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Bend the Curve CIP-News - December, 2011

Bend the Curve Continuous Improvement Practitioners

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December 2011

Volume 6, Issue 12

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Special points of interest:

- Next Clinicals
 - January 20
 - February 17
- Be sure to check out all the hyperlinks



As we dream by the fire.....

— Walter E. Lowell



December brings again the opportunity for us here at *CI-P News* to look back at the activities of *Bend the Curve* for 2011.

So, as we sit by the fire this season, we recount all things "Lean" that transpired here in Maine State government.

It's an impressive list and provides testimony to how so few can do so much for so many in support of improving the work of government.

There is still much to do and we eagerly await 2012 for all the opportunities that will present themselves to us.

This was a year of transitions as well. A new administration, with streamlining as a major agenda item, took over the reins of government and immediately began asserting itself in a new direction for Maine State Government. As with all new administrations, new leadership was brought in and with it new challenges for *Bend the Curve*.

Many of you participated in the events and activities listed below, and without your on-going support none of these would have been accomplished. So a heartfelt thanks to all of you who have taken your

time and energy to bring to life shared values of commitment, trust, perseverance, and faith that government can work better, faster and cheaper for the citizens of our great state.

It is an impressive list and one all CI-Ps can be proud of:

- ★ *Bend the Curve* wins Harvard Kennedy School's Bright Ideas Award.

The Ash Center for Democratic Governance and Innovation at the John F. Kennedy School of Government, Harvard University, announced, on March 29, 2011, its recognition of the innovative State of Maine *Bend the Curve* program as a "Bright Ideas" award recipient.

- Submitted by the DHHS Office of Lean Management Services, the award was given to government programs demonstrating "that creative solutions to some of our nation's most intractable problems can be generated and succeed in even the most challenging of environments."
- Maine's *Bend the Curve* program has demonstrated that Lean methods and principles work in government, are enthusiastically embraced

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As we dream by the fire..... (cont'd. from p. 1)

by employees, and offer a unique and innovative opportunity to transform government and how it does its work.

★ *Bend the Curve* Lean Continuous Improvement Projects & Efforts.

Bend the Curve (BTC) provides support, consultation, assistance, and leadership in process and other continuous improvement approaches and activities for State of Maine staff and work teams -- as they seek to continually improve their work culture, procedures, processes, and systems in order to meet the mission of their respective Department and the expectations of Maine citizens. BTC Continuous Improvement Practitioners consult in problem-solving and in identifying and defining work processes needing improvement. They assist staff to identify and evaluate measurable cost and time savings, as well as quality, and with the development and monitoring of change/action plans. These improvement efforts, such as value stream mapping and rapid improvement events, this year have included improvement work with the following:

- Maine Center for Disease Control on its School-Located Vaccine Clinics (SLVC) process to help them streamline the process Maine Immunization Program Infectious Disease School-Located Vaccine Clinic (MIP ID SLVC) team Maine Immunization Program ID SLVC team.
- Office of Financial Management Services.
- Secretary of State, Bureau of Motor Vehicles.
- Maine Automated Child Welfare Information System (MACWIS).
- Office of Lean Management service for the design and development of a continuous improvement projects tracking database.

★ Continuous Improvement Practitioner (CI-P) Development & Capacity Building.

- The Development of Practitioners 2 (DOP 2-2) Training, January-February 2011. Our first in-house delivery of the second level course for CI-PS. The course was designed to strengthen CI-P's background in Lean and process improvement and to enable many CI-Ps to obtain their final milestone for CIP certification.
- Introductory Development of Practitioner 1 (DOP 1-7) Training conducted at USM-LAC, June 6-10, 2011, promoting the development of Lean continuous improvement expertise and capacity within the university setting and curricula - with the goal of producing graduates with an already-existing knowledge and practice of Lean that can be applied in all sectors of Maine's economy and government.
- Week-long intensive introductory Development of Practitioners 1 training re-designed and developed. To be delivered February 6-10, 2012.

As we dream by the fire..... (cont'd.)

- Monthly Bend the Curve CI-P Clinical Supervision Work Sessions. Held the 3rd Friday of the month in order to -
 - Continue to enhance CI-P knowledge & development of the five competencies in their practice.
 - Understand and practice Continuous Improvement principles, methodologies, and tools.
 - Increase CI-Ps' understanding of their consulting process.
 - Learn to question the obvious, the assumptions.
- Study Missions to Organizations Implementing Lean to observe their implementation of Lean operations. The purpose of study missions is to learn that comparable transformation is possible within State government & that the methods for achieving that transformation are doable; increase Lean management/leadership competence and confidence; develop a Lean mindset; study a range of implementation strategies and practices that have resulted in improved performance, and; see the practical application of Lean continuous improvement. Study missions in 2011 were highly informative and useful. They included:
 - J.S. McCarthy Printers, Augusta.
 - Hancock Lumber in Bethel.
 - Idexx Laboratories, Westbrook.

★ **Development of State of Maine Bend the Curve information & materials.**

- CI-P News monthly newsletter published for use by the CI-Ps in their practice and by interested others.
- Creation and Sustainment of the Bend the Curve website: <http://www.maine.gov/dhhs/btc> hosted by Maine DHHS.
- Government-oriented improvement materials including templates; forms; design notes for value stream mappings, kaizens and other methods; reference guides; simulations; activities; links; etc. created and/or adapted for use in transactional (including government) environments. These are available on the *Bend the Curve* website.

— *cont'd on page 4*

Nothing works unless the economy works:

- *Establish priorities (not about everything to everyone).*
- *Fix problems, not blame.*
- *Focus on opportunities rather than challenges.*
- *Collaborate.*

— Dana Connors, Director
Maine Chamber of Commerce

(from notes taken during his speech at "Making Maine Work", Sunday, October 2, 2011. Jewett Hall, University of Maine Augusta)

★ Lean Continuous Improvement Awareness & Training.

- Presented workshop at the Northeast Shingo Prize conference, *Made Lean in America*, Maine's Bend the Curve program and the role of government: "[Bending the Curve-Steps towards Building a Lean Government](#)".
- Delivered a presentation on Bend-the-Curve to the Department of Administrative and Financial Services (DAFS) Management team.
- Participated in Maine CDC Performance Improvement learning sessions led by Jack Moran, Ph.D.

★ Collaboration.

- Organizer and Member of the multi-state Lean Collaborative. The Lean Collaborative is a multi-state network of both public and private sector individuals, organizations, and companies interested and involved in continuous improvement. It provides a forum for active collaboration and sharing of knowledge, skills, and resources.

This past August was the Collaborative's second annual highly successful *Lean Systems Summit*. The next Summit is scheduled for August 9 & 10, 2012.

- **2011 Lean Systems Summit**, August 11 & 12, 2011, Eastland Park Hotel, Portland, Maine: "Collaboration, Innovation, and Use of Lean Concepts in Achieving Operational Excellence".

The [Summit](#) provided an opportunity for business leaders and management to discuss collaboration, innovation and the use of Lean concepts in achieving operational excellence. The Summit program included speakers and fifteen informational workshops -- across healthcare, services, government, education, manufacturing, construction, and other businesses -- describing how Lean leaders and practitioners have used Lean to change their culture and improve their way of doing business. Lean is the way to do things easier, better, faster, and cheaper in order to survive and thrive and applies to manufacturing, government, and services equally.

- Walter E. Lowell, Ed.D, CPHQ, named to Board of Directors of the Relational Coordination Research Collaborative, led by Professor Jody Hoffer Gittel and based at Brandeis University's Heller School for Social Policy and Management. [RCRC](#)'s research focuses on developing and testing interventional models of organizational change that lead to improved outcomes for organizations and their stakeholders. Its mission is to transform relationships for high performance by building shared goals, shared knowledge, and mutual respect across boundaries.
- Continuing work to integrate the continuous improvement, staff education, and data/research functions of DHHS.

As we dream by the fire..... (cont'd.)

- ★ Increasing efforts to coordinate and collaborate within State government in order to -
 - High-Performing Staff: Support the development of a knowledgeable, skilled workforce that is able to problem-solve, direct self-development, anticipate and respond to changing customer expectations and work environment, and develop creative solutions to emerging challenges.
 - Superior Customer Service:
 - Support the development of services, processes, and systems that are customer-centric, are seamless, meet challenges and customer needs, and exceed expectations.
 - Engage customers in a collaborative partnership that continually seeks excellence in service design and delivery.
 - Efficient & Effective Administration:
 - Become a Leader in the development and continuance of efficient and effective management of State systems and resources.
 - Deliver value by consistently enhancing system effectiveness and efficiency for meeting customer needs through exemplary continuous improvement methodologies and excellence based on data/evidence/fact-based planning and decision-making and ongoing staff development.
 - Integrated Services: Support the development of seamless access to appropriate, consistent, and comprehensive quality services to all State customers through a focus on customer requirements, staff development, and staff involvement in system improvement interventions and activities.
 - Excellent Provider Partnerships: Engage providers in ongoing collaborative partnerships that continually seek excellence in service design and delivery that meet customer needs.

As I noted earlier, it's an impressive list of accomplishments and ongoing work !

I would like to acknowledge CI-Ps Arthur S. Davis — founder of *Bend the Curve*, Rae-Ann Brann, and Anne Rogerson who left State service this year. We thank them for all their work and inspiration and definitely miss them but know that they are enjoying themselves and will spread the *Lean* word throughout their new journeys. We hope that they will not lose touch with us or *Bend the Curve*.

And, let us celebrate the accomplishments of the three CI-Ps who were certified this year as Bronze Level Continuous Improvement Practitioners: Timothy Griffin, Terry Sandusky, and Lita Klavins. Great achievement, folks!

Wishing you all a joyful and productive New Year, *Walter*

Printed & Other Matters

Human Services by the Batch

BY: Jonathan Walters | November 8, 2011 | Governing Magazine

<http://www.governing.com/topics/health-human-services/col-human-services-batch.html#continued>

“. . .While there's much to love about a system that gets away from the old model of "to each case a case manager," those with experience in switching to a task-based system say it's not for everybody and it's not easy to do.

On that score, Tioga and Schenectady Counties, in collaboration with the state Office of Temporary and Disability Assistance and Cornell University's School of Industrial and Labor Relations have developed a how-to guide . . . that allows jurisdictions to assess whether the task-based approach is worth considering, and how to launch such a system.

One key to consider: Include staff from the very beginning when considering such a significant new way of doing business. "We actually let staff, within certain constraints, design the system," says Nitti.

The guide also covers the sort of detailed data analyses that welfare offices should do in order to understand key variables like workload patterns and the time it takes to handle various transactions, which will in turn help managers figure out -- at least approximately -- staffing requirements. . . .Even though task-based management can streamline operations quite a bit, Nitti emphasizes that supervisors have to continually help caseworkers focus on the connection between transactions and people. "We may now be a processing center," says Nitti, "but every time you process a transaction or touch a piece of paper, you touch a family or individual who needs help. Not only that, you're dealing with these issues before they become a crisis."

Peter R. Scholtes—Quotes

- ★ Less than 5 percent [of problems] result from people committing errors. Human error is a negligible source of our problems. Yet because we don't understand systems, we act as though human error were the primary cause of our problems.
- ★ 95% of changes made by management today make no improvement.
- ★ People don't resist change, they resist being changed.

– Peter Raymond Scholtes was an internationally known author, lecturer, and consultant on quality, organizational development/change, and leadership. He is the author of The Team Handbook and The Leader's Handbook: Making things happen and getting things done (http://www.kellyallan.com/leaders_handbook.html). Quality Digest recognized him in 1995 as one of the 50 Quality leaders of the decade. He also received the Deming Medal (2006) and the Ishikawa Medal (2000).

“Why Do Hospitals Need Lean?” ***

“Taiichi Ohno, one of the creators of the Toyota Production System, is often quoted as saying that organizations must ‘start from need.’ In today’s world, the ‘need’ for Lean in healthcare is very clear in terms of quality and patient safety, cost, waiting times, and staff morale. Hospitals face a growing number of external pressures and challenges as well. Hospitals do many wonderful things, but a senior leader at a prestigious university hospital summarized their internal challenges by lamenting that ‘we have world-class doctors, world-class treatment, and completely broken processes.’

So, how can an approach called Lean help healthcare organizations? On first hearing the word, people might complain that they are already understaffed and do not have enough resources. The everyday use of the term lean and countless newspaper headlines reinforce what are often negative connotations. Rest assured, the approach used here is not about mass layoffs. The idea of ‘preventable’ errors may bring skepticism, as employees and physicians believe they are already being as careful as possible. Hospitals using Lean methods do not improve quality by asking people to be more careful any more than they improve productivity by asking people to run around faster. Lean is very different from traditional ‘cost-cutting’ approaches that have been tried in multiple industries, including healthcare.

Lean is a tool set, a management system, and a philosophy that can change the way hospitals are organized and managed. Lean is a methodology that allows hospitals to improve the quality of care for patients by reducing errors and waiting times. Lean is an approach that can support employees and physicians, eliminating roadblocks and allowing them to focus on providing care. Lean is a system for strengthening hospital organizations for the long term—reducing costs and risks while also facilitating growth and expansion. Lean helps break down barriers between disconnected departmental ‘silos,’ allowing different hospital departments to better work together for the benefit of patients.

Someone might ask how Lean methods can help solve the everyday, nagging problems that so many committees and teams have already tried fixing. Lean is different in that people learn how to look at the details of processes, where the people who do the work fix things where the work is actually done, instead of relying on experts to tell them what to do. Lean helps leaders see and understand that it is not the individuals who are broken, but the system itself.”

*** Mark Graban. Lean Hospitals: Improving Quality, Patient Safety, and Employee Engagement. CRC Press: Florida. 2012. Chapter One, “The Case for Lean Hospitals”.

BTC Lean Schedule

Date	Time	Topic	Location	Contact
Jan. 20	8:15-4:30	Clinical Supervision	221 State, Lean Lab	WEL/JK
Feb. 6-10	8:15-5:00	DOP 1-7 (<i>tentative</i>)	221 State, Lean Lab	WEL/JR/JK/MAD
Feb. 17	8:15-4:30	Clinical Supervision	221 State, Lean Lab	WEL/JK
March 16	8:15-4:30	Clinical Supervision	221 State, Lean Lab	WEL/JK
April 20	8:15-4:30	Clinical Supervision	221 State, Lean Lab	WEL/JK
May 18	8:15-4:30	Clinical Supervision	221 State, Lean Lab	WEL/JK
June 15	8:15-4:30	Clinical Supervision	221 State, Lean Lab	WEL/JK

* To add or see more events or detail, go to the Bend the Curve Calendar in Outlook’s Public Folders.



Department of Health
and Human Services

Maine People Living
Safe, Healthy and Productive Lives

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

The primary purpose of the *Bend the Curve* Team is to provide support, consultation, assistance, and leadership in continuous improvement approaches and activities for State staff, work teams, and leaders as they seek to continually improve their work culture, systems, processes, and environments – in order to meet the mission of Maine State government and the expectations of Maine citizens.

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We're on the net !

<http://www.maine.gov/dhhs/btc>



**Continuous Improvement Practitioners:
BTC Intervention Facilitation Status**

DHHS		DOL		DAFS	
Kate D. Carnes	C-L	Jorge A. Acero	C-O	Wendy Christian	I-O
Nancy Cronin	C-O	Michael T. Brooker	I-O	Rebecca S. Greene	I-L
Marcel Gagne	LCL	Deidre A. Coleman	I-O	Lyndon R. Hamm	I-LCL
Julita Klavins	L	Joan A. Cook	LL	Billy J. Ladd	I-LCL
Walter E. Lowell	L	Merle A. Davis	L	Michaela T. Loisel	I-L
Jerrold Melville	LCL	Eric Dibner	O	DOC	
Ann O'Brien	L	Peter D. Diplock	I-O	Gloria R. Payne	I-O
Cheryl Ring	C-LCL	Brenda G. Drummond	I-O	DOT	
Terry Sandusky	L	Anita C. Dunham	I-LCL	Michael Burns	C-O
Bonnie Tracy	C-O	Karen D. Fraser	C-L	Jessica Glidden	I-O
		Timothy J. Griffin	L	Rick Jeselskis	I-O
Sec.of State-BMV		Gaetane S. Johnson	I-O	Robert McFerren	I-O
Scott Thompson	O	Michael J. Johnson	O	Sam McKeeman	C-O
OPEGA, Legislature		James J. McManus	I-LCL	Jeffrey Naum	I-O
Matthew K. Kruk	I-O	Scott R. Neumeyer	I-O	Mark S. Tolman	I-O
Univ. of Maine		John L. Rioux	L	DEP	
Kim Jenkins	O	Sheryl J. Smith	C-O	Carmel A. Rubin	I-O
Community – Private Sector *					
Rae-Ann Brann*	I-L	James Fussell*	I-LL	Henry B. McIntyre*	LCL
Stephen C. Crate*	I-O	Kelly Grenier*	LL	Jack Nicholas*	I-O
Arthur S. Davis*	L	Alicia Kellogg*	I-O	Anne Rogerson*	O
Nancy Desisto*	L	Maayan L. Lahti*	I-O	Clough Toppan*	LCL
Jane French*	I-L				
Town of Durham, New Hampshire					
		David Kurz	I-O	Steve McCusker	I-O
		Michael Lynch	I-O	Todd Selig	C-O
* Community CI-P		I - Inactive	C - "Champion for Lean" - not facilitating		
L - Lead (LL-Learning)		LCL - Learning Co-Lead		O - Learning Observer	

**More Miller
workshops &
next DOP 1
scheduled !**

Additional workshops with Ken Miller are still being planned. We'll keep you posted.

An introductory week-long CI-P Bronze level training DOP 1 is tentatively scheduled for February 6-10, 2012.

You can also check the Bend the Curve Calendar in Outlook's Public Folders & come to the planning meetings for Clinicals and other events.