Presented by
KaiNexus

Leading with Respect:

Standard Work for Frontline Leaders

Presenter: Didier Rabino
Client Advisor, Value Capture
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Presenter: Jen Ashley
Site Supervisor, Sutter Health
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Host: Mark Graban
Senior Advisor, KaiNexus
Mark@KaiNexus.com

Presenters

Didier Rabino

- Client advisor at Value Capture (1 year)
- Lean Sensei at HealthEast and Fairview (7 years)
- Operation leader and Lean architect at Andersen Windows (8 years)
- Operation leader and Lean advisor at Steelcase (13 years)

Jennifer Ashley

- Site Supervisor at Sutter Valley Medical Foundation (12 years)
- Sutter roles have included:
  - Patient Service Representative
  - Patient Service Coordinator
  - Leading a team on innovation for Practice Design and In Person Patient Flow.

Leading with Respect:
Standard Work for Frontline Leaders

September 15, 2020

Who is Sutter Health?

- Sutter Health is a not-for-profit integrated health delivery system headquartered in Sacramento, California. We enhance the well-being of people in the communities we serve through our commitment to compassion and excellence in healthcare services.
- Founded in 1921 as a response to the 1918 Flu Pandemic
  - 24 hospitals
  - 200 clinics
  - Approximately 12,000 physicians
  - 2,000 advanced practice clinicians
  - 14,500 nurses
  - 55,000 employees
- Sutter Health Key Results: we deliver healthcare that is safe, personal, affordable and accessible

Who is Value Capture?

Trusted Advisory group **founded in 2005.**

Our **mission** is to partner with healthcare executives to capture all of the value possible - value for their patients, staff, communities, and the sustainability of the enterprise.

Our **vision** is create model sites for healthcare, inspiring and teaching others to close the gap on perfect care at the lowest sustainable cost.

Our **goal** is to develop capability within your organization to solve problems every day, creating a culture of improvement.

Our **trusted expert advisors** come from a variety of backgrounds and are experienced in system transformations.

Sutter Health VALUE CAPTURE

Leading with Respect

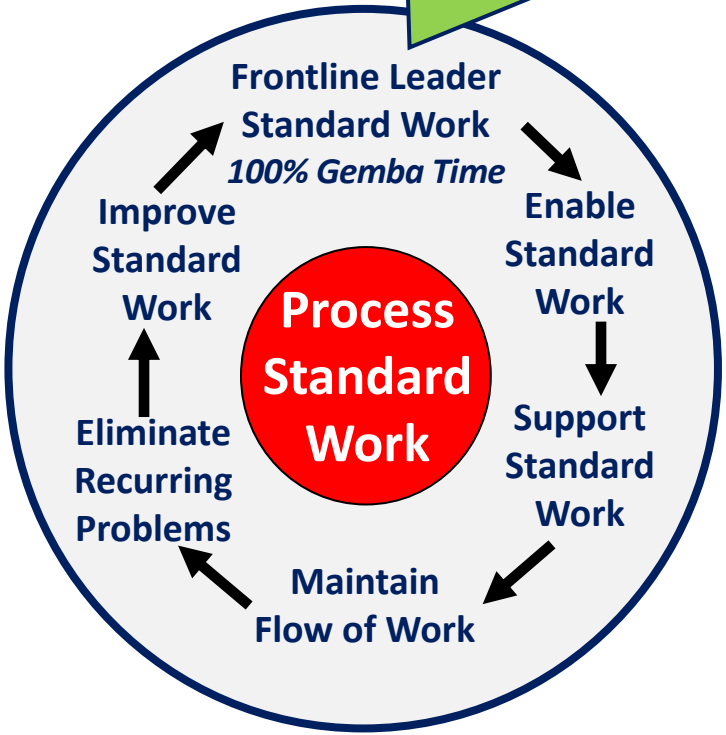
Standard Work for Frontline Leaders

Learning Objectives:

- Explain the frontline leader's role and responsibilities
- Define process and tools to support the frontline leader’s SW

Frontline Leader Role

ULTIMATE OBJECTIVE: THE IDEAL STATE
Frontline employees are successful 100% of the time in **executing** and **challenging** their standard work.



1 - Establish Process Standard Work

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START HERE
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- Identify the key processes (those critical to customer needs)
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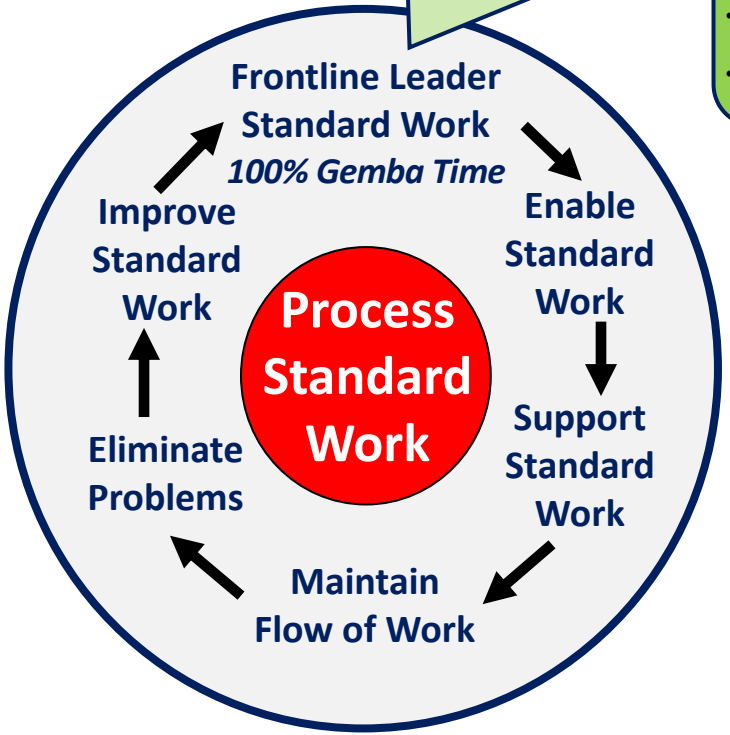
- Teach standard work using job breakdown and other techniques.



1 - Establish Process Standard Work

Expected outcomes for rooming process standard work:

- Agreement on needs to be addressed today
- Vitals collected
- Outstanding health maintenance items identified

Teach standard work with job instruction

HOW TO GET READY TO INSTRUCT

Have a Time Table— how much skill you expect him to have, by what date.

Break Down the Job— list important steps. pick out the key points. (Safety is always a key point.)

Have Everything Ready— the right equipment, materials, and supplies.

Have the Workplace Properly Arranged— just as the worker will be expected to keep it.

Job Instruction Training

TRAINING WITHIN INDUSTRY
Bureau of Training
War Manpower Commission

KEEP THIS CARD HANDY

Front of the Job Instruction Card

HOW TO INSTRUCT

Step 1—Prepare the Worker
Put him at ease.
State the job and find out what he already knows about it.
Get him interested in learning job.
Place in correct position.

Step 2—Present the Operation
Tell, show, and illustrate one IMPORTANT STEP at a time.
Stress each KEY POINT.
Instruct clearly, completely, and patiently, but no more than he can master.

Step 3—Try Out Performance
Have him do the job—correct errors.
Have him explain each KEY POINT to you as he does the job again.
Make sure he understands.
Continue until YOU know HE knows.

Step 4—Follow Up
Put him on his own. Designate to whom he goes for help.
Check frequently. Encourage questions.
Taper off extra coaching and close follow-up.

If Worker Hasn't Learned, the Instructor Hasn't Taught

Back of the Job Instruction Card

Rooming Process Standard Work Formalized:

IMPORTANT STEPS		KEY POINTS	REASON
WHAT I am doing A logical segment of the operation when something happens to advance the work.		**HOW I must do the work.** 1. Things that make or break the job 2. Things that prevent injury 3. Things that make the work easier to do; a "knack or a trick"	**WHY I must do it this way** Reasons for the Key Points
1.	Prepare room	• Clean and stock room • Assign room number with DAR • Print medication list • Review chart for any relevant info	• Avoid contamination and product shortage • Room number notifies PSR room is ready • Med list helps with med rec in step 6 • Chart review to know what is needed
2.	Welcome patient	• Use AIDET • Validate patient identification	• Improve patient satisfaction • Safety step
3.	Start rooming	• Collect pt weight • Direct them to take a seat • Perform hand hygiene	• Used for medication dose • Make patient at ease • Avoid care givers and patients from getting sick
4.	Start Epic documentation	• Ask/confirm what pt is being seen for (appt notes) • Start applicable scribe note	• Verifies what notes to open/process to follow • Enables quick access to documentation
5.	Set agenda	• Inquire what else pt has to discuss until no other concerns brought up • If multiple concerns, find out what pt wants to be seen for today • Make another appt if needed and document	• Agenda setting keeps appt focused • Allows other concerns to be addressed properly later • Avoid flow of other patients to be impacted by a long visit
6.	Complete rooming	• All needed verifications in rooming tab • Add Chief Complaint of med rec if needed • Pend refills and complete HM topics as appropriate • Obtain and enter vitals including 2nd BP if needed	• Patient safety • Flags for clinicians that items need addressed • HM completion helps keep pt healthy • Helps clinician assess what to address with patient
7.	Prepare for clinician	• Finish progress note prep • Send 2-minute warning to clinician • Update clinician with reason for visit	• Informs clinician prior to entry what pt is being seen for • Gives time for clinician to see note/vitals and enter the room at the proper time • Affirms agenda setting and reduces deflections

Sutter Health VALUE CAPTURE

2 - Enable Standard Work

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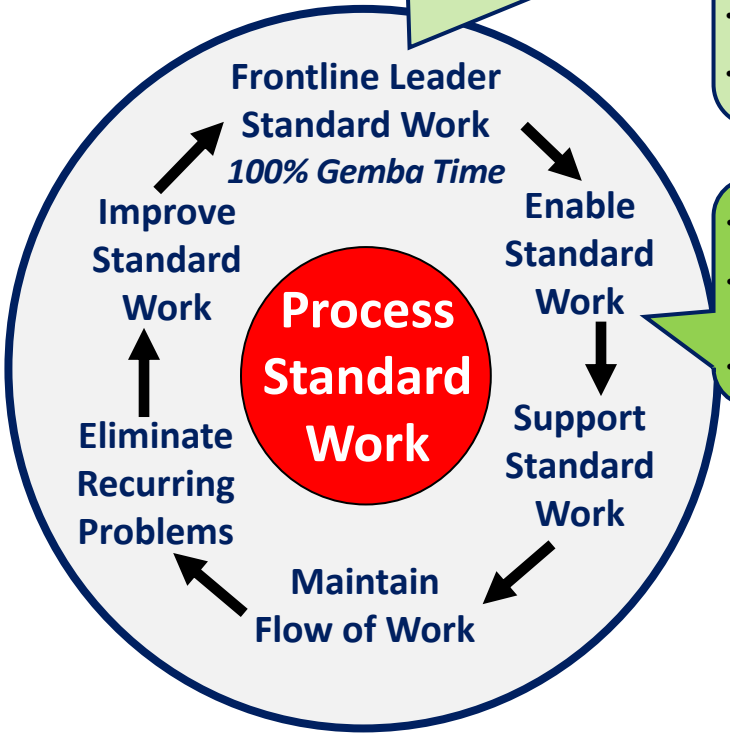

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- Train employees to meet the needs listed in the cross-training matrix.
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- Give reinforcing and corrective feedback.

Sutter Health VALUE CAPTURE

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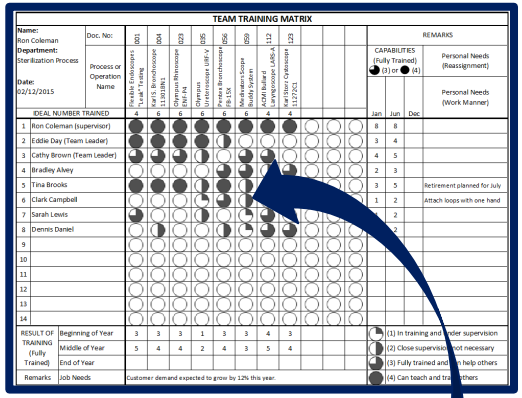


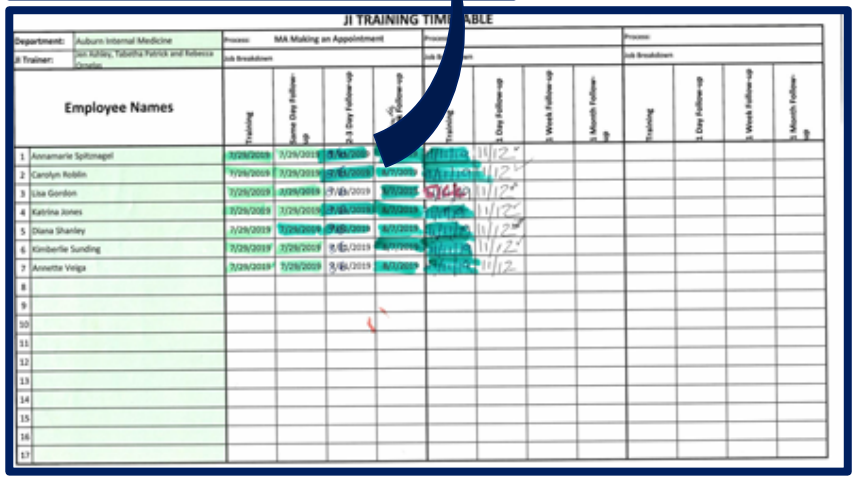
TEAM TRAINING MATRIX

Name: Ron Coleman
Department: Sterilization Process
Date: 02/12/2015
Doc. No:
Process or Operation Name

	IDEAL NUMBER TRAINED	4	6	6	6	6	6	4	4	Jan	Jun	Dec	Personal Needs (Reassignment) / Personal Needs (Work Manner)
1	Ron Coleman (supervisor)	●	●	●	●	●	●	●	○	8	8		
2	Eddie Day (Team Leader)	●	●	●	◑	◑	○	○	○	3	4		
3	Cathy Brown (Team Leader)	◑	◑	◑	◑	◑	◑	◑	○	4	5		
4	Bradley Alvey	○	○	○	○	◑	◑	◑	○	2	3		
5	Tina Brooks	●	●	●	◑	◑	◑	◑	○	3	5		Retirement planned for July
6	Clark Campbell	○	○	○	○	◑	◑	○	○	1	2		Attach loops with one hand
7	Sarah Lewis	◑	○	○	○	◑	○	◑	○		2		
8	Dennis Daniel	○	◑	○	○	◑	◑	◑	○		2		
9		○	○	○	○	○	○	○	○				
10		○	○	○	○	○	○	○	○				
11		○	○	○	○	○	○	○	○				
12		○	○	○	○	○	○	○	○				
13		○	○	○	○	○	○	○	○				
14		○	○	○	○	○	○	○	○				
RESULT OF TRAINING (Fully Trained)	Beginning of Year	3	3	3	1	3	3	4	3				
	Middle of Year	5	4	4	2	4	3	5	4				
	End of Year												
Remarks	Job Needs	Customer demand expected to grow by 12% this year.											

CAPABILITIES (Fully Trained) ◔ (3) or ● (4)
(1) In training and under supervision
(2) Close supervision not necessary
(3) Fully trained and can help others
(4) Can teach and train others

Train employees to do the work



JI TRAINING TIMETABLE

Department: Auburn Internal Medicine
JI Trainer: Jen Kohler, Tabetha Patrick and Rebecca Crosby
Process: MA Making an Appointment
Job Breakdown

	Employee Names	Training	1 Day Follow-up	3 Day Follow-up	1 Week Follow-up	1 Month Follow-up	Training	1 Day Follow-up	3 Week Follow-up	3 Month Follow-up	Training	1 Day Follow-up	3 Week Follow-up	3 Month Follow-up
1	Annamarie Spitznagel	7/28/2019	7/29/2019	8/1/2019										
2	Carolyn Roblin	7/26/2019	7/29/2019	8/1/2019	8/7/2019									
3	Lisa Gordon	7/26/2019	7/29/2019	8/1/2019	8/7/2019									
4	Katrina Jones	7/26/2019	7/29/2019	8/1/2019	8/7/2019									
5	Diana Shanley	7/29/2019	7/29/2019	8/1/2019	8/7/2019									
6	Kimberlie Sunding	7/29/2019	7/29/2019	8/1/2019	8/7/2019									
7	Annette Veiga	7/29/2019	7/29/2019	8/1/2019	8/7/2019									

Stand-up to ensure employees can be successful to do the work

STAND UP – PLAN TO WIN THE DAY 7:00AM

① PATIENT NEEDS — Dr. Matthias | Dr. Pham | Dr. Tamasaky | Dr. Kalla | Dr. Lin
ADA — OFF
INTERPRETER — OFF
X FAM MEMBERS — OFF
PROCEDURE RM!! — OFF
EKG — OFF
SUTURE REMOVAL — OFF
OPEN SLOTS
OTHER

② PEOPLE — AM — PM
SCRIBE 1 — Abby / Abby
SCRIBE 2 — Shaunda / Shaunda
SCRIBE 3 — Leslie / Leslie
SCRIBE 4 — Katrina / Lisa
SCRIBE 5 — Kim / Diana
SCRIBE 6 — Annemarie / Annette
OVERFLOW OR — Diana / Kim
OVERFLOW BL — Lisa / Katrina
FLOAT MA — Alicia
RN — Trina
PSR CHECK IN — Christina
PSR VW — Misty

TRAINING PLAN FOR DAY
MEETINGS/COVERAGE
Reflections 1030–1230
VISITORS FOR TODAY
NEED TO KNOW

③ EQUIPMENT BROKEN — DATE | EQUIP | STATUS | TX #
1/22/20 — Thermometer Down — Work Order Placed — 86555
1/23/20 — Weight Stick — Work Order Placed — 86587
1/29/20 — Computer Not Turning On — IT Ticket Placed — 93572

④ SUPPLIES — DATE | SUPPLY OUT | PLAN 4 DAY
1/27/20 — BP Logs — Ordered
1/29/20

⑤ EXPERIMENT 4 DAY
- NO SHOW SIGN
- If you need to cancel Overflow MA use SPOK to inform float MA of cancellation.
- Remove Walk Out once room # is added

Sutter Health VALUE CAPTURE

3 - Support Standard Work

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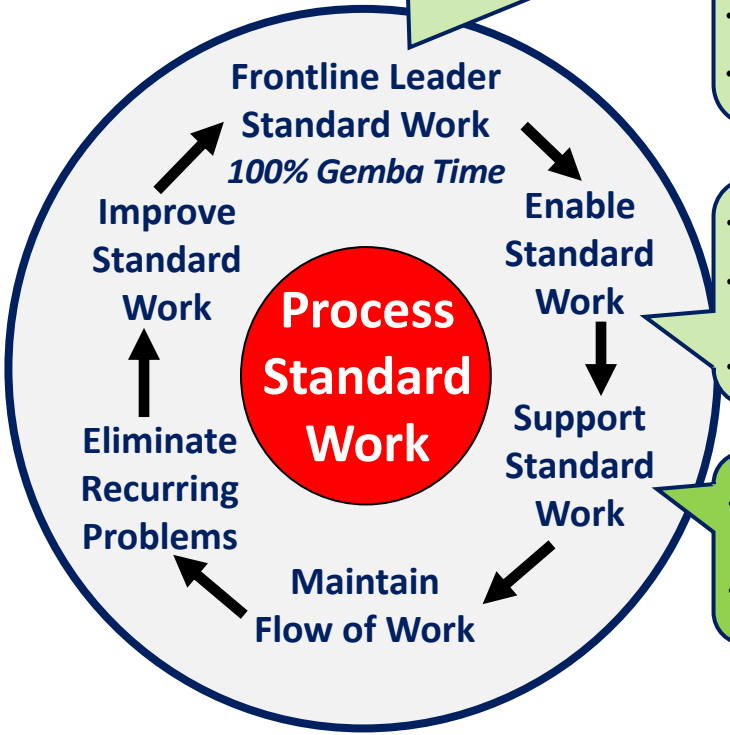

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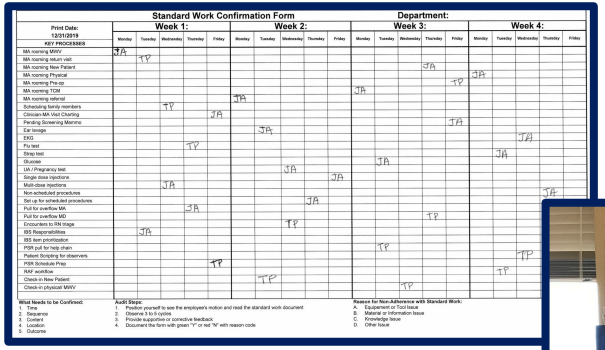
Sutter Health VALUE CAPTURE

3 - Support Standard Work

Standard work confirmation Table



Standard Work Confirmation Form — Department:

Print Date: 12/31/2019

KEY PROCESSES	Week 1: Monday	Tuesday	Wednesday	Thursday	Friday	Week 2: Monday	Tuesday	Wednesday	Thursday	Friday	Week 3: Monday	Tuesday	Wednesday	Thursday	Friday	Week 4: Monday	Tuesday	Wednesday	Thursday	Friday
MA rooming MWV	JA																			
MA rooming return visit		TP																		
MA rooming New Patient														JA						
MA rooming Physical															TP	JA				
MA rooming Pre-op											JA									
MA rooming TCM																				
MA rooming referral						JA														
Scheduling family members			TP																	
Clinician MA Visit Charting					JA															
Pending Screening Mammo															JA					
Ear Image							JA													
EKG																		JA		
Flu test				TP																
Strep test																	JA			
Glucose												JA								
UA / Pregnancy test								JA												
Single dose injections										JA										
Multi-dose injections			JA																	
Non-scheduled procedures																			JA	
Set up for scheduled procedures									JA											
Pull for overflow MA				JA																
Pull for overflow MD														TP						
Encounters to RN triage								TP												
IBS Responsibilities		JA																		
IBS item prioritization																				
PSR pull for help chain												TP								
Patient Scripting for observers																			TP	
PSR Schedule Prep					TP															
RAF workflow																	TP			
Check-in New Patient							TP													
Check-in physical MWV													TP							

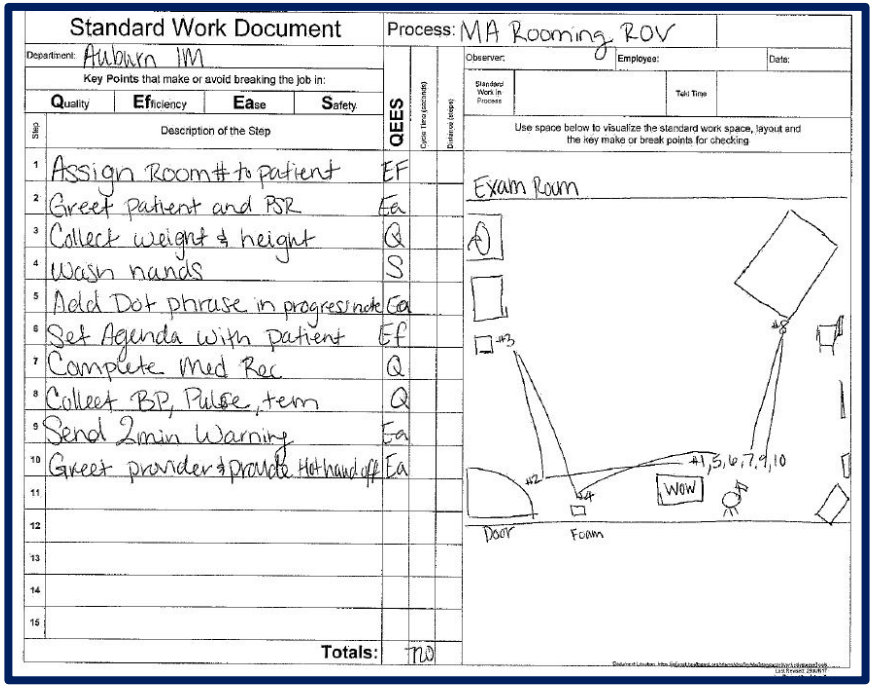
What Needs to be Confirmed:
1. Time
2. Sequence
3. Content
4. Location
5. Outcome

Audit Steps:
1. Position yourself to see the employee's motion and read the standard work document
2. Observe 3 to 5 cycles
3. Provide supportive or corrective feedback
4. Document the form with green "Y" or red "N" with reason code

Reason for Non-Adherence with Standard Work:
A. Equipment or Tool Issue
B. Material or Information Issue
C. Knowledge Issue
D. Other Issue

Process Observation Calendar

Standard work document as a visual management tool



Standard Work Document — Process: MA Rooming ROV

Department: Auburn IM

Key Points that make or avoid breaking the job in: Quality | Efficiency | Ease | Safety

Observer: | Employee: | Date:

Standard Work in Process | Takt Time

Step	Description of the Step	QEES	Cycle Time (seconds)	Distance (steps)
1	Assign Room# to patient	EF		
2	Greet patient and PSR	Ea		
3	Collect weight & height	Q		
4	Wash hands	S		
5	Add Dot phrase in progress note	Ea		
6	Set Agenda with patient	Ef		
7	Complete Med Rec	Q		
8	Collect BP, Pulse, tem	Q		
9	Send 2min Warning	Ea		
10	Greet provider & provide Hot hand off	Ea		
11				
12				
13				
14				
15				
	Totals:	TNO		

Use space below to visualize the standard work space, layout and the key make or break points for checking

Sutter Health VALUE CAPTURE

4 – Maintain Flow of Work

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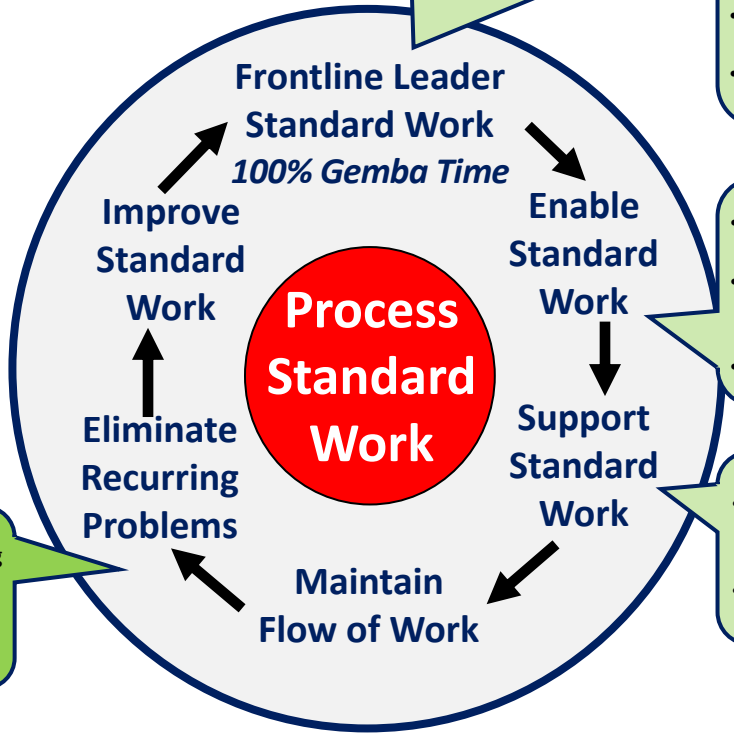

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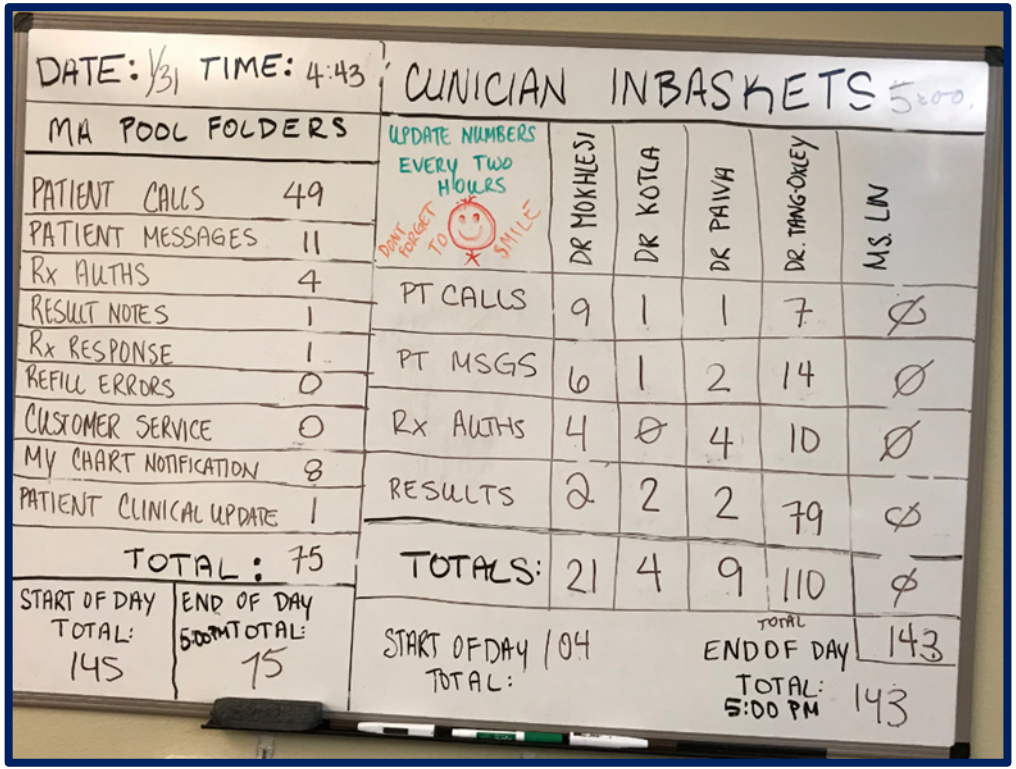
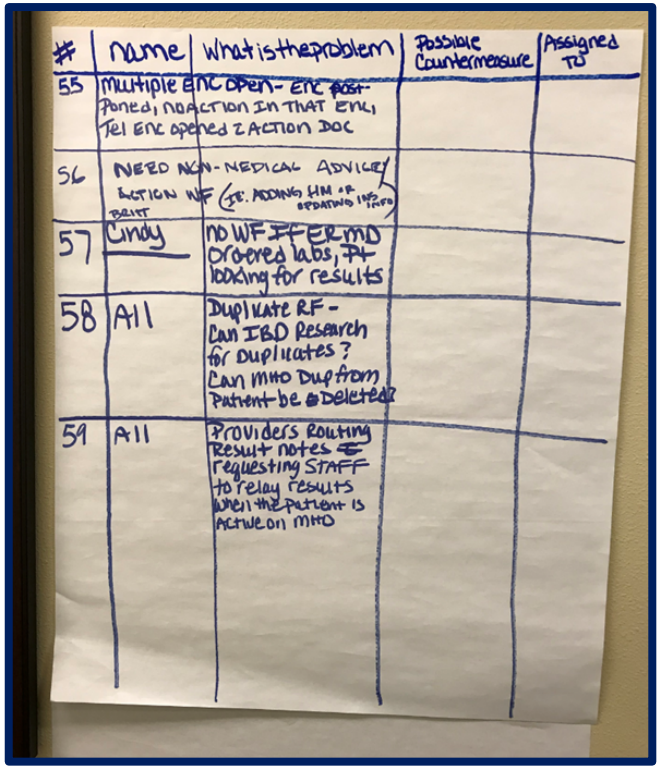
3 - Support Standard Work
- Confirm standard work regularly and frequently (inspect what you inspect so people respect what you expect – Be aware of new needs, change, emerging gaps)
- Use the help chain in real time to remove obstacles to standard work.

4 - Maintain Flow of Work
- Record output and problems throughout the day, using flip chart in a visual area for all.
- Identify the causes that generated these problems.
- Use visual signals and visual metrics to identify potential issues in real time.

Sutter Health VALUE CAPTURE

4 – Maintain Flow of Work





5 - Eliminate Recurring Problems

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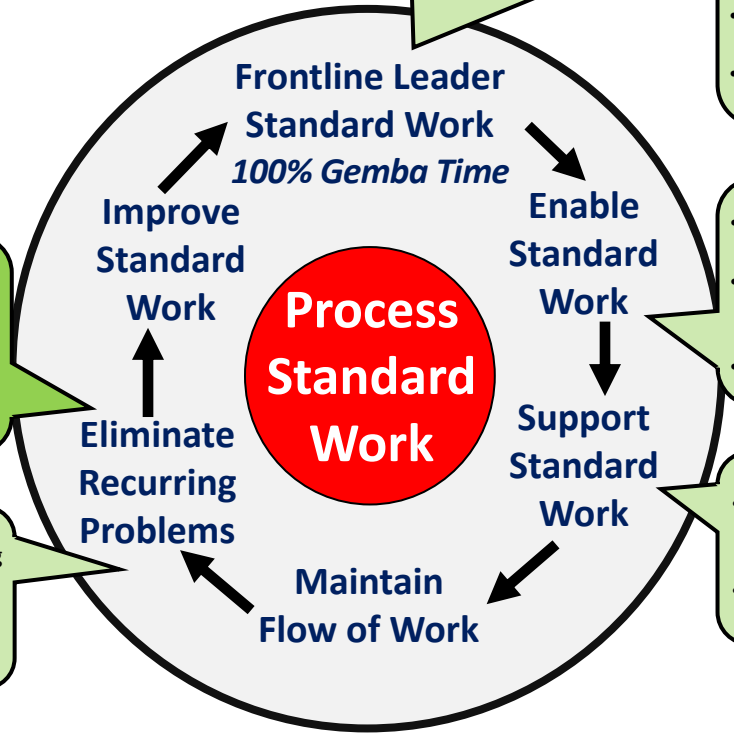

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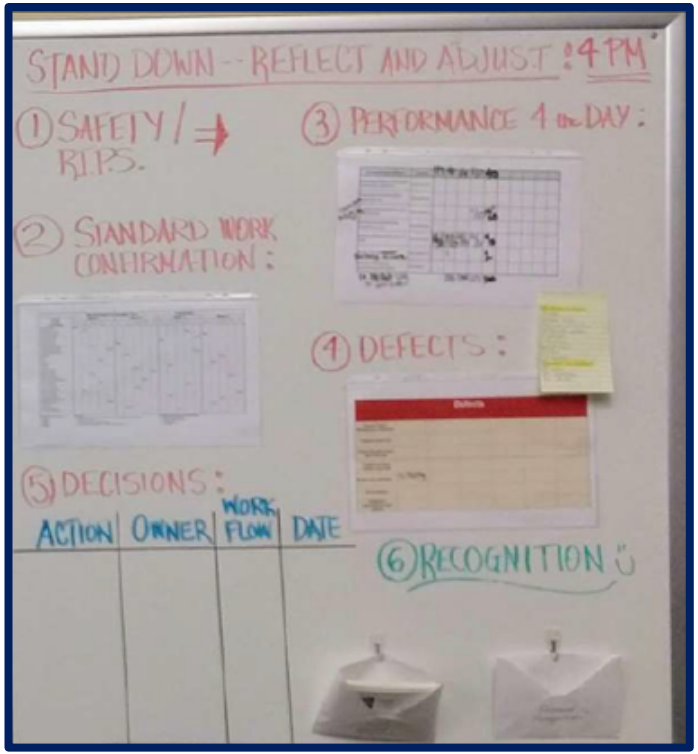
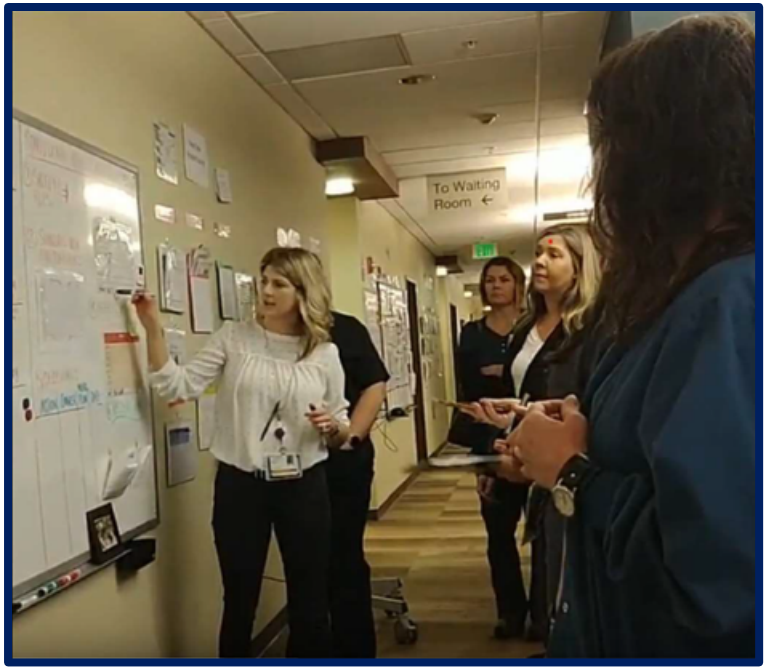
5 - Eliminate Recurring Problems
- Use the stand-down meeting to review with the team the main problems recorded during the day.
- Engage team members to analyze the causes using 5-Why in order to get to the root and implement countermeasures.
- Verify effectiveness

Sutter Health VALUE CAPTURE

5 - Eliminate Recurring Problems





6 – Improve Standard Work

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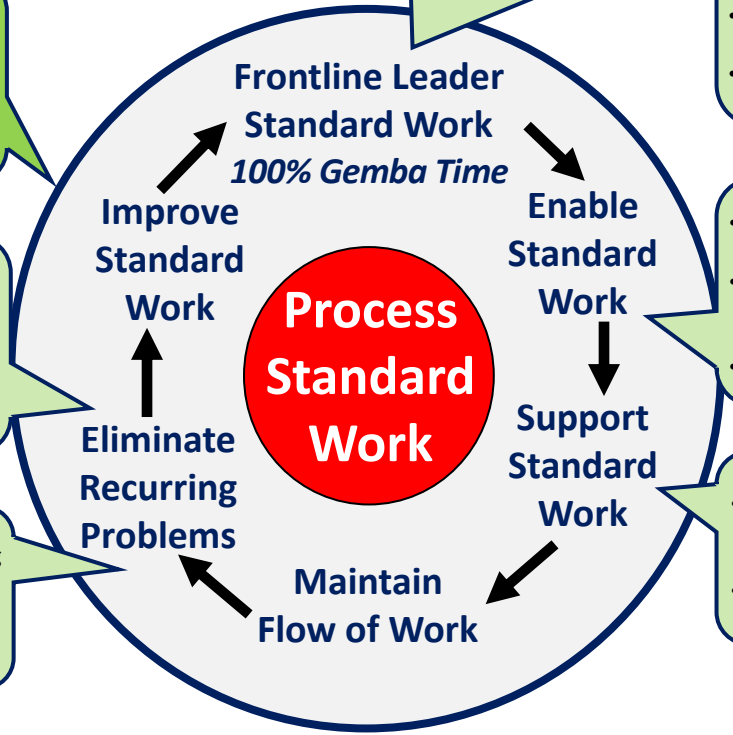
6 - Improve Standard Work
- Engage employees to submit ideas that improve standard work in terms of safety, quality, ease to learn, and efficiency.
- Support employees in experimenting and implementing the ideas.
- Recognize efforts. Share and spread success.



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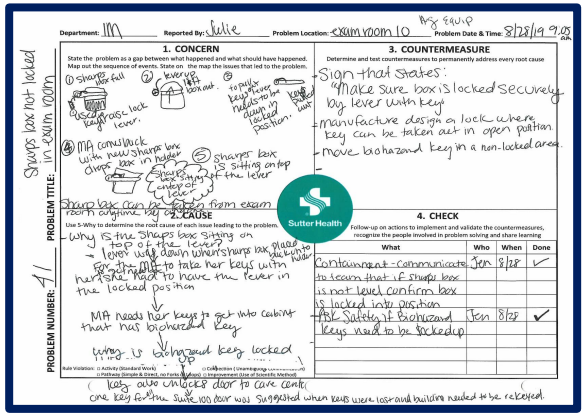
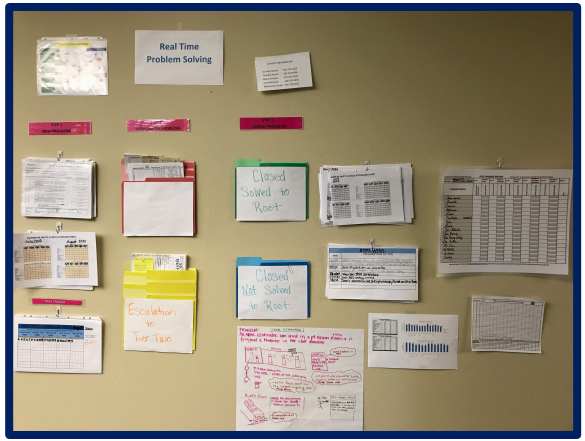
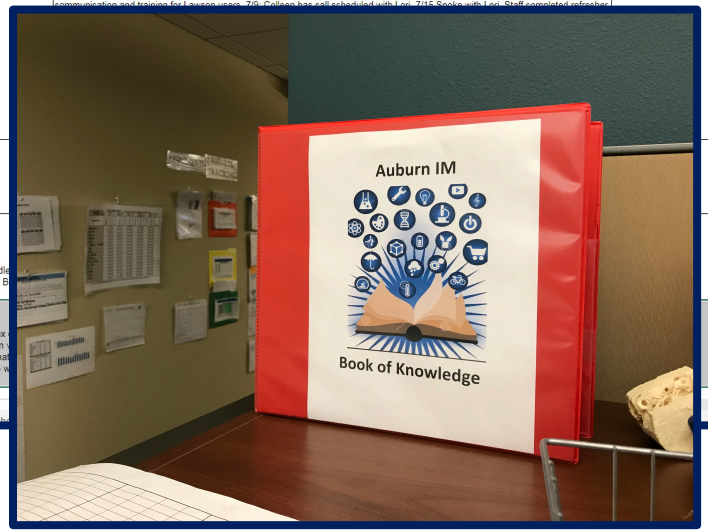
6 – Improve Standard Work





Date of Escalation	Department	Description and Date of Event	Status-	Escalation outcome	Date of update/escalation/new owner	Closed? Y/N, Dat
7/16/19, 8/9/2019	IM	"Pt Cln update notification" folder no standard work during interim of MHO changes. Need help from Adrina Weicher team and Tom Stoffregen.	SS reached out to Epic trainer to investigate and define. Info sent to RAD that further information may be coming. To be escalated ot Tier 4 as FYI and steps taken. Re-escalated 7/23 Jona will reach out to Jeremy Sutton re: has he reviewed the e-mail.JM did not. 7/22/2019 Meeting set up for 7/23/2019 with Betty, Jeremy, Tom, and Jen to discuss next steps. (C.R) 7/24 Jen had meeting and coaching. Follow up meeting scheduled. Follow up with Jen. 8/5. Jen has meeting scheduled 7/31 at 12:30 PM(see below) LOOK FOR UPDATE AFTER SEPT 5TH FROM JEN. Meeting set up with Betty and Tom Stoffregen 8/13/19. Meeting on 8/15- outcome Tom will put to gether SBAR for MHO Steering committee to review and action. Tom is going to work with Jeremy Sutton regarding reports to see if they is happening elsewhere. we have a follow up meeting on 9/6.9/5 Meetig Betty will be meeting with her Enhancement team next week on. Emails sent. 9/29 Jen is requesting in person meeting and will ask if attendees need more time to consider date. 9/16/2019 Confirmed it is on the Sept adgenda for Epic Mentor meeting. (cr) 9/27/19 update Jen had meeting with Betty. She is working with Tom Mitchell on her SBAR to have a send a message button added to MHO screen. 10/25/19 meeting with Betty and Tom Stoffregen. We are moving forward with Adding veribage to the MHO clinical Screen (under the Allergy, Health Issue and Medication) to educate patients of proper use. Next steps Tom will submit this request to MHO steering. Next meeting to follow up is 12/20. New info from the MHO team, Lisa to round with Jen (jm) 11/7/19. 12/20/19- Due to Epic upgrade this request was not submitted to the MHO steering. Next steps Tom will be working with Betty to put together request for MHO steering. next meeting scheduled for 2/13/20. Had phone call with Tom and Betty. Tom will email Dr. Veena Jones the Medical Director for MHO asking to take the enhancement request to MHO steering. Our next follow up meeting is on 3/26/20 JA. Meeting pushed out to 4/22/2020 JA. Meeting got pushed out to 5/21/2020 JA. Had meeting with Tom Stoffergen he is going to work with Tifanie Hayden from the MHO system team to add verbiage to the MHO clinical Screen (add "only provide confirmed diagnosis"). next meeting TBD. JRA 5/21/20		TBD Jen	
7/3/2019		Purchasing	5cc slip tip found in storage. Staff identified they did not have the correct Lawson number. Frequently number changes. Communication is ineffective and inconsistant causing re-work by care center staff and purchasing staff. Email sent to Lori Linch to discuss method of			
11/6/2019	Sierra Bldg	Elevator down AGAIN			3/10/2020 Sandi	
	Bell FM	11/1/19 and 11/4/19- Magellan needle cover not engaging. 2 near misses. B 1" and 25G x 1 1/2" needles			3/19/20: Sandi	
1/7/2020	Peds	On 1/7/2020, an MA brought the box Pentacel to show me that one green sitting alone, without the blue vial that necessary for the complete vaccine missing.			3/10/2020 Sandi	
					3/16/2020 Jona	



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If you have further questions about today's webinar or want to learn more about Value Capture and our work, please contact us at mmoore@valuecapturellc.com or visit us at http://valuecapturellc.com/

Announcements (Then Q&A)

“A Pathway to Habitual Excellence”

- www.ValueCaptureLLC.com/Playbook
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- Training Team Office Hours
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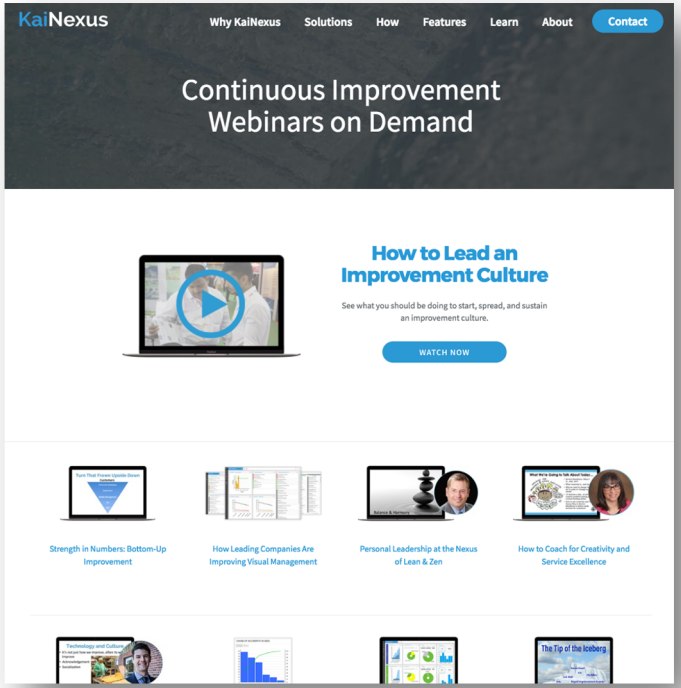
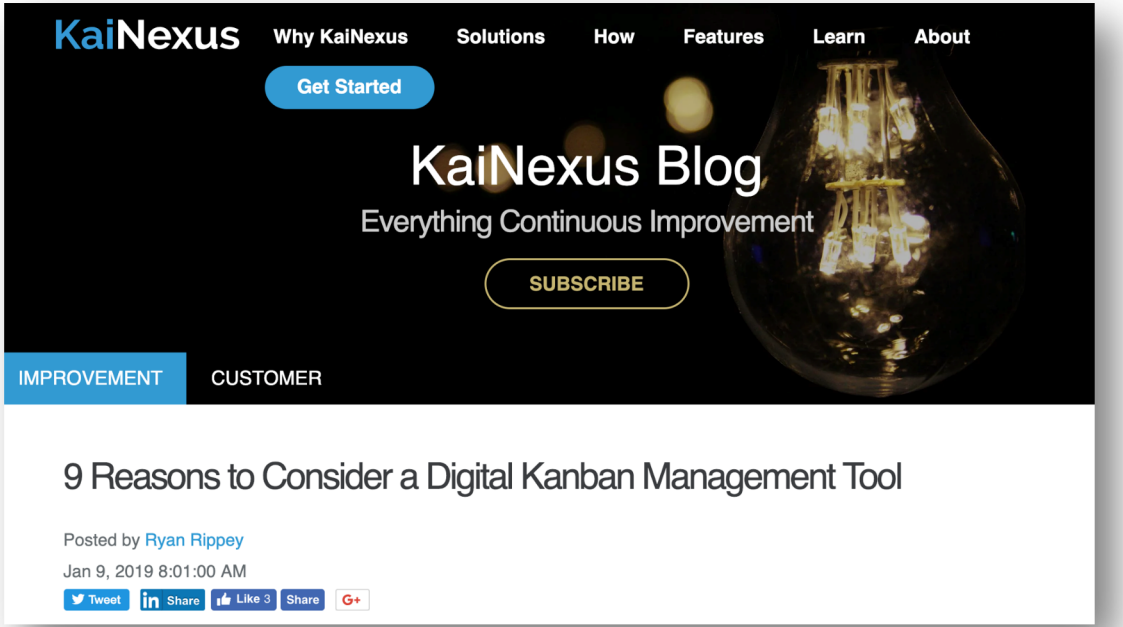
  - September 22, 1 pm ET
  - Greg Jacobson, MD, John Toussaint, MD, Skip Steward
  - *Open to everybody!*

Other Resources





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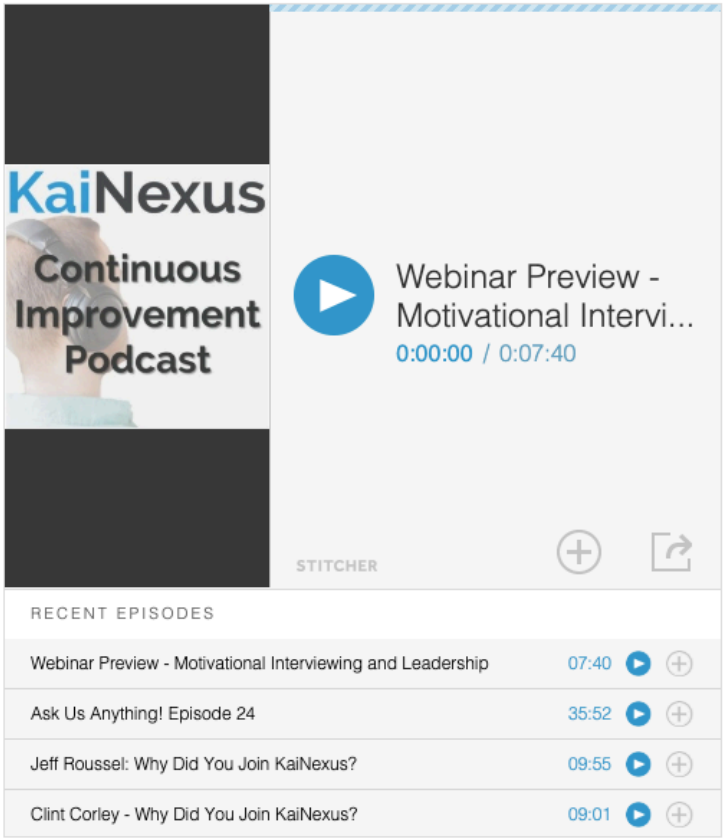

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