



Leadership Transition: Threat or Opportunity to Lean Transformation?

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Want Better Employees?
Be a Better Employer.

Lean Transformation
Summit 2018
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What is a Community Health Center?

There Are Four Key Components That Define Health Centers and Allow Them to Reach America's Most Underserved Communities

- 1 Patient-majority governing boards
- 2 Comprehensive set of services
- 3 Open to all, regardless of insurance status or ability to pay
- 4 Located in high need areas

Health Centers employ nearly **208,000** people and provide a comprehensive set of services

behavioral health chronic disease management preventive services enabling services oral health

Over **27 million** patients served, including:

over **330,000** veterans

nearly **1.3 million** homeless patients

over **955,000** migrant farmworkers

Health Centers Reach the Nation's Most Vulnerable

1 in 6 Medicaid beneficiaries

1 in 3 people below FPL

1 in 5 uninsured persons



Health Centers Create Savings and Promote Economic Growth

\$45.6 billion in total economic activity generated

\$24 billion in savings to the entire health care system

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2



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A Need for Change



LCHC is located 10 miles from downtown Boston, in the economically, culturally, and socially diverse city of Lynn.

It is a small but mighty healthcare center serving more than 40,000 patients representing 113 countries and 72 languages – of which over 90 percent live at or below 200 percent of the federal poverty line.

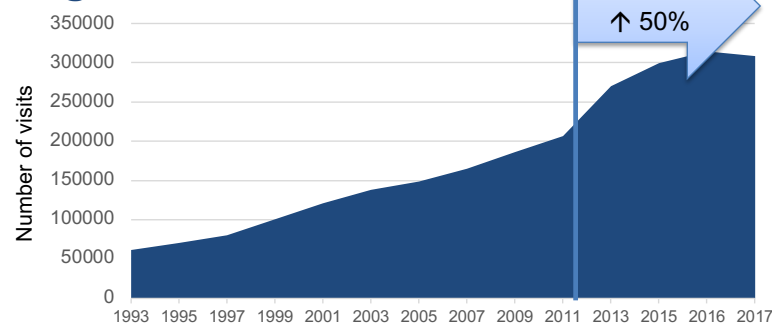


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Increasing Demand



2x Space



1971

LCHC established on Chestnut St.



1976

LCHC moved to a larger facility



1993

Moved into current site



2012

Completed site addition

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Mission – Comprehensive Health Care of the highest quality for everyone in the Greater Lynn community, regardless of ability to pay



"Health care is above all a moral issue... at stake are not just the details of policy,

but fundamental principles of social justice and the character of our country."

"We will - yes, we will - fulfill the promise of health care in America as a right and not a privilege."

– Edward M. Kennedy

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The challenge

*Are we **best** able to
serve our community?*

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What prevents us from being the best?

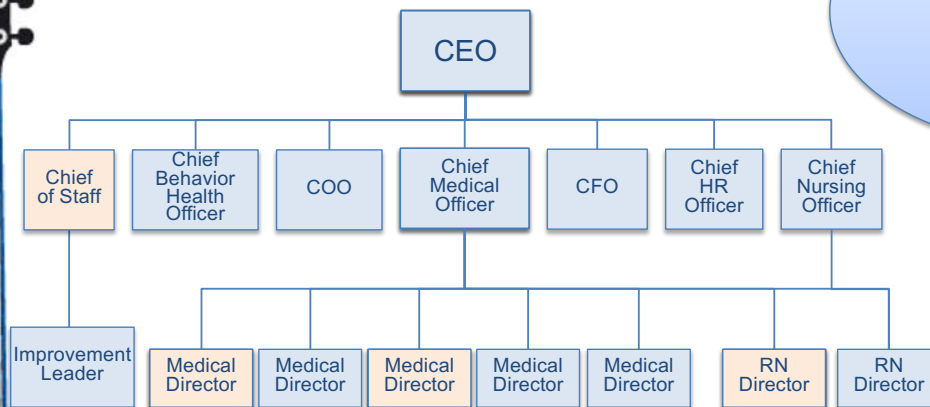
- Customer experience
 - Long wait times for our patients
 - Variable telephone wait time
 - Inconsistent quality
- Staff overburden & experience
- Declining Productivity (# of patients per hour)

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My first 90 days...



*How can I
create a level
of stability?*

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My first 90 days...



'Grasp the situation' with a new lens

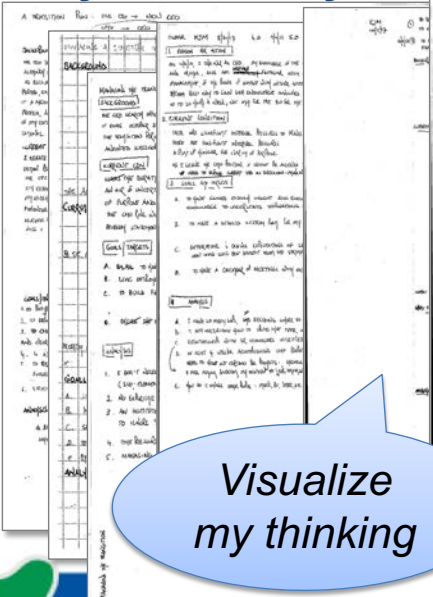
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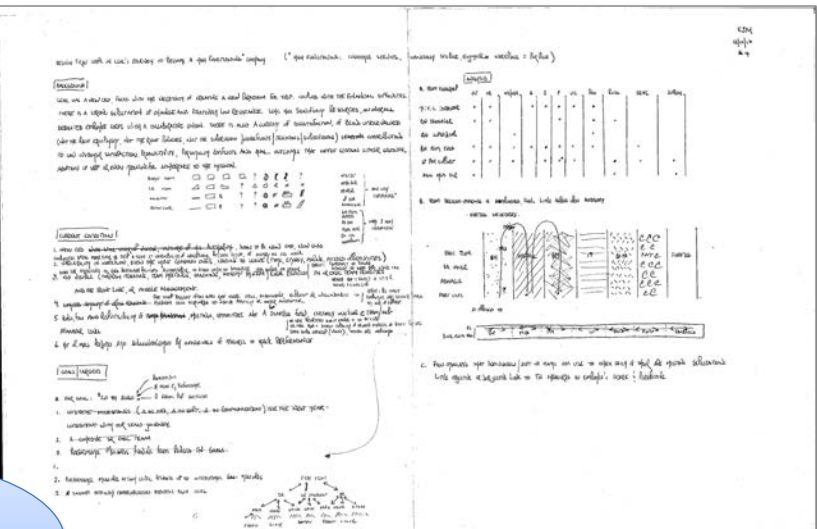


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My first 90 days...



Visualize my thinking



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But how did we get started?

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VALUE-DRIVEN PURPOSE

"How do we transform a whole community by transforming its biggest asset?"

clp
co-learning partners

Lynn Community Health Center Co-Learning Partnership

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Lynn COMMUNITY health center

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VALUE-DRIVEN PURPOSE

"How do we transform a whole community by transforming its biggest asset?"

Volume is increasing month after month but visits per FTE have been declining for over 5 years

We have a productivity problem!

Let's go faster!

BASIC THINKING

Who owns improvement? Who improves my work?

Lynn Community Health Center Co-Learning Partnership

Demand is high, but you are seeing less patients?



What is actually happening in the work?

How can we learn quickly together?

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Focus on the WORK



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Evolution



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Build a habit



Rapid cycle experiments focused on learning

PDCA Improvement

Date	What's the problem?	What's the impact?	What's the proposed countermeasure?	What's the Expected result?	What actually happened?	What did we learn?
7/1/16	CA with clipboard to get a sig diff piece the	CA took 10-15 sec to get it	CA took 10-15 sec to get it	CA took 10-15 sec to get it	CA took 10-15 sec to get it	CA took 10-15 sec to get it
7/1/16	Not completely convinced with checking the photo in the room in a lobby	Results are slightly longer than expected	Ensure all photo checkers are up to date - Check out photo in room, up	Accuracy of photo checkers - As the photo checkers are up to date	Not completely convinced with checking the photo in the room in a lobby	CA took 10-15 sec to get it

PDCA Improvement

Date	What's the problem?	What's the impact?	What's the proposed countermeasure?	What's the Expected result?	What actually happened?	What did we learn?
7/1/16	Patients wait in long lines all the time Dark and/or team without checking out in the hallway sign	It's leave without needed signs and check-out	CA's with the 'Quick' Check-out in room room - Daily check - Daily check - Daily check	CA's with the 'Quick' Check-out in room room - Daily check - Daily check - Daily check	CA's with the 'Quick' Check-out in room room - Daily check - Daily check - Daily check	CA's with the 'Quick' Check-out in room room - Daily check - Daily check - Daily check
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Build a habit – Build confidence & capability

What is currently happening?

Blue Team
Main Building – 2nd Floor
Segundo Piso

Provider: lee

Appt Time: 10:00

Reg Initials: yo

1) Arrived on Blue 9:44pm
2) CA called in 9:46
3) CA done rooming 9:55
4) Other (start) _____
5) Other (end) _____
6) MID in process 9:56

NO WAITING FOR PROVIDER!
Time from CA done rooming
to when pts see provider

0-5 min

5-10 min

10-15 min

15+ min

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17



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Design it Right Upfront



Full Scale Mock-up

Physical & Process Simulations –

Tested design alternatives through scenarios considering:

- Volume
- Patient Mix (different diagnoses)
- Provider Mix (specialties, role)
- System constraints (hours of service, union rules)
- Variation (day of week, seasonality)

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Design it Right Upfront

Design processes & space for perfect patient & staff flow

Iterative learning

Led to...
↓ walls
↑ flexibility
↓ cost

Resulting in...
↓ handoffs
↓ patient waiting
↓ steps

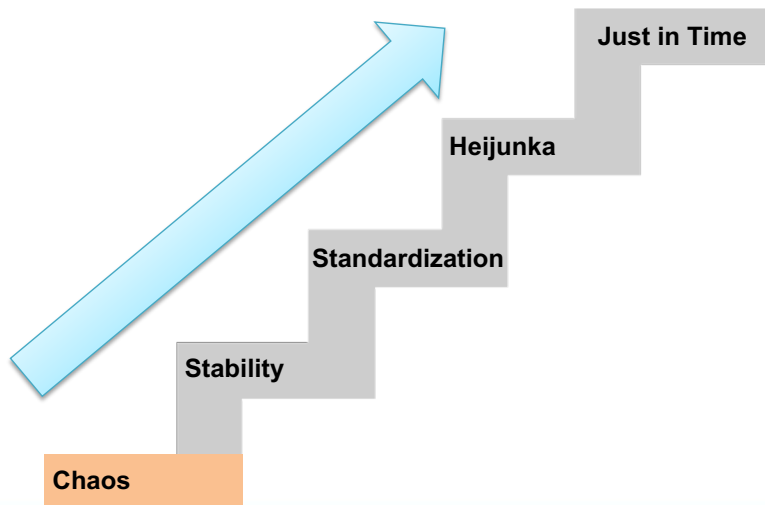


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Directionally better...

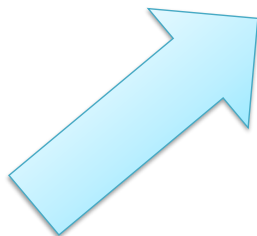


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Step 1



Stability

"The job of management is to maintain working conditions before trying to improve them"

– Jim Lancaster

"Kaizen on chaos only creates more chaos"

– Jim Womack

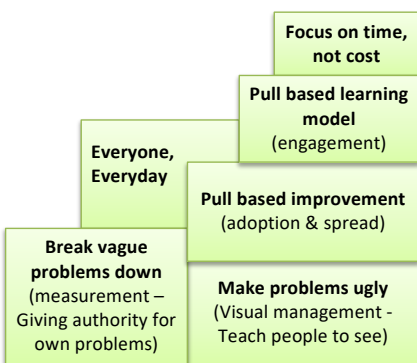
Chaos

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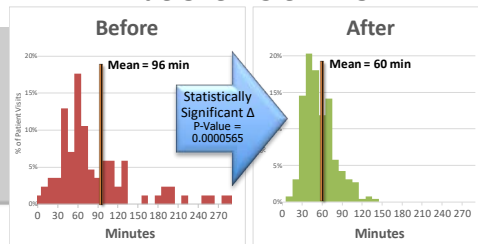
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Step 1 (first 4 months)



Stability

Patient Visit Time



"100s or even 1000s of little actions added up to some astounding results"

– Jim Lancaster

Chaos

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Results for 1 Model Clinic

Imagine the potential...

For patients



8,514 hours of patient wait time reduced per year

For medical staff

1,355 more patients seen per year



For the organization



\$182,956 increased revenue per year

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Directionally better...



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At the same time...



How do we better understand our work?



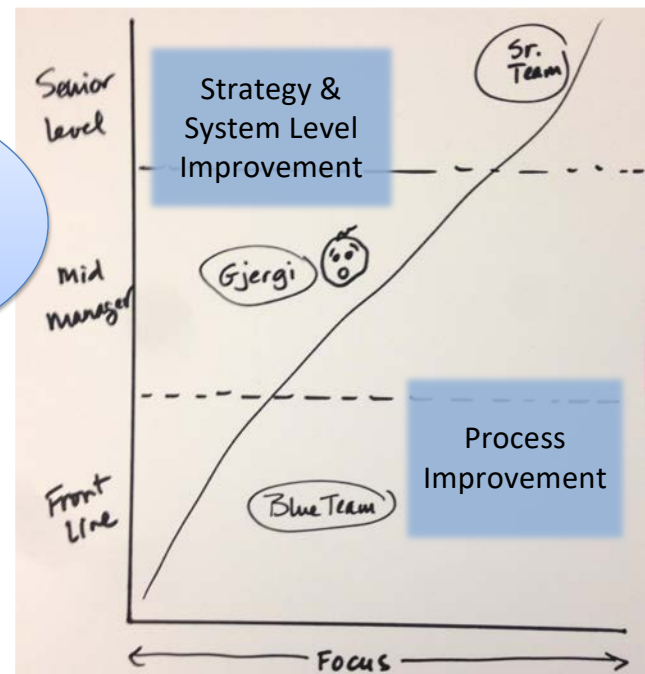
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Are we solving problems at the appropriate level?



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What are we working on?

What are our priorities?

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Were we able to focus on the vital few?

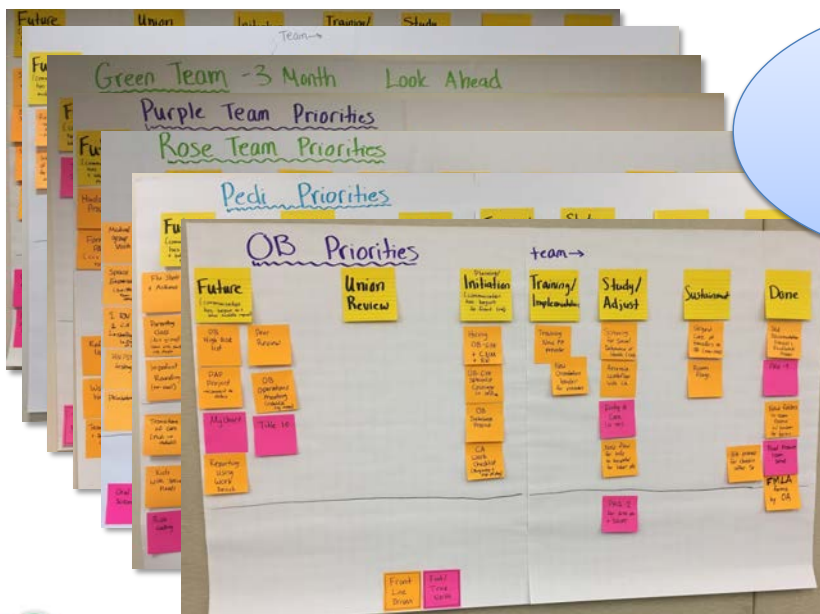
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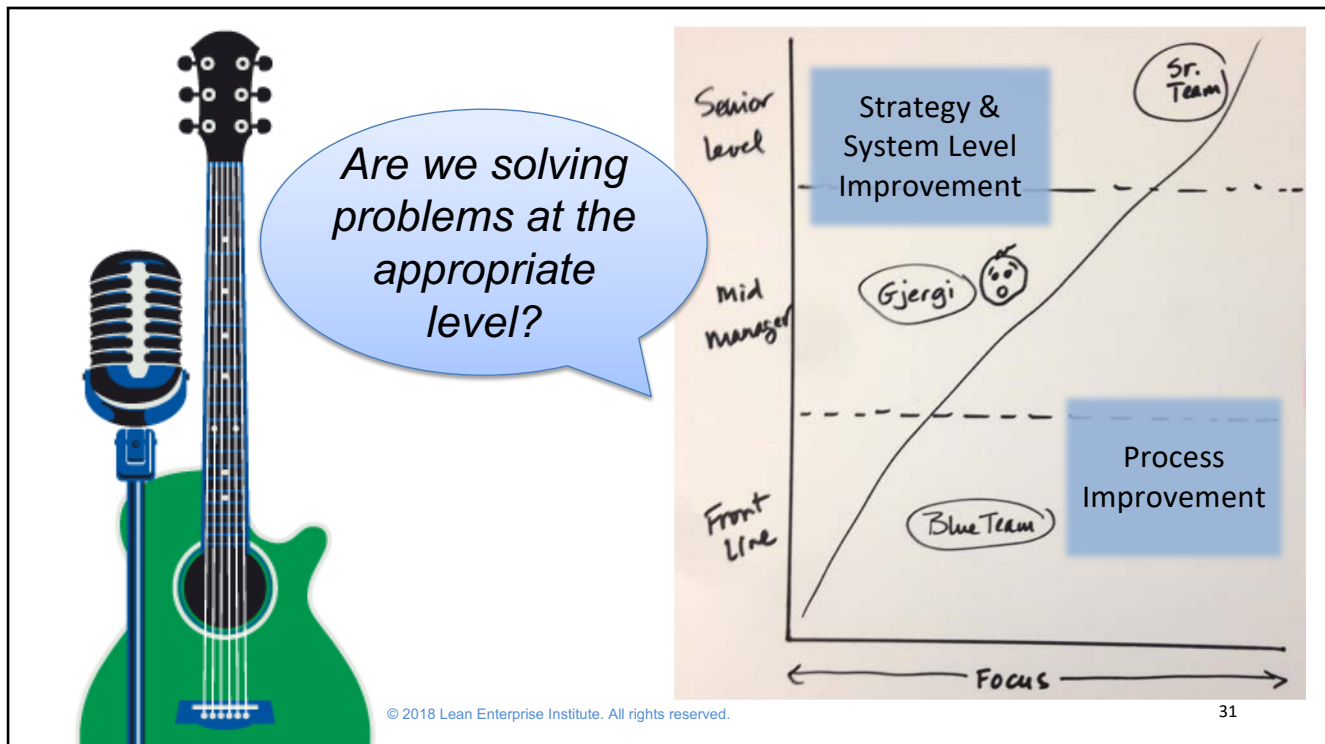
What are we actually doing to the front line?

What is the front line actually working on?



Front-Line
Driven

Management
Driven
(Find / True North)



As we learned, we continued to ask the next question...

...to find the next gap

...to gain clarity

Build a Habit

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Deepen Learning through Cross-fertilization



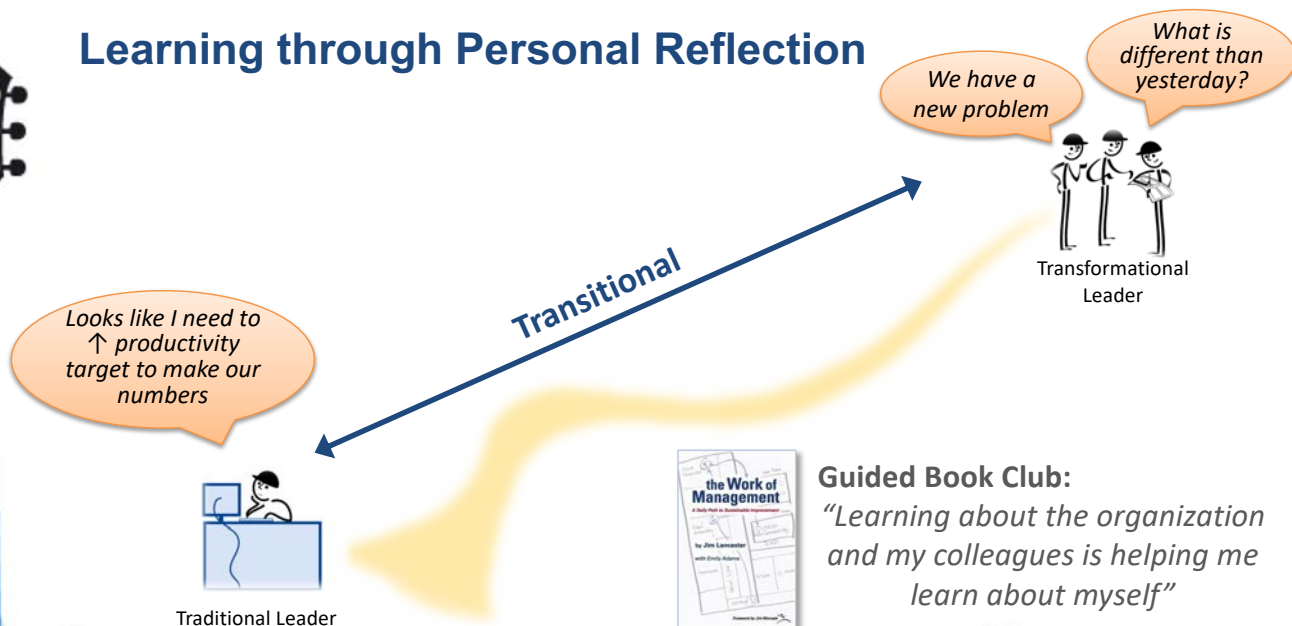
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Learning through Personal Reflection



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What did we learn?

- Visualize the work so we can problem solve (private and public)
- We all need a coach
- Focus on stability
- Build problem solving thinking
- Same approach at the front and top
- Shift from “I” to “we” and “them” to “us”
- Personal transformation happens in different ways
- Its about transforming **ourselves!**

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Learning through Personal Reflection



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Questions?

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