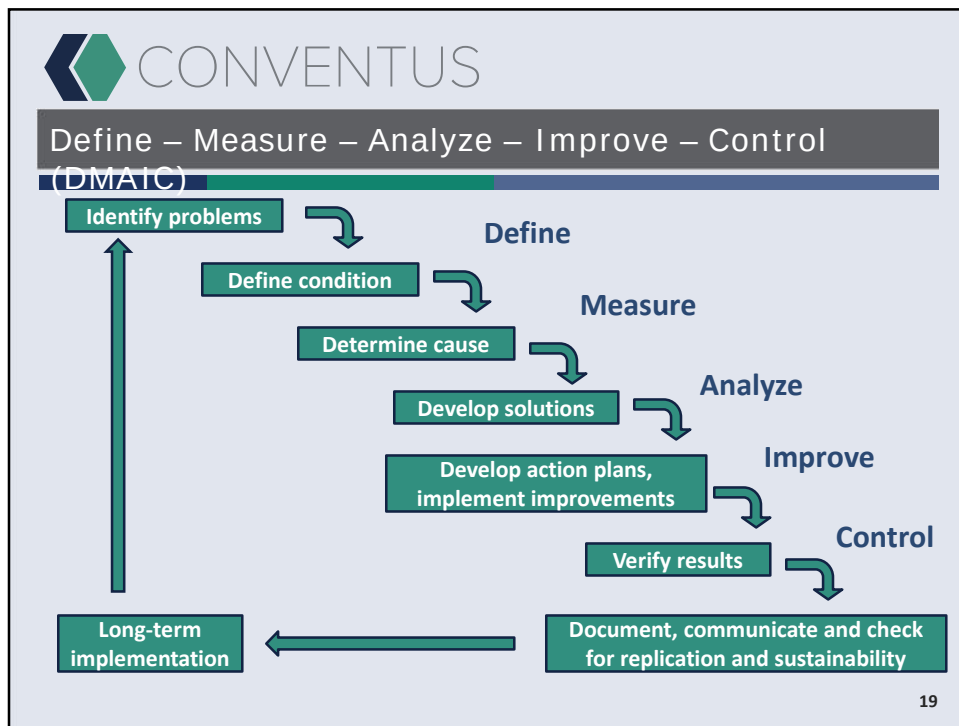
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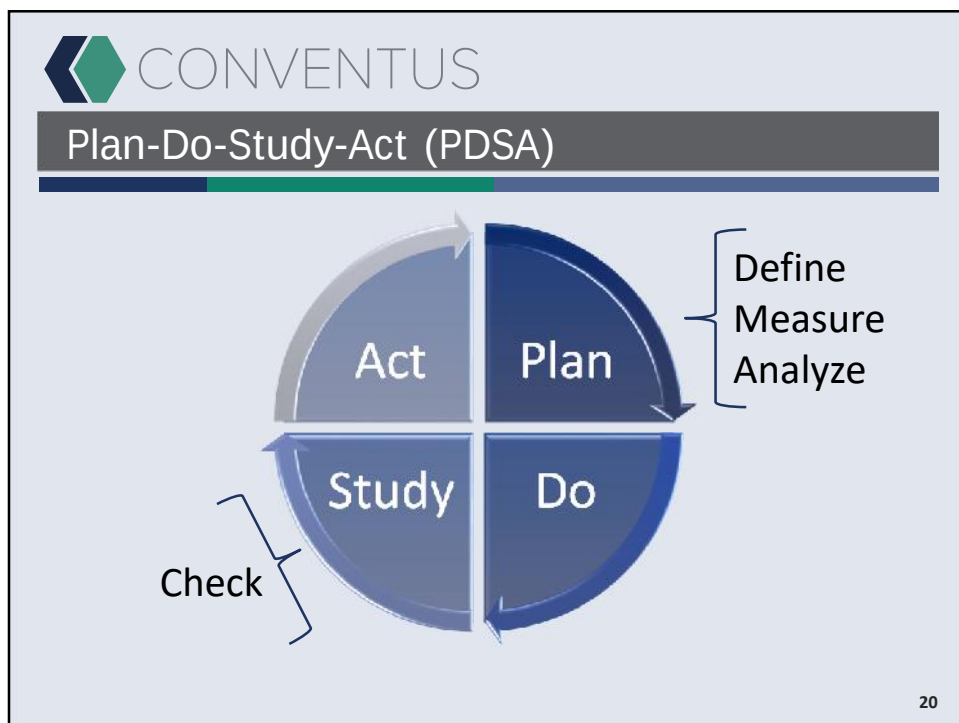
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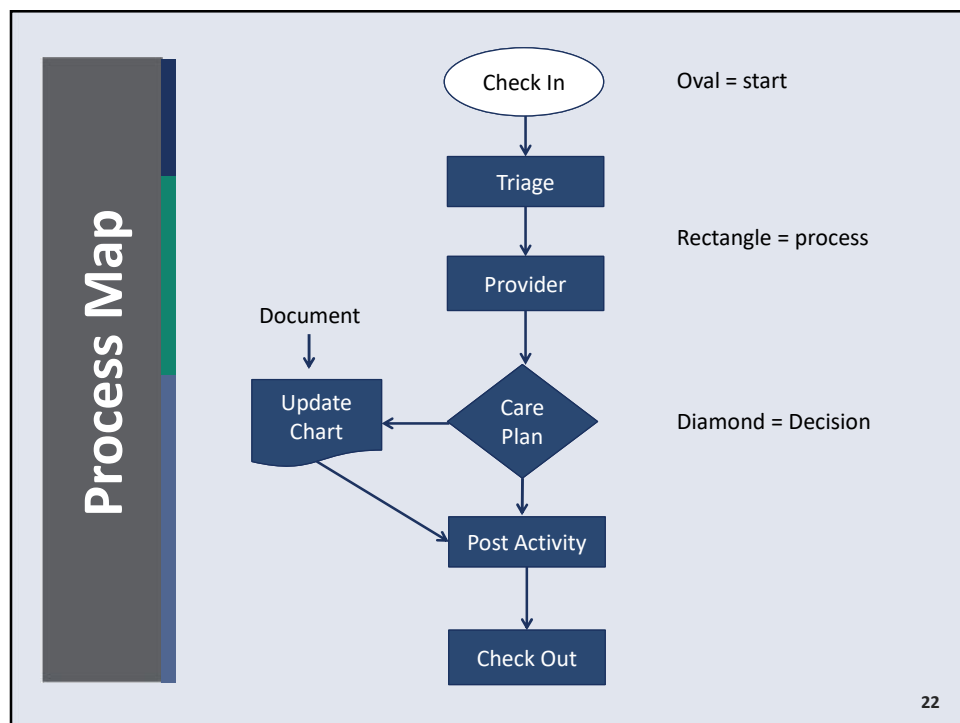
Project Management Team

- The process of tracking team member performance, providing feedback, resolving issues, and managing changes to optimize project performance.

Source: Guide to Project Management Body of Knowledge

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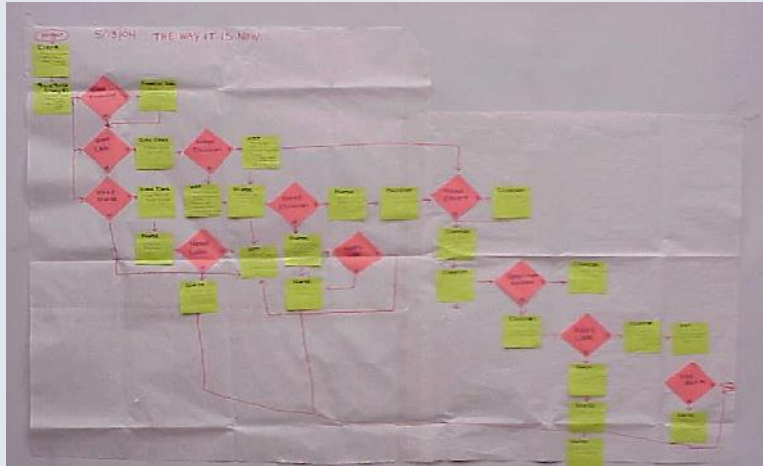
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Don't need high tech approach

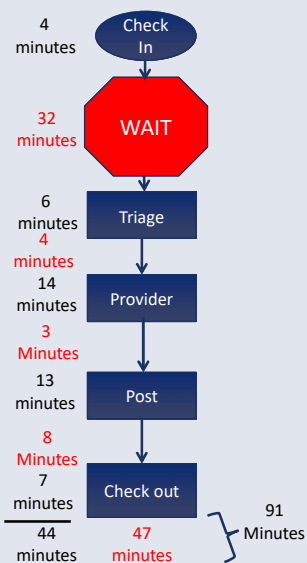


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Value Stream Mapping (VSM)

Examples



What is value added?

What is business value added?

What is non-value added?

What is the process cycle efficiency?
(48.3%)

Identify wastes by type:

•
•
•
•

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Measure

- Develop a thorough understanding of the current state and collect reliable data on the process itself
 - Time, quality and cost that identify the problem current state
- Need benchmark
 - Baseline (current state)
- Need hypothesis
 - Targeted future state

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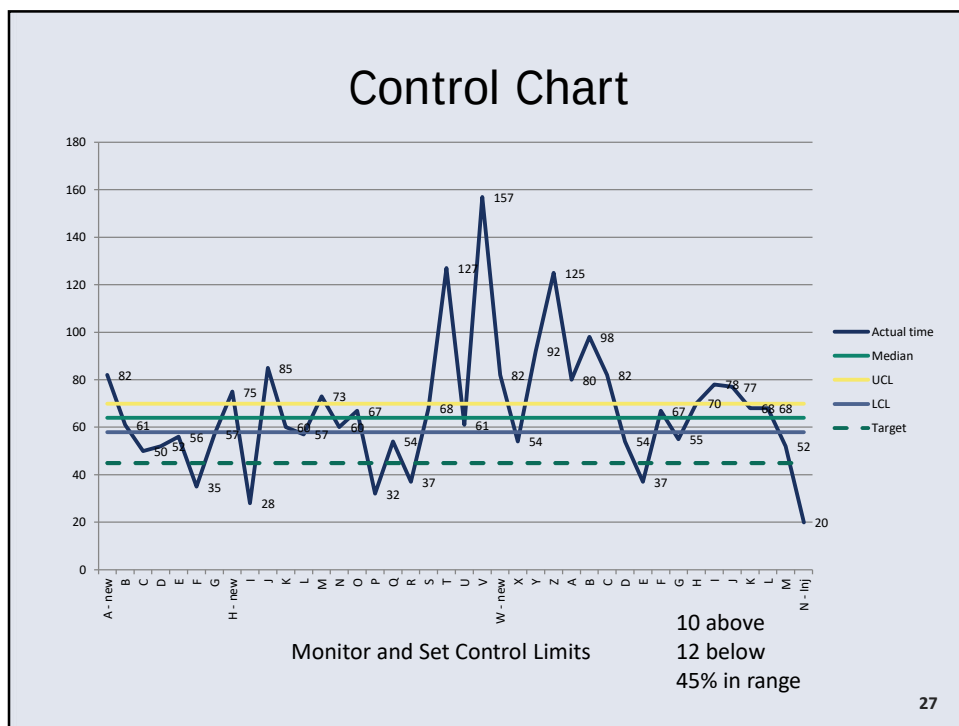


Two key principles

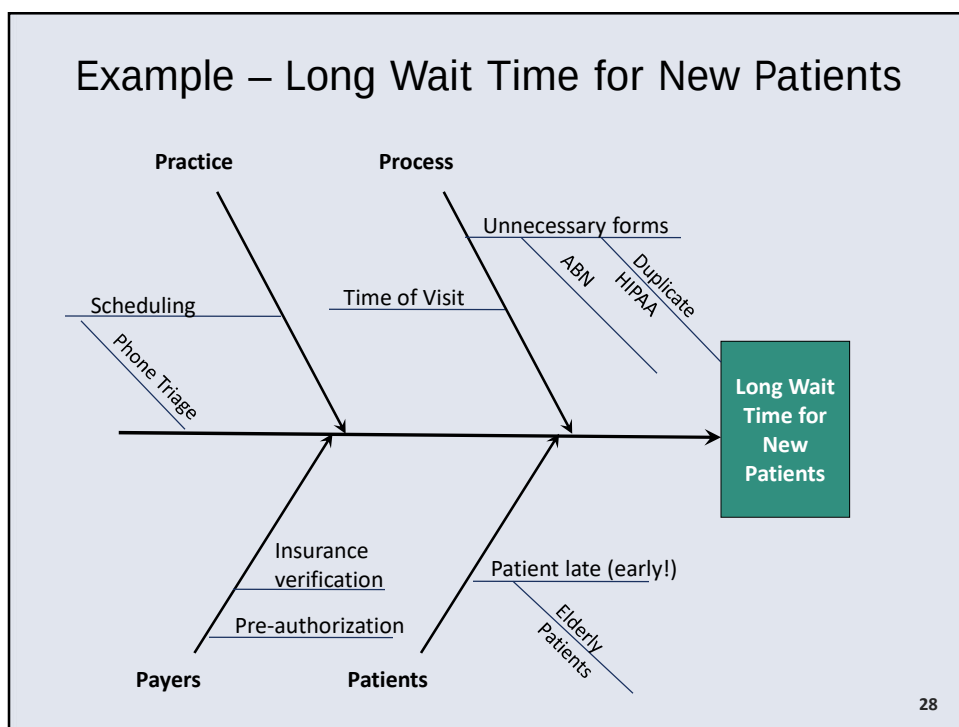
1. If you don't measure it, you can't change it
 - Description
 - Comparison
 - Context
2. If you don't value it, you won't change it
 - Benefit

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5 Why's

- Why – multiple times = problem solving tool, uncover the root cause
- Problem = Child Got a “D” in math
 - Why did you get a “D” in math?
 - Because I didn't do all my homework assignments
 - Why didn't you do your home work?
 - I hate math
 - Why do you hate math so much?
 - Because I suck at it
 - Why do you think you suck at it?
 - I just don't get it

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5 “S”

- Sort – what is needed and not, eliminate the latter
 - Remove or “red tag”
- Set in order – keep needed items in right place
 - “Picture” current state, draw future state
- Shine – keep area clean
 - Safety, waste, cleanliness
- Standardize – clean up – the first 3 S
 - Every day
 - Create your OWN agreement to accomplish
- Sustain – make this a habit to clean, establish processes or procedures to insure success
 - Self discipline – do you have it???????

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Team Roles

- Champions
- Facilitator
- Team leader
- Process owners
- Inside subject experts
- Outside subject experts
- The recorder

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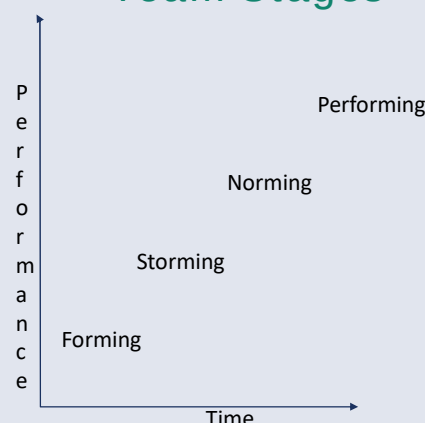
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Team Stages

➤ Most teams go through four development stages before they are able to be considered effective

➤ As members are added and/or removed from a team, they may go through these stages again, as follows:



Performance

Time

Forming

Storming

Norming

Performing

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Starts with Commitment

- Vision
 - “The articulation of the image, values, direction, and goals that will guide the future of the organization”
- Mission
 - The intersection of the founding principles and the environmental scan
- Stretch Goals
- Empower teams

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The Readiness Assessment

- Assess the outlook and goals of the organization
 - Is there a consensus of vision?
 - Do we have the resources to meet our goals?
 - Are we willing to do what it takes to change?
- Evaluate the current state
 - What do we look like right now?
 - What is our current level of efficiency?
 - Do we have the resources to start the project?
- Review the capacity for change and improvement
 - How flexible are we when it comes to change?
 - What is our capacity for growth and improvement?
 - What existing issues exist that would constrain our efforts?

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It's OK to fail ...

- Accept failure as a natural part of doing business
- Remove structural obstacles to reduce the objective risks of a failed venture
- Turn failure into fodder: fail small, fail fast, & fail cheaply

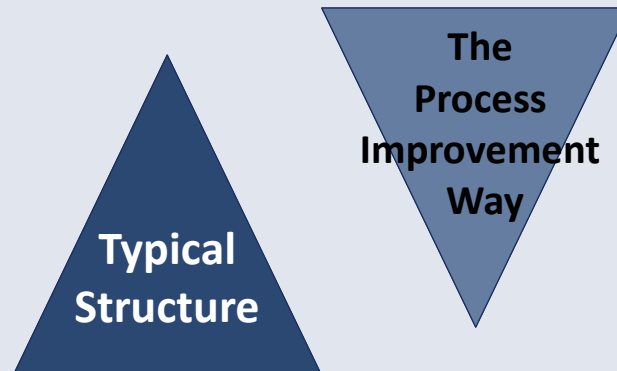
"Those who don't take risks tend to have two major mistakes a year, those who do take risks tend to have two major mistakes a year!"
Peter Drucker

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Your Process Improvement Organization Chart



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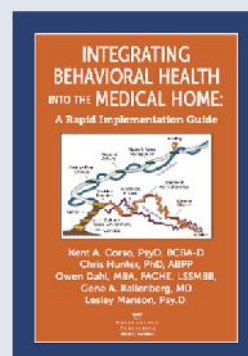
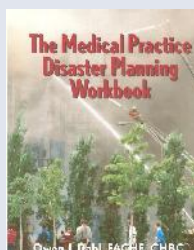
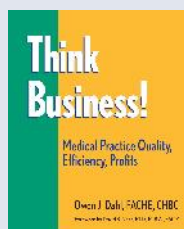
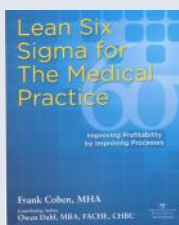
Source: *Harvard Business Review*. Strategic Humor, October 2011

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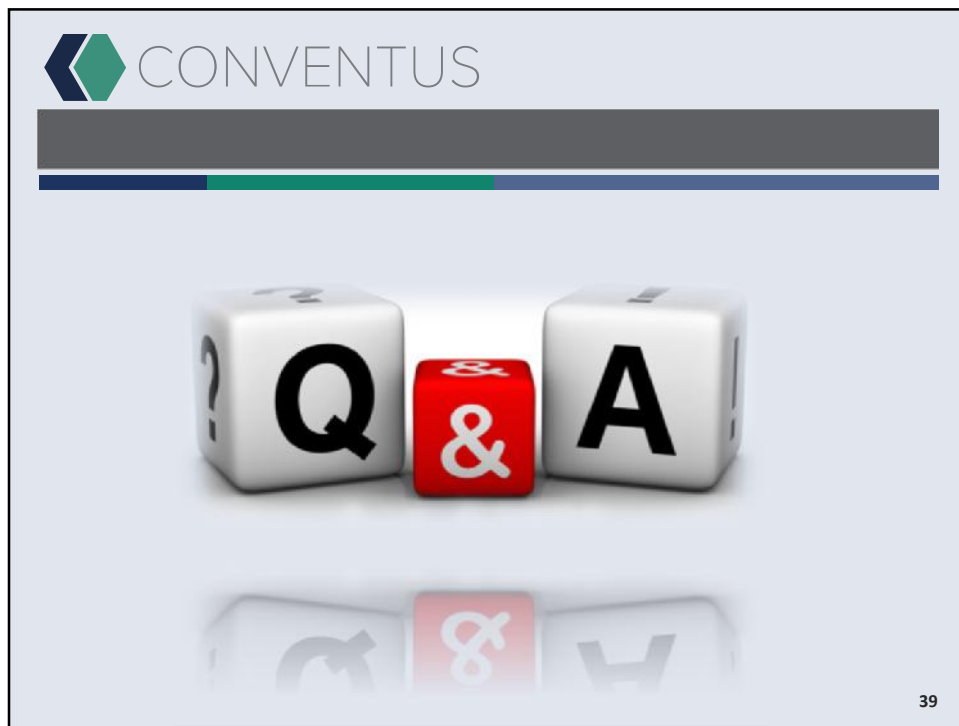
Resources



For book orders: www.mpmnetwork.com
Use promo code "dahl-client"

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