

Lean Management System (LMS) Pilot Program

Over the years, Professional Development has evolved from delivering primarily Lean and Six Sigma-based training to VA Medical Centers (VAMC), VISN offices, and National Program Offices to our current consultative model of delivering more sophisticated Lean and Six Sigma support to these customers.

The previous LMS model provided a one-time training event to teach a Lean course, followed by a reflection period wherein our facilitators would step back to see if the facilities could apply their Lean training



to a meaningful problem in their organizations. Our new consultative model provides a more persistent presence that encourages stronger working relationships between VA-CASE facilitators and pilot sites. We now assist sites with their application of Lean/Six Sigma principles, and support them as they develop Lean Management Systems within their own organizations.

Through this new consultative model, our LMS pilot program provides customers with more time in “face-to-face” mode with a VA-CASE faculty member. Customers get to utilize the experience of the VA-CASE faculty to help them with their projects, Rapid Process Improvement Workshops (RPIW), value streams, Continuous Daily Improvement (CDI), and strategic planning activities. Because facilities are provided with coaches/mentors along the way, our new model helps facilities avoid some of the bigger pitfalls or failure modes during their Lean journey. Subsequently, we at VA-CASE are utilizing our skills and resources in a dynamic fashion that works beyond classroom training and allows us to hone, advance, and utilize our faculty’s skillset for more demanding and exciting applications.

The LMS program provides customers with more time in “face-to-face” mode with a VA-CASE faculty member. Customers get to utilize the experience of the VA-CASE faculty to help them with their projects,

2013 marked the end of the first year for the LMS pilot program. The LMS program was initially launched at the Richard L. Roudebush VAMC in Indianapolis in 2012. While Indianapolis had ongoing Lean activities prior to and including the 2012 pilot launch, the program really took off

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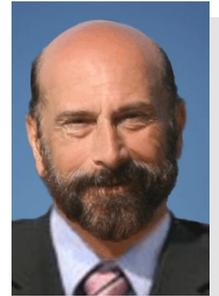
Leadership Corner

Professional Development

The Professional Development Program focuses on education and dissemination of Lean in all venues related to OSE disciplines and methods. The program is a national VA leader in developing Lean curriculum, certifying Lean Managements Systems, and facilitating Improvement events. Professional Development works closely with stations, VISNs, and CO departments and staff members to provide a bridge for integrating Lean and fostering incorporated improvement capacity.

In FY13, Professional Development has successfully lead and participated in work at the National, VISN, Station, and Enterprise levels. The breadth of our work includes:

- Lean Belt Training (Yellow, Green and Black);
- CPAC (Consolidated Patient Accounts Center) support for the development of internal capacity, including facilitation for Lean Six Sigma Black Belt training;
- Deployment of a Lean Management System in 6 Pilot Stations;
- Access Academy support;
- Coordination of a Lean Certification program;
- Facilitation of Value Stream Analysis (VSA), TPOC's Transformational Plan of Care (Strategic Deployment Plan at an Enterprise level);
- DEEDS Initiative for a Qualitative and Quantitative assessment of the deployment of the Lean Management System (LMS);
- Initiation of a series of Virtual Rapid Improvements (RPIEs) in partnership with the National Systems Redesign Office;
- Specialty Care Transformation (SCT) to support facilitators in growing internal capacity; and
- Development of a Lean Social Media group in VA YAMMER to enhance communication and sharing of Lean methods.



George Ponte

Our staff's profound experience, skills, and assets align well with our customer's needs. Our major focus for the coming year is the growth of a national consultative service. Our primary challenge is maintaining high quality standards while balancing rapid growth in areas that play a strategic role in VA performance. To this end, we are committed to developing an internal management system that focuses on supporting staff and clients while fostering innovation, development and quality outcomes. Looking forward, next year we will develop enhancements to our certification program and continue a controlled expansion of our Lean Management System pilot. We will continue to support the CPAC group as they work to increase their internal capacity for Lean improvement work.

Drawing on expert staff with many years of Lean management and leadership experience, the Professional Development Program consistently delivers high quality educational venues that meet the specific needs of our wide variety of customers. The strength of our skilled faculty lies in their ability to make adjustments to program content and meet program deliverables. Evaluation assessments consistently confirm that our faculty maintain a high level of performance. Our evaluation measurements—where our faculty score >4 on scales of 1-5—ensure our customers' satisfaction. Our unwavering focus is on providing our partners (CO, VISNs Stations, CPACs, and others) with methods to improve the quality of care delivered to our Veterans.

Welcome New Employees

Larkin Ray Harris, MSW, received her Master of Social Work – Community Practice at DePaul University in 2012 and is currently pursuing a Masters of Public Health from George Washington University. She holds bachelors' degrees in Clinical Psychology and Political Science from Northern Illinois University. As a Health System Specialist Larkin worked with the Wilkes-Barre VA Medical Center (WBVAMC) as an Administrative Officer to Surgical Service and as the Executive Assistant to both the Chief of Staff and Nurse Executive; focusing on high tech solutions to station level problems. Her work at WBVAMC included the implementation of electronic Way Finding, the GetWell Network, and tele-ICU. Larkin works in Professional Development facilitating LEAN courses, assisting in course development and LEAN certification.



Madeline (Madi) Lucena-Pulst, BSBA, worked as an Administrative Officer (AO) in Psychiatry Acute and Clinic Care in North-Florida/South-Georgia Veterans Health System (NF/SGVHS). As an AO Madi supervised administrative staff, handled physician and Title V recruitment, lead major contracting projects, and served as a VA affiliate liaison with UF Psychiatry Department Residency Program. Prior to joining VA in 2006, Madi was a Senior Staff Accountant with an established Healthcare Management Consulting Firm in the Southeast and attained administrative experience in various industries (education, construction, real-estate, agriculture, and non-profit). She graduated from the University of Florida with a bachelors degree in Business Administration in 2009. Madi is a trained Lean Six-Sigma Black Belt, a Certified VHA Mentor, and a graduate of the VA Healthcare Administration Training Program (GHATP). In 2013, NF/SGVHS received the VISN 8 Lean Forward Award as a result of her efforts as a black belt in



the ED/Psych Patient Flow System Level Analysis. Madi works with Pam Pau in Fiscal.

Angela M. Howard, MSN, RN, is a Health Systems Specialist with Clinical Partnerships in Healthcare Transformation (CPHT) where she is supporting both The Hybrid Specialty Care as well as the Mental Health Chaplaincy national collaboratives. She is currently serving as a collaborative team coach and faculty. She previously worked for VA-CASE in 2010-2011 as a green belt facilitator and IE. She began her Lean career as a Systems Redesign Coordinator in Indianapolis in 2001, where she earned her yellow, green, and black belts through Purdue University. She most recently was a Performance Measurement and Clinical Guidelines Coordinator at the VA Illiana Healthcare System in Danville, IL. She received a bachelors of science degree in Nursing from Lakeview College of Nursing and a masters of science degree in Nursing Administration from the University of Cincinnati. Her interests inpatient healthcare quality/performance improvement. She recently completed a certificate program in Healthcare Data Analytics through a joint program by Nebraska Methodist College and the Midwest Mountain VERC.



Rebecca Bargeloh, RN, MSN works the CPHT Program. She has a variety of clinical and administrative experiences in the VA Health care system. She has over nine years' experience as a Registered Nurse and over 13 years' experience in health care. She joins VA-CASE from the Louis A. Johnson VA Medical Center in Clarksburg, West Virginia, where she served as the Administrative Officer for Behavioral Health and Rehabilitative Service. In this role, she managed the outpatient clinics, monitored and



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analyzed VA Performance Measures, served as the project activation manager for a various mental health construction projects, and was responsible for keeping Executive Leadership updated on Behavioral Health improvement projects. Ms. Bargeloh was responsible for the implementation of the Primary Care-Mental Health Integration Program and Mental Health Suite Treatment Planner Software.

Ms. Bargeloh received a bachelor of science degree in Psychology and associate of science degree in Nursing from Fairmont State University and a master of science degree in Nursing Administration from Marshall University in Huntington, West Virginia.

Richard "Rick" Olivero, Industrial Engineer, is an Air Force Veteran and graduate of the University of Michigan. Before joining the Transactional Systems Program in March 2014, Rick worked as a contractor at Ford Motor Company to improve the efficiency in their tire lab engineering department. Rick has also worked at Corporate Domino's Pizza in Supply Chain Engineering and the University of Michigan Health System as a Network Engineer and Project Manager.



Michele M. Rhoutsong, MBA is a Program Analyst with CPHT. Currently, she is working in conjunction with the Mental Health/ Chaplain Collaboration, Specialty & Surgical Care Collaborative, and several other ongoing programs. She comes to VA-CASE with an extensive background and knowledge from having worked in several different locations and career choices within Europe and the continental United States. Projects she has been involved in include the Darlington Race in Hartsville, SC, Extreme Home Make-over in Kokomo, Indiana, Setting up business for University of Phoenix in the European theatre, Space Shuttle



landings in Florida and directing a cooking demo for Chef Jose Andres in Hyde Park, NY. She is a graduate of the University of Phoenix with her MBA and Bachelors in Business/Marketing. She is an Air Force Combat Veteran.

Jason J. Germann, AS, is an Industrial Engineer/Project Manager acting as the Business Manager for VE-TAP. Prior to joining VE-TAP he provided project management administration for CPHT to the National Activations Office Checklist Project as well as back-up support for project management activities in the Mental Health & Chaplaincy Collaborative. Jason was also responsible for coordinating work with technical personnel in the database programming of an application for the National Activations Office Checklist Tool.



Prior to VA-CASE, Jason was a Product Development Coordinator & Product Development Engineer for the Interventional Breast Solutions Division of Hologic, Inc. He coordinated and designed minimally invasive breast biopsy devices and accessories to provide compassionate care in women's health globally. He additionally participated in Kaizen events and engaged in 5S organization throughout the facility.

Jason received his associates of science degree in Mechanical Engineering Technologies from Purdue University and is currently working on his Bachelor's Degree in Mechanical Engineering Technologies at Indiana University Purdue University Indianapolis

Makeyta N. Roberson, MPA, is a Program Analyst with Clinical Partnerships in Healthcare Transformation where she provides support to multiple projects and collaboratives. Prior to joining VA-CASE she worked as a Travel Clerk in the Business Practices Office of the John D. Dingell VA Hospital in Detroit, Michigan. Previously, she worked as a Rating Veteran Service Representative for VBA, Appeals



Management Center (AMC) in Washington, DC. She holds a BBA in Management Information Systems and a Master's in Public Administration, both from the University of Michigan- Dearborn. She is a Veteran of the US Army, where she served as a Systems Maintainer. Her interest areas include information systems, processes and finance. She plans to return to gain a degree in Finance in the near future.

Ryan Mika, BS, is an Industrial Engineer with the Clinical Partnerships in Healthcare Transformation (CPHT). Ryan served in the United States Navy from 2004-2008 working for the Aircraft Launch and Recovery Equipment (ALRE) program as a catapult systems supervisor onboard the USS Abraham Lincoln (CVN-72). After military service, Ryan attended Northern Illinois University, graduating in December 2013 with a bachelor of science degree in Industrial Engineering, focusing on healthcare systems transformation and optimization, operations research, and computer simulation modeling.



Victoria Baker, BSOE, is a Program Manager in the Clinical Partnerships in Healthcare Transformation (CPHT) group. Ms. Baker received a bachelor degree from Wayland Baptist University in Occupational Education while serving on active duty with the United States Air Force. She has also finished most of the credits toward an MBA from Indiana Wesleyan University. Ms. Baker also received certifications from the Air Force in Instructional Systems Design and Technical Writing.



After leaving active duty, Ms. Baker went on to serve in the Indiana Air National Guard. Upon her return to Indiana in September 2005 she went to work for Indiana Veterans Affairs as a State Approving Agent for the VA's GI Bill program. Ms. Baker has also worked with

non-profit and other government organizations to help Veterans in Indiana prepare for and find employment. In 2007, she was instrumental in building the Career Learning and Employment Center for Veterans with Disabilities which helped place over 80 Veterans with disabilities in federal employment opportunities at the Naval Surface Warfare Center in Crane, Indiana as well as hundreds of others with other employers throughout Indiana.

Ms Baker and has an Associate of Science in Fine Art from Vincennes University and two associate degrees from the Community College of the Air Force in Aircraft Armament Systems Technology and Instructor Technology.

David Whittemore, MBA, is a Program Analyst with Clinical Partnerships in Healthcare Transformation. He has experience in financial audits, budget creation and review, and improving program efficiency. Prior to joining VA-CASE he was a Contract Specialist and Budget/Financial Analyst for the Department of Defense. He received a B.S. in Management and Master of Business Administration from Oakland City University. His interest areas include program review, financial audits, and accounting. He is a Member of the American Society of Military Comptrollers (ASMC) and holds its highest professional certification, the Certified Defense Financial Manager (CDFM).

Anne Marie Johnson is the Business Manager for Professional Development where she schedules trainings and manages the budget and contracts. Prior to joining VA-CASE, Anne worked in the health care field as the Medical Informatics Fellowship Coordinator at Regenstrief Institute. In October of 2004 she joined the VA Center of Excellence on Implementing Evidence-Practices (CIEBP) where she served as Lead Administrative Assistant for four years and then transitioned to Grants Administrator for Research and Development. As the Grants Administrator, she submitted grants for VA funding for the Health Services Research & Development (HSR&D), Rehabilitative Research & Development (RR&D), Biomedical Laboratory Research & Development (BLR&D), and Clinical Science Research & Development (CSR&D). Each program had two funding cycles per year with an average of 12 proposals per cycle. In FY2013 she submitted 49 proposals submitted requesting over \$36M for VA Research.

Staff News

Pamela Pau has moved from her role as the Associate Directory (AD) for Operations into a new role as the Associate Director for Fiscal. Within this role, Pam will provide coordination and oversight for VA-CASE fiscal and contracting operations. Pam works at the John D. Dingell VA Medical Center in Detroit, MI. Prior to joining VA, Pam was a Global Program Manager for Electronic Data Systems (EDS) working at the General Motors World Headquarters in Detroit, MI supporting GMAC. As an experienced Program Manager with Fortune 500 and international experience, Pam has proven success in Information Technology program management, sales, marketing, qualitative and quantitative analysis and reporting, contracting and financial reporting, vendor management, human resources, customer service and multicultural team building. Pam's global team was comprised of system engineers, database administrators, and project management personnel, located in Germany, South Africa, Argentina, Brazil, Canada, and the U.S..

Amy Vannatter-Dorr, LMSW, is now the Acting Associate Director for Operations. The scope of her job responsibilities include VA-CASE corporate administrative and business processes. Within her new role, Amy will be working to insure standardization and automation of the VA-CASE administrative/business processes.



Eric Lammers, BSIE, moved from his role as the Deputy AD for the Transactional Systems Program (TSP) into the Associate Director for TSP. Eric started with VA-CASE in 2010 and is our first engineer to rise up through the ranks to an Associate Director position!

Jeff Peterson is now the Associate Director for the Data Engineering Resources (DER) Program Office. DER is a data engineering resource program that primarily concentrates on projects involving programming and data management. They are currently mapping 9 buildings in the Washington D.C. area. This project encompasses the

programming of a Rent/Lease solution for the 1.9 million square feet within these buildings. They are also working on a project to reduce the wait time for a specific group of Veterans to access to their benefits.

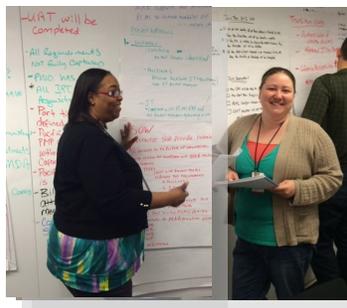
Jeffrey Bailey, BS is now the Deputy Associate Director for the Data Engineering (DE) Program Office. He has been the Program Manager for the NAO Project and the Project Manager for the Health Benefits Project where he created the back-end database and the Health benefits web application. Jeff also served as the lead for the VA-CASE Pathways Mentorship Program. Prior to joining VA, Jeff was a Materials Manager for a manufacturing company in Indianapolis before deciding to return to school to obtain his degree in Computer Information and Technology.

Jeff was originally hired as a student in 2013 and has moved through the ranks to a Deputy Associate Director position. Congratulations Jeff!

Kristen Tingley, BS, has received her Green Belt Certification. She submitted an A3 on a project she co-facilitated with Matt Greenlee in Social Work on Discharge Planning at the Indianapolis VAMC to complete her Green Belt in Lean. During the RPIW, the team came up with six PDSA's with the goals of increasing collaboration, streamlining the process, and improving efficiency and timeliness of the discharge process for both patients and providers.



Lawanda Cheatham, BS, and **Anna-Maria D'Ambrosio, MS**, completed their Capstone for FAC/PPM Mid-level where they demonstrated the ability to work in teams to create project management documentation.



Lawanda Cheatham and Anna Maria D'Ambrosio

during the 2013 timeframe. As part of their Transformational Plan of Care (TPOC) enterprise-level Lean planning event, Indy launched six value streams (VS) hosting a total of 53 RPIWs (Rapid Process Improvement Workshops) in 2013. They also rolled out 40+ new CDI (Continuous Daily Improvement) Huddle areas and taught six Lean “Belt Training” courses. VA-CASE was there to guide and assist this work.

Throughout 2013, five additional sites began working with VA-CASE to implement or continue their development of a Lean Management System: Palo Alto, CA; Cincinnati, OH; New Orleans, LA; Erie, PA; and two sites in Chicago, IL (FHCC Lovell and Jesse Brown). The support model for the pilot sites includes one VA-CASE faculty who serves as a sensei/mentor/coach for the executive level staff of the pilot organization and one VA-CASE faculty who serves as a sensei/mentor/coach for the mid-level management, Systems Redesign staff, and front-line staff. The executive level coach is there to help guide the facility leaders in the use of Lean tools for strategic planning, strategy deployment, alignment of Lean activities and resources, and establishment of Lean leader standard work. The mid-level coach supports the roll-out of the program by leading and then coaching Value Stream Analysis (VSA) and RPIWs; builds program capability and capacity by teaching and engaging mid-level managers, Systems Redesign, and front line staff; and as such, demonstrates and recognizes initial program successes.

While the overall elements of the LMS deployment are the same at each of the pilot sites, the level of implementation for each element and the amount of support provided by VA-CASE sometimes varies. Because of the overall “newness” of this model within the VA, and the variation across each site’s adoption of LMS, we are currently studying the similarities and differences in sites’ deployments to discover generalizations or conclusions that can be made from this initial launch so that future launches can benefit from these learnings.

Reno VAMC

The Reno VAMC have been very engaged and positive regarding the Lean Trainings and improvement project facilitation provided by VA-CASE Professional Development this year. Since January 2014, they have:

- trained 75 participants in two Lean Yellow Belt, one Lean Green Belt, and one Value Stream Analysis course
- provided facilitation for the facility’s first RPIW event



The Associate Director, Laura Howard, personally acknowledged her satisfaction with the services provided and progress made within the organization. Currently, the Medical Center is defining TPOC strategic goals to drive their first Value Stream Analysis to be executed this year. Overall, providing training and support for the Reno VA, their Systems Redesign Chief, Debra Moreno, and her staff has been a very productive and enjoyable experience.

VA-CASE Faculty, Kimberly Johnson, PsyD, MA is the Lean Sensei for the Reno VAMC.

Dr. Thuy Boardman, wearing her “thinking cap” in a light hearted moment during the VSA training.



Associate Director, Laura Howard and ACOS Ambulatory Care, Amy Sanguinetti during their first RPIW event

Southeast Louisiana Veterans Health Care System

The Southeast Louisiana Veterans Health Care System in New Orleans, Louisiana engaged in a Value Stream Analysis – RPIW to improve the Beneficiary Travel Payment System. Qualified Veterans are entitled to travel benefits that will help optimize their clinical care. The mission of this RPIW was to provide prompt and accurate travel payments to qualified Veterans.

Prior to the RPIW, the process was not meeting the demand and observation-based time studies were conducted identifying the following:

- 23% of time spent by clerk was non-value added during several days of observations (4 hours each day)
- 3 hours and 23 minutes spent to audit and create voucher
- 49 minutes of phone calls
- 1 hour and 19 minutes of total interruptions
- 9 minutes to cancel van rides

Using the Solution Approach the team surmised:

If we.....	Then we can expect to.....
Develop Standard Work for the PSA, Travel Clerk and Agent Cashier	Have a process with consistency and reliability
Set up times for 9 G and 10 G to send vouchers to the travel office	Have a predictable controllable flow of vouchers
Do a visual audit of the received vouchers (not a computer check)	Process claims more timely and meet the demands.
Process travel vouchers as "they arrive" in bene-travel	Take out the non-valued added steps and give back 30 minutes to process vouchers
Stop separating multi visit claims for single patient and just pass them through as one	Get the veteran paid-Creating one step for travel and fiscal
Provide 2 hours of protected time	Maximize productivity without interruptions
Get a volunteer for IG	Create the perfect patient experience by maximizing wayfinding

The following Rapid Experiments were conducted with shown outcomes:

What We Did	Expected Result	Outcome
Protected time to focus on audit	Greater efficiency of processes and productivity	33% increase in productivity
Visual Audit	Greater productivity	Doubled the number of vouchers audited
Simulated a pull request for agent cashier	Timely delivery of vouchers to agent cashier with real time processing	Efficient load balance
Developing a visual aid to assist PSA's in meeting travel voucher documentation	Reduce error rate and variation	(Currently evaluating)
Informal Information Guide in the IG lobby	To decrease the non job related interruptions and increased wayfinding for our veterans	Eliminated 7 interruptions in 2 hours

As a result of the RPIW, Beneficiary Travel has successfully improved their process, as evidenced by:

- NO backlog in travel
- Today's work is being accomplished today.
- Vouchers processed prior to the RPIW were averaging 132 to 250 a day. Vouchers processing has increased to 785 a day exceeding metric target goal of 600.
- Daily tracking of defects accomplished to assist with further improvement efforts.
- Decreased complaints and Veterans getting paid in a timely manner.
- Turnaround time from travel to fiscal to payment placed in system (FMS) decreased from 54 days to 8 days.

Staff within the Travel Office, as well as in Fiscal, are pleased and satisfied with the process improvements. Veteran calls have significantly decreased to the patient advocate and the director's office regarding travel pay. Morale is high!

Great Job New Orleans!

What Went Well?

- Team fully engaged
- Lots of hard and dedicated interactive sharing of ideas
- Enjoyable new experience at times
- Staying focused
- The facilitators helped us move forward in a productive way using the A3 framework
- Networking
- Fresh eyes brought new insights
- Opportunity to interact with people outside the department

Cincinnati Lean Spread Key Video Spotlights

In 2013, the Cincinnati VA Medical Center launched a Transformation Plan of Care pilot, which embodied a Lean process improvement methodology. During the launch event, the mantra was developed as "I am the Key" (to improving Veteran care). This mantra has been used to spread the Lean message, through presentations, training, signage, written communication and video messages.



During the first year, one of the Key initiatives was to implement Continuous Daily Improvement (CDI) through the use of huddle boards in all functional areas of the Medical Center. The huddle boards are designed to also accomplish another requirement of Lean, "respect for people," by giving front line staff a voice to continuously improve their work areas. Huddle boards gained quick acceptance and engagement by staff, and generated many great ideas. Currently, there are 21 huddle boards in operation and the goal is to launch four new boards per quarter.

The Medical Center Leadership Team regularly attends huddles and supported a method to recognize staff for the best ideas being generated. Starting in 2014, the "I am the Key" award and video testimonials were implemented to highlight improvement ideas from huddle boards. Two videos are produced

per month and there have been 12 completed in FY 2014. These videos are shown at the monthly Executive Leadership Board meeting, where the



the huddle board idea action owner is recognized. These videos are also emailed out to all Medical Center staff twice a month. These video messages have been very well received as they reflect front line staff as

high-lighted, energized and involved in the Lean improvement culture change at the Cincinnati VA Medical Center.

New Orleans Team



Lean Six Sigma Facilitator is Awarded Commendation Medal

HM1 (Hospital Corpsman First Class Petty Officer) Amy D. Hensdill was awarded the Navy and Marine Corps Commendation Medal for her work as a Lean Six Sigma Facilitator. She facilitated the Outpatient VSA at FHCC which involved four main primary care and specialty clinics that primarily serve DoD patients. She facilitated a team whose goal was to reduce flow time for "Ship Sick call". Every day in in this clinic, which is the recruits' primary means of healthcare while they are in Boot Camp, they see about 200 patients who show up in a batch at 6:30 am. Through the use of visual management, balance loading, and developing fast tract care area, she led the team in reducing the batch size, reducing over processing, and wait times. The team went from three hour flow times to 1 hour and 10 minutes for an average patient. She facilitated a team in the special physical department, where recruits who are going into a special rate such as "Air Crew" have a more extensive physical. She led the team in reducing

total lead time from seven days to four days. All and all her accomplishments supported the primary mission of her Navy command, which is "Keeping the pipe-line flowing for sailors into the fleet." To date this VSA, through the six RPIW HM1 Hensdill facilitated over a 9 month period, achieved **Brian Poynor, Amy Hensdill** an ROI for FHCC of approximately 1.5 M from reducing lost training days.



HM1 Hensdill's biggest asset is that she is willing to learn and is a life long learner which is one of the most important attributes of anyone who is in the continuous improvement profession.

The Navy and Marine Corps Commendation Medal is awarded to a person in the Navy or Marine Corps who demonstrates service that is outstanding and worthy of special recognition. The performance should be well above that usually expected of an individual commensurate with the individual's grade or rate, and above that degree of excellence which can be appropriately reflected in the individual's fitness report or personnel records.

HM1 Hensdill's citation read:

Meritorious service in the superior performance of her duties as Command lean Six Sigma facilitator, Captain James A. Lovell Federal Health Care Center, North Chicago, Illinois from June 2011 to May 2014. Petty Officer Amy D. Hensdill US Navy guided leadership and 2,500 staff through a Lean Transformational Plan of care in support of the command's strategic plan, her direct supervision of an outpatient value stream and 11 improvement teams led to the completion of 34 "just do its", 23 projects and 5 rapid improvement events. Her efforts improved patient safety, quality of patient care, and increased patient satisfaction. Her superior performance of duty during this tour is the culmination of a distinguished 20 year career of honorable and dedicated naval service. Petty Officer Hensdill's initiative, perseverance and loyal devotion to duty reflected great credit upon herself and were in keeping with the highest traditions of the United States Naval Service.



Lean Six Sigma “2P” Project Improves Laboratory at Lovell FHCC

Adapted from The May 2014 Apollo, the Official Newsletter of the Captain James A. Lovell Federal Health Care Center (LFHCCC).

The Lean Six Sigma team met with the microbiology and blood bank team for three days to embark on the first ever 2P (Process Preparation) for the Veterans Health Administration and the Bureau of Navy Medicine.

The purpose was to gather their insight and make recommendations, suggestions on redesigning microbiology from two spaces into one. The team underwent a valuable, but difficult process, using Lean tools to redesign the new spaces around the flow of the processes instead of the reverse – determining process flow based on workplace design.

Team members brainstormed the key requirements for each of the rooms and were then divided into three smaller teams. In a friendly competition, each sub-team was charged with creating a new design, to scale, and promoting their designs to the lab staff for comments and



input. After “selling” their ideas, the sub-teams voted on the designs to determine an overall winner.

Feedback from lab staff members was used in conjunction with input from each sub-team to finalize a new hybrid design for the new spaces. The new design was then mocked-up, life-sized, with furniture and outlines on the floor. This ensured proposed design ideas would fit and would support the new process flow.

The team also had to plan ahead. Designs accommodated future workload expansion and technology upgrades. One idea was auto-notification using audio-visual alerts when samples arrive in central processing identified for microbiology. Other ideas involved electronic microscopes equipped with cameras and a display monitor to use for education and training; under-the-desktop computer monitors, to allow for increased horizontal workspace; wireless workstations, and USB/Ethernet ports surrounding the center workstations. The team worked diligently to create a state-of-the-art lab representing the future of microbiology.

VA Palo Alto Health Care System ED Internal Workflow: Door to Doctor Emergency Department Value Stream

The Community goal from the Centers for Medicare and Medicaid Services for length of stay (LOS) for ED patients discharged to home is 2 hours, however, the LOS for the ED at VA Palo Alto HCS averaged 3.3 hours. In order to improve the flow and move patients through the ED quicker, they chose to focus on the front end of the process first, reducing Door to Doctor time.



Emergency Department MESS Board

Some changes made as a result of the RPIW:

- The Charge RN is the Flow Manager
- Designate a Flow MD
- Designate a Communications MD
- Fully utilize EDIS as a communication tool
- Stable patients not actively receiving therapy move to the Main ED waiting room to wait for test results, social work, etc. to create open beds for more critical patients

The results were phenomenal:

- Pre-RPIW Door to Doc Time Average: 1 hour, 41 minutes
- Post-RPIW Door to Doc Time Average: 31 minutes
- Decreased Door to Doc Time = Happy Veterans!
- ED Missed Opportunity Rate = 1.4% in April 2014 The lowest it has ever been!
- ED LOS for patients discharged home = 2.7 hours for April 2014 The lowest it has ever been!

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TSP Accomplishments

- **Network 11 Contracting Office (NCO11) Systems Redesign** *Cameron Husk, Lead Engineer* -- Phase 2 of the project concluded on 3/7/14. Cameron Husk, VA-CASE Industrial Engineer, continues to provide industrial engineering support to NCO 11 in the form of coordinating and co-facilitating RPIWs in partnership with VA-CASE Professional Development.
- **CBO Purchased Care – Fee Basis Claims System (FBCS) Optimization** *Chris Heathcote, Lead Engineer; Lincoln Ridge, IE; Stacie Bergman, Program Support Assistant* – As of March 2014, FBCS Optimization was deployed to 20 VISNs. Of these VISNs, 10 have completed Post-Implementation, 8 are in the Post-Implementation phase, and 2 are in the Implementation phase. When comparing throughput rates between the Baseline and Post-Implementation periods among these 74 facilities, total claims processed per month improved an average of 29 percent.
- **CBO Purchased Care – Project Access Received Close to Home (ARCH)** *Valerie Curtis, Program Manager* – The goal of Project ARCH has been to prepare for the potential sunset of Project ARCH when the public law that grants the pilot's authority expires on August 29, 2014. An Interdisciplinary Project Team (IPT) was formed and completed an Executive Decision Memo (EDM) in January outlining recommendations for the future of Project ARCH. VA-CASE has assisted with completing numerous briefings for the DEPSEC and the SECVA on the EDM, Transition Planning activities, and on potential sustainment options after the public law expires. No decision has yet been made at the SECVA level regarding recommendations contained in the EDM and other briefings, and the project team has begun preparing individually tailored transition plans for every Veteran who is receiving care under Project ARCH in order to be prepared for a potential outcome of the sunset of Project ARCH. The team has also provided abstracts for Senate legislation/bills, since Project ARCH is of intense interest to the Senate Veterans Affairs Committee.
- **CBO Purchased Care – Non-VA Medical Care National Standardization (NVNS)** *Derrick Markel, Program Manager; Lindsay Hall, Project Manager; Shruthi Musunuri, Lead Engineer; Anthony Pak, IE; Rick Olivero, IE* -- The NVNS project team proposed/vetted future state recommendations for standardizing non-VA medical care business processes with leadership from both VA-CASE and the Chief Business Office for Purchased Care (CBOPC). Two levels of vetting were conducted, 1) with subject matter experts within CBOPC, and 2) with CBOPC senior leadership for final approval. Feedback provided from the vetting sessions was incorporated into the final set of future state recommendations, and concurrence/final approval was received from all participating members in March 2014.
- **CBO Revenue Operations – Consolidated Patient Account Center (CPAC) Process Observation** *Valerie Curtis, Project Manager; Shaiju Eapen, Lead Engineer; Geoffrey Black, IE; Ming Hsu, IE; Celeste Wallace, IE* – The CPAC Process Observation project began in January 2014. The goal of the CPAC Process Observation project is to gather data through time studies in various CPAC locations/departments followed by data analysis to compile a baseline for all CPAC processes. The VA-CASE team is onsite at each CPAC for two weeks and completes activities including current state process mapping and time studies. The team studied the Accounts Management department at the Mid-Atlantic CPAC (MACPAC) in Asheville, NC, in February and the Mid-South CPAC (MSCPAC) in Smyrna, TN, in March. Data from the MACPAC and MSCPAC was then compared and the results were presented to the customer. Looking forward, the VA-CASE team will be visiting the Florida Caribbean CPAC in Orlando, FL, to observe the Billing department, the West CPAC in Las Vegas, NV, to observe Billing and Insurance Verification, followed by the North Central, Central Plains and North East CPACs between now and August. Once site visits are complete, the team will be conducting additional data analysis and compiling a final report for the customer.

CPHT Accomplishments

- **National Optimizing Cancer Care Collaborative**

We are continuing to support the National VHA Optimizing Cancer Care (OCC) National Systems Redesign Committee, as well as the VAPHS VERC and NEHCP VERC, to apply OSE and SRD methods to support and enhance work done by the current collaborative and provide capacity and capability for diffusion and implementation of collaborative strong practices related to the development and implementation of systematic processes for cancer care. The VA Cancer Care Collaborative is focused on optimizing the timeliness and quality of cancer care throughout the VA health care system. The Cancer Care Collaborative has provided the mechanism to measure, analyze and implement changes to assure timely diagnosis and the timely initiation of evidence-based treatment.

- **Patient Aligned Care Team (PACT) Collaborative**

We are continuing to support the facilities on PACT initiatives. VHA embarked upon an 18-month nationwide PACT Collaborative to align patient-centered care to a more Veteran-centric model. The national PACT

Collaborative is divided into five regions and each region designed, developed and delivered six learning sessions and five action periods. VA-CASE provided support services including administration, coordination, coaching and technical support for each of the five regions.

- **Improving Patient-Centered Care via Integration of Chaplains with Mental Health Care**

This project seeks to conduct a VA/DOD Mental Health and Chaplaincy (MH&C) learning collaborative that will bring together motivated teams of chaplain and mental health representatives to develop and implement tools to enhance integration (e.g., enhanced charting, collaborative assessments, joint clinical conferences). This project aims to improve health care services provided to Veterans and Service members by incorporating chaplains into VA and DoD mental health care systems. VA-CASE will be supporting the project with Program management, coordination and industrial engineering support as well as serving as a Co-Director for the Collaborative.

Journal Publications

Bidassie, B., Williams, L.S., Woodward-Hagg, H, Damush, T.M., (in review) *External Facilitators in an Acute Stroke Quality Improvement Collaborative in the Veterans Health Administration*. Implementation Science

Bidassie, B., Barany, J.W., McCabe, G.P., Duffy, V.G., Witz, S.M. (in review). *Development of a Predictive Model for Low Back Musculoskeletal Disorders based on Occupational and Lifestyle Risk Factors*. IIE Transactions on Occupational Ergonomics & Human Factors (OEHF)

Bidassie B, Davies ML, Boushon B, Stark R (2014) *VA Experience in Implementing Patient Centered Medical Home Using a Breakthrough Series Collaborative*, Journal for General Internal Medicine. DOI: 10.1007/s11606-014-2773-5

Conference Presentations and Poster Sessions

Woodward-Hagg H., Taylor KT., Bidassie B., Large System Transformation within Healthcare Organizations Utilizing Lean Deployment Strategies, IIE Annual Conference and Expo 2014bMontreal, Canada, May 31-June 2014

Zhang L., Gao Y., Bidassie B., Duffy V.G., Application of Bayesian Networks in Consumer Service Industry and Healthcare. IIE International Conference Human-Computer Interaction, Creta Maris, Heraklion, Crete, Greece, 22 - 27 June 2014.

VA-CASE Quarterly Newsletter

TBI in Outpatient Settings: Assessing Needs of Veterans, Caregivers and VA Staff

Dr. Virginia Daggett, PhD, has recently partnered with the Polytrauma/Blast-related Injury (PT/BRI) QUERI, the PT/BRI QUERI Family Care Practice Advisory Committee and the national Physical Medicine and Rehabilitation (PM&R) Program for a May QUERI Rapid Response Proposal submission. Dr. Daggett, PI, and co-investigators plan to explore the experiences, needs and preferences of Veterans, family caregivers and VA clinical staff in Polytrauma outpatient settings as Veterans receive their initial PM&R comprehensive evaluations and at their 3-4 month follow-up visits.



Due to the complexity and chronicity of TBI, and the effects of multiple providers and settings in PSC outpatient settings, it is critical that a needs assessment be conducted using a tested approach such as walkthroughs. Through these walkthrough exercises, we will gain valuable knowledge about Veterans' and family Caregivers' needs and preferences in two critical care points. We will utilize this outcome data to modify the existing inpatient Polytrauma Family Care Map to serve as an informational guide for Veterans receiving TBI care in VA outpatient settings and their family Caregivers.

The goals for the project are to tailor the innovative walkthrough exercise approach for VA outpatient settings and use it to identify needs, concerns and perceptions of Veterans, family Caregivers and VA clinical staff as Veterans transition into care at a Polytrauma Network Site (PNS) or Polytrauma Support Clinic Team (PSCT) site, with clinical champions acting as site facilitators. and to prioritize the most relevant needs, concerns, and recommendations of Veterans and family Caregivers and VA staff regarding the delivery of care in PNS and PSCT sites.

Note: Dr. Virginia Daggett has collaborated with the Polytrauma field advisory group, Family Care Practice Advisory Committee and has facilitated this group activity since August 2013. This field advisory committee is a national committee and consists of clinicians from each level of VA Polytrauma, PT/BRI QUERI researchers and a caregiver/care transitions expert in the community.

Office of Nursing Research Roadmap

Dr. Virginia Daggett, chair for the Goal Group 2 Nursing Infrastructure in the National Nurse Research Field Advisory Committee, is designing a roadmap (an algorithm) for new nurse researchers to utilize as they initiate research at their VA medical centers. The purpose of this roadmap is to support new nurse researchers as they explore research infrastructure and support at their respective VAMCs, funding opportunities across the VA and provide awareness of critical steps post funding. The preliminary roadmap has been completed and reviewed by all the members of the Nurse Research Field Advisory Committee. Dr. Daggett is now currently partnering with the national Office of Nursing to display it in the VA Office of Nursing Research Toolkit and she will be providing an overview of this roadmap on a future Nursing Research conference call. Dr. Daggett would like to acknowledge other Nurse Research Field Advisory Committee members in her Goal Group who have been instrumental in the development of the roadmap: Dr. Roberta Oka, Palo Alto, CA; and Dr. Sue Haddock, Columbia, SC; and Ms. Annie Plahitko, Project Manager in Research & Development at the Richard L. Roudebush VAMC, Indianapolis, IN.

VE-TAP Accomplishments

- In close partnership with the National Homeless Programs office, VE-TAP has developed a Gap Analysis framework for the VA goal on Ending Veteran Homelessness by 2015. Utilizing national data sources to provide a national summary analysis of gaps across all VAMCs, VE-TAP has deployed a tool for all VAMCs to revise gap analysis and develop strategies to close these gaps. Additionally, VE-TAP has provided an Operating Plan development tool for all VAMCs to develop plans that integrate gap analysis and program performance score cards.
- In January 2013, the Veterans Health Administration (VHA) and the Department of Defense (DoD) launched a program to integrate services and improve the handoffs between service members as they moved from the DoD to VHA healthcare, the Wounded Warrior Initiative. This program, the Joint DoD-VHA Lead Coordinator Program, required data analytic support. A VA-CASE-Wayne State University team was formed to provide this support. Feedback from the Stakeholder facilities was overwhelmingly positive. The weekly data assessment calls facilitated by the VA-CASE team allowed individual LC's to see their program improve with continuous feedback. The data collection process is designed to self-sustain the process and enables maturity of the LC Program. Currently, the project provides a critical feedback and information forum that is universally well attended. Based on the success of this pilot effort and the contributing support by the VACASE analytic team, the stakeholders have recommended enterprise roll-out of the LC program to DoD and VHA for sustainment.
- Veteran Centered Design (VCD) Lab has completed the Indianapolis Pathology Laboratory Project. This project informed the conceptual development & design of a State of the Art Pathology Lab work flow processes & floor plan layout. The team facilitated consensus among staff, reduced the physical steps for a Centralized Processor, and reduced pre-analytic processing time by 50%. The completed CAD floor plans were delivered for implementing the construction project. The re-design will improve service to the Veteran by reducing lab process time and providing more timely results to the care provider.



VE-TAP Staff



VISN 11 Accomplishments

- The VA-CASE VISN 11 Program partners with the VA-CASE Professional Development Program to deploy Lean Senseis throughout VISN 11 Facilities. Most recently, Senseis have assisted with the VISN 11 Strategic Planning Summit (April 2014) to help VISN 11 identify their critical few strategic priorities for improvement via the Lean/A3 Thinking approach. VISN 11 Leadership successfully reduced the number of Strategic Priorities from 37 in 2012 to 14 in 2013 and 5 in 2014 for the purpose of focusing/re-directing improvement efforts on the critical few important priorities for the Network via a Lean approach.
- The VA-CASE VISN 11 Program in partnership with VA-CASE Veteran-Centered Design Lab experts are collaborating with VA Ann Arbor Health Care System to re-design their VA Ann Arbor HCS Welcome Center. Goals include to inform the development of an optimally designed Veteran Welcome Center at the Ann Arbor HCS through analysis of the most efficient flow through the atrium zone, leading to a highly satisfying and demographically appropriate Veteran experience. This will include investigation of traffic flow, travel patterns, and frequency of use of various services located within the Veteran Welcome Center space. In addition, both teams will review optimization opportunities of the Primary Care Clinic through incorporation of PACT concepts and efficient use of clinic space, leading to an improvement of the Veteran's healthcare experience. Teams are currently in the investigation phases of the project that include stakeholder meetings and site visits for exploratory purposes.

DER/PMO Accomplishments

- The VA-CASE Data Engineering program has completed Phase 1 of the Beneficiary Travel project in the first quarter of FY 14 which established the baseline templates and reminder dialogs consistent with the CBO requirements. These were placed on a common site for the deployment and use of several test sites. Adjustments in the technical manual are being made to assure the proper functioning of the health factors built into the dialogs and reminders. SLA for Phase 2 has been signed and Phase 2 ratifies the work to date and moves the tested templates and reminders to the VACO Informatics Committee for approval and patch build to allow for national roll out.
- In partnership with the VA-CASE Program Management Office – the Emergency Women's Services (ESW), Specialty Care (SC)/Patient Aligned Care Team (PACT) production continues with the first applications nearing completion for ESW. The program remains on track for a June 2014 rollout of the initial tools for both projects. A long-term operations strategy was reviewed by Heather Woodward-Hagg and Dr. Steven Asch in Palo Alto HS R&D to ensure all five toolkits are sustained through FY2015.

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