

The Role of the Leader in Visual Management

Sue Schade, MBA, LCHIME, FCHIME,
FHIMSS



Let's Deal With The Work

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Background

- 30+ years in health care IT management
- Founding advisor at Next Wave Health Advisors - currently interim CIO at University Hospitals in Cleveland
- CIO at University of Michigan Hospitals and Health Centers (3+ years)
- CIO at Brigham and Women's Hospital in Boston (12+ years)
- Experience working for software vendor and consulting firm

Objectives

- Provide overview of multi-year journey and lessons learned by:
 - UMHS leadership
 - IT leadership
 - CIO
- Understand challenges of visual management:
 - Leaders at multiple locations
 - Electronic vs. manual boards
 - Incorporating visual boards into management meetings and huddles
 - Perception of duplicate effort

UMHS on the Lean Journey

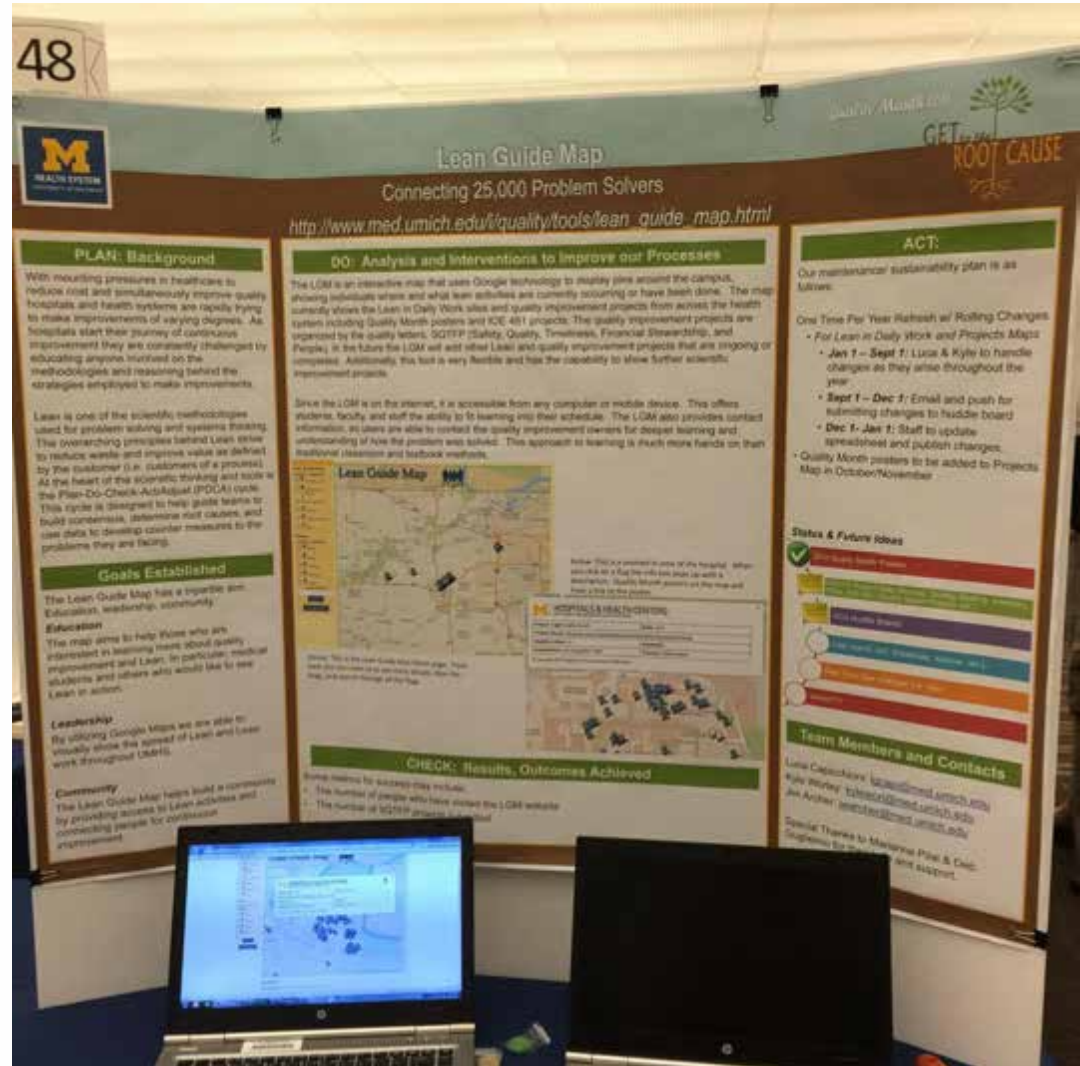
- Michigan Quality System
- Managing to Learn – A3 thinking and problem solving
- Lean Leader On the Job Development Program
- Daily Management System

“My goal is to develop 25,000 scientific problem solvers – every UMHS employee.”

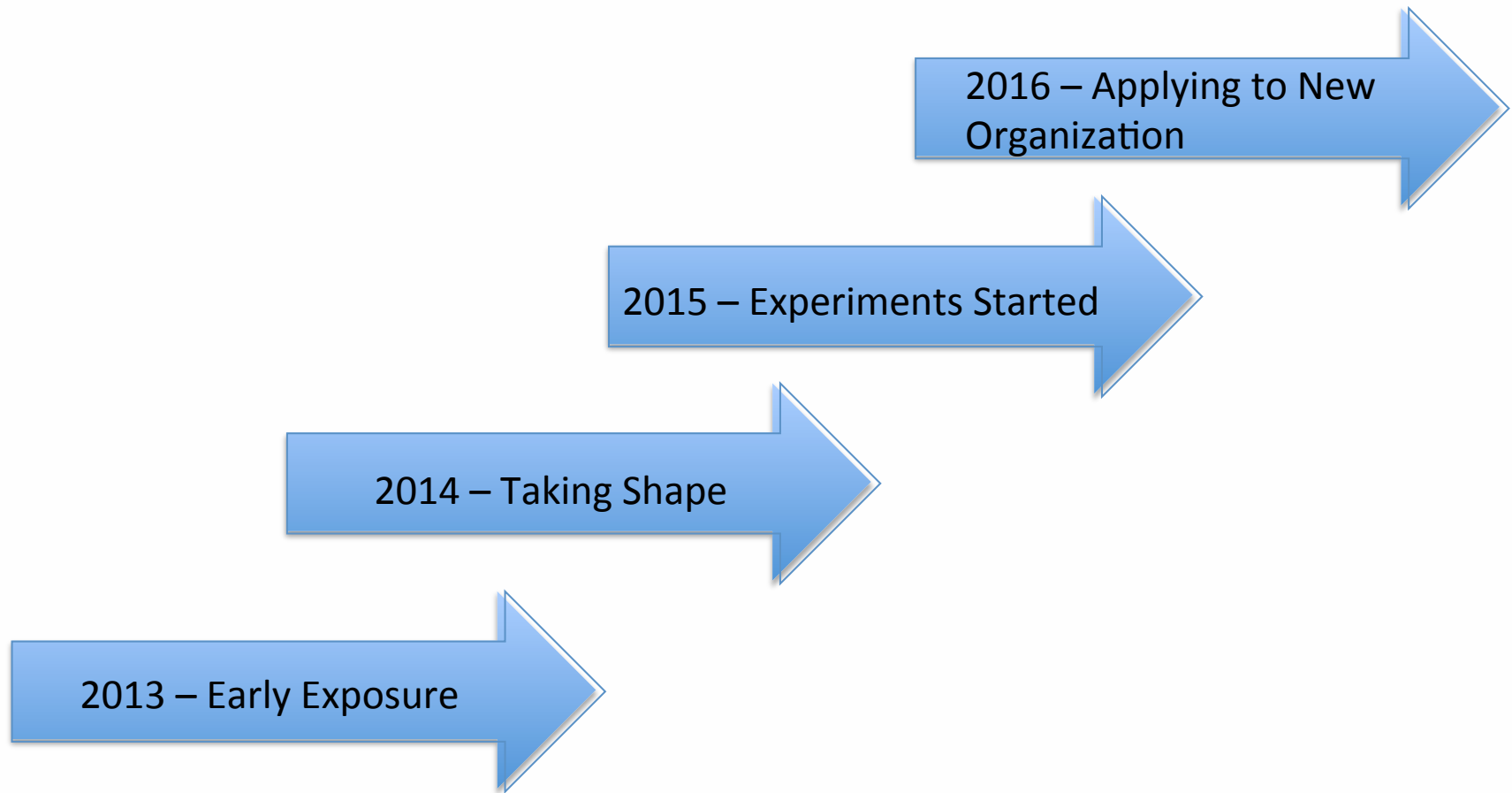
Jack Billi, MD

Connecting 25,000 Problem Solvers

Quality Month Display showing the Lean Guide Map app at UMHS

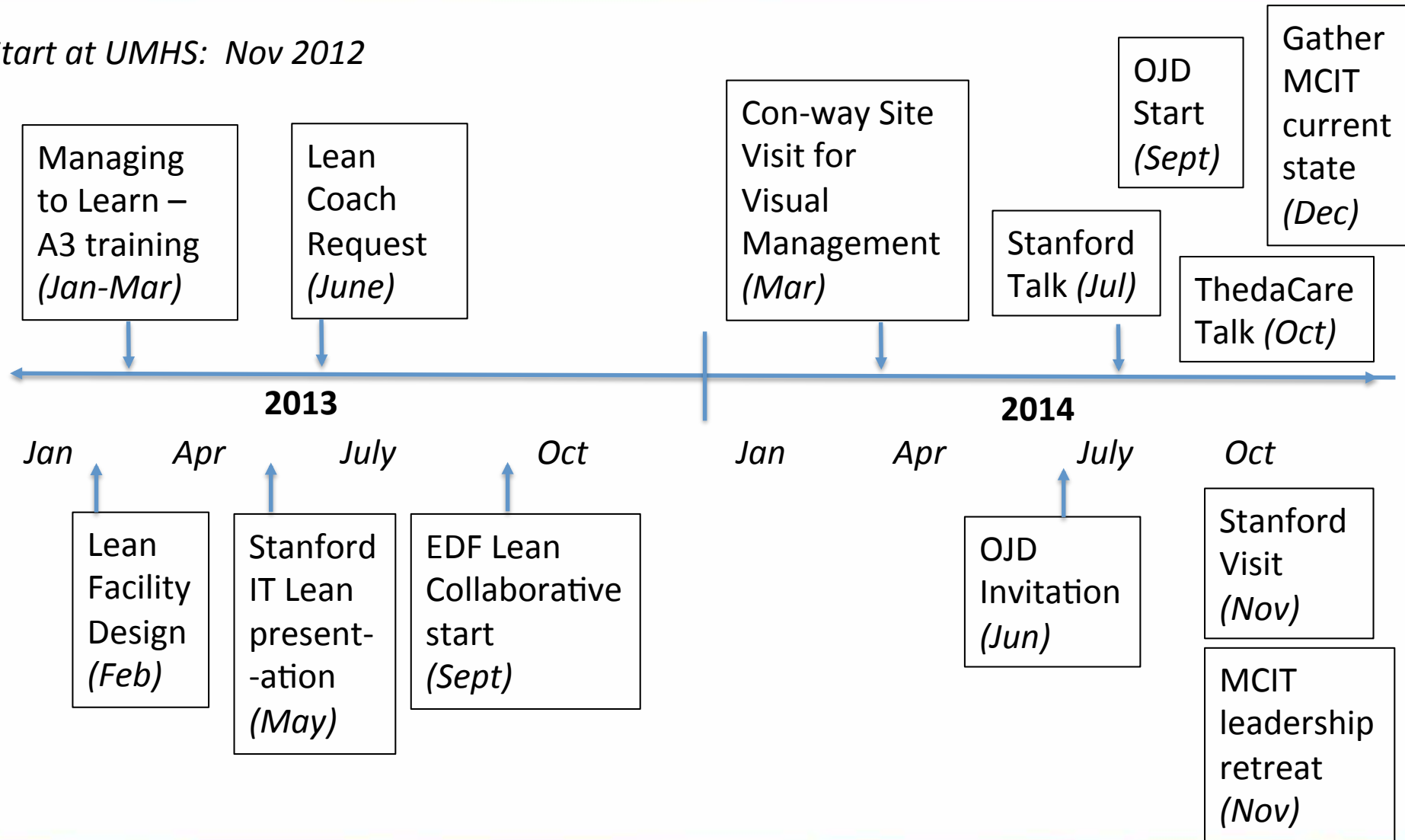


A Leader's Journey

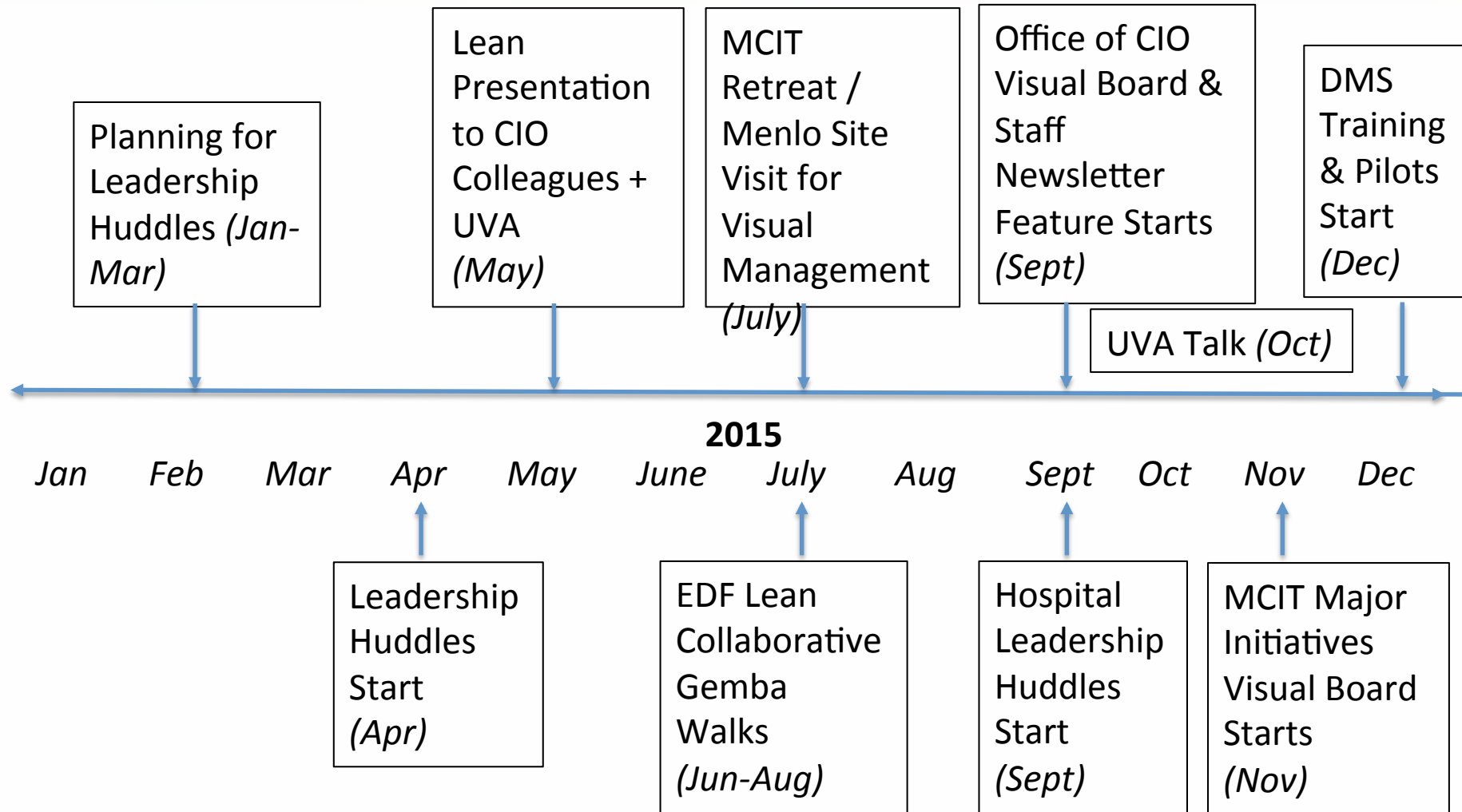


Early Exposure and Taking Shape

Start at UMHS: Nov 2012



Experiments Started



Importance of Learning from Others

- Stanford CIO presentation to colleagues
- Con-Way site visit with UMHS executive leadership
- Stanford Health Care CEO, Amir Rubin, Grand Rounds
- ThedaCare System former SVP, Kim Barnas, Lean Thinkers Series
- Stanford site visit by UMHS executive leadership
- UVA CIO presentation to colleagues
- Menlo site visit with IT leadership
- Univ. of Virginia EVP Health Affairs, Dr. Richard Shannon, Lean Thinkers Series

Lean Leader On the Job Development (OJD)

- 15 month program for cohort of 15 health system executives from system, hospitals and medical school
- 2 primary goals:
 - Develop individuals as lean leaders – apply to own area
 - As a team, design the necessary systems and processes for the organization
- Michigan Operating System to reduce unnecessary variation and achieve standardized work at all levels
- Organizational changes impacted ability as team to make significant progress
- Influence vs control

IT Leadership Retreat

- Early planning for huddles and visual management
- Enlisted support from lean coaches
- Raising awareness and getting team buy-in
- Viewed Stanford IT lean video
- Role play using existing basic daily huddle from a UMHS unit

IT Leadership Huddles - The Problem

- Too many IT committee, team, workgroup and 1:1 status meetings – lot of overlap
- > 80% of leadership time spent in meetings
- Discussions and decisions conducted via email due to lack of availability for meetings
- More email than time to read it all
- Project status reports too detailed, time delayed





"No, Thursday's out. How about never—is never good for you?"

Hypothesis

- More timely, focused communication on what really matters
- Real-time problem resolution
- Reduce time in meetings
- Reduce amount of email
- Reduce the “swirl”

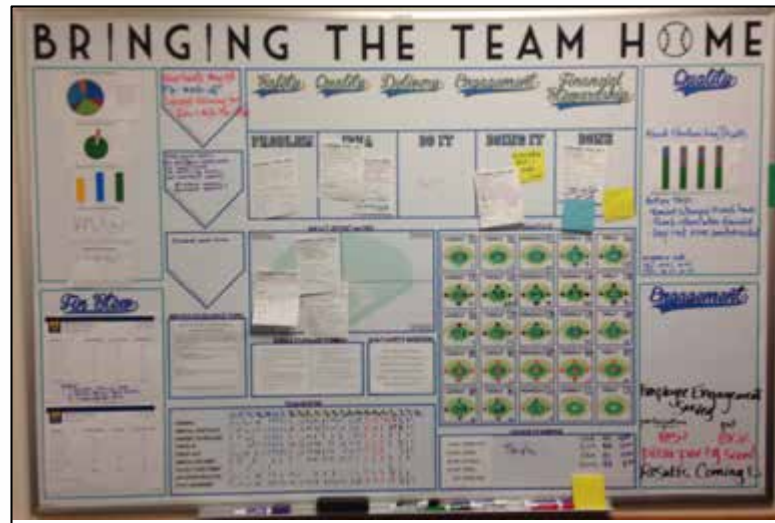
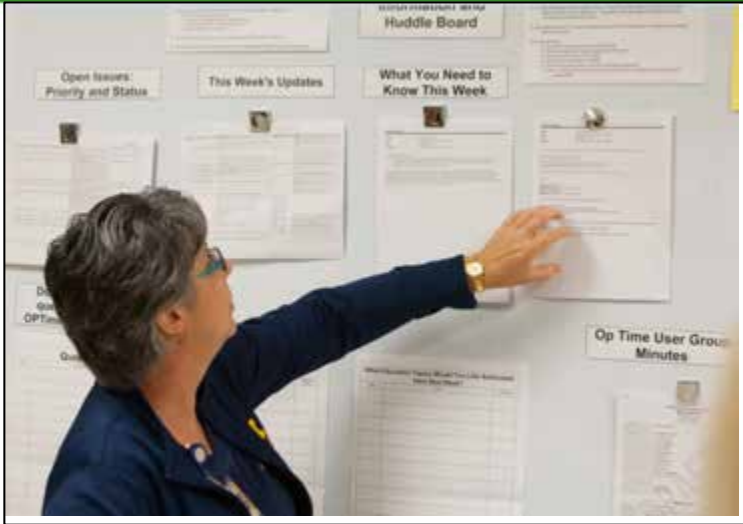


Proposed Solution

- Twice weekly leadership huddles
- 20-30 minutes max
- Online meeting to accommodate multiple locations and distributed nature of team
- Scripted process
- Focus on surfacing problems, triaging, and sharing improvement ideas
- Metrics focus on a single operational concern



Investigating Huddle Boards at UMHS





IT Leadership Huddle Board

- Used Adobe Connect for our online huddle
- SharePoint site has links, notes, tasks
- Proceedings of each meeting recorded in “visual board” spreadsheet
- Metrics created with Splunk




Huddle Documentation on SharePoint Site

OMT Huddle - Home

Site Actions   Browse Page

U-M Health System | UMHS Internal | Clinical Home Page | U-M

 **University of Michigan Health System**
OMT Huddle ▶ Home

MCIT Collab Applications Audits ▼ Benchmarking Finance FteEffortSurvey HR Reports **Leadership ▼** UMHS Enterprise Analytics Roadmap UMHS

▶ MCIT Metrics

▶ OMC/OMT

OMT Huddle

▶ Libraries

▶ Site Pages

▶ Shared Documents

▶ Lists

▶ Calendar


▶ Tasks


▶ Role Call

▶ ELI

▶ Discussions

▶ Team Discussion







 Recycle Bin


 All Site Content

Welcome to your site!



Add a new image, change this welcome text or add new lists to this page by clicking the edit button above. You can click on Shared Documents to add getting started section to share your site and customize its look.


Shared Documents

 Type	Name	Modified
	4-17-15 test - Leadership Dashboard v3	4/17/2015 1:12 PM
	4-20-17 Leadership Dashboard 	4/20/2015 10:24 AM
	Leadership Dashboard v3	4/17/2015 3:50 PM
	MCIT Leadership Huddle Script ver 2	4/17/2015 3:50 PM

 [Add document](#)

Role Call

	 Title	Huddle Date	Danielson	Diebel	Hepner	Hollingsworth	Kryza	Kwapis	McPhall	Neff	Pollack
There are no items to show in this view of the "Role Call" list. To add a new item, click "New".											

 [Add new item](#)

Balanced Framework

- Same balanced framework that UMHS leadership was defining for setting goals, priorities and measures:
 - **Safety:** To avoid harm to patients, employees, students and visitors.
 - **Quality:** Do the right work in the right way the first time to obtain the intended clinical and/or administrative outcome. Do not pass on a defect.
 - **Delivery/Timeliness:** Timely execution.
 - **Financial Stewardship:** Resource stewardship.
 - **People:** Create optimal environment to engage, develop and empower individuals and teams to improve performance.

The Scripted Process

Safety

- Report issues with systems, applications, process, or environmentals that have or may result in adverse or sentinel events; determine actions and assign leads

Quality

- Report any major incidents, operational Red/Yellow status, security issues or trends of concern; determine actions and assign leads

Delivery/Timeliness

- Review our metric for High/Urgent tickets. The goal for this metric is no high/urgent tickets greater than 1 week old.
- Time permitting, we review the real-time dashboard at the end of the meeting
- Report issues affecting major initiatives, project prioritization, deployments or service desk trends; determine actions and assign leads



The Scripted Process (continued)

Financial Stewardship

- Report any major financial issues regarding Operating or Capital Budgets, variances or process concerns; determine actions and assign leads

People

- Discuss resource management issues including key vacancies, resource availability, or significant morale or Employee Engagement issues; determine actions and assign leads

Closing

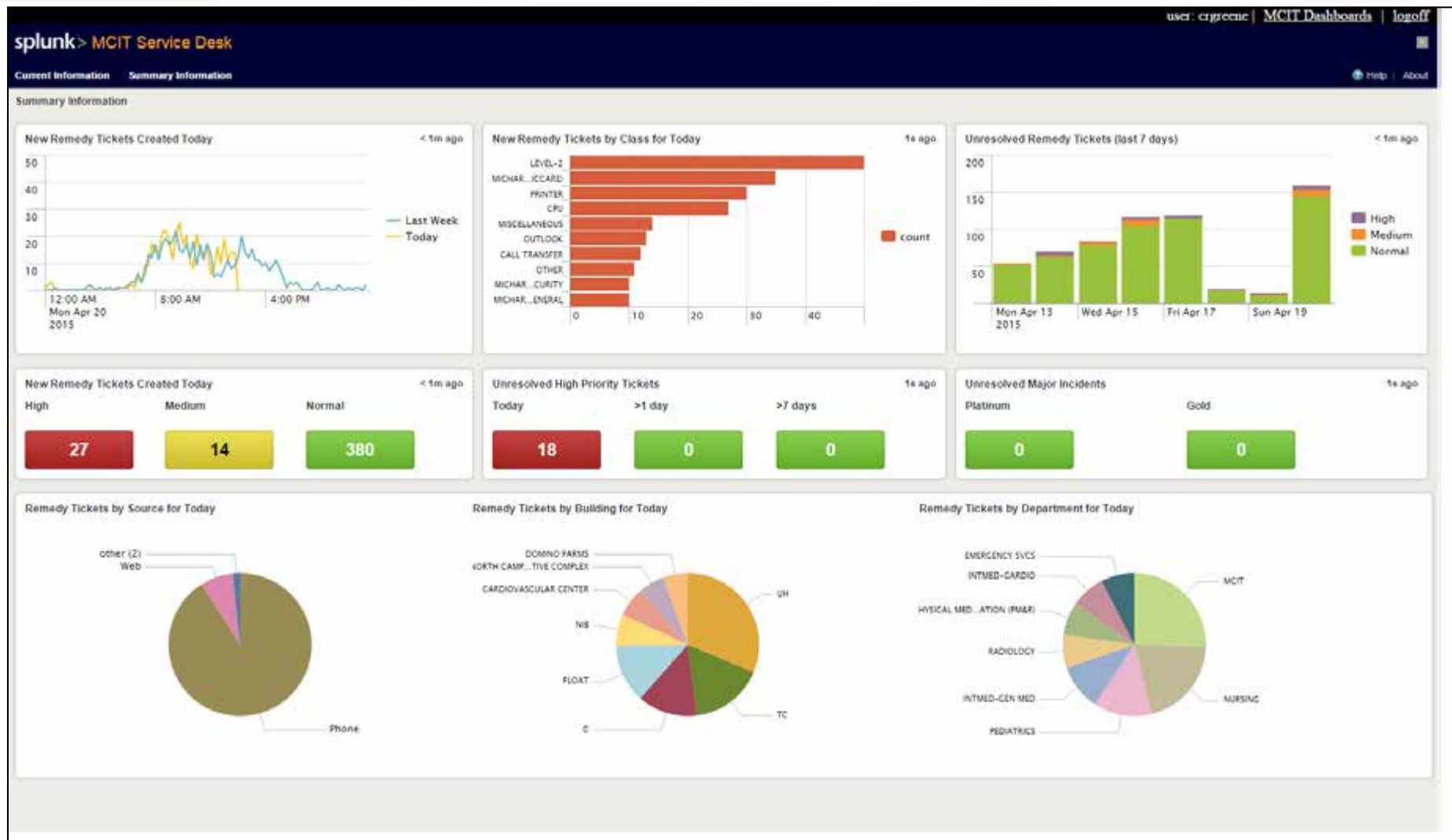
- Call for **Everyday Lean Ideas** (ELIs); update status of any previous ELI being tracked on the SharePoint site
- Call attention to outstanding **tasks** on the SharePoint site; review new tasks being added from today's Huddle
- Call for staff **recognition** or good news story that represents why we do what we do



Online Record from Each Huddle

MCIT Leadership Visual Management Board DRAFT					
Remarks /Problems					
Status Legend Green = 0 issues Yellow = 1 to 3 issues Red = > 3 issues					
Safety <i>To avoid harm to patients, employees, students and visitors</i> System and application failures resulting in an adverse or sentinel events	Issues	Target	Status	Owner/Lead	Defined Action Items
	Significant Safety issues	Zero			
Quality (Do the right work in the right way the first time to obtain the intended clinical and/or administrative outcome.) Major incident, operational red or yellow, security, break/fix TKTs	Significant Quality issues	Zero			Defined Action Items
Delivery/Timeliness Timely, efficient, and effective delivery of our services requests for new initiatives, high priority TKT TAT, Service Desk FCR	Significant Delivery/Timeliness issues	Zero			Defined Action Items
	Current metric: X urgent/high tickets > 1 wk old	0 > 1 week			Review high/urgent tickets for your division or teams; work to cleanup or resolve within targeted time
Financial Stewardship Timely, efficient, effective, execution Major budget variances, need for funding	Significant Financial issues	Zero			Defined Action Items
People <i>Create optimal environment to engage and empower teams to excellent performance, achieving ideal experiences & high customer satisfaction</i> Resource availability, important vacancies, morale, rumors, engagement	Significant People issues	Zero			
Every Day Lean Ideas/ Leadership Sharing Metric: 100% participation at each local level experimenting with Lean in Daily work tools (huddles, visual management boards, ELI, etc)		100%			
Supporting Data https://miops.med.umich.edu/					
Recognition or good news story					

Metrics from Splunk Available Online



Metrics from Splunk Available Online

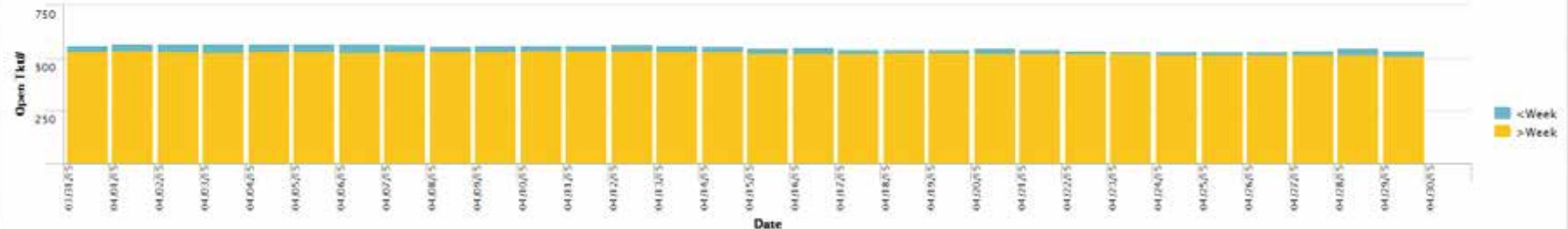
MCIT OMT Huddle Board

Weekly Huddle Board for MCIT OMT

Edit More Info

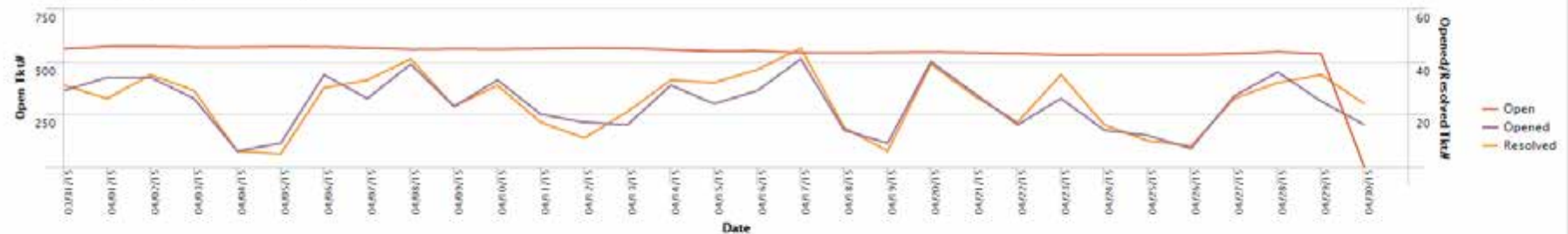
The Goal: Zero High/Urgent tkt and csr left open for more than one week

1m ago



Monthly Trend (High/Urgent tkt and csr)

1m ago



Top Ten Groups (Open, High/Urgent tkt and csr as of Yesterday)

1m ago

Group	<Day	<Week	<Month	<Year	>Year	Total	Avg_Days_Open
MSI-MSIS	0	0	2	44	130	182	806
PMT-MOS-ADMIN-SYS	0	0	0	16	22	38	494
MICHART-RESOLUTE-HB	2	3	3	15	4	27	171
MICHART-REPORTS	0	1	2	16	1	20	154
MSI-PROFEE	0	0	0	3	15	18	1045
ISO-NSS-TECHSECU	0	0	1	15	0	16	59
SSA-BIOMED-HOSP-OPER	0	1	2	3	8	14	707
PATH-INTERFACESERVICES	0	1	0	6	5	12	329
PATH-SYSTEMS-NETWORKING	0	0	0	6	6	12	438
MICHART-BEACON	1	0	0	10	0	11	71
Total	3	6	10	134	197	350	4274

Top Ten tkt and csr (Open, High/Urgent tkt and csr, as of Today)

1m ago

Ticket#	Date_Opened	priority	Group	class	item	Days
000000000423309	08/12/04	High	MSI-BIOCHEM	SECURITY	OTHER	3913
000000000544034	09/01/05	High	MGR-BSM-BAP	WEB DEVELOPMENT	OTHER	3528
000000000586348	12/12/05	High	MGR-BSM-BAP	MACROMEDIA DREAMWEAVER	NEED ASSISTANCE	3426
000000000600533	01/20/06	High	MSI-MSIS	NETWORKING	CLOSET SWITCH	3387
000000000603853	01/27/06	High	MSI-MSIS	OTHER	OTHER	3380
000000001063858	08/22/08	High	MSI-PROFEE	CORE IMAGE	CWDB (VTAM) UPDATE REQUEST	2442
000000001080965	09/25/08	High	MGR-BSM-BAP	CDR	ORACLE	2408
000000001092668	10/16/08	High	MSI-PHARMACOLOGY	SERVER-HARDWARE ISSUE	DNS	2386
000000001129861	01/05/09	Urgent	MSI-MSIS	IP ADDRESS	OTHER	2306

In the Beginning. . .

- First huddle: conference line problems, cancelled 12 minutes in
- First lesson: establish standing backup conference call arrangement for future
- Exposed processes lacking to monitor certain metrics in spite of data being collected and available
- Tracking action items and ensuring follow-up
- Exposed silos of information - requires everyone to be on same page with data and issues (i.e. online dashboard)



In the Beginning. . .

- Learning what to mention/raise so not just management check-in but truly surfacing problems
- Able to highlight something that needs escalation vs getting lost in volume of email (i.e. key contract requiring UM CFO signature)



Early Results

- Team motivated to reduce meetings, email volume
- Getting the twice a week huddles on everyone's calendar was a challenge
- Causing us to rethink the purpose and value of current leadership meetings
- Awareness among staff that leadership cares about time-to-resolution



Revised Approach

- PDCA in June led to changes
 - Assign problem solving and hold accountable to return
 - Tasks need single owner
 - Leave phone line open for further conversations as needed
 - Ensure resolution at staff level when possible, not always escalate to huddle
- PDCA late 2015 led to additional changes
 - Script changed to 10 second follow-up and roll call
 - Increased connection to daily hospital leadership huddle
 - Improved tracking of follow-up items
 - CIO led

Learning from Others – Menlo

- Quarterly IT leadership retreat focused on our lean journey – in particular visual management
- Site visit to Menlo was cornerstone
- Irony of software company using so much paper and manual tracking processes
- Debrief on what we learned and our action plan

Menlo Site Visit



Hospital Leadership Huddles

- Started Mid-September as part of Daily Management System being developed
- Held daily at 10:05AM following the two facility based patient safety huddles
- Format:
 - 10 second follow-ups
 - Patient safety huddles report out
 - Roll call
- Close tracking of short and long term follow-up items
- In person in centrally located conference room with phone option for offsite participants
- Summary published within few hours
- Learned from them and vice versa

Hospital Leadership Huddles

Ground Rules

- Phones on vibrate and all electronic devices put away for huddle time
- Start on time/ end on time
- Follow roll call standard work
- One person speaking at a time---no side conversations
- Listen while others report
- Keep report short and to the point---30 seconds or less
- Problem identification in the huddle- problem solving outside the huddle
- Only report if there is something to escalate to this group for awareness or problem solving --- it's okay to have nothing to report
- Attendance in person is preferred, only call in where impossible to attend
- No alternates unless you are out of town
- No guests or observers other than huddle support staff for now; designated alternates may come for learning

Phone line Ground Rules

- Put phone on mute
- Do not put phone on hold
- If late do not announce arrival
- Wait for your name during roll call to bring forward issues
- At the end of roll call the lead will ask if anyone arrived late- you can announce your name for attendance and bring issues forward at that time

ID	Open Date	Issue Description	Owner	Next Step	Due Date
★ 9/14		Lesser phones planned updates / billing update			9/20/14
9/21		Re-read for P4 30 mins for C.W. (OCS)	30802	Using morning 30 min	10-12
9/18		Lab issue: roll from ED	Joese	Add: Bring up/roll from ED	10-12
9/22					
9/21					
9/23		Stress of system: 2 entered M. Chart	Karen W	Investigate system	9-30
★ 9/24		EO Plan out of time per overnight	Sharon R	Bring up system: 20 min, 10 min	9-21
9/24		Outliers: 40 min from medical	Stephanie	Jeff & Stephanie with team	10-15
9/24		Investigate: "Signs" & "Key Pages" & list of drop pages	Karen W	Review: Sign in	10-2
9/24		... (scribbled out)	Closed
★ 9/25		Admit Bed are broken 3 bed reformed in system	Marie C	Review: 10 min, 10 min	9-30
9/28		Phone: 10 min from medical, 10 min from ED	Phyllis C	Review: 10 min, 10 min	9-30
9/29		10 min from medical, 10 min from ED	Connie	Review: 10 min, 10 min	9-30

Date: 9/17

State of C.W.:
Projected Beds: 34
Holding in ED: 9
High Occupancy: No, Bed Care, Tels, ACU
B1 Overflow: (Circled) (Circled) (Circled)
ED Transfers: (Circled) (Circled) (Circled)
OSH Transfers: (Circled) (Circled) (Circled)
OR Cases: Add/Dis: (Circled) (Circled) (Circled)
Unavailable Beds Due To:
Facility: ACU, Tels, GenCare, VVM
Staffing: ACU, Tels, GenCare, VVM

Date: 9/17

State of C.W.:
Projected Beds: +44
Holding in CES: 0
High Occupancy: No, Bed Care, Tels, ACU
CES Transfers: (Circled) (Circled) (Circled)
OSH Transfers: (Circled) (Circled) (Circled)
OR Cases: Add/Dis: (Circled) (Circled) (Circled)
Unavailable Beds Due To:
Facility: ACU, Tels, GenCare, VVM
Staffing: ACU, Tels, GenCare, VVM

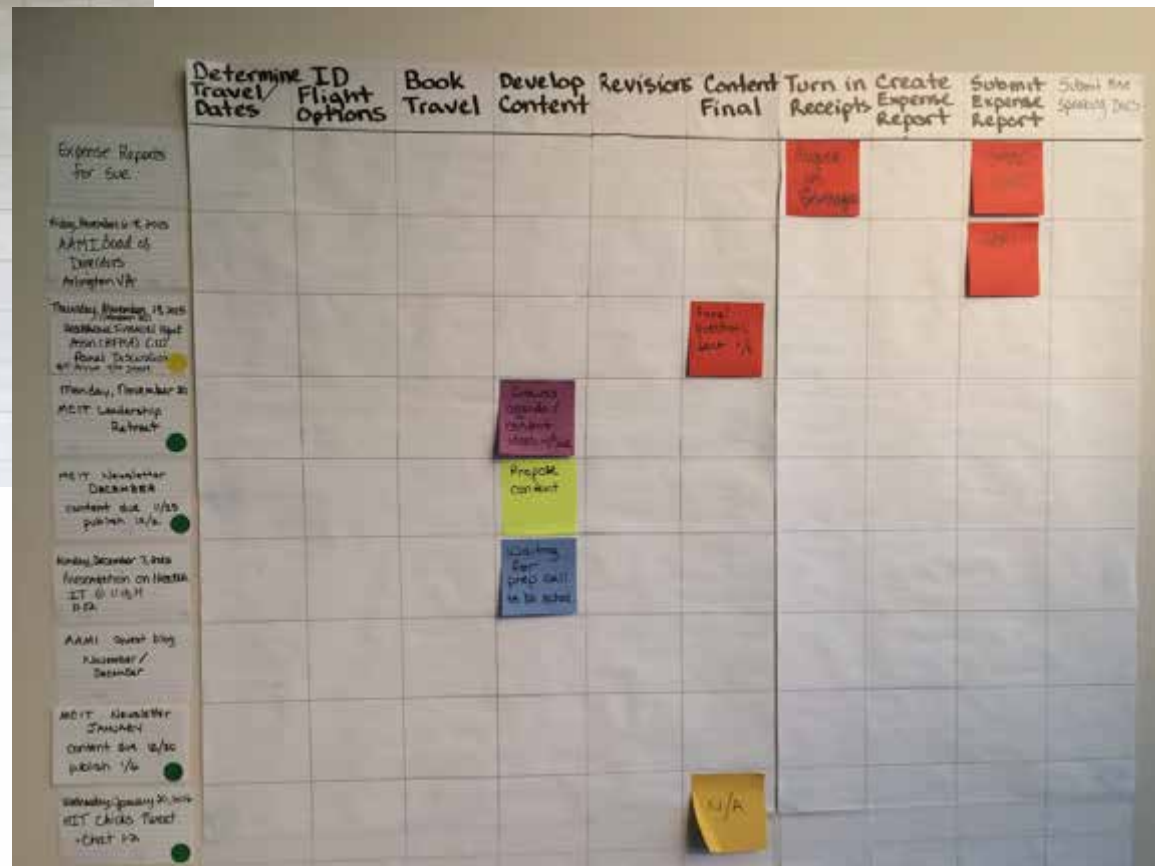
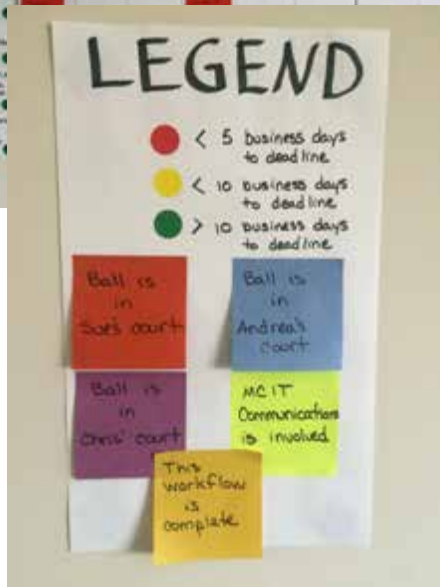


Office of the CIO Visual Board

- Scope: CIO driven initiatives requiring staff support
- Small team in one physical location
- Numerous examples of shared tasks falling through the cracks and scrambling at last minute
- Two support staff broke down the common tasks involved in our shared work and who typically does what. Chris helps with a lot of content and Andrea handles logistics.
- Comments from many about irony of CIO using manual visual board with sticky notes and markers
- Added in communications team
- Other department admins visited to learn

Office of the CIO Visual Board

“Keep it simple but visual”



View from Staff

Andrea: “The visual board helps me when we are working on things as a group. I know who owns each task and I can look at the board to see the due dates.”

Chris: “I was excited about starting the board because sometimes it was hard to remember ‘Who’s on first?’ with all the different commitments. It is great to walk in and see exactly where each project is at, and who has the next step. Because we use color, I can tell instantly if I have a lot to do, and how soon. One unexpected advantage is handoffs. Our work is like a Venn diagram: there are three of us, and sometimes the work belongs to just one person, or two, or all of us together. Before the board, it wasn’t always easy to know this. Now, because we look at the board together, these handoffs and downstream impacts come up naturally in conversation.”



Spreading the Word

- CIO blog covered Lean often – many staff subscribed
- Monthly IT staff newsletter now includes Lean feature
- Goals:
 - Educate
 - Raise awareness amongst staff
 - Show commitment from leadership to our lean journey and experiments

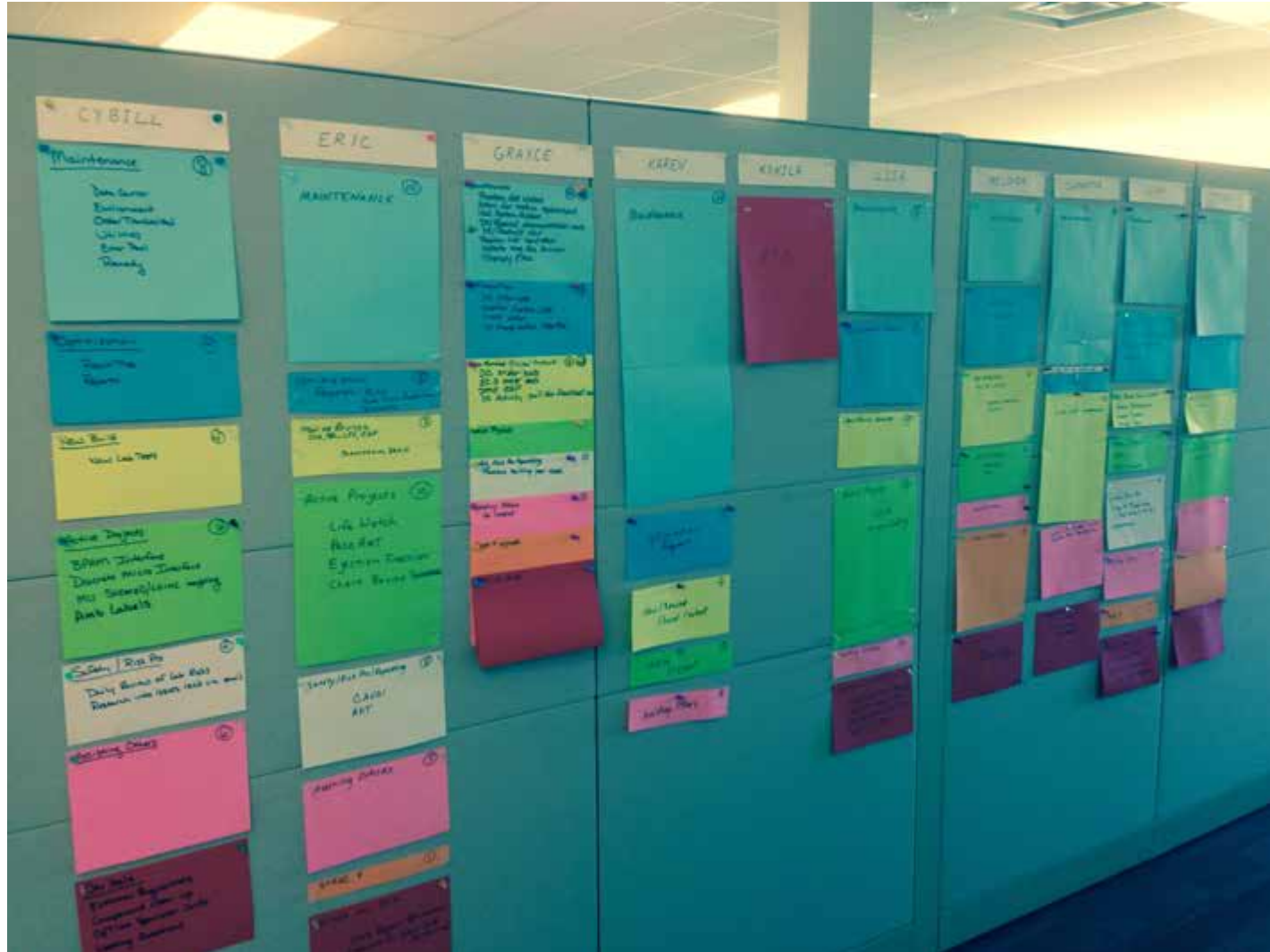
IT Experiments

- Huddle and visual board experiments spread in IT as managers heard from leadership and considered what their teams could do
- Order Entry team started a resource planning board
- Training Services team started huddles 3 times per week and dealt with challenge of staff being in many different locations
- Key metrics: number of open tickets, number of classroom training sessions, training satisfaction, & % of classroom surveys completed

Order Entry Team Resource Board

Key:

- Color coded for different categories of work
- 1 inch = 1 hour
- Max 32 hours per week



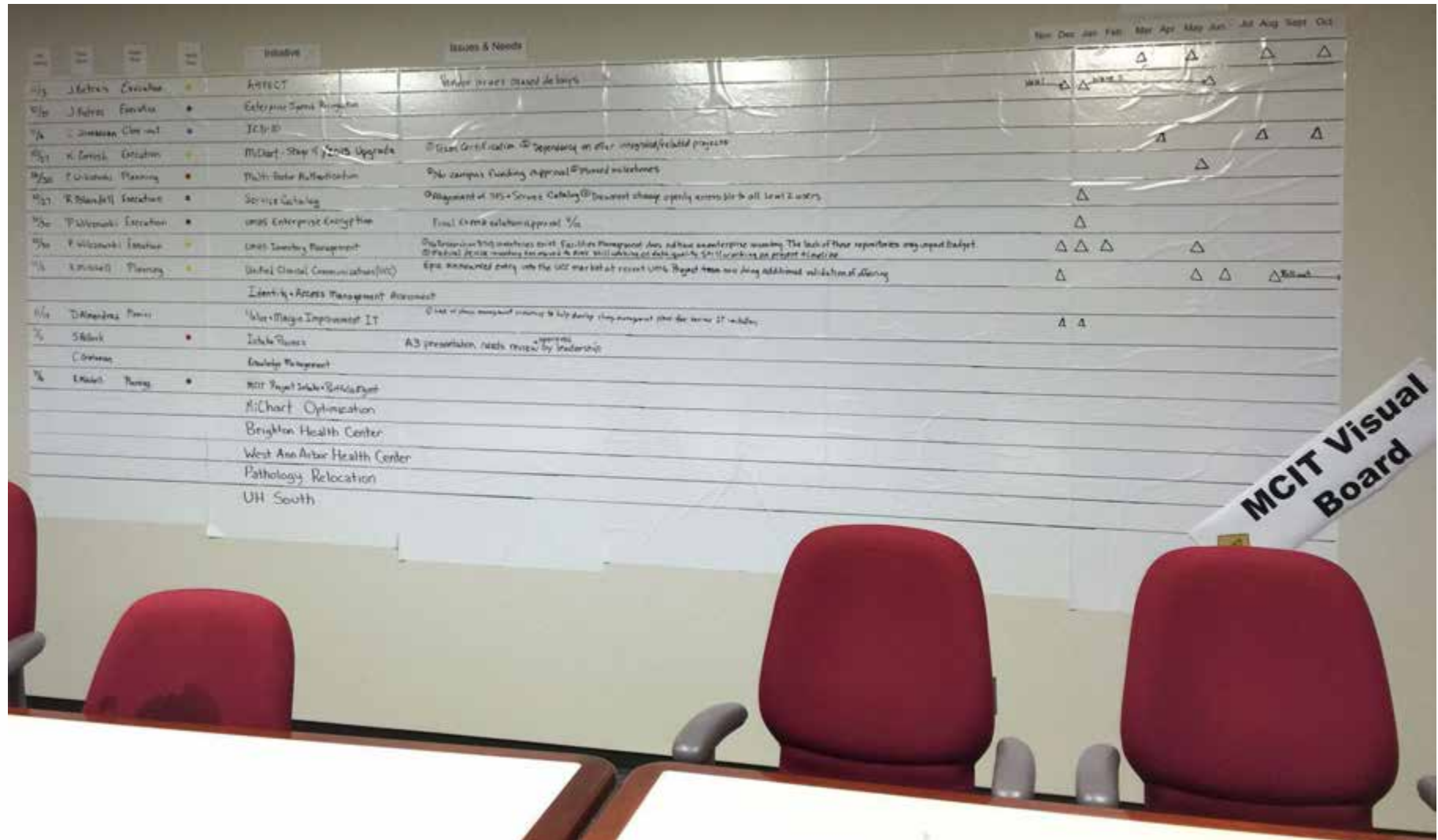
Major Initiatives Visual Board – The Problem

- Hub and spoke model with CIO
- Silos in spite of focused efforts to break them down
- Leaders focus on own projects accountable for
- Not as aware of interdependencies as needed
- Need frequent review of project health by leadership team

Major Initiatives Visual Board: Getting Started

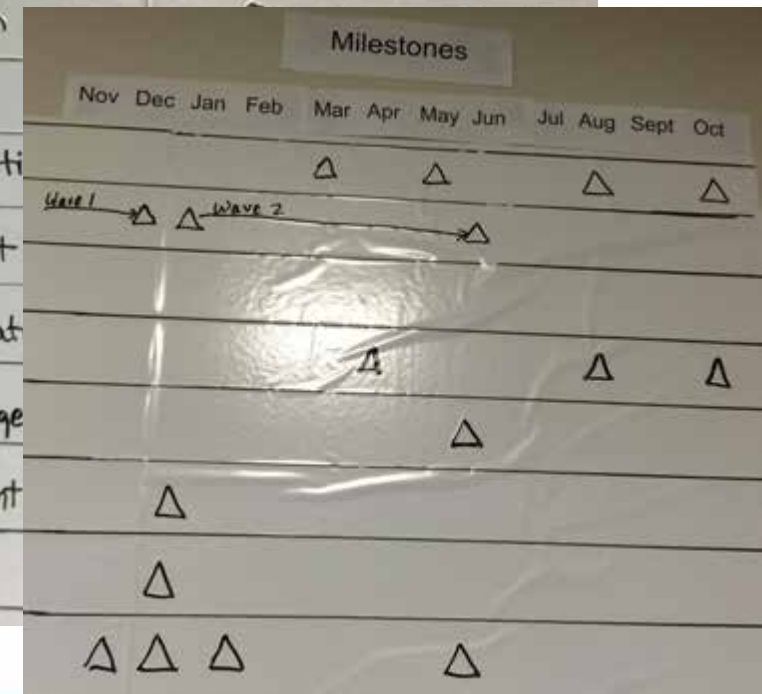
- Bi-monthly written Major Initiatives report to senior leadership
- Determining which of the Major Initiatives should be on visual board
- Not fancy, just the basics – markers, lines, sticky notes
- Early resistance to manual board and thinking it was duplicate effort
- Staleness of it after 1 month

Major Initiatives Visual Board – Initial Version



Major Initiatives Visual Board – Initial Version

Last Updated	Status Owner	Project Phase	Health Status	Initiative	Issues & Needs
11/3	J. Pietras	Execution	●	ASPECT	Vendor issues cause
10/29	J. Pietras	Execution	●	Enterprise Speech Recognition	
11/6	C. Ormanian	Close-out	●	ICD-10	
10/27	K. Cornish	Execution	●	MyChart - Stage 4 / 2015 Upgrade	① Team Certification ②
10/30	P. Wilczewski	Planning	●	Multi-factor Authentication	
10/27	R. Blaisdell	Execution	●	Service Catalog	
10/30	P. Wilczewski	Execution	●	UMHS Enterprise Encryption	
10/30	P. Wilczewski	Execution	●	UMHS Inventory Management	
11/3	K. Mitchell	Planning	●	Unified Clinical Communication	
				Identity & Access Management	
11/10	D. Almendras	Planning		Value & Margin Improvement	
11	S. Billock		●	Intake Process	
	C. Ormanian				



Major Initiatives Visual Board: Refining

- Push to keep it current and use it in meetings and huddles
- Set expectations and provide broad direction but let program owner manage it
- PMO switched to printed/plotted version generated from system
- Installed tackboard strip to hang it up
- Rolling 9 months vs set 12 months
- Ok to write on it

Major Initiatives Visual Board – Next Version

- Last Update
- Project Name
- Status Owner
- IT Executive Owner
- Phase
- Health Status

Last Update	Project Name	Status Owner	IT Executive Owner	Phase	Health Status	Notes / Details / Next Steps / Other
1/15/2015	Asset Mgmt System Enhancement	Patric, Jacob	Hollingsworth, Karen	Execution	●	Ready infrastructure and functionality to be tested. Vendor was encountered with "technical" upgrade
12/16/2015	Reggie Health Center	Strong, Mitch	Kaplan, Brian	Planning	●	
11/12/2015	Enterprise Spectra Migration	Patric, Jacob	Hollingsworth, Karen	Execution	●	
	Identity and Access Management		Kryza, Joe	Initiation	○	
12/16/2015	Phone Project	Pollock, Sally	Pollock, Shash	Planning	●	All items approved at OMT on 12/16/15. No
12/17/2015	Knowledge Management	Omanon, Carolyn	Pollock, Shash	Planning	●	12/18/15 Creating Knowledge Management implementation
	McAfee Optimization - Business	Sanderson, Tim	Hollingsworth, Karen	Execution	○	
	McAfee Optimization - Clinical	Remick, Carmen	Hollingsworth, Karen	Execution	○	
12/17/2015	SACD-2 Stage 1	Cornish, Kathleen	Hollingsworth, Karen	Execution	●	Issue: App built outside agent build build 1.1. New security have presented this week a design, adding another server to add Project readiness is receiving daily update information is required to make progress. Substantial Patient build resource that The status was moved from HCL to TSL 1. However, delayed funding may delay work
12/17/2015	MultiFactor Authentication	Wickens, Peggy	Kryza, Joe	Planning	●	
12/16/2015	Pathology Relocation	Strong, Mitch	Kaplan, Brian	Planning	●	Need Decision on which group will support January
12/11/2015	Service Catalog	Boesdal, Ron	Pollock, Shash	Execution	●	1. How does the SCS and the Service Catalog 2. Document storage need to create a docs Create document storage system - Link C
12/18/2015	UH South Level 5	Strong, Mitch	Kaplan, Brian	Planning	●	
12/18/2015	UH South Level 8	Strong, Mitch	Kaplan, Brian	Planning	●	
12/11/2015	UAMS Enterprise Encryption	Wickens, Peggy	Kryza, Joe	Execution	●	Presented Remote Media (final project) recent approve 11/10/2015.
12/18/2015	UAMS Inventory Management	Wickens, Peggy	Kryza, Joe	Execution	●	o No Release at BYOD inventory as it o Hardware may impact our budget. o Medical Device inventory has migrated encrypted report. Still working on project o Document that we'll use the BYOD as o I received a sample Apple extract for the
12/17/2015	Unified Clinical Communications (UCC)	McAfee, Kathy	McPhail, John	Initiation	●	Issue: Epic announcement regarding ending project next steps. Next Steps: Capture Epic product meeting (Denon) (Project Sponsor) Site Date: HSCOO 12/16/2015 Meeting Change management resources need to be
12/17/2015	UHS IT Project	Almehrik, Oak	Kaplan, Brian	Planning	●	EC Presentation date moved to 2/10/16 to be implemented in place
12/18/2015	West Area Infor Health Center	Strong, Mitch	Kaplan, Brian	Planning	●	

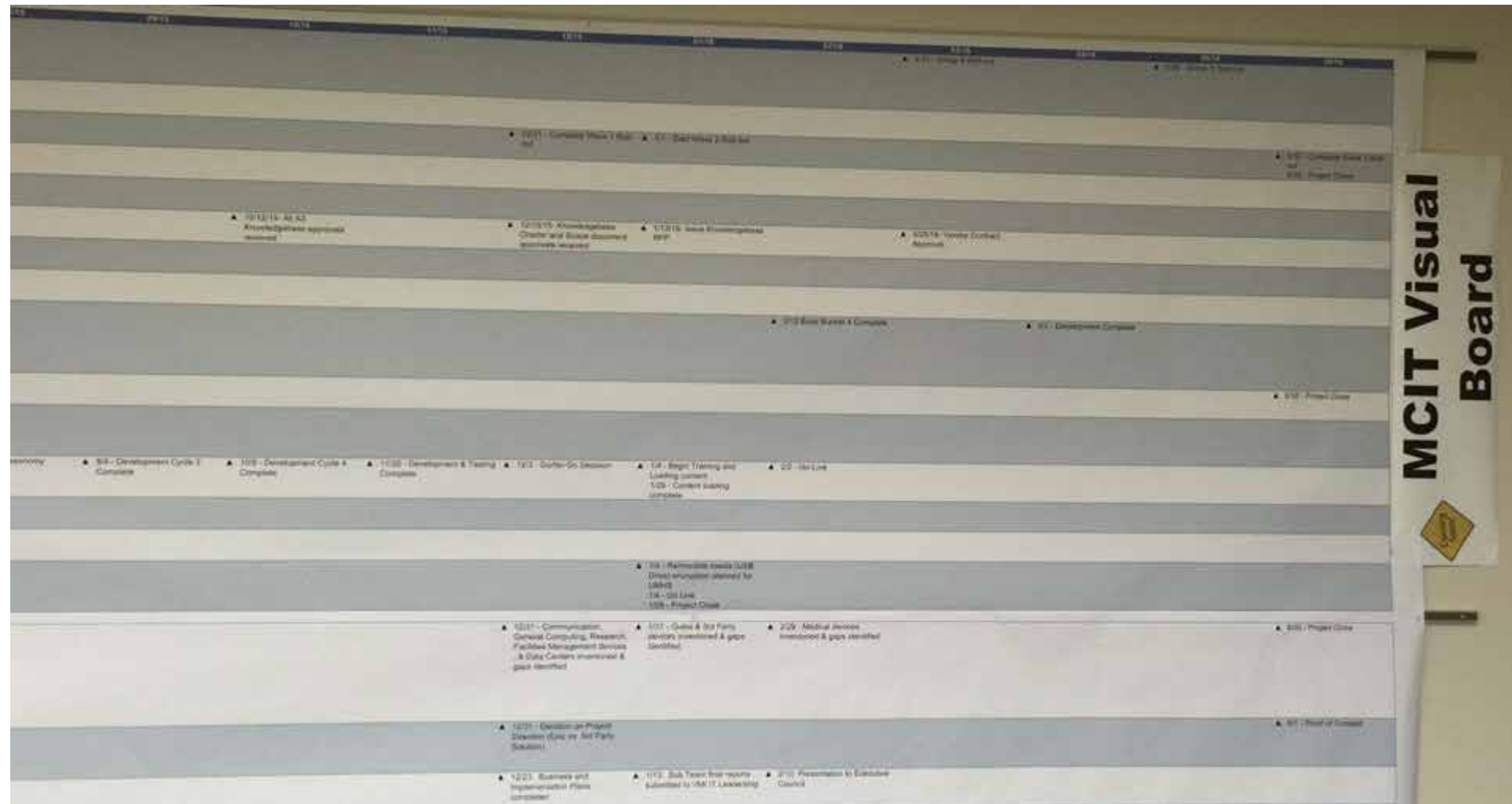
Major Initiatives Visual Board – Next Version

Issues:

- Needs
- Owner
- Next Steps
- Due Date

A3 was approved at OMT on 12/9/15. Team working on implementation scope, strategy and timeline.
12/18/15: Creating Knowledge Management Tool RFP for vendor submission. Request is for pilot and full MCIT/MSIS implementation.
<p>Issues:</p> <ul style="list-style-type: none">-App build overdue against build bucket 1 and 2 milestones.-New resource issue presented this week when the recently Radiant AC resigned, requiring updates to build task assignments, adding another barrier to addressing overdue build timelines.-Project leadership is receiving daily updates on build progress to provide more transparency into status, and identify what intervention is required to make progress.-Supplemental Radiant build resource support is being requested (2RadiantACs) to mitigate <p>The status was moved from RED to YELLOW since Campus funding was approved. However, delayed funding may delay overall project timing. More info to come.</p>
Need: Decision on which group will support this project: MSIS, MCIT RDC, MCIT MDC - Christine to schedule meeting January
<p>1. How does the SIS and the Service Catalog align</p> <p>2. Document storage need to create a document storage location that will be openly accessible to all with a Level 2 IT</p> <p>Create document storage system - Linda Cox - 12/04/15 - completed 12/28</p>

Major Initiatives Visual Board – Next Version



Major Initiatives Visual Board: Lessons Learned

- In conference room where leadership team regularly met and seen by many others
- Importance of transparency
- Use during huddles and leadership meetings – focus where project health either red or yellow
- Ask: What help is needed to move red to yellow and yellow to green?
- Challenge of getting group ownership vs leader ownership
- Not everyone based at that location

Daily Management System Pilots

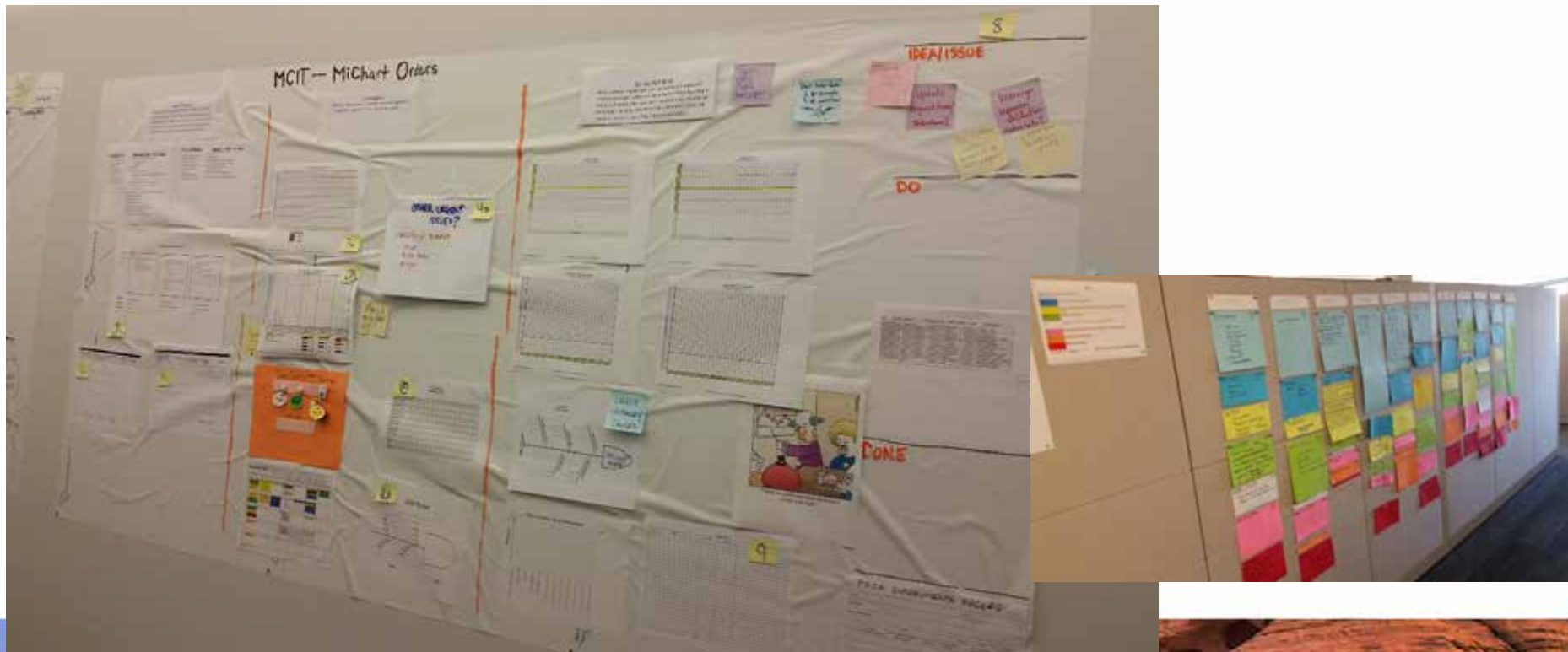
- Goal: Develop Lean Daily Management System in IT
- 5 vertical teams participated in DMS workshops led by lean coaches:
 - Order Sets
 - Data Courier
 - Apps Packaging
 - Network Architecture
 - Reporting
- Vertical teams ensure all leadership levels involved

DMS Team for Order Sets



Huddles: Daily at 2:05
Go Live: Nov 9
Metrics: Order-sets - simple – 2 wk TAT
Order sets – complex – 6 wk TAT

- Defining “simple” and “complex” order sets
- Tracking and understanding barriers to meeting TATs
- Regularly including review of workload visual



2016 - Applying to New Organization

- Early experience and observations at University Hospitals
 - System level Operations Effectiveness (OE) group
 - My initial exposure at Operations Committee – Week 2
 - Hospital presidents presented patient satisfaction 2015 metrics and 2016 plans
 - Visual management and huddles in place throughout community hospitals
 - No visual board at corporate office except in OE area
- OE provides well documented guide that includes information on huddles, visual boards, gemba walks
- Coming next – emphasis on executive leadership training at system level

IT Experiments to Start

- Potential champion:
 - One of IT senior leaders has Stanford lean experience
 - Same leader is already doing daily huddles and visual boards for monitoring project and issues
- After first several weeks – clear how huddles and visual board can help address gaps in IT
 - Silo projects lacking close review of interdependencies
 - Hub and spoke approach with CIO vs cross team communication
 - Planting seed with IT leadership
 - Drafting list of projects with high impact, visibility, and interdependencies

Key Takeaways / Lessons

- Leader as champion
- Need to be vocal and visible
- Limits of “just do it” approach
- Need for overall program owner and driver to partner with
- Letting go so others can develop and shape it
- Willing to experiment and not get stuck on perfection
- Be patient but persistent
- Ownership by the entire team
- PDCA

Reflecting On and Sharing My Journey

- On the Lean Journey – August, 2014
- Importance of Rounding or Going to the Gemba – August, 2014
- Making Time for Reflection – November, 2014
- Leadership Huddles: Not Just Another Meeting – March, 2015
- So What's the Problem – A3 Thinking – July, 2015
- Leaders Learning Lean – Time for a Field Trip – July, 2015

Reflecting On and Sharing My Journey

- Go to the Gemba, Seek to Learn – August, 2015
- Reducing Costs While Increasing Value – September, 2015
- Are We Ready for the Business of the Day – October, 2015
- October is Quality Month – October, 2015
- Quality Month: Sharing Improvement Stories – October, 2015
- Keep it Simple and Visual – November, 2015



- Email me at sue.schade@uhhospitals.org or sue.schade@nwhadvisors.com
- Follow me on Twitter **@sgschade**
- Check out my blog, *Health IT Connect*, at www.sueschade.com