

Foreword

from the Publisher

Across the world for nearly a century, managers and front-line workers have been steadily learning about the power of rigorous processes to create more value for customers with less waste of every sort – time, defects, human effort, capital investment, injuries. The most accomplished practitioner of these methods through much of the past 60 years has been the Toyota company, but recently many organizations in a wide range of industries far beyond manufacturing have applied rigorous process management—often called lean thinking—to their core activities. When customer value is clearly understood and managers and employees at every level are creatively engaged in dramatically improving traditional processes, the results are invariably highly positive.

Curiously healthcare, with its strong base in the scientific method of rigorous experiments, was largely absent from this movement until recently. Seemingly the steady advance in medical knowledge, including celebrated “miracle cures” like organ transplants and stents to open heart arteries, obscured the fact that the healthcare actually being delivered to the average patient was costly and of low quality in comparison with the results being achieved in many other industries.

In the mid-1990s a few healthcare providers began to experiment with improving their delivery processes. But it took time to modify the improvement tools developed in very different contexts for successful use in healthcare. And there seemed to be little demand for these tools, even once fully proved, as long as the healthcare community believed that traditional management practices and delivery methods were adequate.

But now everything has changed dramatically. As health insurance is extended to millions of additional Americans while the baby-boom generation begins to make significant demands on medical care and government finances grow ever more perilous, the prevailing attitude about traditional methods of healthcare delivery has been radically transformed. Indeed, the one—the only?—thing that all observers of American healthcare can agree on today is that the way we have done things in the past cannot be the way we do things in the future. In consequence, there is suddenly a widespread demand for a simple, actionable approach to creating lean healthcare delivery systems with much lower costs and much better quality. Describing this concept, demonstrating its power to improve results, and explaining how to deploy it is the objective of this book.

Even as we at the Lean Enterprise Institute waited for the healthcare community to embrace lean thinking, we were searching for the leader or leaders best equipped to deliver the message when the time was right. We observed many experimenters in many medical systems with startling results in isolated applications. But we were seeking someone who had brought all of the techniques of lean healthcare together in a complete system—primary care, hospitals, and developed supporting management systems that engaged every employee. We were therefore delighted when we encountered John Toussaint, MD, and his collaborator Roger Gerard, PhD, just as they were completing a decade-long effort to introduce lean healthcare as leaders of the ThedaCare medical system in Wisconsin.

As a doctor, medical director, and then CEO, John Toussaint has taken a hands-on role in pioneering a rigorous approach to quality while slashing waste and cost and improving patient experience across the enterprise. Roger Gerard, as ThedaCare's expert in organizational development and learning, has given hard thought to the change management process and the new leadership behaviors needed to engage doctors, nurses, support staff, and managers in a better approach to providing care while improving their work experience. Together they possess a unique insight on the challenges and rewards of lean healthcare and the book in your hands is the distillation of what they have learned.

One of the key points of this volume is that to embrace lean healthcare you—particularly if you are the senior leader—must *do* lean healthcare by going to the gemba, the place near the bedside where value is actually created for the patient. You need to involve yourself directly in process improvements and learn to see both waste and value. The improvement initiatives described in the pages ahead do not require your direct and undivided participation because of your technical knowledge or authority. Indeed, both may get in the way. Rather you need to apply your hands directly to resolving the problems you will find as part of an improvement team of doctors, nurses, support staff, line managers, and patients because this is how you will change your own thinking about waste, value, and leadership in healthcare.

This prospect is frightening at first for most leaders because they have been trained in a management model where the senior leader (particularly when a doctor) should know all the answers. In fact, lean leaders can only know how to ask the right questions in a collaborative spirit. Your leadership team will probably need help in transitioning from one way of leading to the other. We have therefore helped create the Healthcare Value Leaders Network across North America. It is open to any healthcare provider with a leadership that is truly committed to

transforming their entire enterprise through hands-on learning and sharing gemba experiences. The work of the Network is described in the End Note. We hope you will consider joining.

Speaking both as the publisher and as a 30-year participant in efforts to introduce lean thinking in a wide range of industries, let me express my hope that you will find *On the Mend* helpful in focusing your own efforts. And let me express the additional hope that you will share your experiences with the multitude of other organizations now embarking on lean healthcare. But let me also urge you to keep clearly in mind your training as medical scientists. Lean transformation is all about Dr. Deming's Plan Do Study Act (PDSA), otherwise known as the scientific method. There is no simple formula to copy and no quick path to success. Instead you must perform your own experiments—tailored to the mission and circumstances of your organization. And then you must honestly study the results and act on your findings, including sharing them with the healthcare community.

The new temptation in these difficult times for healthcare is not to cling to the past. Instead it is to seek quick, painless miracle cures, and someone will always be offering these. But there are no miracle cures, not even “lean” ones, for poorly designed processes, outmoded leadership styles, and unengaged employees. There are only continuous experiments, conducted honestly by leaders with courage, an open mind, and a collaborative spirit, as the healthcare community commences a long journey in pursuit of lean healthcare.

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