Lean Healthcare and the Bridges Lens: A New Model

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Today’s Objectives

- Attendees will:
  - Enhance knowledge of Bridges to Health and Healthcare
  - Examine a method for operationalizing the BTHH Lens
  - Gain understanding of basic Lean Sigma tools
  - Gain insight regarding a model for using Lean Sigma logic to implement the Bridges Lens in healthcare
BRIDGES to Health and Healthcare: New solutions for improving access and services

Part One: Approaching the Bridge
Part Two: Courageously Crossing the Bridge

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Viewing the Impact of Economic Class on Health and Healthcare

POLICY

Individual  Institution  Community
It's all about Efficacy …

Can you deliver on your promises to:
• The Patient
• The Payer
• The Community
• The Institution
• The Staff

Economic Class and Health: Poverty Matters

- **INDIVIDUAL**
  - Personal and professional mission

- **INSTITUTION**
  - Response to POLICY

- **COMMUNITY**
  - Impact of economic and cultural diversity on health and disparate resource consumption

- **POLICY**
  - Erosion of financial and human capital
FYI: Use of Accurate Models

- Bridges is not a program
- Bridges is a “lens”
- The lens defines economic class environments
- The mental models include poverty, middle class, and wealth
- Interventions do not work when models are inaccurate

IT’S NOT ABOUT LACK OF EFFORT OR ENERGY!

- $$
- Policy changes/legislation
- Innovation/research
- Sophisticated diagnostics
- Sophisticated treatments
- Advanced technology systems
- Professional training
What Does a Rut Look and Feel Like?

- Trying harder and harder
- Obtaining significantly fewer new results
- Everybody feels it, even the “thinkers” and consultants

Why Are We Stuck?

**Two Possibilities:**

1. We didn’t try hard enough, use the right technique, or get enough information
2. Our thinking processes and imagination are stalled in gridlock
Escaping the Rut

When self, institutional, or community intentions seem to fail, use the Bridges lens to ask these three questions:

1. Could this be a failure of **not knowing** what to do?
2. Could this be a lack of **power** because of rules, policy, or legislation?
3. Could this be a failure of **not knowing how** in the absence of a structure that allows for creativity?

The Best Customer Service Model

- **Quality**—Good product value for price
  Value-based purchasing programs
- **Understanding**—Knowing the Customer
  Joint Commission Diversity and Cultural Competence
- **Clarity**—What you want the customer to experience, to think, to be, to do
  Advanced Patient Satisfaction Surveillance/CRM
- **Delivery**—Skill in delivering the desired experience/outcome
- **Change**—Identifying and making necessary changes in the product and delivery model
  Hospital Readmissions Reduction Programs
At your table, select a single change in operational strategy to address ACA and CMS changes or care requiring both effort and energy during the last 3 years. See if it passes this test. Were these efforts:

- Effective
- Patient centered
- Timely
- Efficient
- Accessible
- Did they help the bottom line??????
How might you “operationalize” a lens?

Defining Lean Sigma

- A logic method used to
  - Decrease waste
  - Increase efficiency
  - Standardize process for sustainability
  - Assign accountability

- Originally used in manufacturing and business, now widely accepted in healthcare
Why Bridges with Lean Sigma?

- The Bridges Lens is a concept designed intentionally to allow for distinct use by individuals, institutions, and communities.
- The intent of Bridges is that it allows for the uniqueness for each community.
- Lean Sigma is a logic model for implementation that is known in healthcare, as well as business and industry.
- While Lean Sigma tools provide structure, they are intended to be used to assist in process quality improvement in any area.
- Lean Sigma logic can assist communities, business, and industry to implement Bridges Lens concepts in a way that is familiar to them.

Bridges Framework Lens

Individual Lens

- Identify Current State
- Ideal Future State
- Building on strengths, develop a plan to reach Ideal Future State
- Identify and Analyze Current Resources
### Lean Healthcare Process Model

- **Current Work Process**
- **Ideal Future State Process**
- **Analyze current process to identify Waste & Pinch Points**
- **Involve key players, review current work process to eliminate waste and pinch points working toward goal of Ideal Future State Work Process**

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### SIPOC Tool

<table>
<thead>
<tr>
<th>Suppliers</th>
<th>Inputs</th>
<th>Process (Current or Ideal Future State)</th>
<th>Outputs</th>
<th>Customers</th>
</tr>
</thead>
<tbody>
<tr>
<td>In this column, identify the suppliers for the inputs listed in the inputs column.</td>
<td>In this column, identify the inputs (products, supplies, and/or resources needed to complete the major steps of the process listed in the center column.</td>
<td>In this column outline the major steps within a given work process.</td>
<td>In this column, list the major outputs (products, services, etc.) for the steps of the process in the center column.</td>
<td>In this column, list the customers who will receive, or benefit from, the outputs in the preceding Outputs column.</td>
</tr>
</tbody>
</table>
### SIPOC Tool with Bridges

<table>
<thead>
<tr>
<th>Suppliers</th>
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<th>Individual’s Current State or Ideal Future State</th>
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</tr>
</thead>
<tbody>
<tr>
<td>In this column, identify the suppliers for the inputs listed in the inputs column.</td>
<td>In this column, identify the inputs (products, supplies, and/or resources needed for the resources listed in the center column.</td>
<td>In this column outline the individual’s current resources - Financial - Emotional - Mental/Cognitive - Spiritual - Physical - Support Systems - Relationship/Role models - Knowledge of hidden rules - Language/formal register</td>
<td>In this column, list the major outputs of the resources listed in the center column.</td>
<td>In this column, list the customers who will receive, or benefit from, the outputs in the preceding column.</td>
</tr>
</tbody>
</table>

### Table Talk

- Working with your table:
  - Identify a Process in your healthcare institution/community that would benefit from a SIPOC
  - List the Outputs, and then the Customers
  - List the Inputs and the Suppliers
  - Looking through the Bridges Lens, discuss how the SIPOC tool may be of use in your community?
6S – Another Tool

- **Sort**
  - In this step, items not used for a period of time, which are not needed, are weeded out.

- **Set-in-order**
  - Useable items are organized in an organized manner and are marked with a label indicating this is where a particular item should always be placed.

- **Shine (or Scrub)**
  - This step creates clean, well-maintained areas for storage of the items.

- **Standardize**
  - Guidelines and protocols to assure area remains as outlined in the Set-in-Order and Shine steps.

- **Sustain**
  - Creates a process to assure long-term adherence to the process through audits.

- **Safety (This 6th step is often included in healthcare)**
  - Includes a review of process to assure it focused on utmost safety for customers.

6S looking through the Bridges Lens

- **Sort**
  - In this step, communities identify barriers and issues that are no longer beneficial/friendly to the customer in poverty.

- **Set-in-place**
  - Community partners work collaboratively to set-in-place new systems that assist the customer in poverty.

- **Shine (or scrub)**
  - This step works through the glitches in the new system, assuring it is ‘clean’ and free of unnecessary steps for the customer in poverty.

- **Standardize**
  - Policies are developed that apply across community disciplines to standardize the process.

- **Sustain**
  - The Community Collaborative audits outcomes for specific system initiatives.

- **Safety**
  - Assure that changes promote enhanced safety for the customer in poverty.
Other Lean Sigma Tools—Bridges Lens

- A3 Tool
- Spaghetti Diagram
- Value Stream Mapping
- DMAIC

Implementation – Initial Phases

- **Spectrum Health – Big Rapids-Reed City**
  - Located in rural Michigan
  - Strong Lean Sigma philosophy
  - Strong interest in community needs
  - Discovery learning stage of Bridges Lens
  - Very interested in implementing the model
- **Northwest Michigan Chronic Disease Coalition**
  - Located in rural Michigan
  - Minimal Lean Sigma knowledge
  - Minimal Bridges Lens knowledge
  - Strong interest in exploring opportunities with this model to address current challenges with decreasing incidence of chronic disease in 10-county area
- **Boost Value Consulting, Steve Palmreuter**
  - Lean Expert believes it to be very helpful, especially in the home health arena
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Sources

- http://willowtreeadvisors.com/what-is-a-sipoc-analysis.html
- Knoth, Kurt, Spectrum Health Systems, Grand Rapids, MI.
- Palmreuter, Steve, Boost Value Consulting, LLC