

Taking Process Improvement Beyond the Quality Department

by Janet Jacobsen

At a Glance . . .

- In 2005, Genesis Health System (GHS) adopted the Baldrige criteria as a framework for process improvement.
- Since then, GHS has worked to make processes more systematic by putting quality tools in the hands of employees.
- As its process improvement approach took shape, GHS captured two statewide bronze-level performance excellence awards, and in 2009 it took home the silver award.
- Using improvement tools such as benchmarking and the plan-do-check-act (PDCA) cycle, GHS has achieved continuing success with influenza vaccination clinics for area school children.

A famous Chinese proverb proclaims: *Give a man a fish; you have fed him for today. Teach a man to fish, and you have fed him for a lifetime.* This ancient maxim applies to teaching process improvement skills at Genesis Health System. Here, leaders believe in equipping employees with the quality tools needed to drive process improvement in every facet of this dynamic healthcare organization.

About Genesis Health System

Genesis Health System (GHS) was formed in 1994 with the merger of two large hospitals in the Quad Cities, which encompasses Davenport and Bettendorf in Iowa, and across the Mississippi River in Illinois, Moline and Rock Island. Today, GHS provides a comprehensive array of healthcare services in a 10-county region with 665 licensed beds, 600 physicians, and more than 5,000 staff members.

Adopting the Criteria for Performance Excellence

The formation of GHS presented an opportunity to meld the quality ideologies of the two predecessor hospitals, Mercy and St. Luke's, explains Dr. James Lehman, vice president of quality at GHS. As the director of medical affairs at Mercy Hospital, Lehman had participated in total quality management (TQM) and performance improvement training through the Juran Institute. Prior to the merger, St. Luke's Hospital followed a slightly different quality philosophy. "Through the consolidation process we tried to take the best of both and create our own approach," recalls Lehman.

While the Malcolm Baldrige National Quality Award criteria were "on the radar" at GHS, a commitment to following this framework didn't gain traction until 2004 when Lehman attended an American Hospital Association conference. One of the sessions focused on the competitive advantages offered to healthcare organizations that follow the Baldrige criteria. Lehman's boss was intrigued and instructed him to "do whatever it takes" to learn more about the criteria. Soon thereafter Lehman attended a Quest for Excellence conference where he learned that several states offered performance improvement programs based on the Baldrige criteria. "At the time I hadn't realized that Iowa offered such a program," Lehman remembers. He ultimately decided to become involved with the Iowa Recognition for Performance Excellence (IRPE) program because it seemed to mirror the national Baldrige criteria closely, says Lehman, who is board certified in internal medicine and medical management.

Putting Quality Tools in Employees' Hands

To implement the integrated process improvement approach that the Baldrige/IRPE framework calls for, it was important that GHS take this effort beyond the quality department and involve as many executives and staff members as possible. One of the most important steps early on was for several of the organization's executives, including Lehman, to become IRPE examiners. In some years, as

Benchmarking to Improve Flu Vaccine Clinics

Thousands of schoolchildren in the Quad Cities received free seasonal influenza vaccinations last fall, thanks to the ongoing efforts of Genesis Health System (GHS). By benchmarking and learning about best practices from other successful school-based programs around the country, GHS is expanding its flu vaccine clinics to more schools each year.

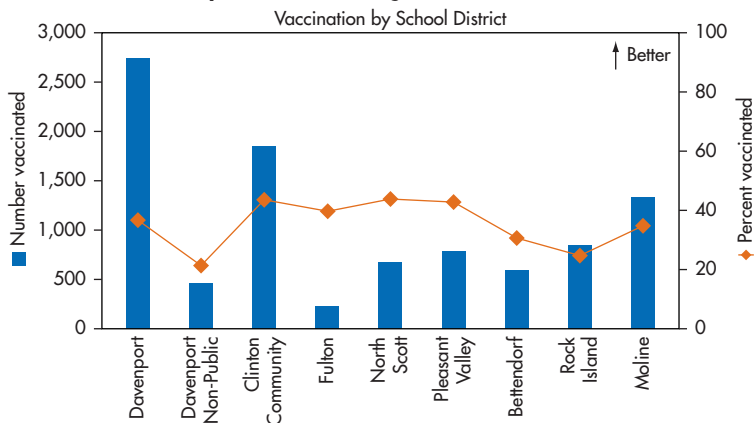
While GHS has a long history of conducting adult flu clinics, recent concerns centered on measures to safeguard the entire community from flu-related hospitalizations and deaths, rather than just protecting one segment of the population, such as the elderly. Michele Cullen, community health manager for GHS, explains that three years ago the organization began focusing on the concept of “herd immunity” as opposed to protection for just one segment. “With that conversation we talked about school-aged children, particularly those in the elementary grades in that they are the ones who carry around a lot of the germs. While they might not get influenza, they have contact with younger siblings as well as elderly grandparents or neighbors,” says Cullen, RN, BSN.

Soon Cullen and her co-workers were studying reports demonstrating that for every one person vaccinated, the impact reaches five people. “That’s how we started with the philosophy that if we can vaccinate one elementary school student, that could help protect five more people in the community,” Cullen recalls.

With just a few weeks to prepare for the first school-centered clinics, GHS contacted the Davenport Community School District for permission to pilot a program in a small number of schools. In the fall of 2007, GHS provided free, voluntary vaccinations for 560 students in three schools.

To expand the effort and improve the clinic processes for the following year, Cullen and her co-workers used the plan-do-check-act cycle and benchmarked the state of Hawaii’s program to learn more about best practices for running successful school-based clinics. In 2008, a little more than 2,000 students in 22 area schools received vaccinations. One year later the program provided 9,400 vaccinations in more than 80 elementary schools, as shown below.

Seasonal flu vaccinations provided in GHS’s third year of immunizing schoolchildren.



Benchmarked against Hawaii’s state-wide influenza vaccination program of children age 5 – 13 that achieved a 46% vaccination rate.

“We feel we now have the model down for the school program to be lean and cost-effective,” notes Cullen, who is working to correlate vaccination statistics with school absentee rates, as well as the number of upper respiratory infections treated in area emergency rooms and urgent care centers.

GHS will once again provide the free clinics in the fall of 2010 and Cullen’s goal is to improve from the 36-percent vaccination rate to 40 percent of students in each school served by the program. “It’s exciting to be out there making this kind of impact with so many area schoolchildren,” she says.

many as 10 GHS employees have served as volunteer examiners. “Having several leaders serving as examiners has been really helpful during discussions at the executive level about understanding the criteria and what we need to do to move ourselves forward,” notes Lehman.

Quality Education

In the past, when the organization tackled a performance improvement project, it was up to the quality department employees to lead the effort. Lehman and his co-workers realized that they needed to educate the staff as a whole on the use of process improvement tools and make the tools readily available well beyond the quality department. “We recognized that it was like the famous saying, ‘Give the person a fish and they eat for a day; teach the person how to fish and they eat for a lifetime.’”

Taking this proverb to heart, GHS now offers a variety of opportunities to employees who want to learn more about the organization’s performance improvement toolbox, which is a set of basic quality tools such as Pareto diagrams, box plots, histograms, affinity and fishbone diagrams, and the plan-do-check-act (PDCA) cycle. As Lehman reports, these tools are nothing fancy—just basic approaches to process improvement.

Over each of the past several years, one of GHS’s quarterly, day-long Leadership Development Institutes (LDI) has been devoted to quality and performance improvement. Lehman and his team spend three to four hours on various process improvement tools and methodologies and the benefits to expect from using them effectively. The most recent LDI held in April 2010 focused on understanding the Baldrige criteria and scoring and an introduction to lean principles.

In addition to the LDI sessions, GHS offers a Queue Up for Quality program, a strategy to diffuse knowledge about performance improvement and quality tools more widely. This voluntary program is limited to 25 participants who are seeking the tools to achieve performance improvement on some basic problems that they might be encountering in their work areas. Lehman is pleased that the organization is starting to reach “critical mass” with employees who have taken this class, know how to use the tools, and apply the tools in their daily work.

Queue Up for Quality graduates serve as improvement specialists in their work areas by taking back what they learn and encouraging their teams and co-workers to use the quality tools, explains Maureen Heuer, performance excellence coordinator at GHS. Two performance improvement specialists in the quality department provide backup support for the graduates if they have questions or concerns as they incorporate what they learned in the program to their part of the organization. In addition, GHS provides online resources through a performance improvement intranet site offering many of the same tools and templates featured in the Queue Up program.

A third layer to the education effort, Genesis University, is just getting under way. Designed to develop current and future

leaders through a three-tiered education system, Genesis University begins with an orientation-style program for new hires, followed by a second level focusing on leadership. The final level is where employees can become certified in each of the organization’s six pillars or key focus areas (quality, service, finance, relationships, growth, and information). A combination of experiences taking part in the Queue Up for Quality program, serving as a Baldrige or IRPE examiner, and leading a process improvement project can qualify an employee as a Certified Genesis Quality Leader.

Lehman says that as a result of these education initiatives, “We’ve taken a lot of pressure off the quality department so they don’t have to facilitate and basically manage some fairly straightforward intradepartmental performance improvement activities. We’ve given more authority to other departments to be engaged with process improvement.”

Teaming Up for Quality

Team improvement projects are key to GHS’s goal of using a systematic approach to improving work processes for better performance, reducing variability, improving services and outcomes, and keeping processes current with healthcare needs and directions. Three types of teams are used:

- Traditional process improvement teams
- Kaizen blitz teams
- Internal/external process improvement specialists

The traditional team approach uses the PDCA method to work through understanding the problem/process, determining root causes, developing and selecting the best solution, implementing a solution, and monitoring the solution. GHS has found that a more focused approach using kaizen blitz teams can yield better, quicker results. This approach, shown in Figure 1, brings together key stakeholders and process owners for one to five days to develop an implementation plan and begin working on implementing solutions. Finally, internal process improvement

specialists are available at GHS to consult with improvement teams as they work through the PDCA process.

Earning Performance Excellence Honors

As GHS began to experience the benefits of its integrated quality education and improvement team efforts, it sought external feedback on its progress, leading the organization to apply for the IRPE award in 2007. In its inaugural application, GHS captured a bronze level award and followed up in 2008 with another bronze recognition.

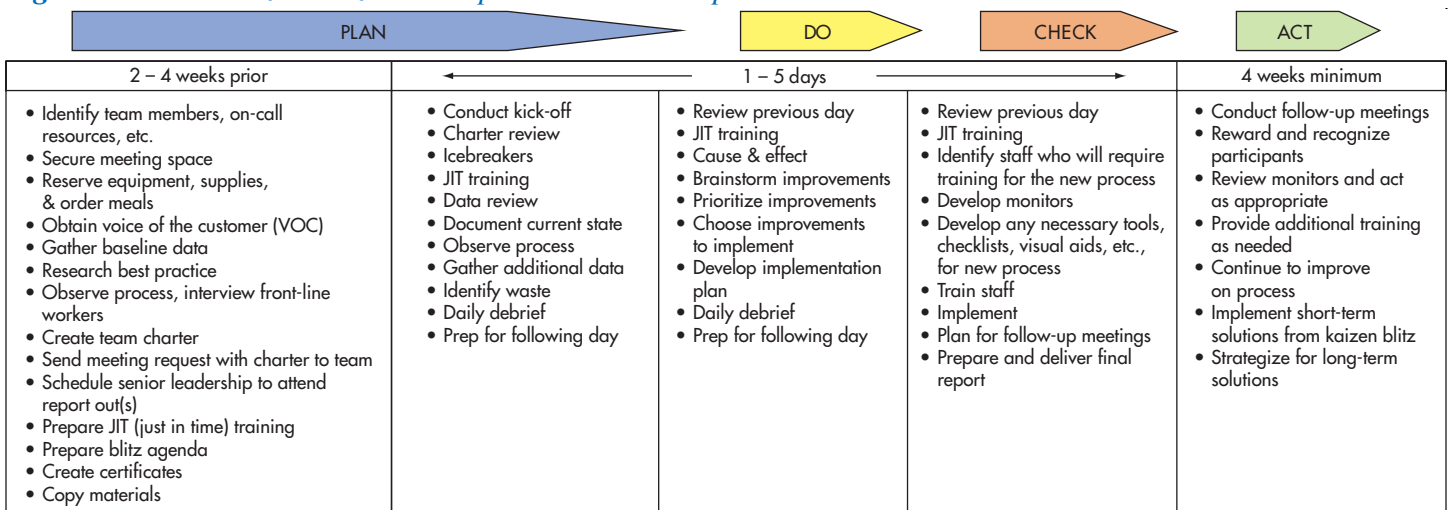
Lehman recalls that the organization had some processes that weren’t very systematic, so the senior leadership team focused on making those processes more systematic and on developing better indicators to measure results. “We recognized that while we were measuring lots of things, we weren’t necessarily measuring the important things. I think getting our measures and our priorities lined up and coordinated better has also resulted in higher scoring on our [IRPE] feedback,” notes Lehman. As GHS became more and more systematic in its process improvement efforts, it captured the IRPE silver award in 2009.

It’s the detailed feedback from the independent team of IRPE reviewers that Lehman and his team value most about the organization’s participation in the Iowa program. He says that while his staff conducts internal reviews and audits, nothing is comparable to having someone from outside the organization, who has no vested interest in GHS, providing insight on something such as a mismatch in the organization’s processes. “It’s worth a lot more than what we pay for it, and I think it’s the best money we spend to get that honest, worthwhile feedback,” remarks Lehman, a veteran IRPE examiner.

Going National?

After achieving success in its first three applications for the statewide award, Lehman shares, GHS is looking to take the effort to the next level. GHS will be preparing an application for

Figure 1—GHS kaizen blitz road map to continuous improvement



the national Baldrige Award, although a timeframe hasn't been finalized. Lehman says that GHS leaders have always questioned whether the best strategy is to wait until the organization can earn the gold IRPE award before applying to the national program. Now he believes that he's sold his fellow leaders on the idea that GHS doesn't need to earn the IRPE gold award first, because it's not a step-wise program. "It's the feedback that's most important, so if we were to apply on a national level and get feedback from national examiners, it might give us a little different perspective on where we need to prioritize our efforts," notes Lehman.

For More Information:

- To learn more about Genesis Health System, visit www.genesishealth.com or contact Maureen Heuer, performance excellence coordinator, at heuerm@genesishealth.com.
- Visit the Alliance for Performance Excellence at www.baldrigepe.org/alliance for links to state quality programs based on the Malcolm Baldrige National Quality Award.
- Visit the ASQ Knowledge Center at www.asq.org/knowledge-center and the Baldrige Performance Excellence® online Baldrige Resource library at www.baldrigepe.org/brl for additional resources on the Malcolm Baldrige National Quality Award, the Alliance for Performance Excellence, and organizational improvement.

About the Author

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About the Iowa Recognition for Performance Excellence Program



The Iowa Recognition for Performance Excellence (IRPE) program helps organizations assess and strengthen performance and capabilities. Participation in this process facilitates self-evaluation and improvement of current processes by identifying strengths and opportunities for improvement. The IRPE program uses the Malcolm Baldrige National Quality Award framework to guide organizations in their performance excellence journeys. Learn more at www.iowaqc.org.