Incubators for Profound Organizational Change

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Institute for Healthcare Improvement Fellow 2009-2010

08:30
5th December 2016
Incubators for Profound Organizational Change

Monday, December 5
8:30 PM – 4:00 PM

- Morning Break from 10:00 AM – 10:30 AM
- Lunch from 12:00 PM – 1:00 PM
- Afternoon Break from 2:30 PM – 3:00 PM
- Finish at 4:00 PM
Incubators for Profound Organizational Change

Goal

- Introduce the fundamentals of managing complex, dynamic processes for exceptional results
- Apply those principles to participants own situations.
- Develop courses of action for managing according to the principles to achieve outstanding outcomes.
Activity

Please form a line in rank order of distance travelled to the Forum
Exercise Debrief

• Physical demonstration of complexity
• The challenge of rapid problem solving in the absence of full information
• Novelty – a new problem
• What did you learn?
GREAT CARE IS DISCOVERED, NOT DECIDED
Objective 0830:10:00

By coffee break you will be able to:

• Describe the challenge of system complexity and how it relates to 21st century healthcare
• Identify why system complexity requires us to take a methodical approach such as OrgTechDevU to achieve effective system design, operation, and improvement
Ford Mustang
yesterday and today

1968

2016
Progress
more complexity, less error, lower cost, higher performance
Royal Hallamshire Hospital, Sheffield

1968

2016
Breast cancer
yesterday and today

Age-standardised five-year relative survival rate,
female breast cancer, England and Wales, 1971-2009

% survival

Period of diagnosis


* England only
$100 millions invested in treatment components

How much have we invested in designing the production line of care?
Practical Exercise

- Do you recognise this complexity in your organisation?
- What effect does the complexity have on clinical outcomes, patient experience and staff experience?
Steve opening video
Competing at Speed

Great

Okay

Δ Climb rate

Δ Altitude

Know a lot

Know something

Δ Discovery rate

Don’t know
Practical Exercise

- What is your organisation’s learning velocity?
- What learning method does your organisation use?
Coffee Break
Back at 10:30
please
Objective 10:30-12:00

By Lunch you will be able to:

- Describe the importance of Gracefulness and Gratitude
- Propose specific applications of the incubator methodical approach to addressing the quality and affordability of health care
Future Proofed Organizations
Same Problem: Different Outcome
New Technology
1/5 th Market Share

92% Market Profit
Gracefulness
Gratitude
Awkwardness and Disappointment
Gracefullness and Gratitude
Practical Exercise

In your organisation, where do you see;
- Awkwardness and disappointment
- Gracefulness and Gratitude
TRANSFORMING CARE TOGETHER

ELEMENTS OF EXCELLENCE

Dr. Pinckney McIlwain
Vice President, Chief Medical Officer
CAMC Health System, Inc.
Charleston, WV
Importance of Organizational Learning and Agility . . . a Baldrige Core Value

“If the rate of change on the outside exceeds the rate of change on the inside, the end is near.”

Jack Welch, Former Chairman and CEO
General Electric Corp.
MANAGEMENT SYSTEM LACKING!

Change Systems and Structures
TRANSFORMING CARE TOGETHER

TCT is CAMC’s approach to redesigning our work processes in support of our mission “striving to provide the best health care to every patient, every day.”
GOALS FOR TCT

1. Increasing direct time with the patient.
2. Decreasing non-value added activity (waste).
3. Increasing employee engagement in improvement activity.
4. Standardizing processes to deliver repeatable and predictable results.
Embracing the Baldrige Approach

Our organizational performance accelerated as we became process driven and integrated the Baldrige processes and systems throughout our organization.
FOUNDATION FOR LEAN

5S Workplace Organization
Standardization
Visual Management
Problem Solving
Human Centered Work

Continuous Improvement

Highest Quality
Healthcare

Human Centered Work

Just in Time

Built in Quality

Problem Solving

5S Workplace Organization
Standardization
Visual Management

CAMC Health System
Malcolm Baldrige
National Quality Award
2015 Award Recipient
5S Principles
1. Sort (Removal)
2. Set In Order (Orderliness)
3. Shine (Cleanliness)
4. Standardize (Adherence)
5. Sustain (Self-Discipline)

5S is the key to Workplace Organization
RN DIRECT PATIENT CARE TIME

Per cent:
- 2009
- 2011
- 2012
- 2013
- 2014
- 2015

CAMC

TOP 25%

Good
FOUNDATION FOR LEAN

5S Workplace Organization
Standardization
Visual Management
Problem Solving
Human Centered Work

Highest Quality Healthcare
Continuous Improvement
Just in Time
Human Centered Work
Built in Quality
Problem Solving
5S Workplace Organization
Standardization
Visual Management
How do we embed TCT into the entire organization?
Performance Improvement System

- DMAIC has helped CAMC create a process and a culture for high performance.

### DMAIC Process for Improvement

**Define**
- Determine strategic opportunity for improvement (data driven)
- Identify customer requirements
- Define the problem

**Measure**
- Develop process measures based on criteria
- Collect process data
- Check the data quality and identify benchmarks
- Understand process behavior
- Baseline process capability and potential

**Analyze**
- Analyze the process
- Develop theories and ideas (potential root causes)
- Analyze the data (trends and benchmarks)
- Verify root causes and understand cause and effect

**Improve**
- Plan improvement strategies
- Pilot strategies
- Measure effectiveness
- Implement improvements and re-measure as needed

**Control**
- Standardize new process
- Sustain
- Spread improvements

Note: This symbol signifies use of DMAIC process for improvement throughout this application.
## TOP 5 BOARD

**Charleston Area Medical Center**

**Vision:**
Charleston Area Medical Center, the best health care provider and teaching hospital in West Virginia, is recognized as the:
- Best place to receive patient-centered care
- Best place to work
- Best place to practice medicine
- Best place to learn
- Best place to refer patients

**Core Values:**
- Service with Compassion
- Respect
- Quality
- Integrity
- Stewardship
- Safety

**Department Scorecard**

### Patient Experience

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### Clinical Quality

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### Key Processes

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### Stewardship

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### Safe Environment

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**CAHSC AMHC Health System**

**Malcolm Baldrige National Quality Award 2015 Award Recipient**
TOP 5 BOARD SAFETY CROSS

- **Effectiveness**: An important tool to know if the safety bundle is being followed on each shift.
- Only green if all parts of the bundle are completed; serves as an internal audit tool for key processes of care.
- Addresses accountability as the issue is discussed with the involved individual(s) that day.

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### Analyze: Daily Tracking Calendar for Root Causes

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- **Zero Incident**: Shade green each day that is free of incidents.
- **Reportable/Near Miss**: Shade yellow each day where a "near miss" incident occurs.
- **Recordable Incident**: Shade red each day where a recordable incident occurs.

List Critical Root Causes of Problem:

- 
- 
- 
-
# A3 Problem Solving

## DEFINE
- **Topic/Issue:**
  - **Background/Problem Statement:** (when, where, how does it occur)
- **Improvement Goal Statement:** (goal target and date to accomplish)

## MEASURE
- **Current State Process:** (list or draw steps of the process to identify bottlenecks)
- **Baseline Metrics & Date:**

## ANALYZE
- **Analysis:** (get to the root cause(s) for the problem, update analysis when additional root causes identified)

## IMPROVE
- **Ideal Future State Process:** (list or draw process if waste & defects removed)

## SOLUTIONS
- **Solutions – Short Term:** (Implement 2-4 weeks)
  - **Implementation Plan:**
    - **Actions**
    - **Who**
    - **By When**
    - **Expected Outcome**
- **Solutions – Long Term:** (>4 weeks to implement)

## CONTROL
- **Sustainment/Follow-up Plan**
- **Team Members:**
- **Approvals:**

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*CAMC Health System 2015 Award Recipient*
Rationale: Provide standardized method for resolution of problems using the Top 5 Board

1. Go to CAMnet and select Quality tab, then select Transforming Care Together.
2. Select Tools and templates.
3. Scroll down to Top 5 Board header.
4. Select Top 5 Board/A3 Tip Sheet and print if needed for reference.
5. Select CAMC Health System Strategic Plan link. Select **Strategic Plan Illustration for Top 5 Board** for the current year and print five copies. One copy of the strategic plan will go above each of the five categories/columns. With a highlighter, highlight the actual pillar, goal and Big Dot that links to the problem in the category/column.
6. Select Strategic Department Goal Action Plan link, go down to the Action Plan & Individual Scorecard Reporting Section, select **Report on Action Plans** (Quarterly), enter your department number, enter the year and print landscape. With a highlighter, highlight the department goals related to the problems in the category/column. Post on the top left corner of your Top 5 Board.
7. Select Define: Template, print five copies. Complete the Problem Statement, Improvement Goal Statement, Link to Strategic Goals, Team Members and Start Date for each of the five categories/columns. With a highlighter, highlight the Strategic Goal, Big Dot and Department Action Plan that relates to the problem. Post in the Define row (red) on the Top 5 Board.
8. Select the Measure: Graph Template that best meets your needs for each category/column. There are four graph templates to choose from: 0% - 100%, 50% - 100%, 1-10 or the graph insertion template. You can edit the scale on the first three templates, the fourth template is used to insert your own control chart. Post in the Measure row (yellow) on your Top 5 Board.
# PERFORMANCE IMPROVEMENT BREADTH AND DEPTH

## IMPROVEMENT IS EVERYWHERE

Improvement is CAMC Health System wide from the Board to every employee:
- **Organizational Level:** Baldrige
- **System and Process Level:** Enterprise Systems Model
- **Department Level:** Improvement Projects
- **Individual Level:** PI training starting at orientation

## IMPROVEMENT IS SYSTEMATIC

Process Improvement uses:
- **Process Improvement Methodology:** DMAIC

## IMPROVEMENT IS FACT BASED

Improvement is evaluated:
- **Improvement Tracking:** Top 5 Boards, Scorecards
- **Performance Verification and Accountability:** Organization Performance and Capabilities Review, Performance Management System

## IMPROVEMENT IS MATURE (Started in 1989)

Improvement is shared:
- More than 67 Committees

Performance is integrated:
- Organizational Knowledge Management
OUR LEARNING...

• Identify key organizational issues and systems that need improvement.
• Line of sight from strategic plan to everyday work.
• Focus on the few.
• Use culture to drive change.
• Innovate for the future.
Commonwealth Fund and IHI
Case Study of International Innovation
The COM-B model, Michie et al (2011)
Capability
A complex system problem
Model for Improvement

1. What are we trying to accomplish?
2. How will we know if a change is an improvement?
3. What changes can we make that will result in improvement?

ACT
PLAN
STUDY
DO
The COM-B model, Michie et al (2011)
Motivation
Medical error
—the third leading cause of death in the US

British Medical Journal
3rd May 2016

NHS providing poorer care as funding crisis deepens

The Guardian
18th February 2016
How?

Marshall Ganz
Social Movement Theory

• Self
• Us
• Now
• Action
The COM-B model, Michie et al (2011)
Opportunity
A complex system problem
2003 Toyota Corolla
The incubator

The Big Room (Oobeya)
Physiotherapist gives an account of the test of change to get a patient home on the day they were discharged by the GSM consultant.
Let me introduce ‘George’

- 82 years old
- Lives independently and wants to continue doing so
- Widowed 5 years ago
- Has mild dementia
- Daughter lives locally
- Losing weight + poor mobility
Frailty Unit
Outcome measure: 34% increase in discharge within 1 day
Length of stay for frailty unit patients reduced by more than 4 days
In-hospital mortality dropped by over 13%
Discharge to Assess (D2A)
Reduction of 6 days waiting on implementing D2A
Sustained 30% reduction of LoS
30% reduction of inpatient falls on pilot ward
In last one year >10,000 patients discharged to home support in 1.2 days compared with 5.5 days
Improving Flow: Cohort 1

Sheffield Teaching Hospitals NHS FT

South Warwickshire NHS FT

Royal United Hospitals Bath NHS FT
Global Aim

Themes
‘Post-it Frenzy’

Build a Big Room

Change Ideas
Brainstorming
Change Concepts
Benchmarking and visits
Process/Value Stream Map
Fishbone
Spaghetti Diagrams
Selection criteria & Multivoting

Specific aim
Change idea
Define measures

APSD

Pre-Phase
Coached weekly meetings
Patient stories
System data
Reflective learning

Standardise

@sheffielddoc
The Big Room (Oobeya)
Improving Flow: Cohort 1


- Learning session 1 (3 days)
- Learning session 4 (3 days)
- Learning session 7 (3 days)
- LS2
- LS3
- LS5
- LS6
- LS8
- LS9
- LS10
- LS11
- LS12

5V Assessment | Testing-Design | Implement

Cohort 1 - some examples

Warwick Frailty—Reduction of Length of Stay by streamlining front door processes

Sheffield Stroke—Improvement in the quality of referral information, part of a series of tests to reduce delays

We have seen a better take up of our processes, improved communication across the pathway, but more importantly a greater understanding of the patients' needs and a greater focus on individual patient needs along our pathway. The enhanced education and knowledge share is a key enabler for improvement, in a more efficient, safer, faster, and less intensive manner. Clinical NPS implementation.

@sheffielddoc
Improving Flow: Replication by social franchise

Cohort 2 starts January 2017:
- Bath
- Imperial
- Northumbria
- Sheffield
- Warwick
Practical Exercise

How is your organisation addressing:
- The capability requires to incubate improvement?
- The opportunity?
- The motivation?
Lunch Break
Be back at 1pm please
Objective 13:00-14:00

By coffee break you will:

Have the knowledge and skills to initiate an incubator for organisational change
Practical Exercise

- What happened in the Big Room?
- What is the difference compared with Toyota or Intel’s incubators of improvement?
Coffee Break
Back at 3pm
please
Practical Exercise

- How can you apply today’s learning to your complex system?
- What will you do next week?
Evaluation

- Did we meet your expectations?
- What went well?
- What could be better?
Steve Spear – The High Velocity Edge
Thank you

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