PROCESS IMPROVEMENT
Webinar 2

For Dementia Care Programs

Sponsored by Division of Social and Health Services

Performance Excellence

- Washington State Quality Award (WSQA)
  - Champions the concepts and tools of the Baldrige Criteria as a strategic approach to excellence.
  - Patterned after the Baldrige Award and utilizes this model as the primary standard for performance evaluation and improvement.
  - One of approximately 35 state programs in the nation.

Logistics

- Voice options: phone (long distance charges), PC w/microphone or just listening
- Raising hand, lowering hand
- Questions and Chat
- Poling questions
- Recording webinar

Role Call

- Please answer poll question on screen
- Organization Name
- Name of participants
- Role of participant in organization

WSQA

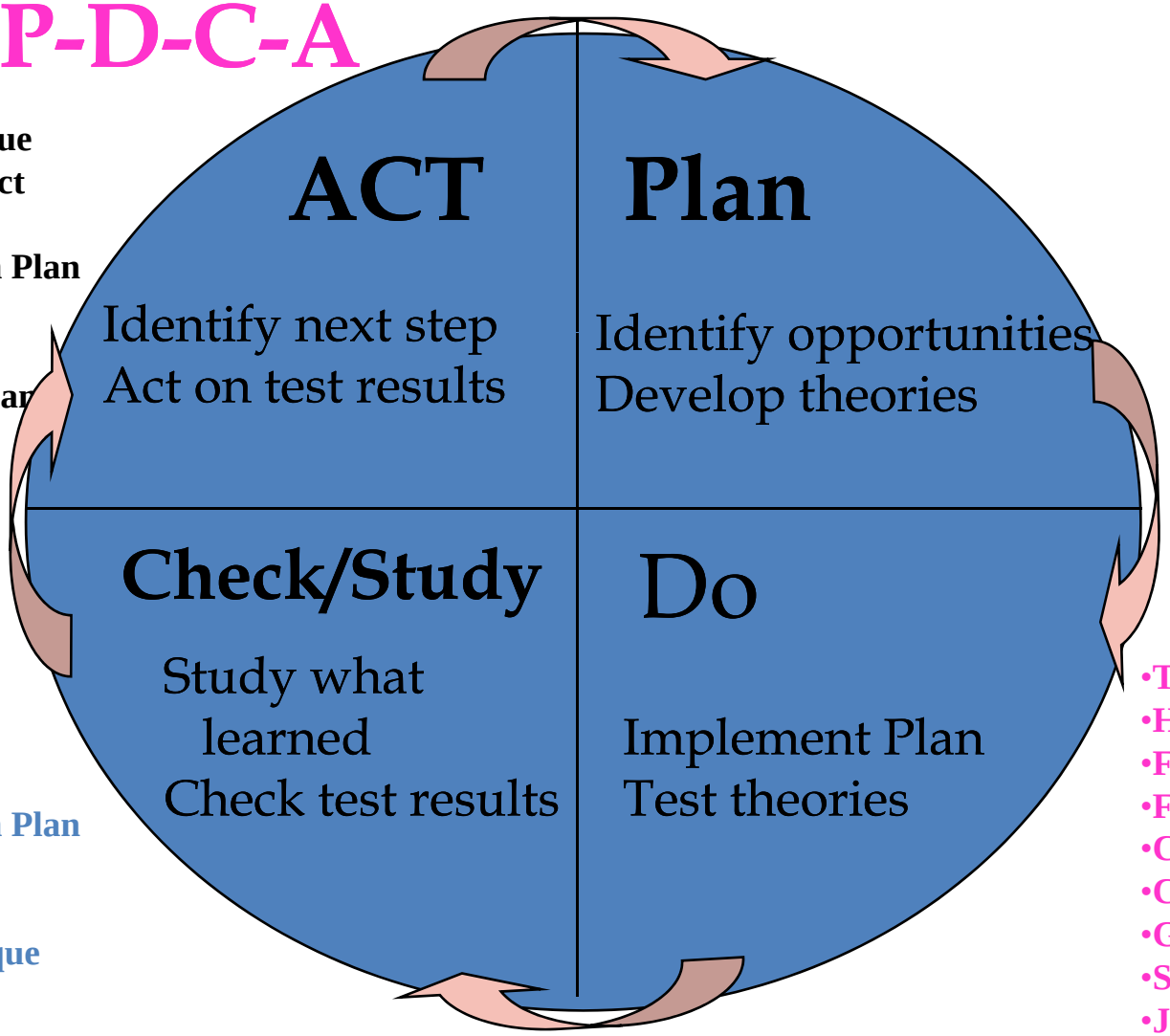
Non profit organization dedicated to improving the way we live, learn and work in WA by helping organizations improve through the use of the Baldrige Criteria for Performance Excellence

Problem Solving Cycle

P-D-C-A

- Brainstorming
- "Why" technique
- Cause and Effect
- Pareto Chart
- Data Collection Plan
- Check Sheets
- Sampling Plan
- Fishbone Diagram

- Check Sheet
- Flow Chart
- Interviews
- Surveys
- SIPOC
- Checklists
- Gaining Buy-in
- Data Collection Plan
- Sampling
- Fishbone
- "Why" Technique



- Brainstorming
- Check sheet
- AIM
- Histogram
- Pareto Chart
- Flow Chart
- Cause and Effect
- Problem Statement
- Surveys
- Fishbone Diagram
- SIPOC
- Prioritization Matrix
- Sampling
- Data Collection Plan

- Tick Sheet
- Histogram
- Flow Chart
- Force Field Analysis
- Contingency Diagram
- Cost Justification
- Gaining Buy-in
- SIPOC
- Judgment Model

Webinar 1 Review

- Quality Assurance Vs Process Improvement
- Forming a Team
- Team Roles
- Selecting a Project
- Brainstorming

Completing Assignment

- How much of the homework did you complete (check all that apply)?
  - Project identified
  - Team identified
  - Problem statement written
  - None
- What were the major difficulties with the homework?

Assignment Review

- Identify Team Project
- Establish Project Team (lead, members, leadership ownership)
- Create Problem statement

Problem Statement

PROBLEM

- Falls constitute a major risk for residents resulting in early discharge, surgery, rehab and potentially even death.

OBJECTIVE

- Reduce falls by 50% by July 31, 2010.

BENEFITS

- Resident safety, longevity and health improved.

JLS1

Slide 10

JLS1 Add specific benefits that could be used for cost justification.
Jennifer Sprecher, 6/14/2010

Problem Statement

Problem Statement

- There is inequality of RCL workload within the QA Unit. JLS2

Objective

- This project will assure workload equality among team members as measured by an index of quantity of surveys and geographic distance of surveyed clients.

Benefits

- The QA Unit and the RCL surveys will exhibit contributions by all QA Unit team members, increased efficiency in use of state resources, increased timeliness of completed surveys, and increased morale among the QA Unit team.

Slide 11

JLS2 Quantify as much as possible.
Jennifer Sprecher, 6/14/2010

Revised Problem

- PREVIOUS: There is inequality of RCL workload within the QA Unit.

- Revised Problem : The RCL survey process is causing:
- inequity of workload among QA Unit team members
- difficulty in workload planning stemming from variations in survey numbers and locations
- lost funds due to surveys uncompleted before deadline
- negative impact on the evaluation of the RCL programs effectiveness due to missing data stemming from surveys uncompleted before deadline.

Revised Objective

Previous: This project will assure workload equality among team members as measured by an index of quantity of surveys and geographic distance of surveyed clients.

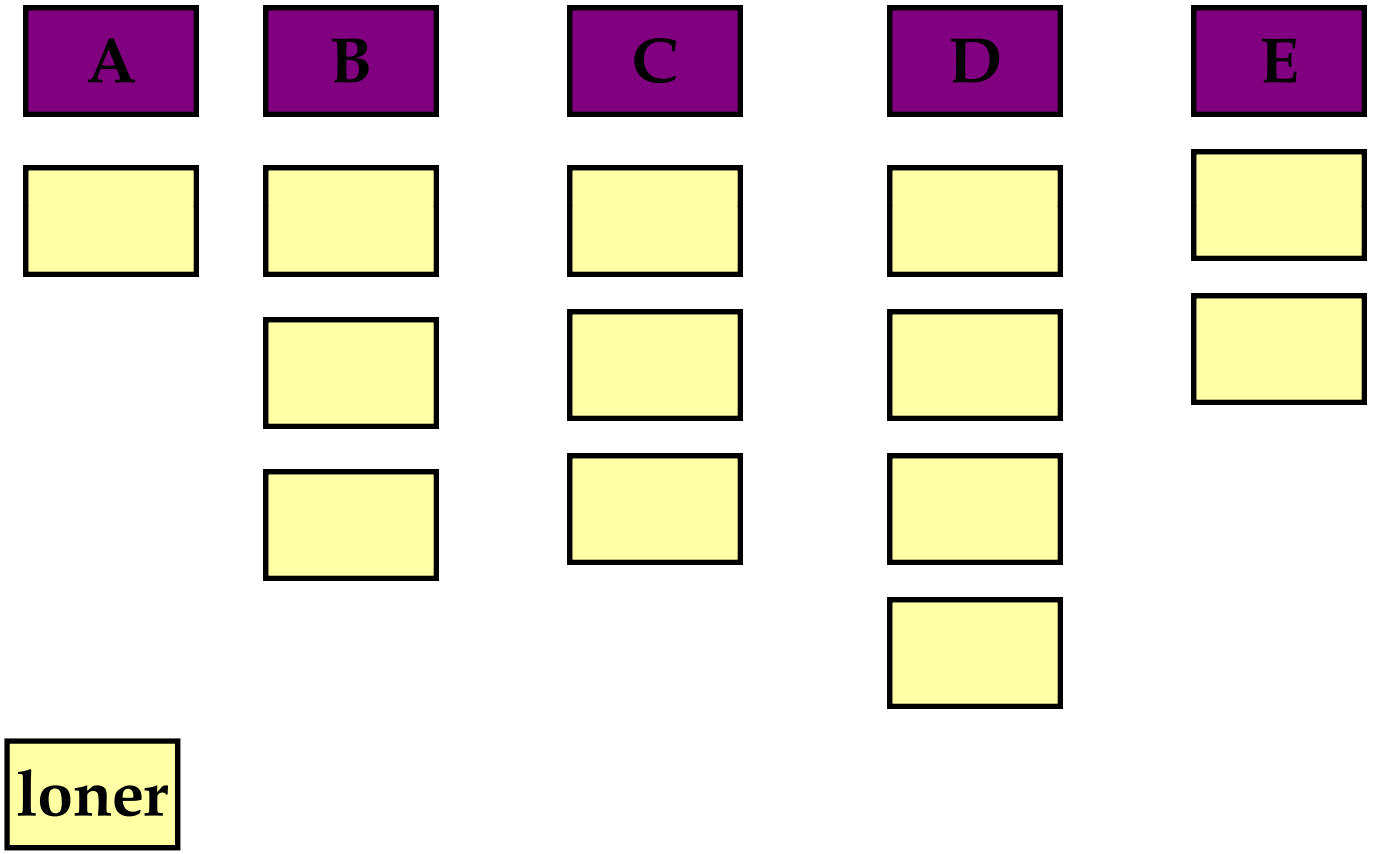
- Revised Objective: Provide an RCL survey distribution process that results in:

- x% Baseline surveys completed prior to- or within two weeks of- client discharge from nursing facility;
- x% Follow-up surveys completed within one year of client discharge +/- two weeks;
- x% second Follow-up surveys completed within two years of client discharge +/- two weeks
- x% of survey fees recouped from Centers for Medicare/Medicaid Studies (CMS)
- an increase in equitable rating by QA Unit staff to x% favorability.

Root Cause

- Teaching 3 tools today
- Can use any and all
- Each has various benefits to use

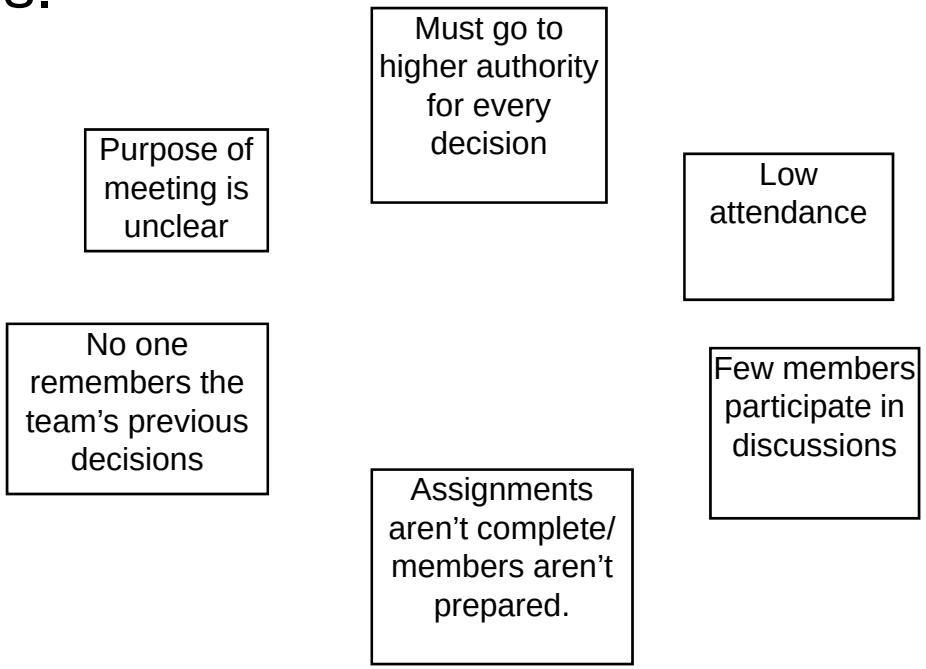
Affinity Diagram Example



Interrelationship Diagraph: Step 1

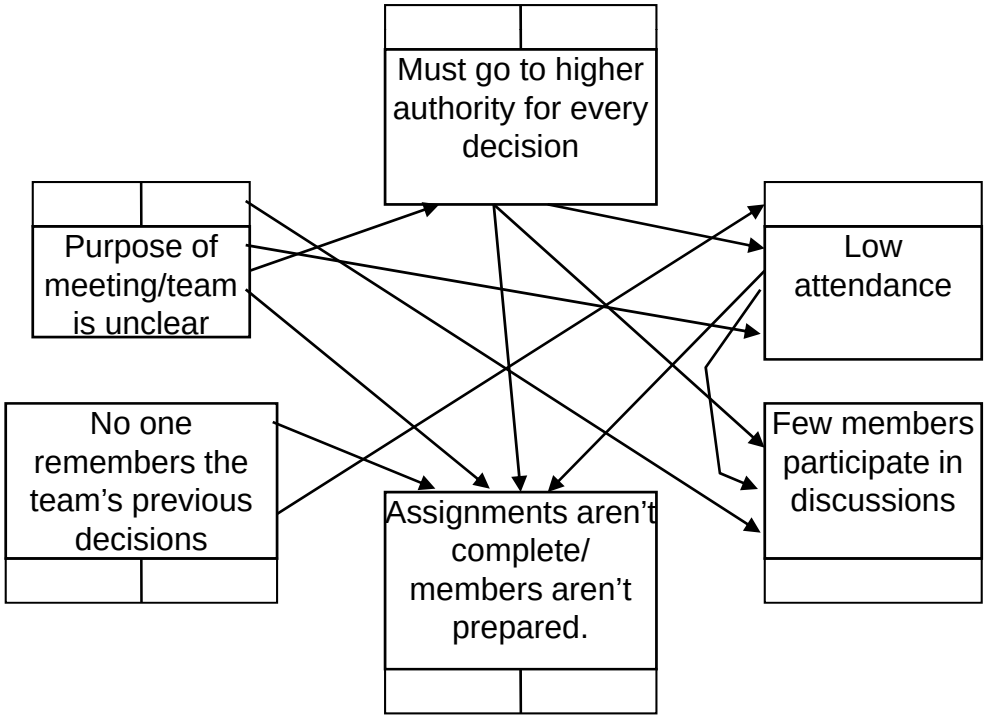
- Post all issues in a circle so they are visible to all team members (placing large Post-it Notes on white boards or flip charts works very well.) These issues relate to "unproductive meetings."

Tip: It usually works best to limit the factors to 12, but teams have been successful with up to 25. The more factors present, the more difficult to manage the volume and complexity.



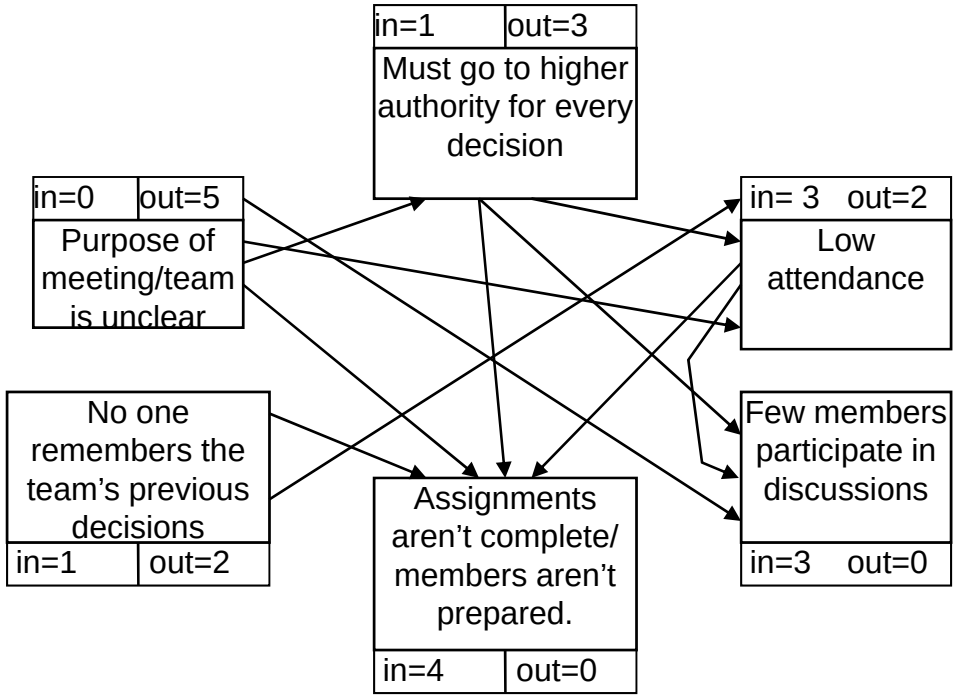
Interrelationship Step 2

- Beginning with the factor at the top, pair it with the one to the immediate right and ask: 1) Is there a cause/effect/influence relationship between these two? 2) If yes, which direction is the influence stronger? 3) If there is no relationship, do not connect the issues.
- Now, compare the top factor to the second issue to the right and connect with an arrow, if there's a relationship. Continue this process until all boxes have been compared to each other.
- Draw a one-way arrow from the cause to the effect. Avoid two-headed arrows. Force a decision about which way the arrow should point.



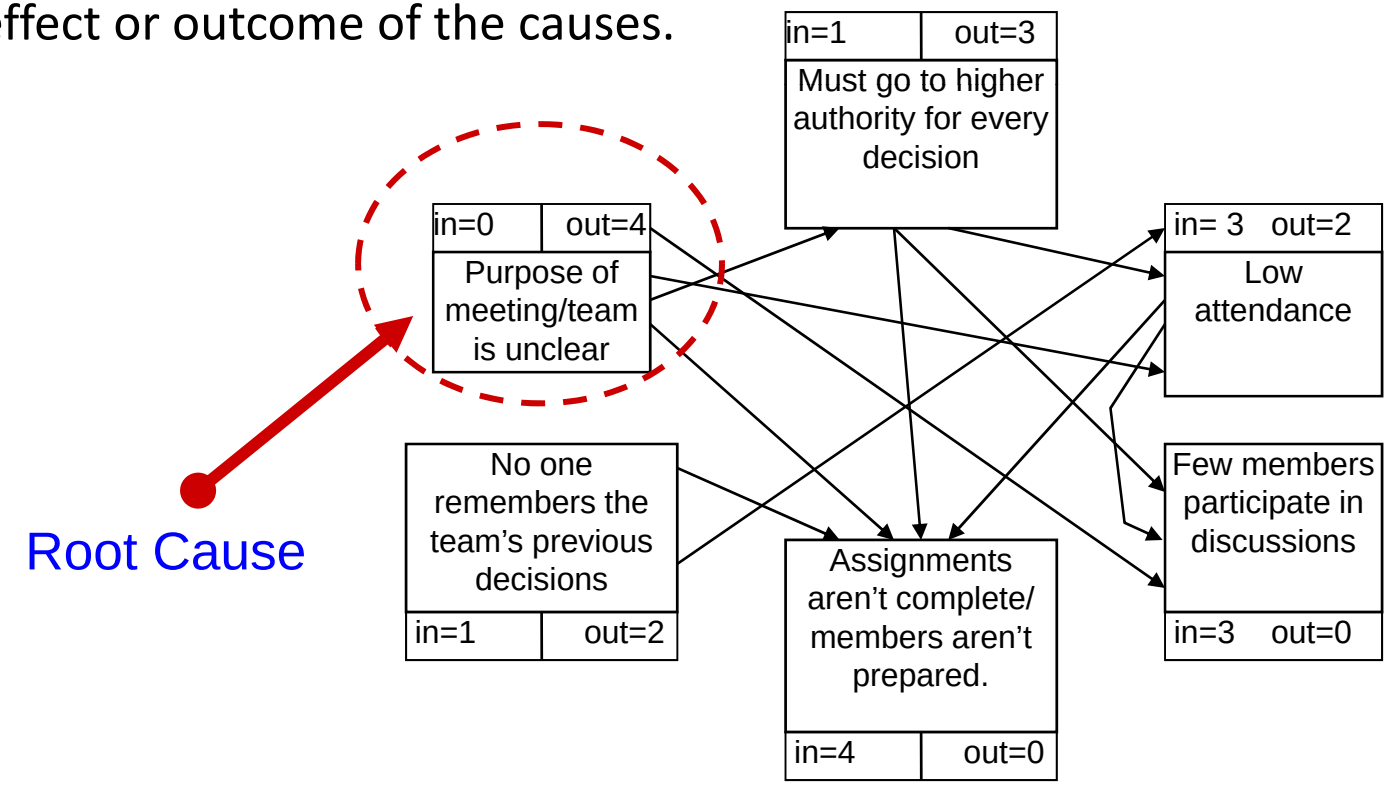
Interrelationship Step 3

- Tally and record the number of outgoing arrows for each factor, as well as the number of incoming arrows.
- Once the arrows have been tallied, each characteristic can be identified as a cause (driver) or effect (outcome).



Interrelationship Step 4

The factor(s) with the most arrows going out, would be considered the major cause or driver and having the most influence over the situation. The factor(s) with the most arrows coming in, would be an effect or outcome of the causes.



Another Example: Facilities Department

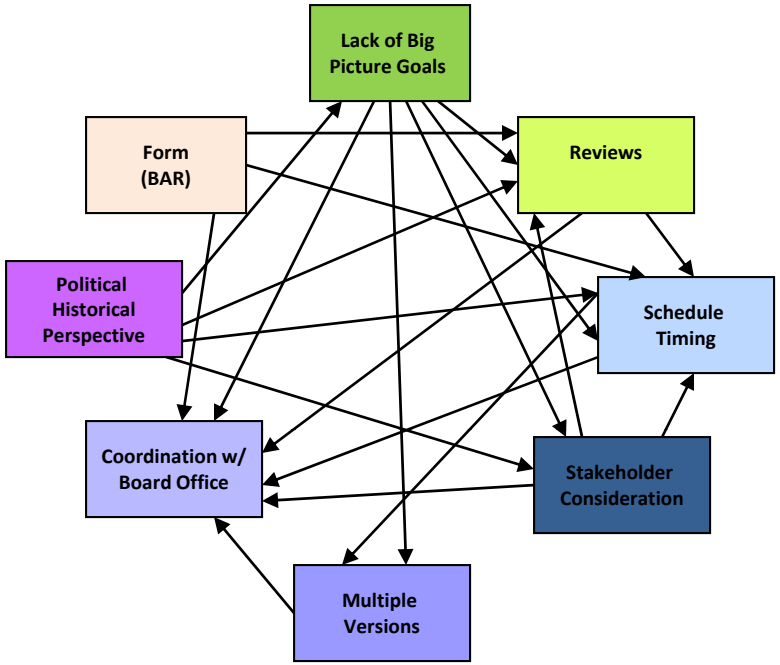
Why is the Board Approval Process not working?

Lack of Big Picture Goals:
- No clear purpose
- Monday meeting notes not always incorporated
- Change language used to be positive
- Make sure all the editors have same goal
- Stuck in "red" tape
- Outside issues deliverables not prepared
- Routing forms to use not resolved
- Some things presented in negative vs. positive language

Reviews:
- PM needs to make sure changes occur thru all sections
- No identifiable version changes on document
- Who resolves conflicts in changes when opinions differ
- Too many people participating in review
- Multiple reviewers make different changes
- Inconsistent data between BAR & attachments
- Casual conversation do not always get into new version
- PM authority is over ruled

Schedule - Timing:
- Takes too long
- Reviews not timely
- Changes in Board Comm. Time
- Panic attack to put It all together
- Knowing who to engage for review, how & when
- BEX postpones project
- Multiple changes
- Postponing submission to board
- Board moves to another agenda
- Change Board meeting time
- Error rate increases because timing changes
- Procrastination of projects
- Signature process (timing)

Stakeholders Consideration:
- Not prepared for "stakeholder" interjection
- Stakeholder uprising not predicted
- Suddenly becomes an issue - difficult to coordinate and predict
- Understanding who & when to engage "special" reviewers



Buckets	Arrows In	Arrows Out
Lack of big picture goal	1	5
Reviews	4	2
Schedule -Timing	5	2
Stakeholders Consideration	2	3
Multiple Version	3	1
Coordination w/Board Office	6	0
Political Historical Perspective	0	4
Form (BAR)	0	3

Multiple Versions:
- Don't use track changes on document
- Version numbers not clear
- Need to get typos & grammar errors corrected
- 2 or 3 version in one day
- Late attachments not getting added on correctly
- Document version not consistent
- Not knowing you have time to correct version to edit

Coordination w/Board Office:
- Change in expectation for level of service for Board meetings
- Coordination with the board office hard to be on "their" schedule
- Turn in items last minute to meet Board office needs
- Not understanding how the board action process is full of changes while board process is straight forward
- Compressed at end
- Board process doesn't take into account capital process
- Special interest groups/individuals impacts on process
- One shot a month to get it right for Ops

Political Historical Perspective:
- Focus on project not understanding "political" issues
- Not including the historical perspective
- Don't anticipate "political" or history needs to be presented
- Miss or Lose historical perspective

Form (BAR):
- Difficult to fill out BAR forms for capital
- Some of boxes on BAR doesn't fit Capital
- Not using BAR to market action as best we can

Fishbone Diagram P-D-C-A

Output: A list of possible causes for the problem.

Examples of Use:

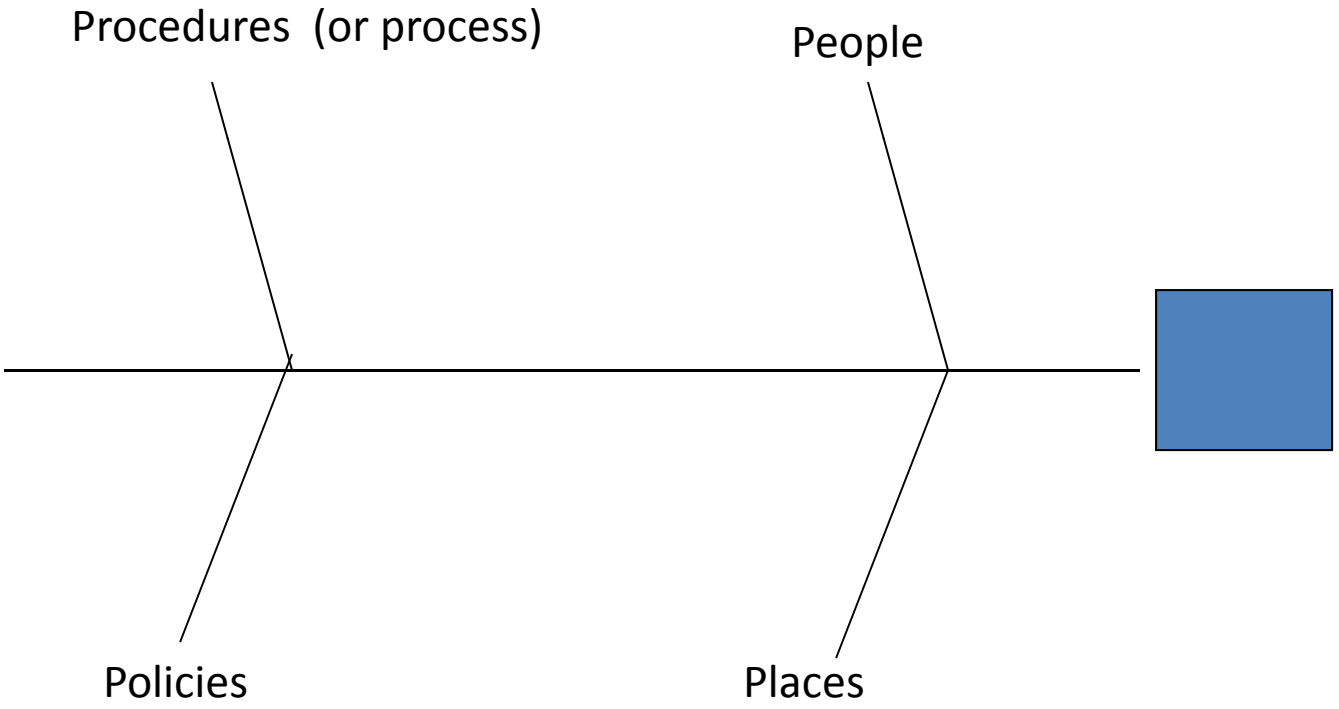
- Identifying causes for Part Failure
- Loss in sales high
- turnover rate

When to Use: When the problem is well defined, the process is commonly understood and the group is beginning to identify causes of the problem.

Benefits of the tool: Assists the group in identifying causes that might not have otherwise been recognized.

Fishbone

Categories are suggested service industry categories



5 Why's P-D-C-A

- Why does this problem happen?
- Why does that happen?
- Why – any other reasons?
- Why?
- Why?

Measurement System Analysis

Before starting your measurement system, be sure that measures are:

- Reproducible (between people): Ability of different individuals to get the same measurements at the same time
- Repeatable (by person): Ability of a given individual to get the same measurements for the same item when measured multiple times

Clear operational definitions are key (e.g. when does the clock start and stop when measuring commute time to the office?)

Data Collection Plan P-D-C-A

- What to measure
- Data Types
- Definition
- Targets or specifications
- Method of collection

Check sheets

P-D-C-A

Error code	**Frequency**	**Comments**
Program bug		
Input error		
Coding incorrect		
Wrong form		

Sampling

P-D-C-A

- Random
- Stratified
- Systematic

Data Collection Steps P-D-C-A

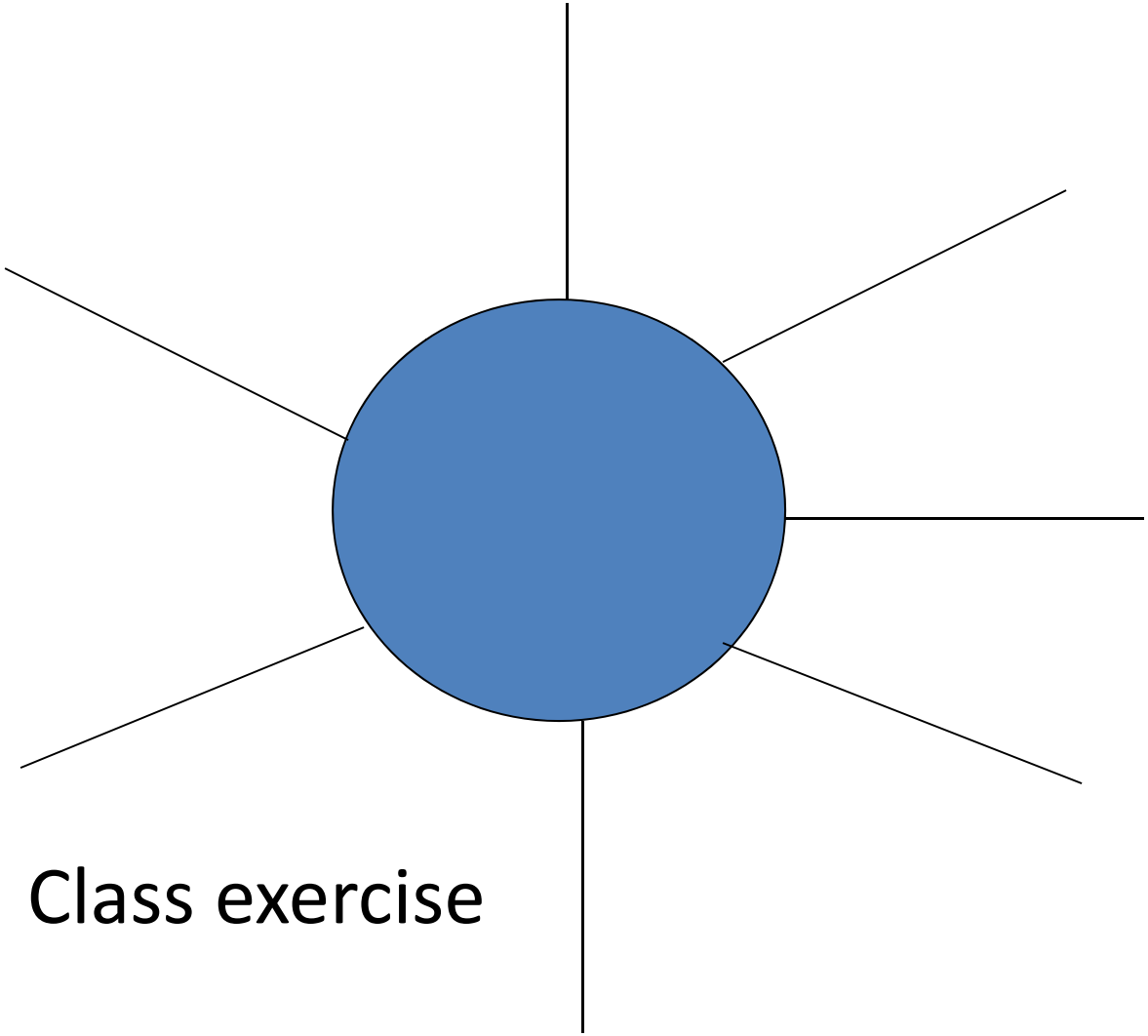
- Plan & Prioritize
  - Collection tool/method
  - Clearly defined
  - Train data collectors
- Trial run
- Collection
- Summary

Meeting Guidelines

- What makes an effective meeting?

Contingency Diagram

P-D-C-A



Class exercise

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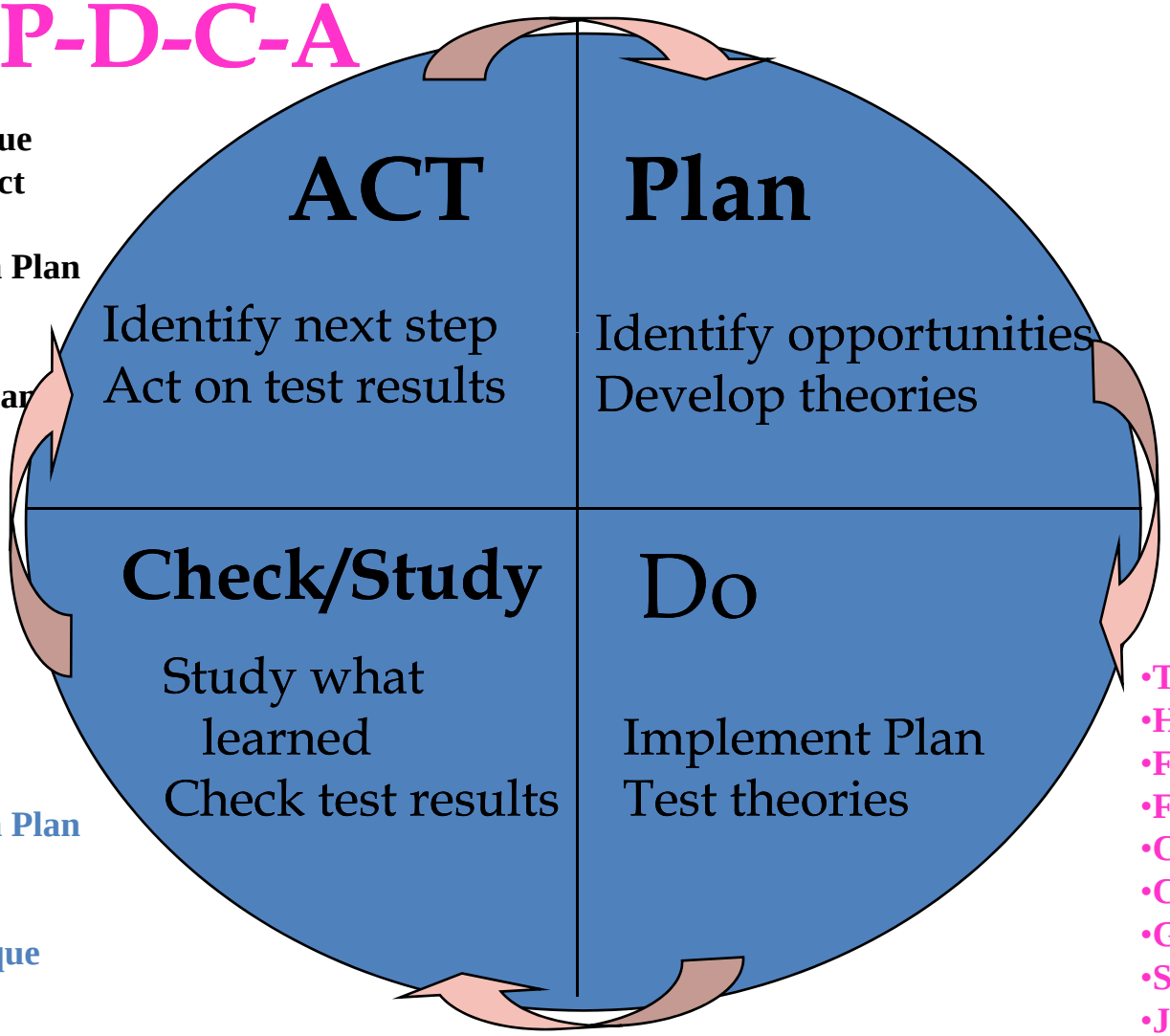

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Assignment 2

Root Cause Analysis

Conduct two root cause analysis using 2 of the following tools:

- Affinity diagram
- 5 Whys
- Fishbone diagram

Meetings

Using the Contingency Diagram- establish meeting guidelines for your organization

Coaching Support

- These webinars contain up to 20 hours of 1:1 support
- Do you anticipate any issues with the homework
- Telephone or e-mail
- Any support needed for root cause analysis and data gathering
- Use the coaching time!

Web Summary

- Web 1 Review:
  - Team roles
  - Brainstorming
  - Problem statement
- Web 2 Review
  - Affinity Diagram
  - Fishbone Diagram
  - 5 Whys
  - Meeting guidelines

DON”T FORGET TO DO ASSIGNMENT 2!

Contact Information

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