HEALTHCARE SYSTEMS PROCESS IMPROVEMENT
CONFERENCE 2025

Sponsored by: SOCIETY FOR HEALTH SYSTEMS
LEADING HEALTHCARE IMPROVEMENT

Recipes for Success
(Ways to Get the Work Done)

Avi Fishman, MBA, SSBB, LMBB

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Presenters & Disclosures

Avi Fishman

MBA, SSBB, LMBB

I have nothing to disclose

Key Learning Objectives

You will learn about my philosophy towards people and problems.

Will go over the various ways the Process Improvers can identify waste and bring about meaningful and sustainable improvements within an organization; which are:

- Mapping
- Internal Consulting
- 5S
- Kaizen Events
- Traditional Projects
- Mentor/Train
- Embedded Approach

My Philosophy towards People and Projects

Everything I do - is done with respect
I don't tell people what to do or where to go

If you already know your solution - don't call me
If you are looking to add FTE's - don't call me

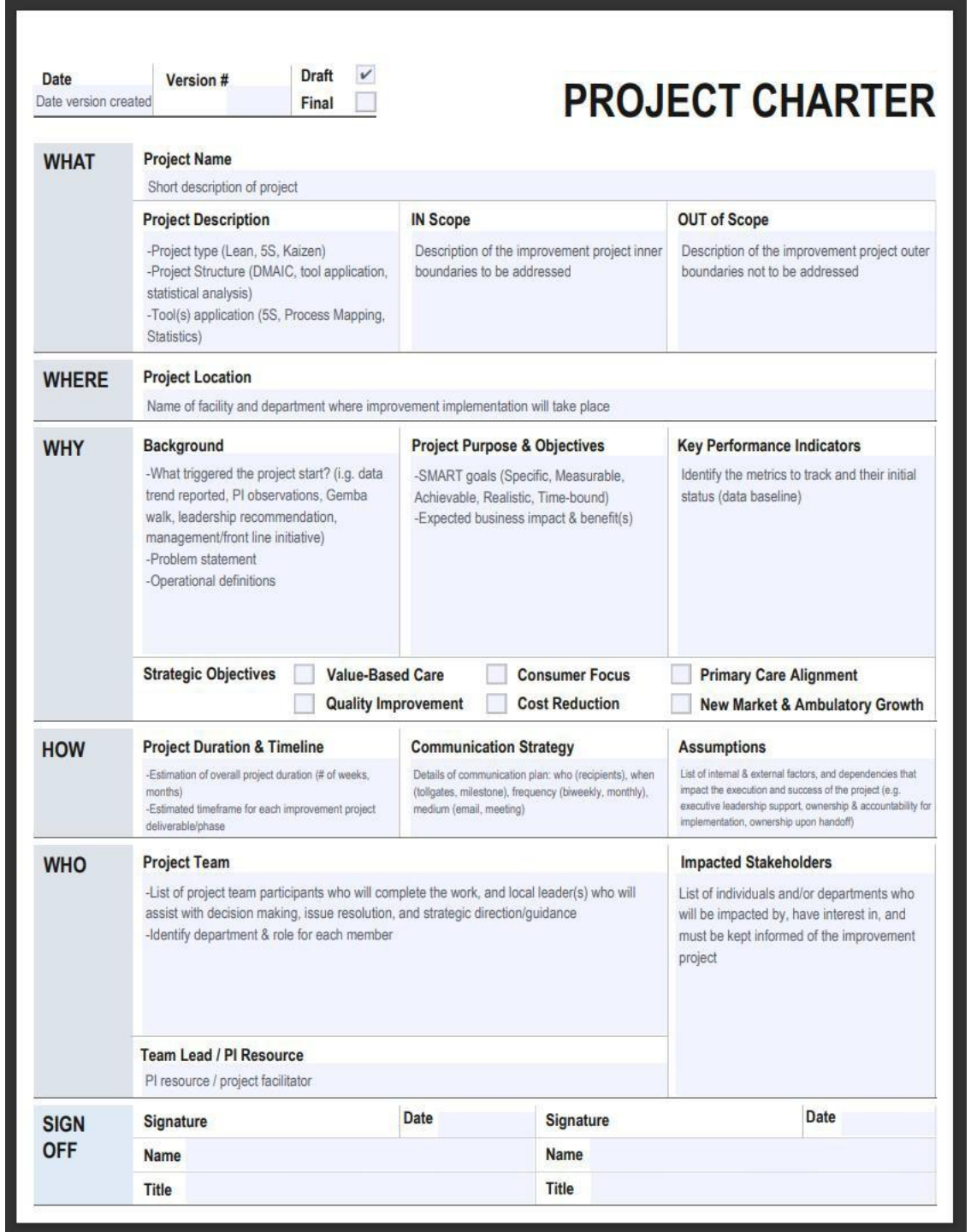
Project Work – The Bottom Line

Everything you do – must result in or lead to

- identifying waste
- bring about measurable improvement
- meet the needs of the customer

Let’s Get Started

Everything starts with a Charter



Date	Version #	Draft ✔
Date version created		Final ☐

PROJECT CHARTER

WHAT

Project Name

Short description of project

Project Description	IN Scope	OUT of Scope
-Project type (Lean, 5S, Kaizen) -Project Structure (DMAIC, tool application, statistical analysis) -Tool(s) application (5S, Process Mapping, Statistics)	Description of the improvement project inner boundaries to be addressed	Description of the improvement project outer boundaries not to be addressed

WHERE

Project Location

Name of facility and department where improvement implementation will take place

WHY

Background	Project Purpose & Objectives	Key Performance Indicators
-What triggered the project start? (i.g. data trend reported, PI observations, Gemba walk, leadership recommendation, management/front line initiative) -Problem statement -Operational definitions	-SMART goals (Specific, Measurable, Achievable, Realistic, Time-bound) -Expected business impact & benefit(s)	Identify the metrics to track and their initial status (data baseline)

Strategic Objectives

☐ Value-Based Care ☐ Consumer Focus ☐ Primary Care Alignment

☐ Quality Improvement ☐ Cost Reduction ☐ New Market & Ambulatory Growth

HOW

Project Duration & Timeline	Communication Strategy	Assumptions
-Estimation of overall project duration (# of weeks, months) -Estimated timeframe for each improvement project deliverable/phase	Details of communication plan: who (recipients), when (tollgates, milestone), frequency (biweekly, monthly), medium (email, meeting)	List of internal & external factors, and dependencies that impact the execution and success of the project (e.g. executive leadership support, ownership & accountability for implementation, ownership upon handoff)

WHO

Project Team

-List of project team participants who will complete the work, and local leader(s) who will assist with decision making, issue resolution, and strategic direction/guidance

-Identify department & role for each member

Team Lead / PI Resource

PI resource / project facilitator

Impacted Stakeholders

List of individuals and/or departments who will be impacted by, have interest in, and must be kept informed of the improvement project

SIGN OFF

Signature	Date	Signature	Date
Name		Name	
Title		Title	

What

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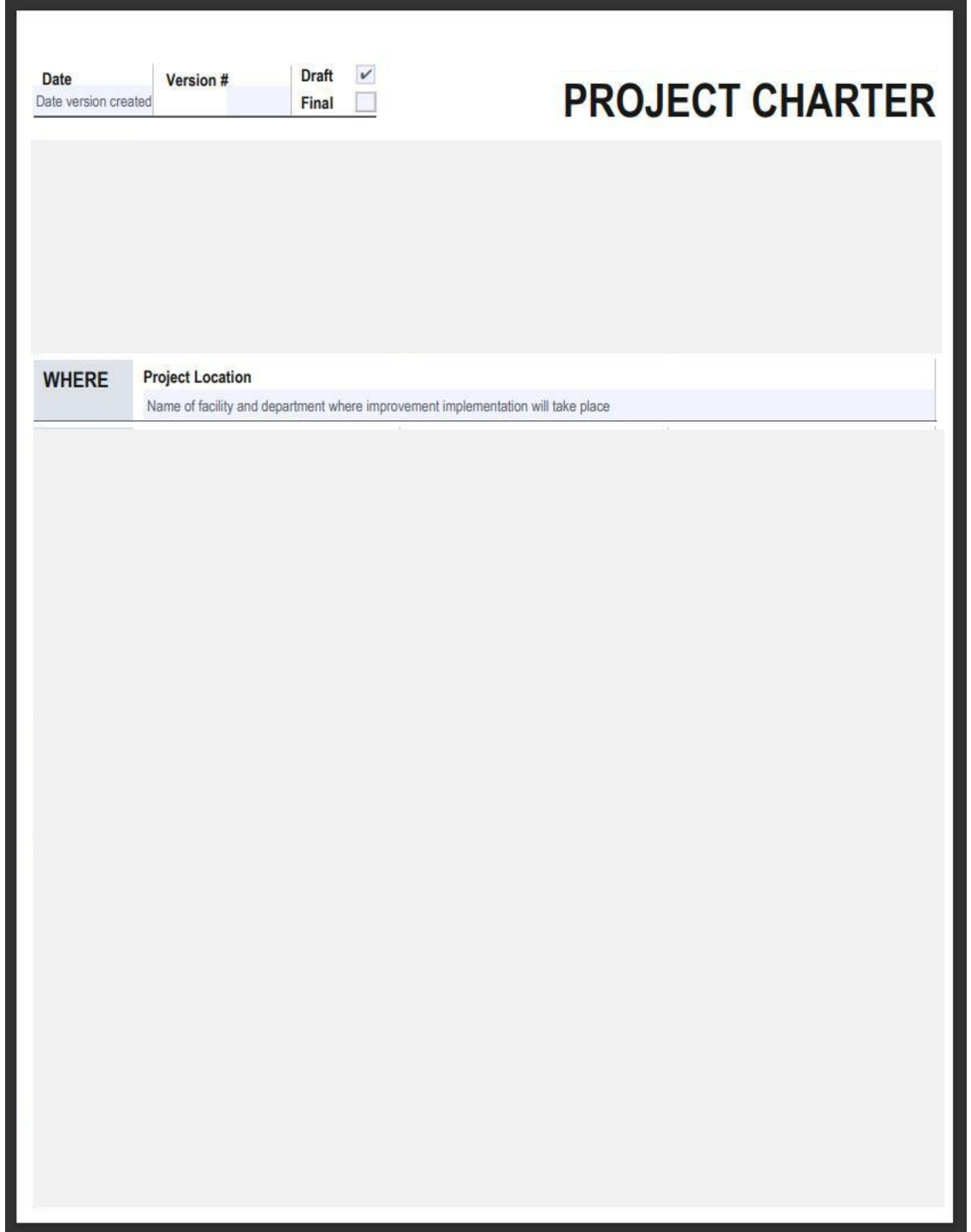

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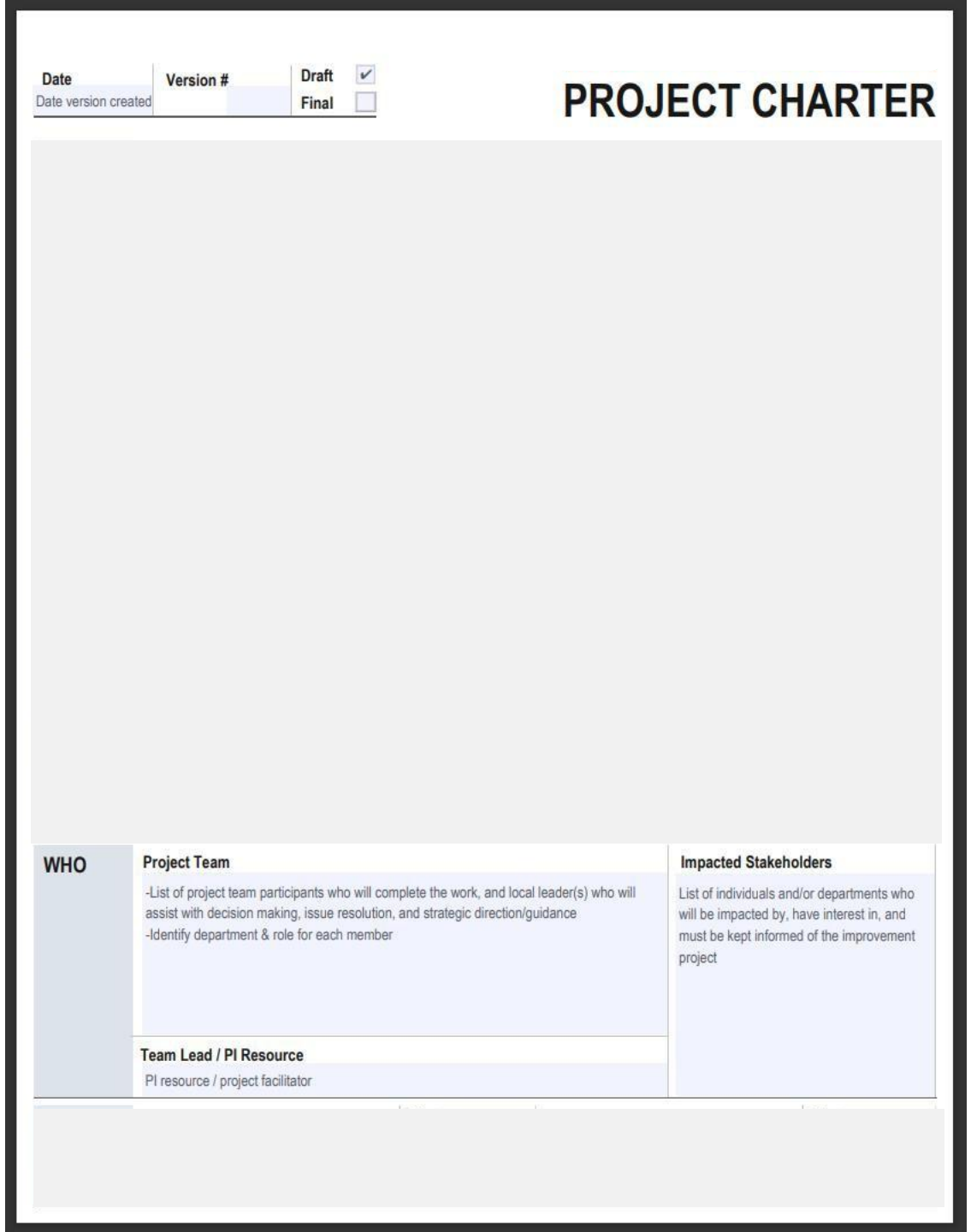

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PROJECT CHARTER

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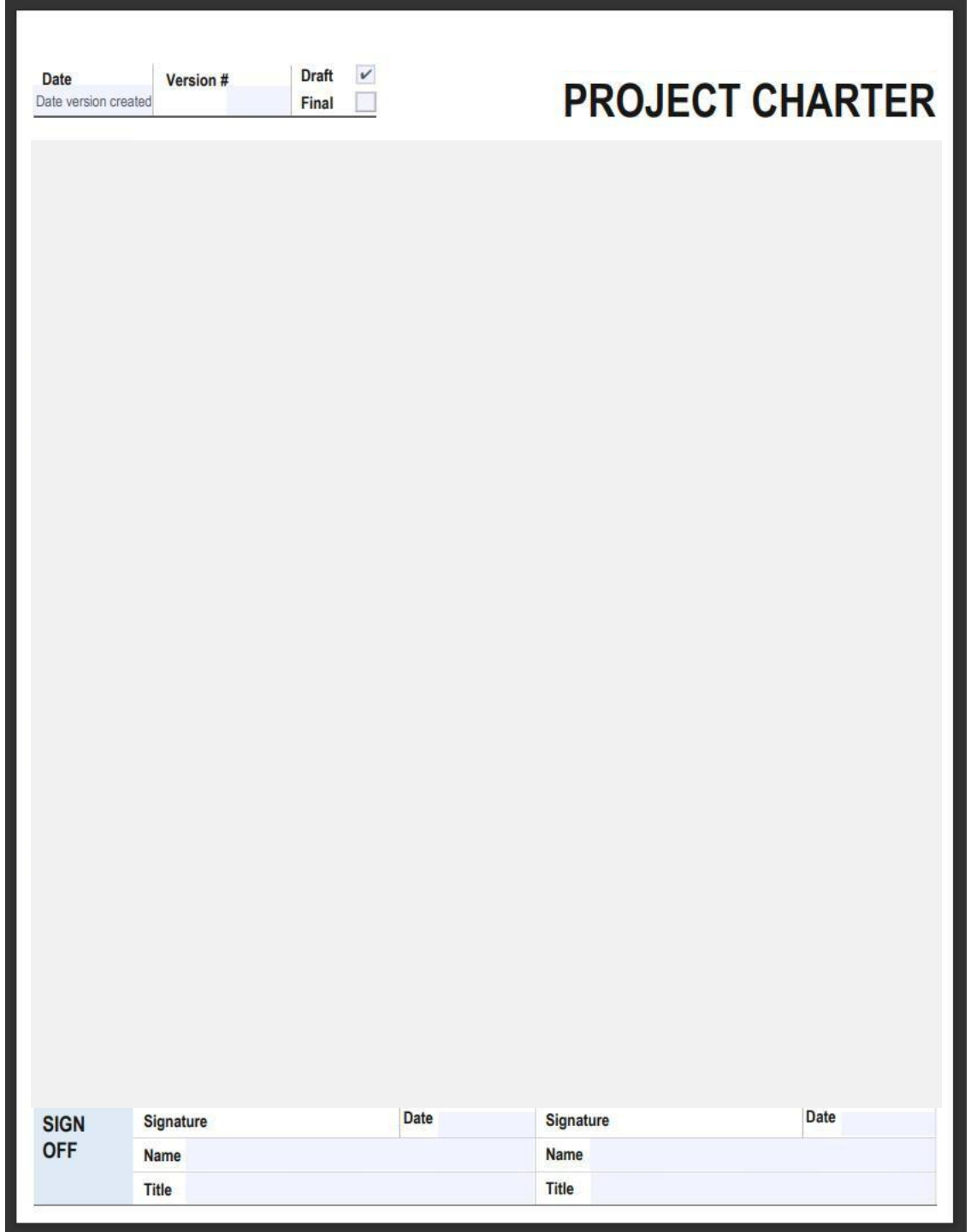
	Team Lead / PI Resource PI resource / project facilitator	

Sign Off



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Ways to Get the Work Done

M

PROCESS MAPPING

Small (Limited Engagement)

1 to 2 Months

To identify "current state" process steps and where there may be some inefficiencies

1 Lead (possibly + 1 Assist)

- can include SIPOC, swim lane, cross functional or spaghetti mapping

IC

INTERNAL CONSULTING

Small (Limited Engagement)

1 to 3 Months

To investigate, summarize findings in order to recommend quick fixes

1 Lead (possibly + 1 Assist)

- utilizes Lean concepts

5S

5S PROJECT

Large (Complex)

3 to 6 Months

To bring about improved space organization / use for efficiency, effectiveness & safety

1 Lead + 1 Assist

- 5S stands for sort, set in order, shine standardize and sustain

KE

KAIZEN EVENT

Large (Complex)

2 Weeks + 4 Days + 2 Months

To bring about incremental and sustainable improvements in less time than a Traditional Project

Entire Team

- follows the DMIAC framework of: Define, Measure, Analyze, Improve & Control

TP

TRADITIONAL PROJECT

Large (Complex)

6+ Months

To bring about incremental and sustainable improvements in a methodical, comprehensive manner

1 Lead + 1-2 Assist

- follows the DMIAC framework of: Define, Measure, Analyze, Improve & Control

MT

MENTOR/ TRAIN

Large (Limited Engagement)

6 to 9 Months

To mentor / train Green Belts and future leaders to engage in meaningful DMAIC and 5S projects

1 Lead

- follows the DMIAC framework or 5S. Impactful means to train future “Lean Doers” within MHS

EA

EMBEDDED APPROACH

Large (Complex)

6 to 9 Months

To bring about incremental and sustainable Improvements within a department

1 Lead (possibly + 1 Assist)

- follows the DMIAC framework or 5S. Impactful means to train future “Lean Doers” within MHS

Everything you do requires ongoing leadership support and commitment from front-line management and those that do the work

M

Process
Mapping

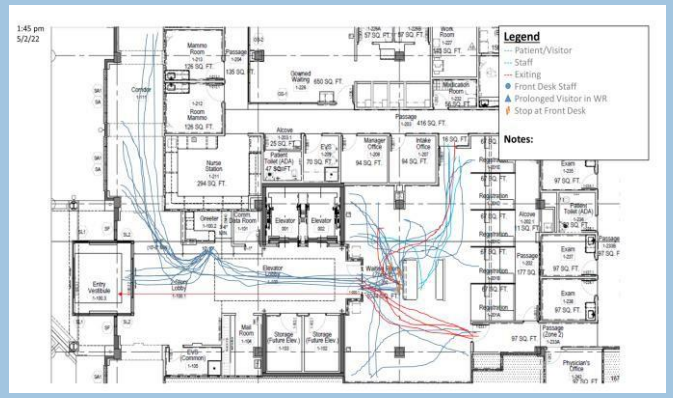
Mapping ≠ a project

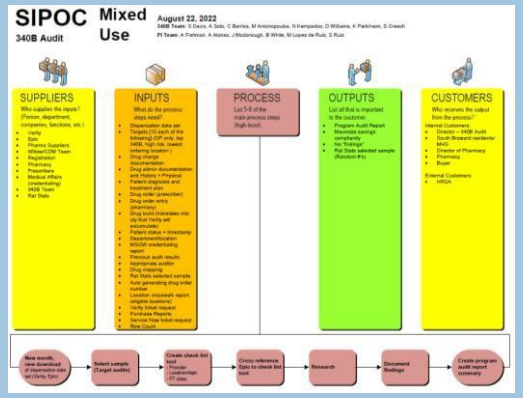
Can take 1 to 2 months

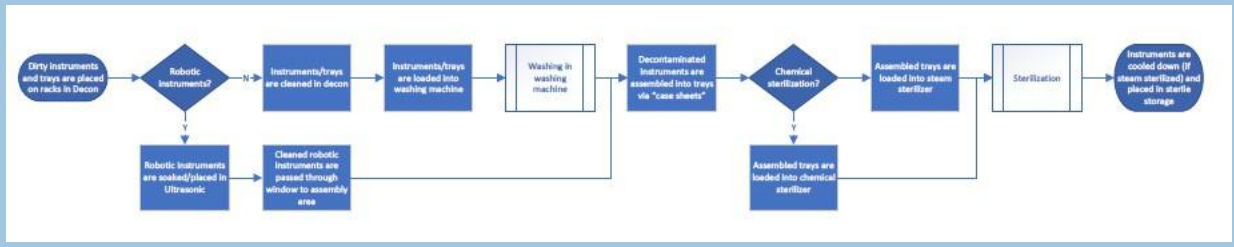
Can be done by 1 or 2 Team Members

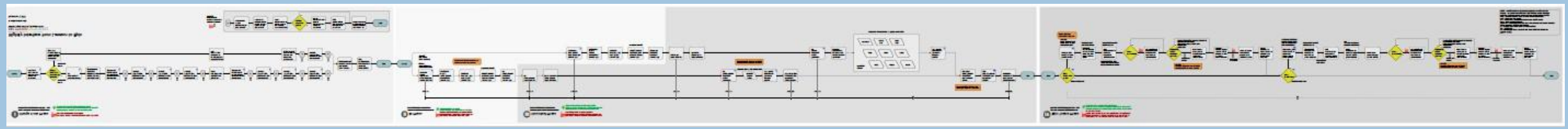
Helps layout current state process as well as identify process inefficiencies (NVA)

Can include SIPOC, swim lane, cross functional or spaghetti mapping









Everything you do requires ongoing leadership support and commitment from front-line management and those that do the work

IC

Internal
Consulting

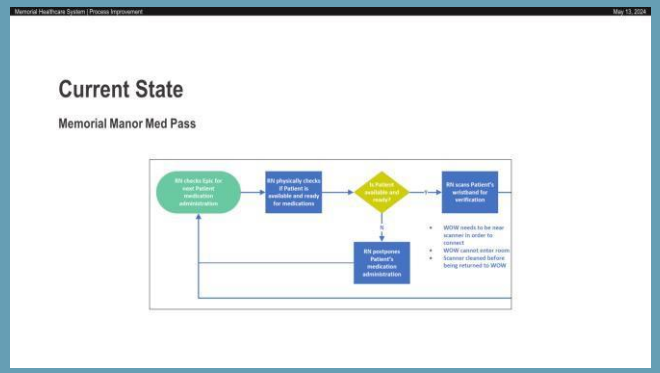
IC ≠ project; but can lead to one

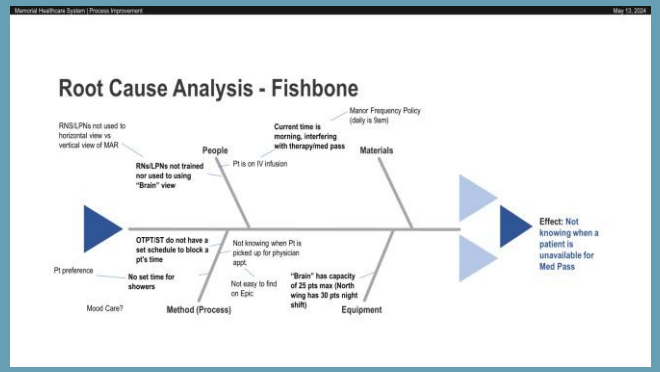
Can take 1 to 3 months

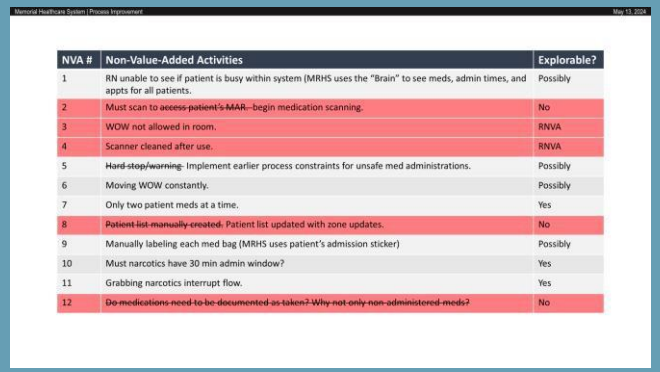
Can be done by 1 or 2 Team Members

To investigate, summarize findings in order to recommend some quick fixes

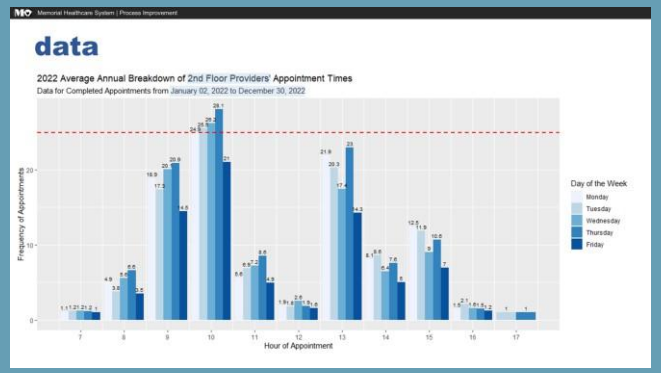
Can result in a request for a project

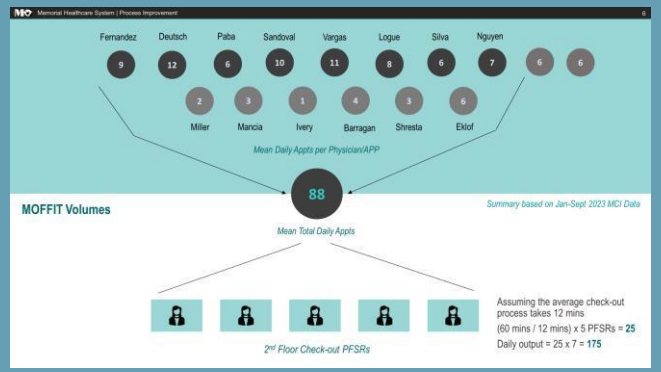






NVA #	Non-Value-Added Activities	Explorable?
1	RN unable to see if patient is busy within system (MRHS uses the "Brain" to see meds, admin times, and appts for all patients.	Possibly
2	Must scan to ~~access patient's MAR.~~ begin medication scanning.	No
3	WOW not allowed in room.	RNVA
4	Scanner cleaned after use.	RNVA
5	~~Hard stop/warning.~~ Implement earlier process constraints for unsafe med administrations.	Possibly
6	Moving WOW constantly.	Possibly
7	Only two patient meds at a time.	Yes
8	~~Patient list manually created.~~ Patient list updated with zone updates.	No
9	Manually labeling each med bag (MRHS uses patient's admission sticker)	Possibly
10	Must narcotics have 30 min admin window?	Yes
11	Grabbing narcotics interrupt flow.	Yes
12	~~Do medications need to be documented as taken? Why not only non-administered meds?~~	No





Everything you do requires ongoing leadership support and commitment from front-line management and those that do the work

5S

5S
Project

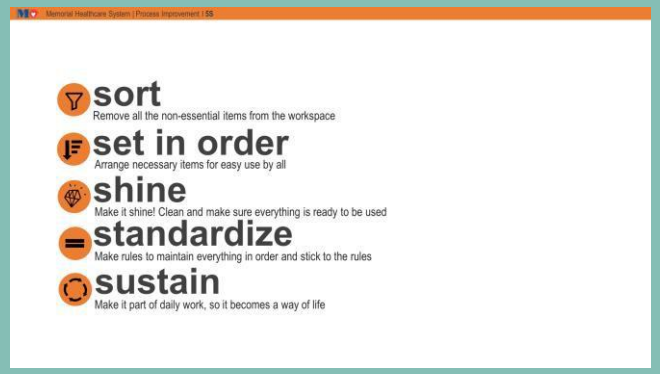
Can be large and complex

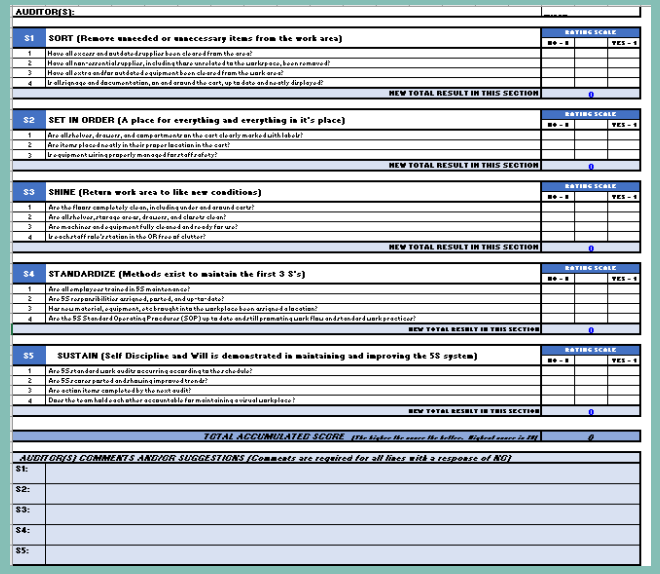
Can take 3 to 6 months

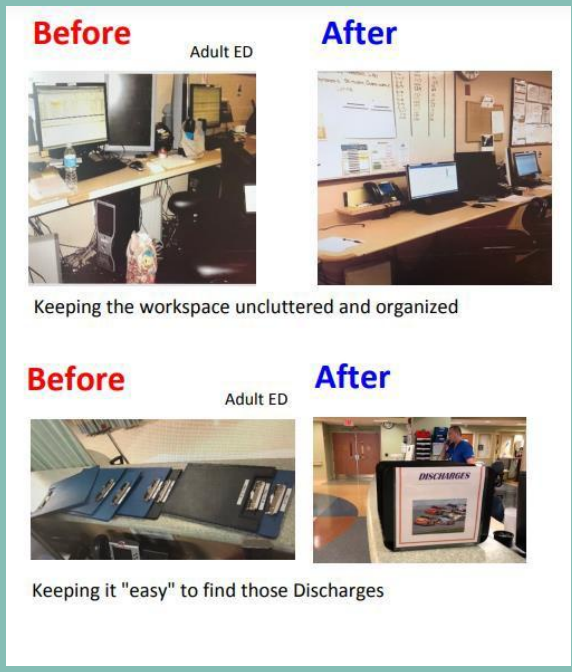
Can be done by 1 or 2 Team Members

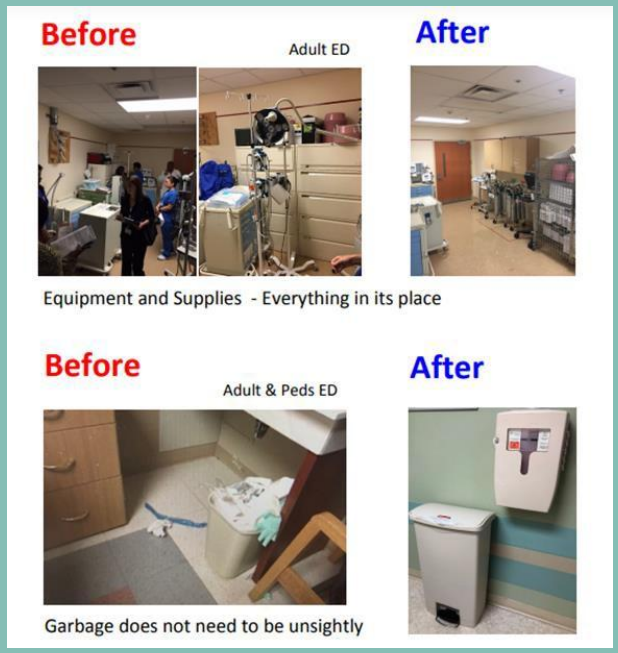
To bring about improved space organization / use for efficiency, effectiveness & safety

5S stands for sort, set in order, shine standardize and sustain









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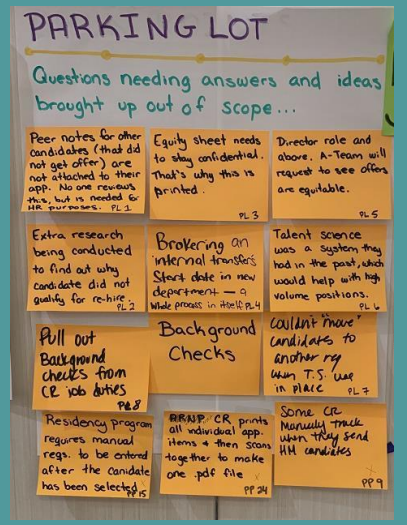
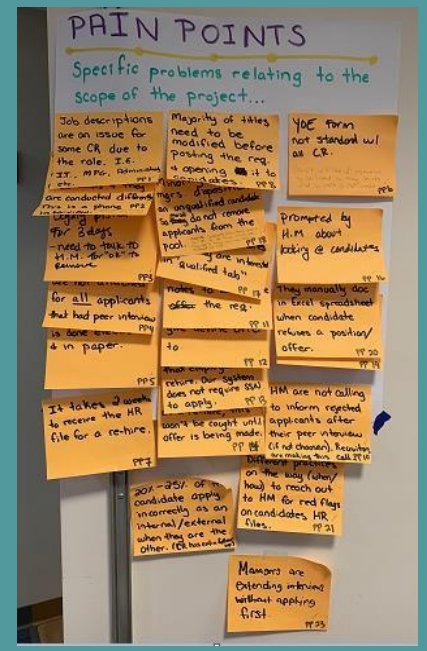
KE

Kaizen
Event

Most definitely large and complex

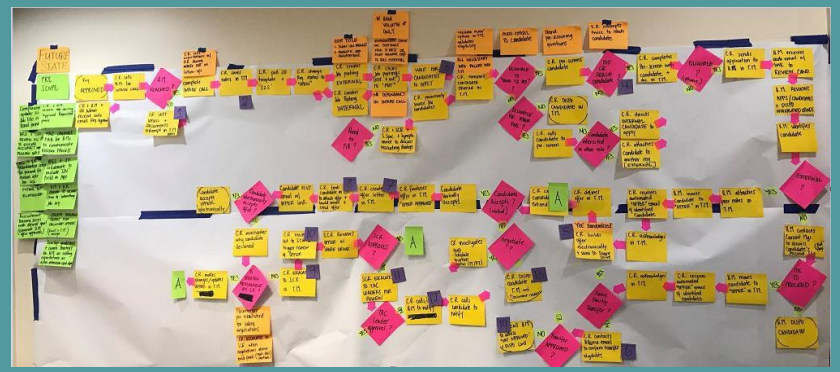
Can take 2 Weeks (pre work) + 4 Days (KE) + 2 months (post work and related rollouts)





Requires involvement of the entire PI team

To bring about incremental and sustainable improvements in less time than a Traditional Project



Follows the DMIAC framework of:
Define, Measure, Analyze, Improve & Control

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TP

Traditional
Project

large and complex

Can take 6 to 9 months (or more)

Can be done by 1 to 3 Team Members

To bring about incremental and sustainable improvements

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Follows the DMIAC framework of:
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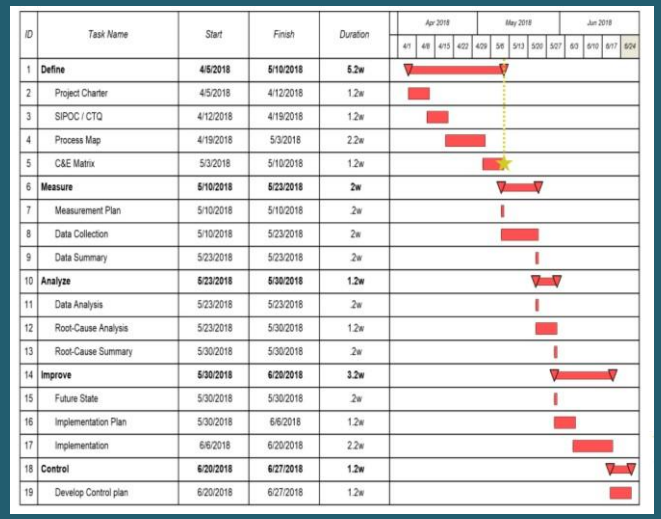
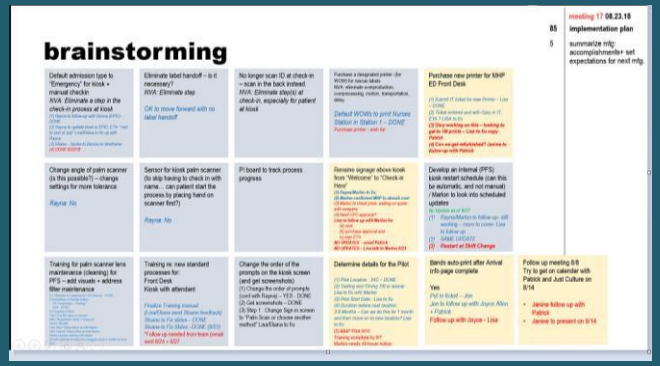
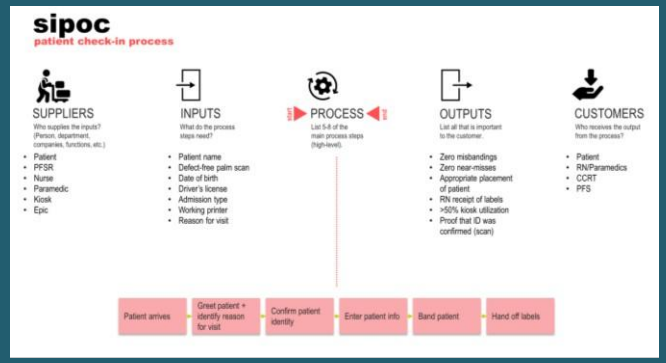
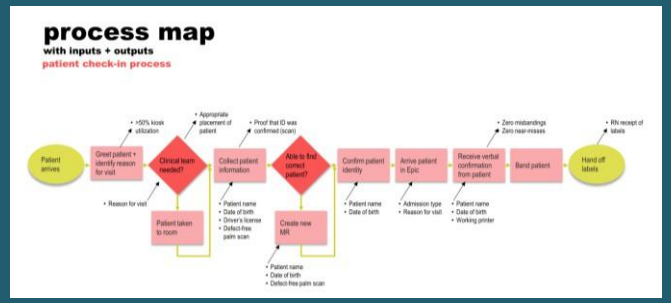
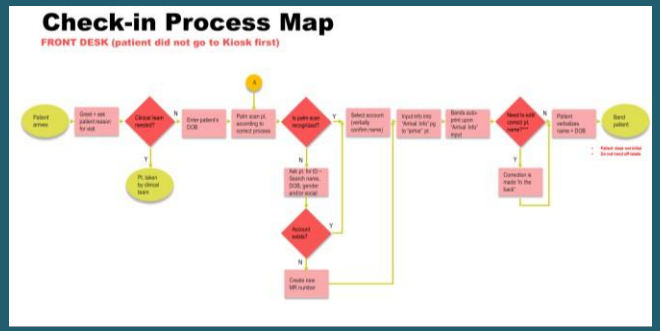


ID	Task Name	Start	Finish	Duration
1	**Define**	**4/5/2018**	**5/10/2018**	**5.2w**
2	Project Charter	4/5/2018	4/12/2018	1.2w
3	SIPOC / CTQ	4/12/2018	4/19/2018	1.2w
4	Process Map	4/19/2018	5/3/2018	2.2w
5	C&E Matrix	5/3/2018	5/10/2018	1.2w
6	**Measure**	**5/10/2018**	**5/23/2018**	**2w**
7	Measurement Plan	5/10/2018	5/10/2018	2w
8	Data Collection	5/10/2018	5/23/2018	2w
9	Data Summary	5/23/2018	5/23/2018	2w
10	**Analyze**	**5/23/2018**	**5/30/2018**	**1.2w**
11	Data Analysis	5/23/2018	5/23/2018	2w
12	Root-Cause Analysis	5/23/2018	5/30/2018	1.2w
13	Root-Cause Summary	5/30/2018	5/30/2018	2w
14	**Improve**	**5/30/2018**	**6/20/2018**	**3.2w**
15	Future State	5/30/2018	5/30/2018	2w
16	Implementation Plan	5/30/2018	6/6/2018	1.2w
17	Implementation	6/6/2018	6/20/2018	2.2w
18	**Control**	**6/20/2018**	**6/27/2018**	**1.2w**
19	Develop Control plan	6/20/2018	6/27/2018	1.2w









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MT

Mentor/
Train

To help others lead a project

Limited engagement that can several months

Can be done by 1 Team Member

To mentor / train Green Belts and future leaders to engage in meaningful DMAIC and 5S projects

Follows the DMIAC framework of:
Define, Measure, Analyze, Improve & Control

Everything you do requires ongoing leadership support and commitment from front-line management and those that do the work

EA

Embedded
Approach

large and complex

Can take 6 to 9 months (or more)

Can be done by 1 to 2 Team Members

Opportunity to train department members

Lean Principles and how to engage in meaningful Improvement work

To bring about incremental and sustainable Improvements within a department

Follows the DMIAC framework

Everything you do requires ongoing leadership support and commitment from front-line management and those that do the work

Remember

Everything you do requires ongoing leadership support and commitment from front-line management and those that do the work

Otherwise… failure may be immanent

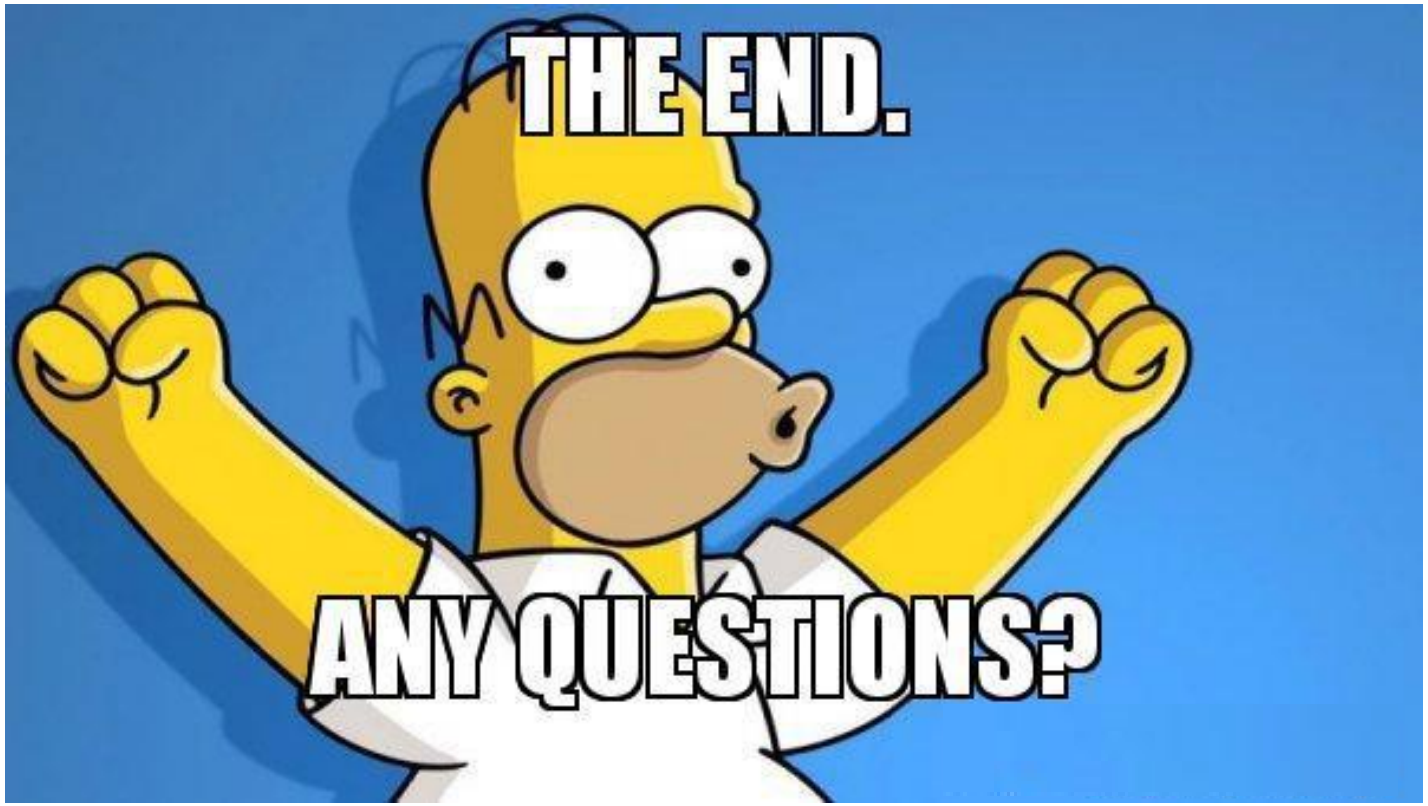
In Conclusion

There are many ways to do improvement work.

It is important to know your customer; what they want and more importantly what they need. While they may understand their business; they may not yet understand their problem.

You need to determine the best approach to take to help your customer in order help them move forward.

Everyone may want a Kaizen Event; but sometimes they will benefit with starting off with Mapping and then you can take it from there.


THE END.
ANY QUESTIONS?