

Continuous Process Improvement Journey at Methodist Fremont Health

Methodist Fremont Health

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Criteria 1: Leadership/Planning: Describer how hospital/clinic leadership guides and sustains your organization:

Mission, Vision, Values A culture of Continuous Process Improvement (CPI) engages all team members, and most importantly, those on the frontline – in systematically increasing the value provided to our customers and team members. This is consistent with and complementary to the mission at Methodist Fremont Health (MFH) which is “Improving the health of our communities by the way we care, education and innovate.” Our Vision is to “Be the preferred integrated health system in the region”; MFH’s Values include: Patient-Centered, Respect, Excellence, Teamwork, Community Service). The mission, vision and values have provided the foundation for this project as the goal in improving performance in the care of the Methodist Fremont Health Patient.

Connect to Strategic Plan The CPI journey supports our strategic plan: **Culture first**: People, Culture, Service Excellence; **Quality is job one**: Quality, Safety, Population Health; **Staff for growth**: People, Culture, Service Excellence; **Deliver Exceptional Service**; **Drive profitable growth**.

Support of C-Suite: The CEO has been a champion by accepting the challenge of having MFH participate in the CPI journey. He and his senior leadership team were active participants in the first cohort. In addition, they have embedded the practices into their work and have the same expectations for their leadership teams. They have supported the educational series being conducted during scheduled work hours. They have also shared their experiences during the cohort trainings.

cohort would then meet every other week to discuss various CPI topics including: Personal A3s, Leader Standard Work (LSW), Lean Management System, Daily Visual Management (DVM); additional topics included key components of the 'Becoming the Change' Book including the Principal Driven Traits (Willingness to Change, Leading with Humility, Curiosity, Perseverance, and Self-Discipline). The cohort would also take time to include discussions around Emergenetics® and how the various thinking preferences and behaviors can impact team communication and performance improvement efforts.

State how the project will improve patient care "Organizations focused on continuous improvement provide better results for their patients. And leaders that consistently adopt principal-driven behaviors – and then coach others to do the same – ensure that continuous improvement work can thrive." (Toussaint, pg. 29). Prior to the cohort structure, process improvement efforts were not approached in a standard way. Improvement projects followed varying methodologies. The continuous process improvement structure provides the foundation that allows leaders to engage with staff, allowing everyone to become a part of the improvement process, and teaches a standard method for measuring success.

Describe how patient and family were engaged in decision-making The process of identifying and tracking areas of improvement through patient feedback, scores and concerns, has provided a conduit for improving the quality and safety of those who experience MFH services.

Patient and families are impacted by having their loved one cared for in an environment that strives to provide safe and effective care. The cohort training assisted the leadership team in understanding how they think and behave for themselves and their teammates.

initiate their in-person meetings. Following the workshop, each cohort would have 9 in-person meetings that would span 4 months. Content for each of the education sessions included:

- Principal Driven Traits (Lead with Humility, Perseverance, Willingness to Change, Curiosity, and Self-Discipline)
- Lean Management System
- Personal A3
- Leader Standard Work
- Daily Visual Management
- Standard Work
- Reflection

As part of the PDSA cycle, it was determined that the discussion around these topics needed to continue beyond the cohort structure and there was a desire to engage with staff on a consistent basis. The decision was made that once each cohort completed its session, participants were invited to a monthly education session where various continuous improvement and leader/personal development topics were discussed. The purpose was to keep the ideas in front of everyone on an ongoing basis, to connect with other leaders in the organization and to show this is a priority. The structure for this monthly meeting is informal, continuous improvement topics are covered and guest speakers (community leaders) are brought in.

State how data was collected The purpose of these efforts was to create standardization around quality improvement efforts and to learn to work differently in a continuous process

Criteria 4: Results: Describe project results both intended and unintended

Share both process and outcome measure results in an effective manner There has been noticeable engagement and buy-in for these continuous process improvement efforts since the first cohort started in September of 2021. As a result of these efforts:

- Over 50 leaders at MFH have completed the cohort structure
- A total of 17 DVM boards have been put up in the organization, with a focus on process improvements, PDSA cycles, identifying projects that are suitable for A3 methodology, bringing overall awareness to the metrics that each department is tracking (both process and outcome measures); work on tying it back to department and strategic goals
- In June of 2022, MFH started tracking completed DVM ideas, in those 12 months, over 161 submissions have been made to the OI portal
- Staff in each area are about to articulate what PI efforts they are working on, the metrics that are associated with each and also feel like they have better communication between team members.
- Daily huddles support better communication and offer opportunities for team members to celebrate successes

Discuss financial implications / return on investment of the project Some of the completed improvement efforts from the DVM boards include:

leadership meetings and staff are invited to share how they use the various CPI tools and what efforts they are working on in their departments or units.

Recognize the creativity and innovation in the project MFH was meant to be a pilot site for implementing Continuous Improvement throughout the health system. The support and commitment for the executive team has made it a priority throughout MFH.

Criteria 5: Lessons learned, Replicability, Sustainability

Describe lessons learned from this project – note barriers and how those were addressed One of the lessons learned from this project is that it's super important to spread the purpose of CPI throughout the organization. It's not enough to just educate the leadership, it's most important to engage with the frontline staff – those that are doing the work. This has become obvious as we start to work towards sustainability; the more staff that know about and support these efforts, the more successful we will be.

Describe how other facilities could replicate this project Start by ensuring there is support from senior leaders, this takes time and resources. The time spent upfront will pay off as staff begin to buy in and realize their efforts are supporting the continuous process improvement culture. The structure created for MFH can be modified to fit into another organization.

Note how the project and new processes will be hard-wired and improvement sustained The first part of this project consisted of introducing Continuous Process Improvement to the leaders at Methodist Fremont Health. With the help of the OI team at NMHS, MFH was able to provide education to all/most of the leaders in just less than 2 years. The next step will be to implement processes in order to sustain the progress already made. One of the barriers in the cohort

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Background

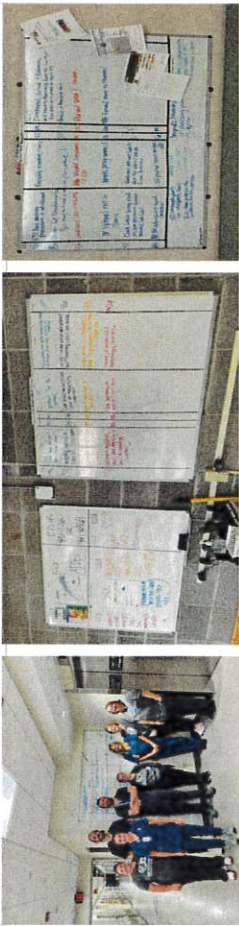
The Operational Innovation Team at Nebraska Methodist Health System approached leaders at Methodist Fremont Health (MFH) about implementing Continuous Process Improvement (CPI). This approach was meant to complement the quality improvement efforts already in place by offering a more standard approach and encouraging all staff to lead with humility, ask questions, and be open to change. Staff at MFH were looking to create a culture of problem solvers and to achieve operational excellence.

Aims

Create and implement a Continuous Process Improvement education series that supports leadership and staff at MFH. Teach and develop leaders at MFH to encourage and coach team members to be problem solvers.

Plan

- Continuous Process Improvement (CPI) education began with the Executive Team and a few other members of the leadership team
- Developed syllabus with CPI topics including Lean Management System, Leader Standard Work (LSW), Daily Visual Management (DVM), Personal A3, and Standard Work
- Invite members of leadership to participate in “cohort” structure – 10 meetings in 4 months where CPI is taught and discussed



Measure

One of the tools used in CPI is Daily Visual Management coupled with team huddles. Historically staff at MFH huddled with team members but there was not a standard structure. CPI provided this structure and encouraged staff to apply PDSA thinking to their improvement ideas. Leader coached staff to be problem solvers, ask questions, identify the issue and the solution.

Results

- Over **80%** of leaders at MFH have been through CPI education
- **17** DVM boards up and running at MFH
- More than **160** performance improvement ideas have been submitted in the past 12 months to the Operational Innovation Team
- **15** Monthly Education Sessions have taken place for those who have completed the cohort

Next Steps

Develop education series for all staff – mostly frontline staff to spread CPI to all levels at MFH.

Team

Executive Team, MFH
Operational Innovation Team, NMHS
Quality Department, MFH