

On the Field Leadership: Transforming People and Process

Chris Anibarro
Jennifer Becker
Aaron Dipzinski
Diane Simons



“The Promise of Lean”

Lean is not a program; it is not a set of quality improvement tools; it is not a quick fix; it is not a responsibility that can be delegated. Rather, Lean is a cultural transformation that changes how an organization works. It requires ***new habits, new skills***, and often a ***new attitude*** throughout the organization from senior management to front-line service providers. *Typically, the people in charge may have to change the most for a Lean culture to develop.*

Lean is a journey, not a destination. Unlike specific programs, Lean has no finish line. Creating a culture of Lean is to create an insatiable appetite for improvement; there is no turning back. With Lean, you will keep changing your definition of what “good” is.

-John Toussaint, MD
CEO ThedaCare
“The Promise of Lean in Healthcare”



Seattle Children's
HOSPITAL • RESEARCH • FOUNDATION

Leadership Inquiry

1. Who are you committed to being?
2. What possibility are you committed to creating?

A3 Proposal for Strategic Coaching

Title: CPI Strategic Coaching Model Proposal
Authors: Loan, Corrie, Kate, Jennifer B, Jennifer A.

Sponsor: Cara Bailey
Date: 11/10/13 v.5.

ISSUE Broaden CPI consulting model to include partnering closely with divisional leaders to deepen their CPI expertise and capabilities to support and coach their team to continuously improve.

BACKGROUND Current consulting model has supported a wedge-patch of activities that do not consistently tie to a strategic direction and do not have systems and infrastructure to sustain them. Partnership between consultants + divisional leaders varies depending on skills, experience of both parties. It's become apparent that a clear and intentional model is missing.

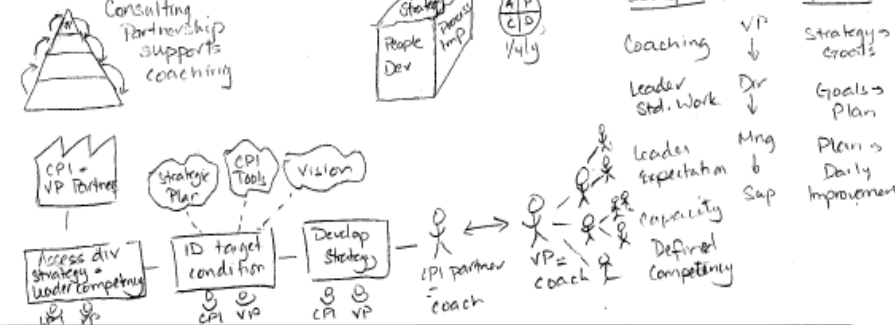
CURRENT CONDITION

Areas	Pharmacy	Diets	Ambulatory Operations	Operational GI	Psych	Deliv. Syst. ICU, Sec 2 PD	Research	IS	ORC
Client Roles	Manager Supervisor	Director Manager	VP Director Manager	Director Manager	Director Manager	Director Manager	Director Manager		Director Manager
Consulting Resources	Central CPI 100% FY2012 0% FY2013	Central CPI 63% of consulting hours	Local level leaders	Central CPI (2 @ each) CAA 80-90% GI 10-20%	Local level leaders	Central CPI (1 @ each) Del Sys 100% ICU 80% Sec 2 100% PD 100%	Research CPI	IS hired consultant	Central CPI 37%
Types of Activities	Building Hope driving improvement	Building Hope driving improvement	Replication of clinic Flow events Kate, A3 Growth metrics Production Board	Value Stream driving improvements	value stream coaching leaders A3	Building Hops drives improvement	Point Imp Value Stream visual systems		value stream A3

GOAL Create a consulting model for partnership between CPI coach and divisional leaders to develop + implement strategic CPI plan and to build infrastructure + competencies of leaders to execute plan.

- ROOT CAUSE ANALYSIS (Obstacles / Barriers)**
- Partnership between CPI consultant + divisional leaders have not been intentionally designed
 - Current consulting team and operational team do not have practical experience with this type of partnership.
 - No clear organizational roadmap and standards exist for leaders and consultants.
 - No consistent practice of integration exists between CPI and divisional leaders.

TARGET CONDITION



COUNTERMEASURES

- Develop + test intentionally design partnership between CPI consultant + divisional leaders
- Develop organizational roadmap and standards for partnership to address strategy, operational + competencies

IMPLEMENTATION PLAN (Objectives for Test)

What	Who	When	Outcome
1. Assess current state - use Shingo Model - VS Strategy, Improvement System and leadership competencies.		Month 1	
2. Create Vision + Challenge for VS - Process Improvement Strategy + plan - People Development Strategy + plan		Month 2 - 12	
3. Execute		"	
4. Measure success vs plan - check + adjust - report learnings		"	
5. Build roadmap + standards for coaching model		Month 9 - 14	

COST **COST BENEFIT / WASTE RECOGNITION**

Left Side - Current Condition

ISSUE Broaden CPI consulting model to include partnering closely with divisional leaders to deepen their CPI expertise and capabilities to support and coach their team to continuously improve.

BACKGROUND Current consulting model has supported a hodge-podge of activities that do not consistently tie to a strategic direction and do not have systems and infrastructure to sustain them. Partnership between consultants + divisional leaders varies depending on skills & experience of both parties. It's become apparent that a clear and intentional

CURRENT CONDITION model is missing. * CPI Consulting Hours - FY2015

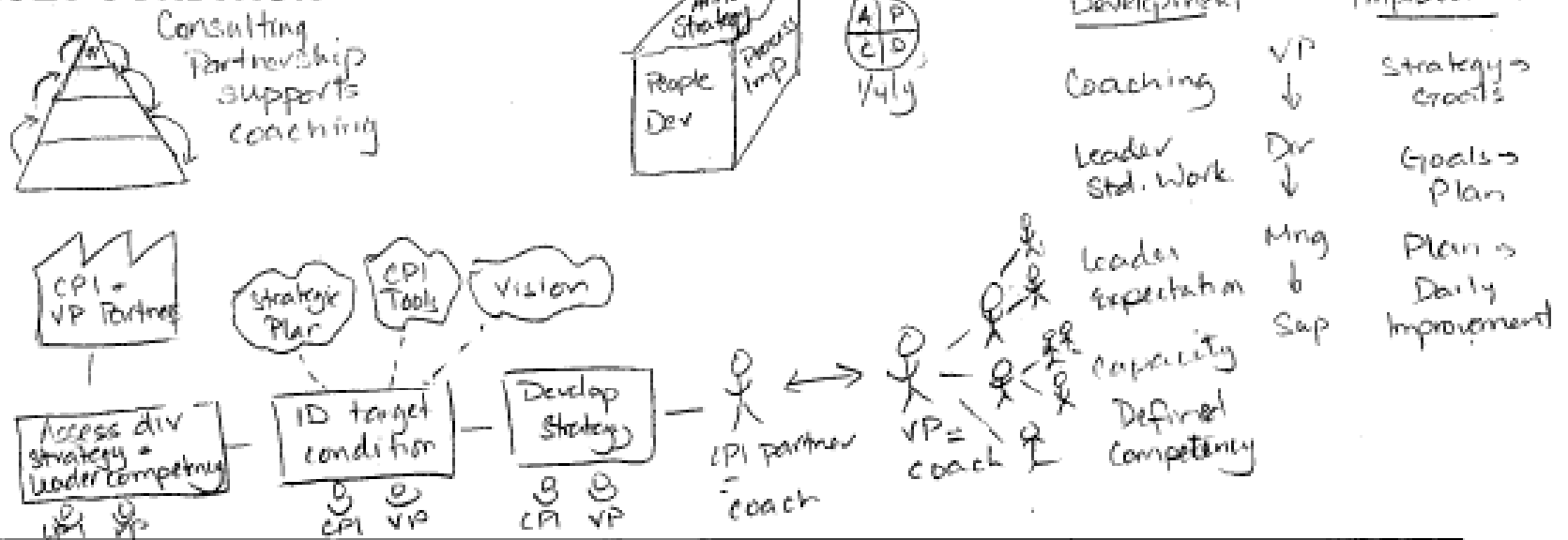
GOAL Create a consulting model for partnership between CPI coach and divisional leaders to develop & implement strategic CPI plan and to build infrastructure & competencies of leaders

ROOT CAUSE ANALYSIS (Interviews / Review) to execute plan.



Right Side - Target Condition

TARGET CONDITION



COUNTERMEASURES

- Develop + test intentionally design partnership between CPI consultant + divisional leader
- Develop organizational roadmap and standards for partnership to address strategy, operations + competencies



Leadership Vision

*All leaders as coaches/mentors
who develop people to improve
ambulatory business*

Leadership Challenge

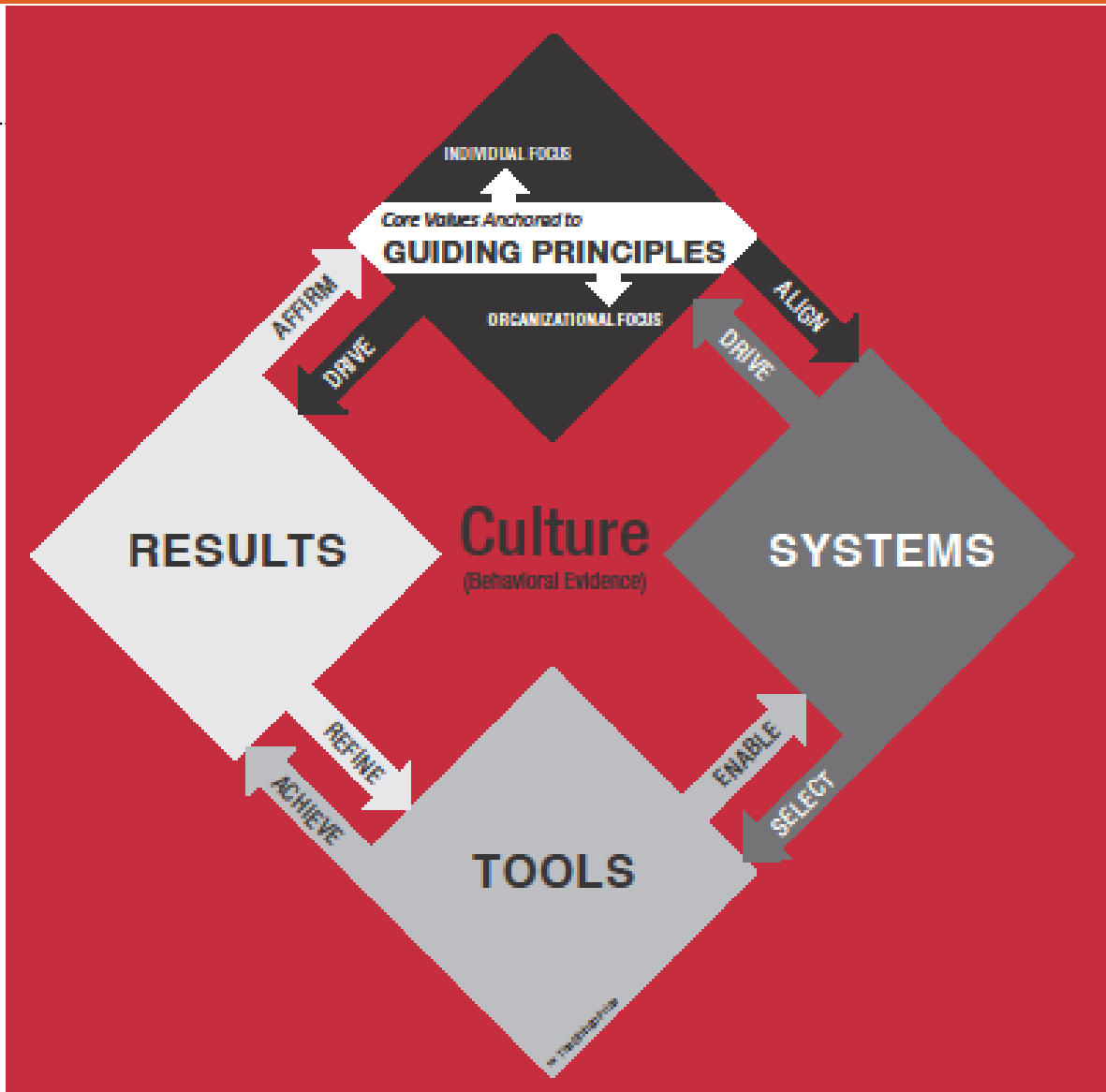
By the December 31, 2014, build a management system within the division where:

- Divisional goals linked from top to bottom throughout division
- All challenges support a future vision of the division
- Divisional leaders develop people to be adaptive problem solvers through consistent behaviors and standard tools

Improvement Routines



Grasping the Current Condition: The Shingo Model



Assessment Process

Cultural Enabler Focus		Systems	Questions	OBJECTIVE
1	Managers and supervisors are seen as mentors & coaches	Leadership Training Leadership Std. Work Coaching	Who do you go to when you have a problem? How do your supervisors/managers help you solve problems? How accessible are your leaders to work on problems? Tell me about how you have solved a problem with your supervisor/manager? Do you see the same problems continue to reoccur in your area?	<i>Enabling guided decision-making at the lowest level.</i>
2	Employees are empowered and recognized for signaling problems or defects that occur in their area.	Visual Management Suggestions/Idea Award/Recognition	What do you do when you see a problem in your area? What support do you receive when you are fixing a problem? When do you work on fixing the problems? Have you ever been awarded for detecting key problems in your area?	<i>Problems are owned and embraced by the workforce. Problems are seen as opportunities.</i>

Cultural Enabler Focus		0	1	3	5	OBJECTIVE
1	Managers and supervisors are seen as mentors & coaches	No evidence	Very little evidence that problems are made visible. Manager as problem-solver.	Manager leading problem-solving, engaging front-line staff	Significant problem-solving at lowest level of organization. Managers consistently acting as coach, asking Socratic questions.	<i>Enabling guided decision-making at the lowest level.</i>
2	Employees are empowered and recognized for signaling problems or defects that occur in their area.	No evidence	Few employees involved in signaling defects and problems, no recognition	Some employees are empowered and some recognition, or only in parts of the department	Significant # of problems and defects are identified and solved by employees, with visible and meaningful recognition.	<i>Problems are owned and embraced by the workforce. Problems are seen as opportunities.</i>

Understand the Direction: Visioning a New Future

Session Goals:

1. To elicit what present/future we currently create
2. To create a vision for yourself as leader [of a lean transformation]
3. To create a vision for the ambulatory division

Guiding Principles

- **Respect Every Individual**
 - Humans possess a *limitless* ability to create *new options*
 - Humans possess a *limitless* ability to *act*

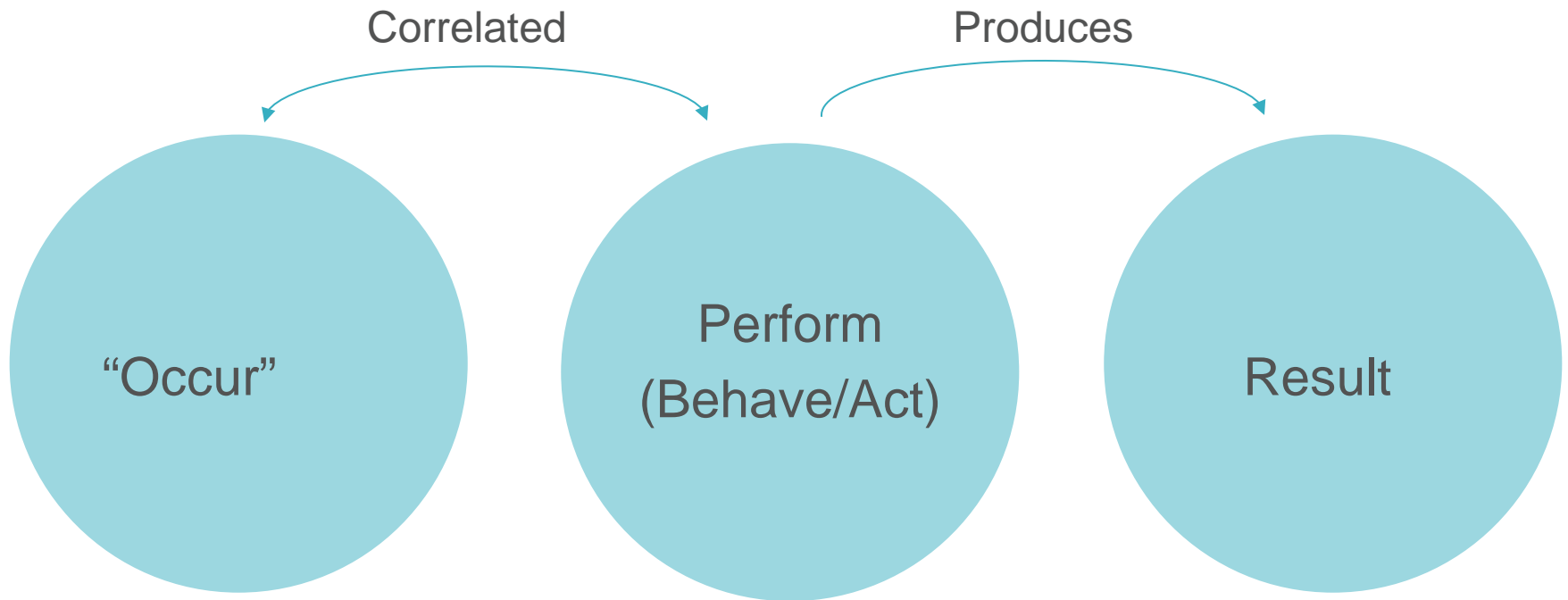
- **Create Constancy of Purpose**
 - Commitment to something bigger than oneself
 - Integrity is foundational

Leadership Distinction

“In the Stands”	“On the Field”
Talk about the game	Conversation is functional
Analyze, explain, describe, criticize, judge, rationalize, have feelings/vent, think we know	Generates movement, Directive (talk to each other)
3 rd person (them, they)	1 st person (living the game)
Has no impact on the game (little at risk/stake)	Has direct impact on the outcome (accountability/butt on the line)



How People Perform Correlates to How Situations Occur for People



<http://www.threelawsofperformance.com/>



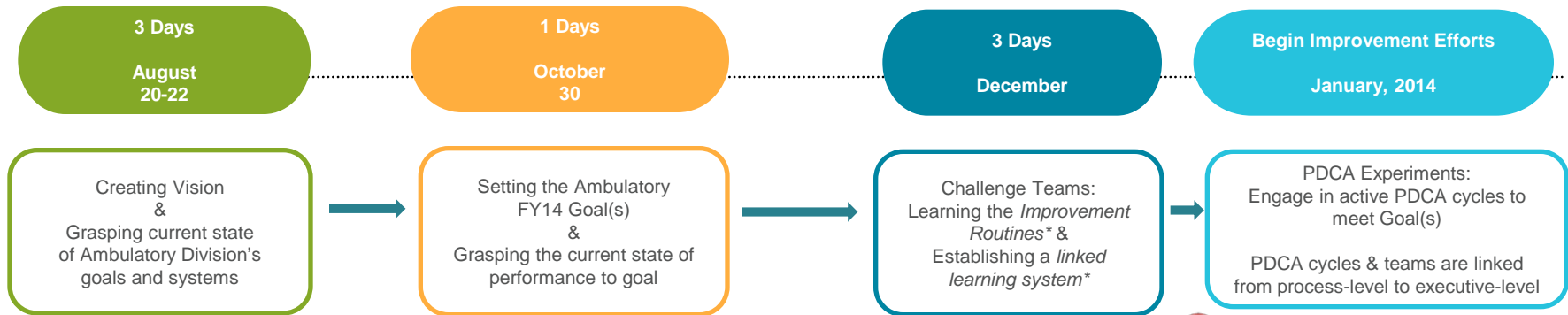
Seattle Children's
HOSPITAL • RESEARCH • FOUNDATION

Seattle Children's Ambulatory Services Vision

*Impacting Lives and
Delivering Limitless Possibilities*



Next steps on our journey



Day 1: (Current State)

- Review organization vision
- Review goals (strategic, hospital, etc)
- Review the current CPI activity in Ambulatory & results gained
- Review CPI system assessment results

Day 2: (Leadership)

- Individual leadership development

Day 3: (Vision)

- Divisional vision

Day 1: (Goals)

- Present FY 14 goal(s)
- Create FY 14 future state
- Identify goal owners and planning teams
- Begin capturing current condition of goals
 - What needs to be understood
 - Where to focus
 - Who needs to be involved
- Deploy challenge to areas & engage in catchball

Day 1: (Process Analysis)

- Training on analyzing process

Day 2: (Target Condition)

- Training on target condition
- Practice PDCA cycles

Day 3: (Coaching Structures)

- Establish actual coaching / learning structures
- Set actual 1st target condition

Set 1st Target Condition

**Improvement Routine= Sequence of actions, followed regularly, that result in improved performance.*

**Linked Learning System= Set of learning cycles (PDCA cycles) working together as parts of a interconnected network to achieve a stated vision and goal.*



“The Promise of Lean”

Lean is not a program; it is not a set of quality improvement tools; it is not a quick fix; it is not a responsibility that can be delegated. Rather, Lean is a cultural transformation that changes how an organization works. It requires ***new habits, new skills***, and often a ***new attitude*** throughout the organization from senior management to front-line service providers. *Typically, the people in charge may have to change the most for a Lean culture to develop.*

Lean is a journey, not a destination. Unlike specific programs, Lean has no finish line. Creating a culture of Lean is to create an insatiable appetite for improvement; there is no turning back. With Lean, you will keep changing your definition of what “good” is.

-John Toussaint, MD
CEO ThedaCare
“The Promise of Lean in Healthcare”



Seattle Children's
HOSPITAL • RESEARCH • FOUNDATION