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Bend the Curve CIP-News - March, 2007

Bend the Curve Continuous Improvement Practitioners

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DHHS CI-P News

Let's Lean It !

This is starting to be a common phrase that I am hearing around the corridors of DHHS. This is a good thing because it says that people recognize that what CI-Ps are doing works, and Lean may well be the way to get under control some of the challenging and difficult problems we face here at DHHS. It is also not unusual in our VSM sessions to hear people talk about Lean in a way that to me, at least, implies a bit of mystery and special knowledge.

When I first delved into the enormous amount of literature written about "Lean," I too thought that here was a special set of tools and methods that might hold the key to improving organization performance. While there is a lot of truth in that statement, the giants in the field — Ohono, Liker, Toyoda — sprinkle, throughout their writings, comments like "It's really about the people." After having read widely and practiced these concepts, tools, and ideas, I have come to the same appreciation as well **:** that Lean is really about people, those that receive the value we produce and those that produce it.

What we have come to know as Lean is really a strategy that recognizes and acknowledges that the employee (i.e. the front line worker) is the individual that creates value for the customer, whether that customer is external to the organization or another employee in the value stream. The employee connects to the customer in many ways and almost always knows whether the customer's needs are met and satisfied.

More importantly, the employee knows that if the customer is not satisfied, they have good ideas as to why not. In the language of Lean, this means they know where the problems are in the value stream. This is why the *sensei* always says to go to *Gemba*, the work place, and have a look around and talk to the employees. They know the problems and have good ideas about how to fix them.

The real power in the work we as CI-Ps do is not really so much in what we know or do as practitioners but in the people, the teams, that we work with. Our goal is to enable them to be both critical and creative. Critical in the sense of being able to talk truthfully about the problems they experience in serving customers and clients, and creative in inventing solutions to the problems they identify.

Jeffery Liker, in his book, The Toyota Way, talks about how at Toyota they work to make every employee a quality improvement specialist.   By promoting and developing their employees, this strategy leverages the eyes, ears, and creativity of thousands of people in the workforce.   It is how Toyota gains the confidence and respect of the customer.

Now when I hear 'Let's Lean it," I am thinking about how best do we use our CIP knowledge and skills to marshal those folks that know the work, know the problems, and know the solutions.

— *Walter E. Lowell*

Inside this issue:

Special points of interest:

- Next Clinics
  ‣ March 16
  ‣ April 20
- DOP 1-4 Scheduled?
- MDOL Case Study !

Clinical Supervision Summary

The purpose of the February Clinical was to

➢ Examine current *BTC* status, including the scheduling of Clinicals.
➢ Discuss CI-P Certification & professional development.
➢ Review the drafting of the *BTC* Plan for moving forward with CI-P and *BTC* development & request for comment from CI-Ps.
➢ Conduct first Lean Learning : Book Review discussion as the beginning of an ongoing Clinical agenda segment.

During Check-in, Arthur announced that David Welch had earned a significant promotion to Senior Economic Research Analyst. Dave said he felt his CI-P training and participation in BTC had had a positive effect in the selection process.

1) Arthur led a continued examination of *BTC* and CI-P status and development. He reviewed the levels of certification — bronze, silver, gold, master, leader (Levels of Mastery) and stressed that the investment and reward = individual development. The group discussed the pluses and minuses of certification, its process, and its requirements for the individual, as well as its impact.

2) Because of CI-P comments, a vote is to be sent out re: Clinical scheduling. In addition, a survey will be developed and sent to all CI-Ps re: factors affecting their *BTC* participation.

3) Apparently, not everyone had received the initial draft of the *BTC*/CI-P plan compiled from the work done in the January Clinical. It was agreed that this would be re-sent (along with the Task Notes for the Word version). The CI-Ps decided to review, complete, & comment, within one week, re: any additions, changes, additional specific tasks, resp. persons, dates, and dependencies.

4) Lean Learning**:** Book Review. This first session covered the "Introduction" in Womack & Jones' *Lean Thinking.* The questions (Questions) Walter sent out prior to Clinical guided the discussion. The general consensus expressed was that this kind of learning and review/discussion was interesting and valuable. The CI-Ps recommended that it be an ongoing part of the agenda. Dave volunteered to lead a discussion from Ken Miller's *We Don't Make Widgets* book for the March Clinical. He'll be in touch re: what he will address and how.

Please make every effort to attend. These are critical sessions for your professional development, certification, and the success of your CI-P work.

Schedule of BTC-Lean Events

Date	Time	Topic	Location	Contact
Mar 5	2 - 4	DHHS CIP	Greenlaw	Walter
Mar 13	8-Noon	IR Access IP Review	221 State	Terry Lita
Mar 16	8-4:30	Clinical Sup	BLS	Arthur
Mar 23	8-4:30	Eligibility Review VSM	Bangor	Chip Clough
Apr 2	2 - 4	DHHS CIP	Greenlaw	Walter
Apr 4&6	8-4:30	Eligibility Review VSM	Bangor	Chip Clough
Apr 10	8-Noon	IR Access IP Review	221 State	Terry Lita
Apr 20	8-4:30	Clinical Sup	CCD*	Arthur
May 7	2 - 4	DHHS CIP	Greenlaw	Walter
May 8	8-Noon	IR Access IP Review	221 State	Terry Lita
May 18	8-4:30	Clinical Sup	CCD	Arthur
June 4	2 - 4	DHHS CIP	Greenlaw	Walter
June 15	8-4:30	Clinical Sup	CCD	Arthur
July 2	2 - 4	DHHS CIP	Greenlaw	Walter
July 20	8-4:30	Clinical Sup	CCD	Arthur
Aug 6	2 - 4	DHHS CIP	Greenlaw	Walter
Aug 17	8-4:30	Clinical Sup	CCD	Arthur

For more detail, see: *BTC Calendar* in Outlook's *Public Folders*.

Lean TIPs

➢ Measurable objectives should include:

- *An action verb [to reduce]*
- *Measurable output [internal errors at XX process]*
- *Quantity improvement [by 50%]*
- *Time frame [by December 22]*

➢ Goals & objectives should be *attainable, challenging, meaningful to the individual or team, based on company and/or department objectives, stated simply and clearly, and as specific as possible*.

—The Lean Office Pocket Guide

MDOL-BTC Case Study: Information Processing Job Jar VSM

Organization Profile:

MDOL performs some of the oldest processes in Maine State government, tracking its existence back to 1873. It now has 565 employees in four bureaus, down from 650 in 2004. The bureaus are Employment Services, Unemployment Compensation, Rehabilitation Services, and Labor Standards. MDOL has 26 Career Centers throughout Maine & 5 office sites in the greater Augusta area.

The Situation

MDOL workers were complaining that many IT work requests weren't being addressed. Requests for minor enhancements that had work-arounds were being ignored for ones that needed immediate attention or were large & required full-time programmer effort. Satisfaction with IT services was low, with complaints that IT needs were not being met. The IT group attributed the problem to a lack of programmers. MDOL management was reluctant to add personnel resources for support services while direct services were being cut. Dept. programming was perceived as not integrated & relatively "siloed."

The Response

Using its *Bend-the-Curve* initiative, MDOL chartered a continuous improvement Team to look at the problem and analyze the process. The Team met at the 11/04 China Lake mapping sessions and completed a current state map. It found that each Bureau/Unit submitted requests differently, resulting in 5 parallel processes. Only one expressed satisfaction with its process. Data on the # of requests completed and waiting was inconsistent, with no complete count of those neglected. Further, some requests were being intentionally withheld from the IT group for other prioritized work. The result was that the users, not aware of this, often faulted the IT group instead of the business side of the process. The Team also identified that the new State policy to track and document all database changes was not being implemented in any of the current systems.

The Team completed a future state, proposing changes that would result in a standardized request submission & documentation system across all DOL-IT work. It would also span the entire value stream, from the realization of the problem to completion & documentation. The Team projected system savings from fewer resubmissions & resulting project tracking so users know where requests are in the process or where they had been held up. The business would control priorities and the submission of requests to better track turn-around and completion. The system would be "pull" after that point.

The Team designed a form, process, and training for the business side to submit requests and to help them prioritize requests. It met with reps from each of the Bureaus/Units and the work gatekeepers, describing the problem & solution and gaining their cooperation in trying the process out. The Team created 1) a priority classification system to help business sort out which problems needed priority; 2) an estimation system to help business prioritize the work & provide feedback to business on what resources the project would require; 3) a web page that pulled the information together and guided the process for new people (also handy for regular users); and, 4) an emergency procedure for work needing rapid completion. It asked that codes & procedures be put in place in IT to track costs in the SLA categories of maintenance, enhancements, and projects. And lastly, it developed an organizational compliance plan. This was the first BTC team to create a process spanning the Department — important to BTC as well as to the process.

The Results

There's now a uniform process for request submission, creating a gatekeeper function within each Bureau to govern submissions and track the work. As a byproduct, the system will document changes to the databases and software. This represents the first department-wide standardization effort using the lean methodology.

The Team projected savings of $52,374/yr. for implementing 4 items, with a one-time cost of about $9K for an on-line tracking application. The benefit would be an organized system for prioritizing, approving, and tracking projects through the system and for tracking the costs of IT.

Ideally, this will enable measurement of requests in terms of their cause, source, number, and resources used — vital to resolving the Job Jar dilemma of too many requests for too few resources. It will provide the data to analyze what is really happening with the requested work and enable focused attention to the appropriate segment of the process.

Remaining work: 1) Analyze that data & remap the process, making further improvements & refinements; 2) Explore coordination on the IT end, primarily in grouping projects & using standardized programming across DOL & State government; and 3) Develop & implement standards for data and database fields, screens, and programming. Work has also been spawned for others: e.g. Common Intake Group which is looking across units to see if MDOL can standardize client and employer databases.

BTC-Lean Intervention Highlights

➤ **Information Resources (IR) Access**
  Process Improvement

Sponsors: Jim Lopatosky & Don F. Williams
Managers: Karen Curtis & Holly Pomelow

Because of feedback that employees aren't provided consistent or timely access to the information systems and computer programs necessary to conduct their work, an IR Access VSM Team (IT, HR, & program staff) met 12/5-7/2006 re: the provision of system and application access and access rights — particularly for new/ transferring employees. The team developed a new process that shifts the 1) identification and approval of technology needs to prior to new employees reporting for work and 2) provision of appropriate and timely access to information resources - including hardware, software, network, and specialized applications (depending on training requirements) - to the same day they report for work.

Its 1/16/07 implementation plan identified the changes and tasks, as well as related processes and problems, that must be addressed. Follow-up plan review work sessions were scheduled for 3/13 and 4/10.

Status: ☺ In its March 13th Plan Review work session, the IR Access Team:

✓ Reviewed the work done to date and assured appropriate postings to the Team's public folder.

✓ Identified barriers & possible strategies for removing/working around them.

✓ Agreed that the detailed work plans for changes/tasks will be completed by the lead responsible persons by 3/26.

✓ Decided to meet monthly on the second Tuesday of each month, 8AM-Noon.

✓ Decided to set up a Study Mission to the HETL labs (as part of the May work session). which have embraced the Lean approach, to see their lean improvement work and to gather from that staff any suggestions, ideas, lessons learned - benefit from their experience - in moving forward on IR Access.

✓ Reviewed the draft of a one-page "announcement"/overview of the IR Access Team & its work.

IR ACCESS TEAM - December 2006

Standing: Scott Cates, Elaine White, Norm Davidson, Eric Spear, Dale Sheldon, Jim Lopatosky
Seated: Carol Stover, Kim Cook, Debra Webb, Holly Pomelow, Karen Curtis

BTC-Lean Intervention Highlights

➤ Pervasive Developmental Disorders (PDD) System Design & Improvement

Sponsors: Sabra Burdick, DHHS &
David Stockford, DOE
Managers: State of Maine - Nancy Desisto
Community - Nancy Intrieri-Cronin

On October 27, 2006, a broadly representative community, family member, and State team began meeting to identify needs, current & future states, and create a plan that, when implemented, will coordinate and improve the multiple systems of care to meet the needs of individuals with PDD.

The work of this team forms the basis for the next mandated, periodic report to the State Legislature.

Status: 🙂 An overall project plan has been developed driving us to complete the plan report to the Legislature and to develop doable activities to advance the plan. We will concentrate our efforts in the next 3 months on "blasts" for earlier identification of children with PDD (under 2 years); identifying a potential new funding source; transitions from child-serving to adult-servicing systems; and looking more deeply into our adult programs to identify doable improvement strategies.

➤ In-State Travel Voucher Payment Process Improvement

Sponsors: Kirsten Figueroa & Liz Hanley
Manager: Chip Woodman

Many State employees are required to travel within Maine as part of their work. They then submit a request for and receive travel reimbursement. (Annual volume = approximately 17,000 requests.) Because of the many complaints of long-delays, a representative Travel Voucher Team was brought together to map and improve the reimbursement process on 11/8&13/2006. The team itself then decided to spend additional time 'finishing up' its Implementation Plan.

This plan will bring the 18-day average to process

New Interventions:

➤ Eligibility Annual Review Process. OIAS/DHHS

➤ Case Mix. OMS/DHHS

➤ Financial Management. OES/DHHS

➤ HETL:Environmental Lab. MeCDC/DHHS

➤ Payroll Process. DAFS

➤ Prior Authorization Process. OMS/DHHS

➤ Youth Transition to Adult Services Process. OIS/DHHS

*** If you're interested in observing, leading, or co-leading opportunities, contact Walter Lowell (287-4307)
*** For additional detail, refer to the Summary of Improvement Intervention statuses on the BTC Intranet site.

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each voucher down to 10 days. Some tasks include 'Traveler' Training, Standardizing Regional and Central Office Travel and Supervisory Approval processes, Eliminating Unneeded Reviews by Finance staff, and Updating/Error-Proofing the Travel Voucher form.

Status: 🙂 Two communications have been sent to staff to clarify and inform travelers of pertinent information. Leadership will discuss authorized signature recommendations to reduce processing time.

"Where leaders spend their time
sends a clear signal to the organization about what is important."

Quint Studer, Hardwiring Excellence

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

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We're on the Intranet !
http://inet.state.me.us./dhhs/bendthecurve

DOP 1-4 Date Tentatively Set for June 18-22

The 5-day CI-P introductory training is tentatively scheduled for June 18-22. Remember that you are a critical part of the CIP recruitment process because you're in a position to identify and encourage staff who have expressed interest and/or who you think would be effective CIPs. Nominations from the supervisors (whose support is required) are to be sent to Walter and/or Arthur. FYI, the CIP job description is on the DHHS *BTC* Intranet site. Remember, too, you can also play an important role at the DOP itself by volunteering to present and/or facilitate specific learning/practice segments.

BTC Continuous Improvement Practitioners: Intervention Facilitation Status					
DHHS		**DOL**		**DAFS**	
Kate D. Carnes	L	Jorge A. Acero	O	Rae-Ann Brann	L
Nancy Desisto	L	Michael T. Brooker	CL	Wendy Christian	O
Jane French	L	Stephen C. Crate	IA	Lyndon R. Hamm	CL
James Fussell	L	Arthur S. Davis	C	Alicia Kellogg	C
Rebecca S. Greene	L	Merle A. Davis	L	Billy J. Ladd	CL
Kimberly Johnson	C	Peter D. Diplock	O	Michaela T. Loisel	L
Julita Klavins	L	Anita C. Dunham	IA	Sam McKeeman	IA
Don Lemieux	C	Karen D. Fraser	L		
Muriel Littlefield	L	Timothy J. Griffin	L		
Walter Lowell	L	Matthew K. Kruk	O		
Jack Nicholas*	O	James J. McManus	CL	**DOT**	
Ann O'Brien	L	Bruce H. Prindall	L	Michael Burns	O
Cheryl Ring	CL	John L. Rioux	L	Jeffrey Naum	O
Terry Sandusky	L	Sheryl J. Smith	L	Robert Slocum	O
Jeffrey Shapiro	IA	David F. Welch	L		
Clough Toppan	CL			**DEP**	
				Carmel A. Rubin	IA
✱ Community CI-P		IA - Inactive		C – "Champion" for Lean	
O - Observer		CL – Co-Lead		L - Lead	