World-Class Management

Aligning Strategy and Goals
Throughout the Organization

Modern Healthcare Webinar Presented by:
Sarah Patterson
Executive Vice President & Chief Operating Officer
Virginia Mason Medical Center

November 10, 2011
World-Class Management
The Virginia Mason Production System

We adopted the Toyota Production System philosophies and practices and applied them to health care because this industry and we were so lacking in an effective management approach that would produce:

- Customer first
- Highest quality
- Obsession with safety
- Highest staff satisfaction
- A successful economic enterprise
We still don’t have stability in our processes

Primary Care Flow Manager Standard Work: Number of SW Implemented by Site

<table>
<thead>
<tr>
<th>Site</th>
<th>Total Work</th>
<th>Not Implemented</th>
<th>Partially Implemented</th>
<th>Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal Way</td>
<td>164</td>
<td>19</td>
<td>0</td>
<td>165</td>
</tr>
<tr>
<td>Kirkland</td>
<td>142</td>
<td>3</td>
<td>0</td>
<td>139</td>
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<tr>
<td>Lynnwood</td>
<td>81</td>
<td>31</td>
<td>0</td>
<td>50</td>
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<tr>
<td>Issaquah</td>
<td>164</td>
<td>100</td>
<td>8</td>
<td>56</td>
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<td>DT GIM</td>
<td>189</td>
<td>9</td>
<td>2</td>
<td>178</td>
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<tr>
<td>Bellevue</td>
<td>125</td>
<td>53</td>
<td>0</td>
<td>72</td>
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<tr>
<td>Winslow</td>
<td>81</td>
<td>10</td>
<td>0</td>
<td>71</td>
</tr>
</tbody>
</table>
Implementation < 100%

Outcome: Percent RPIWs with > 2 Targets Improved 90 Days Post-Event

- % of RPIW Targets Meeting Criteria
- Goal
The World-Class Management System is a leadership system that provides focus, direction, alignment, and a method of management for daily work.

This

Or This
World-Class Management

Requires:
• clear and complete goals
• a transparent environment
• an understanding of VMPS concepts, methods, and tools
• regular management presence where the work happens
• constructive and helpful feedback from top management
World-Class Management

Management by Policy
Provides focus and direction

Daily Management
Manages daily work

World-Class Management System

Cross-Functional Management
Aligns across the organization toward full customer satisfaction
World Class Management

Long Term Vision

5 Year Plans

Annual Goals

KPO Priorities

Quality and Safety
1. Ambulatory Prevention Bundles
2. Optimize Care Transitions
3. Zero Nosocomial Injuries
Fall Prevention
Health-care Acquired Infections
4. Patient Safety Curriculum
5. Innovative Clinical Value Streams

Hospital
Reduce lead time
Improve access and level the patient flow
Eliminate falls with injury, medication errors, and unplanned readmissions
Implement Standard Work for Leaders
Achieve margin targets

Clinic
Reduce lead time
Improve access and day of visit workflow
Eliminate defects in the administration of health maintenance modules
Implement Standard Work for Leaders
Achieve margin targets

Corporate
Reduce lead time
Zero defects in HR/Payroll information flow
Eliminate defects in the distribution of supplies & in OR instrument sets
Implement Standard Work for Leaders
Achieve margin targets
World-Class Management
Elements of Management by Policy

Reflection
• Environmental Scanning
• Review 5 Year Plans

Check and Review
• Compare performance to plan
• Occurs at all company levels

“Catchball”
• Idea exchange
• Feedback, engagement
• Identify resources / roles
• Set measurement criteria

Deployment
• Production plan
• Understanding/ awareness
• Develop strategies for
  • entire organization
  • departments
  • individuals

Adapted from elements of World Class Management, Management by Policy
World-Class Management

Management by Policy – Reflection

• Vision
• Customer Requirements/Customer Satisfaction Data
• Feedback from management

Environmental Scan – SWOT Analysis

Focus for Scanning
Customers (daily living, values, community profiles, etc.)
Emerging or changing market features and business outlooks
Current and potential profitability of different products
Technology (near and far-term forecasting)
Suppliers
Environmental/consumer protection attitudes and trends
Demographics (customers and employees)
Competition strategies
Strategic focus impacts on operations
Management by Policy - Catchball

We need more visibility for the IT strategy and when things are going to be rolled out.

“We will create a production plan that shows the plan for each of the IT strategies and post it on VNET.”
Explicit Goals and Work Plans

1. Strategic Plan Focus Areas: Patient Satisfaction and Service

1.1. Problem Statement:
- Patient’s perception of quality includes their service experience as a critical element.
- Team engagement is highly correlated with patient satisfaction.
- Quality, strong alignment with patient experience, and perception quality.
- Patient’s care experience.
- Specific goals: Patient Experience, Care Quality, and Service Excellence.

1.2. Plan:
- Improve patient experience by implementing new processes and systems.
- Enhance perception quality through targeted initiatives.
- Foster a culture of excellence across the organization.

1.3. Reflection on last year’s activities:
- Incremental improvements achieved.
- Continued focus on patient satisfaction and service excellence.

1.4. Improvement Focus Areas:
- Patient Experience
- Service Excellence

2. Organizational Resources:
- Overall Management Involvement: High commitment to patient satisfaction and service excellence.
- Data Analysis: Patient satisfaction analytics.
- Education/Training: 2 hours of didactic education for all VM team members.

3. Team Membership:
- Leadership:
- Patient Satisfaction Steering Committee
- Service Excellence Leadership Team

4. Action Plan (tactics):
- Service Education
- Team Coaching
- Provider Coaching
- Leader Rounding
- Service Deep Dive in Priority Areas

5. Check/ACT:
- Monitoring progress and adherence to established goals.
- Adjusting strategies as necessary.

6. Follow-up/Unresolved Issues/Progress Reporting/Metrics:
- Weekly updates on progress.
- Metrics to track performance.

7. Virginia Mason Medicine

Team Leadership
- Dr. Jane Smith
- Dr. John Doe

Team Members:
- Various departments and teams
- Project Management:
- Susan Jones
- Maria Rodriguez
World-Class Management
Management by Policy - Check and Review

- regular checks and reviews are critical
- determines current status of goal achievement
- conducted regularly (e.g., daily, monthly, quarterly)
- includes intensive, objective study of data
- joint problem-solving, planning, and follow-up may be required
Cross Functional Management

A management system for implementing breakthrough improvements that is always focused on the elements of full customer satisfaction.
## Orthopedic Value Stream

### Orthopedic Model Line: Hospital Clinic & Corporate KPOs

<table>
<thead>
<tr>
<th>Step</th>
<th>Quarter 1</th>
<th>Quarter 2</th>
<th>Quarter 3</th>
<th>Quarter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>H: 2/9 Ortho Model line 2010 work kick off presentation</td>
<td>C: Visioning Session</td>
<td>H: 9/27-28 SW for PMR aide</td>
<td>H: 12/13-17 Group PT, RPW, WSL: Sherryl Stolt; TL: Kate Reed (coach needed)</td>
</tr>
<tr>
<td></td>
<td>H: 3/25 3P Ortho Model line visioning session</td>
<td>C: Participate in 48 hour f/u phone call</td>
<td>H: 8/9-8/13 RPW Anesthesia Plan for Care</td>
<td>C: KE 11/9-10 Improving the TIR discharge process TL: Kayെndall</td>
</tr>
<tr>
<td></td>
<td>C: KE 1/4-5 s5 of Electronic Information</td>
<td>Co: 8/9-13 RPW implant set up flow (ortho flow #3)</td>
<td>INT: 8/9-13 Education Program Design</td>
<td>Co: 10/25-26 KE 55 of Procedure Room TL: Peter Allen</td>
</tr>
<tr>
<td></td>
<td>C: 3/20 Visioning Session Ortho Model Line</td>
<td>Co: 8/9-13 RPW implant set up flow (ortho flow #3)</td>
<td>Co: 7/16 Moonshine 2-bin Return area</td>
<td>C: KE 11/1/2 Indirect care work</td>
</tr>
</tbody>
</table>

**Hospital Target:** Orthopedic admit to discharge at 3 patient days. OR Patient arrival on day of surgery to incision on first case of the day.

**Corporate Target:** Purchasing: 1. from surgery request in the orthopedics clinic to first notification to purchasing department of implant needed. 2. from surgery to implant charge is released.

**Distribution:** From Supply bin (kanban) picked up until surgery delivered (hospital LG). Supply chain: % of expired medical supplies on hospital level.

**Clinic Target:** Ambulatory: Orthopedics TIR: from request of service to cash claim billed. 1. Access to clinic (3rd next and best available) b. Day of visit c. Inpatient LOS-VAM patients/MDx
Daily Management (DM)

A system used by an organization to perform its daily activities.
What is Daily Management

Repetitive daily activities and behaviors that leaders engage in to ensure customer demand is met and identify abnormal conditions.
Solving problems when they occur
Leaders Have Two Jobs

1. Run your business
2. Improve your business
Understand Your Value Stream and Daily Production

- Start with understanding your demand
- Know your supply
- Standard work developed and posted
And an example of the Hospital L7 board.

At a glance:

Staffing and Bed Capacity is understood.

Demand is known.
There are four principal elements of Daily Management:

- Leader standard work
- Discipline
- Visual Controls
- Daily Accountability Process
Leader Standard Work

• Standard work for leaders specifies the actions to be taken each day to focus on the processes in each leader’s area of responsibility.
# Leader Standard Work

**Hospital Assistant Nurse Manager**

<table>
<thead>
<tr>
<th>Day</th>
<th>ANM/CA Daily Standard Work</th>
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</thead>
<tbody>
<tr>
<td>7</td>
<td>Huddles: Unit Meeting</td>
</tr>
<tr>
<td>8</td>
<td>Huddles: ANM/CA</td>
</tr>
<tr>
<td>9</td>
<td>Call for downgrades</td>
</tr>
<tr>
<td>10</td>
<td>Bed Check</td>
</tr>
<tr>
<td>11</td>
<td>Update Patient Status</td>
</tr>
<tr>
<td>12</td>
<td>T/3 ANM/CA Huddle</td>
</tr>
<tr>
<td>13</td>
<td>Calling for downgrades</td>
</tr>
<tr>
<td>14</td>
<td>Staffing for upcoming shift</td>
</tr>
<tr>
<td>15</td>
<td>Comm with RN Supervisor</td>
</tr>
<tr>
<td>16</td>
<td>Unit Mingle</td>
</tr>
<tr>
<td>17</td>
<td>Make Assignment</td>
</tr>
<tr>
<td>18</td>
<td>Staging for upcoming shift</td>
</tr>
<tr>
<td>19</td>
<td>T/3 ANM/CA Huddle</td>
</tr>
</tbody>
</table>

**STAFFING**

<table>
<thead>
<tr>
<th>Day</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Annu Schedule Changes</td>
</tr>
<tr>
<td>8</td>
<td>Pers Staffing</td>
</tr>
<tr>
<td>9</td>
<td>Med Recon</td>
</tr>
<tr>
<td>10</td>
<td>Patient Lab</td>
</tr>
<tr>
<td>11</td>
<td>Patient Lab</td>
</tr>
<tr>
<td>12</td>
<td>Nursing scope of care orders As needed</td>
</tr>
<tr>
<td>13</td>
<td>Hourly Round spots &amp; investigating admission</td>
</tr>
<tr>
<td>14</td>
<td>Pers Staffing</td>
</tr>
<tr>
<td>15</td>
<td>Med Recon</td>
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</tbody>
</table>

**QUALITY**

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<td>Leader Rounds</td>
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<tr>
<td>8</td>
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<tr>
<td>9</td>
<td>Leader Rounds</td>
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<tr>
<td>10</td>
<td>Leader Rounds</td>
</tr>
<tr>
<td>11</td>
<td>Leader Rounds</td>
</tr>
<tr>
<td>12</td>
<td>Leader Rounds</td>
</tr>
<tr>
<td>13</td>
<td>Leader Rounds</td>
</tr>
<tr>
<td>14</td>
<td>Leader Rounds</td>
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<tr>
<td>15</td>
<td>Leader Rounds</td>
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**SATISFACTION**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>7</td>
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<tr>
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<td>9</td>
<td>Leader Rounds</td>
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<td>Leader Rounds</td>
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<td>Leader Rounds</td>
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<td>13</td>
<td>Leader Rounds</td>
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<tr>
<td>14</td>
<td>Leader Rounds</td>
</tr>
<tr>
<td>15</td>
<td>Leader Rounds</td>
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</table>

**MISCELLANEOUS**

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<td>Resolving staff problems</td>
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<tr>
<td>9</td>
<td>Resolving staff problems</td>
</tr>
<tr>
<td>10</td>
<td>Resolving staff problems</td>
</tr>
<tr>
<td>11</td>
<td>Resolving staff problems</td>
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<tr>
<td>12</td>
<td>Resolving staff problems</td>
</tr>
<tr>
<td>13</td>
<td>Resolving staff problems</td>
</tr>
<tr>
<td>14</td>
<td>Resolving staff problems</td>
</tr>
<tr>
<td>15</td>
<td>Resolving staff problems</td>
</tr>
</tbody>
</table>

**CONTINUOUS PATIENT CARE**

- Red represents tasks that cannot be omitted
- Cross out tasks as you complete
- Every 4 hours indicate total number of patient rounded on out of total census
- Indicate rounding status in Satisfaction box with red, yellow and green

**CONTINUOUS MONITORING OF PATIENT FLOW INTO AND OUT OF UNIT**

- 10/28
<table>
<thead>
<tr>
<th>Green</th>
<th>Red</th>
<th>Actions</th>
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<tr>
<td>DAILY</td>
<td></td>
<td>Review Unit Staffing for next 24hrs</td>
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<td></td>
<td></td>
<td>Review PSAs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Process PSAs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Review Hourly Audits</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Conduct Leader Rounds</td>
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<tr>
<td></td>
<td></td>
<td>Conduct Staff Rounds</td>
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<tr>
<td>WEEKLY</td>
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<td>Meet with ANMs</td>
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<td></td>
<td></td>
<td>Connect with CHL</td>
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<td>Weekly Compliance Reports</td>
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<tr>
<td></td>
<td></td>
<td>Strategize Staff Development</td>
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<td></td>
<td></td>
<td>ANM Development Work</td>
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<td>Med Recon Compliance Audit</td>
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<td>MONTHLY</td>
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<td>Schedule Creation</td>
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<td>Strategize Unit Staffing Needs</td>
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<td>Review Budget Reports</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Complete Budget Variance</td>
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<tr>
<td></td>
<td></td>
<td>Track ANM Kaizen Completion</td>
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<tr>
<td></td>
<td></td>
<td>Review Fit for Duty</td>
</tr>
</tbody>
</table>

**Action Plan if Red**

- Post NT positions above nurses related to multiple beds
- High risk and Top 10 list
- Discharged patients go to 24/7 implementation
- Team Steps goal 2011

**JIT Work**

- Sonya's Kaizen education of all staff to begin 10/5
- High Risk and Top 10 - ANMs completing 10/5
- Discharge pt. signal - roll out to LT 10/5
- Team Steps - Dr. Hansen to publish date of tour
- 2011 vacation - continuing the process
Visual Controls

Visual controls focus on the **process** and making it easy to compare **expected** versus **actual** performance.
Visual Controls

Production Control Board

RCI-J

Plan: 246
Actual: 81
Discrepancy: 221

Hitachi
Visual Controls
Visual Controls

At a glance:

Provider covering

Capacity after lunch

WIP:
  - Messages
  - Forms
  - Lab Results

TODAY IS: 10/28 Thursday

# OF PROVIDERS IN: 10 OUT: 5 % AWAY: ____

RESOURCE NURSE: DAWN CM: ____

AM H U D D L E  T I M E: 

E462 / Amber
WA73 / Pam
K147 / OUT
TO15 / OUT
TO01 / Erica

PM H U D D L E  T I M E: 

E462 / Amber
WA73 / Pam
K147 / OUT
TO15 / OUT
TO01 / Erica
Visual Controls

Here’s an example of how Insurance payment closure understands their business daily.

<table>
<thead>
<tr>
<th>Visual signal for help</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff member can see &amp; re-assign to help</td>
</tr>
</tbody>
</table>
Genba Rounds

Genchi Genbutsu-Go to the shop floor and see…
Daily Accountability Process

Daily accountability is the vehicle for ensuring that focus on process leads to action to improve it.
Daily Accountability
Foundational Elements Hospital Nursing Care

- Geographic assignments
- Huddles every shift
- In-room handoffs
- RN:PCT integration
- Hourly rounds by caregivers
- Documentation near the patient
- Daily leader rounds
- PeopleLink Boards updated and staff huddles done monthly
**Daily Accountability**

**Hospital Genba Rounds**

**Focus**
- Leadership rounding is a key principle of effective leadership
- Standard Work for Leaders is a 2010 target across all KPOs
- Genba Rounds in the hospital were initiated in 2008
  - Variability across all units
  - Lack of standards for participants conducting rounds

**Results**
- Created Foundational Elements Progress Report based on organizational goals, and nursing foundational elements
- Created Peer review process prior to Genba rounds
- Created standardized Genba Rounds Agenda template
- Created standard work for each Genba round participant
- Saved in shared folder on common G drive
- Team Agreements, Level 4 5S achieved

---

**Foundational Element**

<table>
<thead>
<tr>
<th>UNIT</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
<th>JUL</th>
<th>AUG</th>
<th>SEP</th>
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**Operations**

<table>
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<tr>
<th>TASK DESCRIPTION</th>
<th>OPERATOR</th>
<th>STEP</th>
<th>TASK DESCRIPTION</th>
<th>OPERATOR</th>
<th>STEP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>1.</td>
<td>Attend/Participate in Tuesday Standup with Genba Rounds in mind</td>
<td>KPO AD</td>
<td>1.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>2.</td>
<td>Review progress report, agenda and feedback form submitted by unit Directors and Managers</td>
<td>KPO AD</td>
<td>2.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>3.</td>
<td>Attend Genba Rounds on each unit as scheduled by Executive Scheduling.</td>
<td>KPO AD</td>
<td>3.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>4.</td>
<td>Listen to review by unit Leader, link elements to broader work of KPO</td>
<td>KPO AD</td>
<td>4.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>5.</td>
<td>Review current Lean Tools in use.</td>
<td>KPO AD</td>
<td>5.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>6.</td>
<td>Elicit feedback from participants, summarizing action items.</td>
<td>KPO AD</td>
<td>6.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>7.</td>
<td>Start at People Link board. Progress through Agenda, incorporating dialogue.</td>
<td>KPO AD</td>
<td>7.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>8.</td>
<td>Meet and greet Genba participants.</td>
<td>KPO AD</td>
<td>8.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>9.</td>
<td>Send electronic report by due date (1 day prior to Genba Rounds).</td>
<td>KPO AD</td>
<td>9.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>10.</td>
<td>Develop Agenda for Genba Walk</td>
<td>KPO AD</td>
<td>10.</td>
</tr>
<tr>
<td></td>
<td>Inpatient Leader</td>
<td>11.</td>
<td>Conduct pre-scheduled peer review Genba walk to review unit progress of Foundational elements</td>
<td>KPO AD</td>
<td>11.</td>
</tr>
</tbody>
</table>

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**Peer Review Schedule**

- Implemented: Plan with Progress
- Fully Implemented
- Implemented: Plan with Progress
- Foundational Elements Progress Reports

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**NOTE:** The Hospital AD will make notes in the Comments/Suggestions/Action Items box during the course of the Genba Rounds. The noted agenda is to be returned to the Inpatient Nurse Leaders.
Daily Accountability
Foundational Elements Clinical Operations

- 5s visit space (Exam rooms, work areas, storage areas)
- Standardized scheduling practices
- Standardized Rooming
- Standardized Visit Management
  - Specimen labeling & handling
  - Lab and test ordering
- Standardized Indirect Work Management
  - Refills, Results, Records
- Standardized Telephone Management
  - Handling and messaging
- Daily Team Huddles Every Morning
- Standardized communication of contingency plans
- Know your business: demand and capacity
- PeopleLink boards updated and occur weekly
Daily Accountability
Have daily huddles with your team

Example: Health Information Services
Daily Accountability

PeopleLink

- PeopleLink is Virginia Mason's standard method for communicating local and organizational goals to our staff.
- It's the way we connect the dots between what we do and why we are doing it.
- It creates accountability to management and staff to contribute to overall improvement efforts.
PeopleLink Boards

<table>
<thead>
<tr>
<th>Our Focus and Purpose</th>
<th>What our Customers are Saying</th>
<th>Our Focus</th>
<th>Target Sheet</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team Progress</td>
<td>Supporting</td>
<td>Supporting Data</td>
<td>Supporting Data</td>
</tr>
<tr>
<td>Current Work</td>
<td>Our Customers’ Experience (Value Stream Maps)</td>
<td>Today’s Work (Newspaper)</td>
<td></td>
</tr>
<tr>
<td>Turn Your Ideas</td>
<td>We Need Your Ideas On</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Our Focus and Purpose:
- What our Customers are Saying
- Our Focus
- Target Sheet

Team Progress:
- Supporting
- Supporting Data

Current Work:
- Our Customers’ Experience (Value Stream Maps)
- Today’s Work (Newspaper)

Turn Your Ideas:
- We Need Your Ideas On
“The appearance of information boards and other examples of visual controls is far less important than how they are used.”
“I look forward to every Thursday morning at 0730. I look around the room and see people from such different backgrounds, ethnicities, beliefs, cultures, job duties and titles but what I see is a common language, a common goal, common rules. The Strategic Plan is the glue that binds us, that teaches us the common language we speak.”
World-Class Management

Requires:
• Clear and complete goals
• A transparent environment
• An understanding of VMPS concepts, methods, and tools
• Regular management presence where the work happens
• Constructive and helpful feedback from top management
“In times of change, learners inherit the earth, while the learned find themselves beautifully equipped to deal with a world that no longer exists.”

Eric Hoffer
For more information on what Virginia Mason is doing...

Contact:
Virginia Mason Institute
www.VirginiaMasonInstitute.org
Phone: 206-341-1600