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# Bend the Curve CIP-News - April, 2007

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### **DHHS CI-P News**

## Bend the Curve

#### Who's Zoomin Who?



Perhaps one of the greatest technological achievements in our time is the revolution taking place in communication. We have the internet, instant mes-

saging, email, LANS, WANS, and cell phones — to name a few. While this technology has increased the speed of communication, it has not necessarily clarified it. Let me give you an example.

I had two friends who love each other dearly. One day, through some idle office gossip, one of them was told something that the other supposedly said. A flurry of emails between them ensued with each thinking that surely the writing of the email would clarify the situation for the other, but, alas, things only got worse, until one day they both cut off all communication altogether -- no calls, no visits, no emails, no nothing. WAR was declared. This is how life goes sometimes and how wars often start. So I ask, "Who is zoomin who?" Where did they get the idea that an email was a good way to communicate? Does it work for you? It doesn't really work for me, and I think I can write pretty well. Imagine the world those people who rely on this medium and can barely construct a sentence live in.

Communication is so much more than just words. You might say that, well, if they only used cell phones. At least there is a voice, but for me anyway, even the tone of a voice is not enough. I happen to believe that it is the light in your eyes, not the tone in your voice, that is more important than the words you speak. And emails and cell phones cannot transmit that light. If you fall into the trap of my two

friends, well, it is as close to hell on earth as you can get. Yet, increasingly, we seem to think that technology is a tool for clarifying discourse. It is a good way to hide, so think again friends. As with all tools, there are limits to its use.

One of the key ideas underlying lean thinking is the importance of unambiguous communication. What does this mean? Unambiguous communication means that those having the dialogue -- my friends, the customer and supplier (client and service provider) -- understand exactly what the other means (i.e. they are clear what is needed and when it is needed).

One reason we map processes and go on Gemba walks is to make the entire process visible to all the concerned parties so that each person in the value stream understands what the other is doing and why. Value stream mapping is about making our work as unambiguous as possible. We do this by having a team that knows the process, talks about it and then, by mapping it, makes it visible. So we can talk more about it and analyze it and improve it.

CI-Ps know from experience that they get called to map a process because the process is not clearly understood by all parties (e.g. it is ambiguous at some if not all levels). The map begins the revelation of protocols or procedures that are not defined or written or in which the people do not know what is expected of them. This is why one of the most common recommendations coming out of process mapping is to simplify and clarify by developing standard protocols, procedures, and timeframes and to train all staff concerning them.

In communication theory terms, we are getting the noise out of the system.

Cont'd on p.6 —

#### **April 2007**

Volume 2, Issue 4

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### Special points of interest:

- Next ClinicalsMay 18June 15
- DOP 1-4
   Scheduled
- BTC CI-P Calendar Created!

### Clinical Supervision Summary Notes: March 16, 2007

With CI-Ps assuming a greater role in BTC activities, Arthur explained that as of this Clinical, responsibility for facilitating the Clinicals would rotate among the CI-Ps. Peter Diplock "volunteered" to MC the agenda (**Agenda**) and facilitate the regular features for the day.

#### I. OPEN FORUM: PRACTICE ISSUES & CONSULTATION

- ➤ <u>Intervention Summaries</u>: A one-page summary that the IR Access Team itself developed re: its purpose/work & intended for leadership, management, & other stakeholders was distributed as an example for possible implementation. The CI-Ps agreed that a brief summary was a good practice that could be instituted by other intervention teams, as well as CI-Ps doing a summary of all Lean events they facilitate.
- > <u>CI-P News</u>: The March *CI-P News* was handed out & can be accessed on the DHHS BTC site: <a href="http://inet.state.me.us/dhhs/bendthecurve/">http://inet.state.me.us/dhhs/bendthecurve/</a>
- ➤ <u>Discussion</u>: 1) Maine hosting an international conference, involving lean, on operational excellence in government; 2) the different State and national project and innovation awards (Maine PMI, U.S. Government's Malcolm Baldridge, Harvard's JFK School of Government Innovation, etc.; 3) how an organization needs to pay attention to the function of the product as well as the product itself (e.g. PC's replaced main and midframes & companies that did not allow for that lost out. Also, railroads having forgotten for a long time that they were in the business of transportation, not simply railroads and having paid the price of this focus as a result); 4) the group talked about lean events where the problem is not clear or where there are a probably number of problems/issues (possible intervention: Common Functions Kaizen—green/red light thinking: <a href="http://www.maine.gov/labor/bendthecurve/teams/commonfunctions.shtml">http://www.maine.gov/labor/bendthecurve/teams/commonfunctions.shtml</a>.)
- ➤ <u>Open Forum Planning</u>: CI-Ps suggested again that, when possible, CI-Ps should forward the issues they wish to discuss at the Open Forum to Arthur/Walter. This will help to assure that everyone has an opportunity to bring their question/concern/example forward.
- **II. MEETING WITH KEN MILLER**, author of the *We Don't Make Widgets* book, and his senior partner Blake Shaw on Thursday, March 1<sup>st</sup>. Arthur expressed some reservations about integrating the generic widgets experience with the explicit lean BTC effort. However, he felt there may be ways to do this & that there may be uses for the generic version.

#### III. LEAN LEARNINGS: BOOK DISCUSSION - WE DON'T MAKE WIDGETS BY KEN MILLER.

David Welch led a discussion of Chapters 1-3 in Ken Miller's *Widget* book. The book is easy reading, with generic terminology, geared for transactions in government. Defining *widgets* is clarifying: determining the widget helps define the customer(s) & the value stream. Lean terminology is missing, which has both good and bad implications (in relation to BTC use, depending on the audience and where they are in Lean knowledge and implementation). The concept of "paving a cow path" (making permanent that which may or may not go somewhere) is useful in discouraging immediate leaps to technology. The distinction of moving versus motivating people through enabling is also helpful, as well as bringing process into control through empowerment to recognize problems, being able to stop process, & influencing changes in the process. Laws, rules, and policies are all engineering analogous to that in manufacturing. These are realized through operations.

#### IV. DHHS BTC SITE AND NEW STATEWIDE BTC PUBLIC CALENDAR (See page 7)

#### V. CERTIFICATION TASKS & DOP 1-4

Arthur Davis discussed the certification process and getting CI-Ps in the process on their way toward certification. The important thing at this point is to think about things for the portfolio which will represent the work the CI-P has performed (*For a summary, see the January CI-P News*). A Development of Practitioners intro-

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#### 3-16 Notes cont'd

# VI. ESTIMATING/PROJECTING CUSTOMER BENEFIT

John Rioux led an exercise involving the use and aggregation of Lead time from the VSM processes. The material for this exercise is here:

http://www.maine.gov/tools/whatsnew/index.php?topic=BTC Teams&id=35469&v=Default

In addition, the group suggested using averages for a particular process and building that into how it enters the aggregate.

#### VII. IMPLEMENTATION PLAN EXERCISE

This was deferred to the next Clinical. In response to CI-P comments, it will involve identifying specific tasks for implementation and determining dependencies and priorities.

#### VIII. NEXT CLINICAL

April 20<sup>th</sup>, 8AM – 4:30PM, at the Greenlaw Building, Ground Floor, Room 6 on the AMHI Campus.

#### Proposed Agenda Items:

- \* Matt Kruk will lead a discussion on chapters 4-6 of the *We Don't Make Widgets* book.
- \* Laying out the certification <u>implementation</u> process.
- \* Defining specific tasks for implementation and determining dependencies and priorities for the BTC plan.
- \* Ongoing Open Forum: Practice Issues & Consultation Segment.

Dave also urged the group to begin reading the *Hitchhiker's Guide to Lean*, which he felt should be <u>basic</u> Lean reading. Arthur re-enforced this, noting that DOL management is reading it, and it would be helpful for CI-P's to be on the same page. At this point, MDOL management is up to the 4th chapter.

Clough Toppan volunteered to do a presentation/ exercise around *Measurement as Part of Outcome* for a future Clinical.

We need a CI-P to volunteer to be the facilitator for the next Clinical!

- John L. Rioux

©For more detailed notes of Clinicals, go to the CI-P page on the DHHS Bend the Curve website.

#### Next Clinical Supervision: April 20th

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
<b>Apr 20</b> 8-4:30	Clinical Sup	Greenlaw	Walter
<b>Apr 26</b> 9-4	Payroll-FS	Greenlaw	Walter Jon K.
<b>May 1</b> 8-4:30	OES Financial Estate Mgt	/ ?	Jane Cheryl
<b>May 2</b> 9-4	Payroll-IP	Greenlaw	Walter Jon K.
<b>May 7</b> 2 - 4	DHHS CIP	Greenlaw	Walter
May 8 8-Noon	IR Access IP Review & Study Mission	221 State	Terry Lita
<b>May 9</b> 8-4:30	OES Financial Estate Mgt		Jane Cheryl
<b>May 18</b> 8-4:30	Clinical Sup	CCD	Arthur
<b>May 22</b> 8-4:30	OES Financia Estate Mgt	l/ ?	Jane Cheryl
June 4 2 - 4	DHHS CIP	Greenlaw	Walter
June 12 8-Noon	IR Access IP Review & Flow Activity	221 State	Terry Lita
<b>June 15</b> 8-4:30	Clinical Sup	CCD	Arthur
<b>July 2</b> 2 - 4	DHHS CIP	Greenlaw	/ Walter
<b>July 20</b> 8-4:30	Clinical Sup	CCD	Arthur
<b>Aug 6</b> 2 - 4	DHHS CIP	Greenlaw	Walter
<b>Aug 17</b> 8-4:30	Clinical Sup	CCD	Arthur

### Lean TIPs



- ➤ In planning & looking for process work improvements, keep in mind that One Uninterrupted Hour of Work = Four Interrupted Hours of Work.
- ➤ It will take between 15 to 20 minutes to get back to the same level of concentration you had achieved before you were interrupted.
  - —Kate Carnes, Intro to Supervisory Practices

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# BTC-Lean Intervention Highlights

#### DHHS-OIAS Eligibility Review Process Improvement

Sponsors: Sabra Burdick & Barbara Van Burgel

Managers: Tom Keyes & Peter Staples Facilitators: James Fussell & Clough Toppan

OIAS has been working to identify improvements to enhance accuracy and consistency in the eligibility review process across all the public assistance programs it administers and to facilitate the workflow in the maintenance of these programs. This effort has been made more urgent by potential federal program sanctions, resulting from a Food Stamp error rate that is the highest in the nation. Because a key element of the eligibility process is the completion of the annual review, improving the timeliness, accuracy, and completeness of the review will not only improve customer service but will also target error-prone areas, identify ways to mitigate these errors, and identify best practices.

Status: © The Eligibility Review VSM Team for the Bangor office has completed its Current and Future State mappings and its initial draft Implementation Plan. This Bangor plan addresses several major areas needing improvement:

- > Improve & streamline the design, format, and content of the review form/letters.
- > Improve the Case Action Summary Sheet.
- > Explore Clerical Supervision & Duties approach & structure.
- > Review Intake and Appointments processes.
- > Explore Waiver for Face-to-Face (FS).
- > Review / Redesign Reports.
- Improve & Redesign "Notice of Decision."

DHHS-OIAS Eligibility Review Team — Bangor - March 23, 2007



<u>Left to Right</u>: Candace Muller, Susan Lounsberry, Kathleen Tatseos, Terri Harding, Hope Page, Judy Dube, Laura Stevens, Peter Staples, Tom Keyes

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# BTC-Lean Intervention Highlights

#### New Interventions:

- Case Mix. OMS/DHHS
- ➤ HETL:Environmental Lab. MeCDC/ DHHS [Lowell / ??]
- ➤ Youth Transition to Adult Services Process. OIS / DHHS. Manager: Holly Stover
- \*\*\* 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.

#### > DHHS-OES Financial/Estate Management Process Improvement

Sponsor: Karen Elliott Manager: Cherie Wenzel

Facilitators: Jane French & Cheryl Ring

This VSM will look at financial/estate management for public wards and protected persons (i.e. setting up accounts, authorizing what needs to be sent by way of "payables" for clients, etc.) starting when OES gets court papers in hand appointing it as fiscal agent (guardian or conservator) for the individual and ending when this relationship is terminated.

Status: © Charter developed. Scheduled for May 1, 9 & 22nd.

#### > Payroll—DAFS

#### **Process Improvement**

Sponsor: Rebecca Wyke

Manager:

Facilitators: Walter Lowell & Jon Kirsch

Status: Charter developed. Several Current State sessions will be conducted, reflecting varying processes, with unified Future State and Implementation Plan sessions. These are scheduled for April 4, 11, 12 (all current state), 26 (future state) and May 2 (imp. plan).

#### ➤ Prior Authorization—MaineCare Process Improvement

Sponsor: Brenda McCormick Manager: Julie Tosswill

Facilitators: Terry Sandusky & Anne O'Brien

The MaineCare Authorization Unit processes over 18,000 requests annually for prior authorization (PA) of certain services & durable medical equipment and supplies. A health care provider submits a request for PA on behalf of a member, including documentation establishing medical necessity. A request is typically approved, denied, or deferred. Approved requests are issued & given a PA number, which must be put on the provider's claim form in order to receive payment. All documents must be maintained for 7 years.

<u>VSM Objectives</u>: To reduce the 30-day turnaround time for processing a PA request; to establish time benchmarks for reviewing requests according to service type; and to optimize phone call management.

Status: © Charter developed.

Interested in reading a bit about multi-tasking and its effects? Kate Carnes suggests:

http://www.apa.org/releases/multitasking.html

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### IR Access VSM Team & HETL to hold Study Mission

On May 8th, the IR Access Team and the Health & Environmental Testing Laboratories (HETL) will be part of a exciting hallmark event in State government: the IR Access Team will make a Lean study mission visit to HETL. This is the first time that improvement teams are collaborating in this way and is the first time that one team is looking to another <u>internal</u> team for expertise, to learn from it, and to apply the knowledge and experience to its own process improvement. The IR Access Team members are eager to learn from HETL's Lean experiences and insights.

The study mission will include an on-site visit and a discussion with HETL staff.

Director Jack A. Krueger, said that he will have his senior team present at the study mission so that they can provide different perspectives and results from several of their VSM sessions. He added that Lean productivity becomes a way of doing things. I believe that the way we started the process, by involving all of the staff in foundation values, was also helpful.

(FYI, in addition, as part of its lean learning at its next monthly progress meeting on June 12th, the IR Access Team have also invited Walter to conduct the flow activity exercise and discussion.)



### Who's Zoomin Who?

(Cont'd from p.1)

So the next time you map a process always be mindful of the communication issues and focus the team on clarifying the communication that is occurring all the way through the value stream.

Well, you might ask what happen to my two friends. I will give you two endings, and you tell me which one you think actually happened.

The first: When I last talked to them nothing had changed, they both loved each other dearly but both were too stubborn to break the impasse. This went on for some time until one day one of them got on a bike and rode down a hill and for a moment lost concentration, ran into a telephone pole, and died instantly. It was said by others that he was riding over to the other friend's house to finally apologize. On hearing of the death, the other friend spent a lifetime grieving the loss.

The second ending goes something like this: They continued to refuse to communicate until one day they passed each other quite by accident (or maybe not, who knows) and one word was exchanged and that made all the difference and today they are best of friends who have learned valuable lessons about courage and friendship and so many other things. I always wondered what word was exchanged between them and who spoke it first but they would never say. Others said no words were spoken, it was the light they saw in an instant in each other's eyes.

So, "Who was zoomin who?"

- Walter E Lowell

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# BTC Intranet Sites & New Statewide BTC Public Calendar

#### BTC Intranet Sites

The two BTC Web Sites and their contents can be accessed at the following sites:

DHHS BTC:

http://inet.state.me.us/dhhs/bendthecurve/

DOL BTC:

http://www.maine.gov/labor/bendthecurve/

#### BTC Calendar

There is a new Statewide, cross-departmental BTC public calendar in Outlook. It was created in response to a task in the draft BTC business plan that was developed by CIPs in the January Clinical.

The calendar is in the first layer of All Public Folders and is called (surprise! surprise!) "Bend the Curve". See the example to the left. The look or layout of your Outlook may be different, but this directory listing itself should be similar and recognizable.

Just left-click the calendar icon once, and the calendar will open up. This calendar works just like a regular Outlook calendar. Anyone on the "All CI Practitioners" list can access it and place BTC/lean events and activities on it. You can modify and delete your own items as you wish. Only certain people can modify or delete items created by other people (Walter, Lita, & John).

Please think about and advise Lita about what else you might want for other tools/formatting within the calendar that would be helpful – for example, color-coding new interventions that need CI-Ps.

The important point is that the content, accuracy, and completeness of this calendar are totally dependent on the CI-Ps themselves.

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Office of Lean Management, DHHS 47 Independence Drive, Greenlaw Bldg. Ground Floor, Room 6 Augusta, Maine 04333-0011 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.

#### OLM/BTC Staff:

Walter E. Lowell, Ed.D. CPHQ, Director

Phone: 207-287-4307 walter.lowell@maine.gov

Phone: 207-287-4217 lita.klavins@maine.gov

Julita Klavins, M.S.W.

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

BTC Continuous Improvement Practitioners:

Intervention Facilitation Status

#### DOP 1-4 Set for June 18-22

The 5-day CI-P introductory training is 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.

	DHHS		DOL			DAFS		
	Kate D. Carnes	L	Jorge A. A	lcero	O Rae-Ann Brann			L
	Nancy Desisto	L	Michael T. Brooker		CL	Wendy Christian		0
=	Jane French	L	Stephen C. Crate		ΙA	Rebecca S. Greene		L
t	James Fussell	L	Arthur S. Davis		С	Lyndon R. Hamm		CL
Ī	Kimberly Johnson	С	Merle A. D	L	Alicia Kellogg		С	
=	Julita Klavins	L	Peter D. D	0	Billy J. L	CL		
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1	Ann O'Brien	L			CL	Michael Burns		С
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/	Terry Sandusky	L			L	Jeffrey Naum		0
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	0 - Observer			L - Lead				

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