



LEAN CASE STUDY:

REGINA HEALTH REGION TAKES A COMPREHENSIVE LEAN APPROACH

When health care organizations take on quality issues, decision-makers often target specific departments in order to bring about change. While this focused approach may work for isolated problems, system-wide issues such as wait times require a more comprehensive approach. Thanks to a strong commitment from their Senior Management Team, the Regina Qu'Appelle Health Region is involving people throughout the organization in order to take on some of the most pervasive challenges affecting healthcare today.

“Lean is a patient-centered approach that focuses on reducing system waste as it engages and empowers staff and physicians to build high quality and safe processes,” stated Dwight Nelson, RQHR’s President and Chief Executive Officer.

In order to support the deployment of Lean, the Region’s Senior Management Team started by learning about this powerful improvement methodology. The training they took involved learning Lean fundamentals and exploring the cultural shift needed to effect change using Lean. This foundation provided direction and a clear message to staff and physicians that change was coming, and that they would be asked to design it.

“The key is that our senior leaders started by themselves learning about Lean,” said Julie Johnson, Director of Quality Improvement at Regina Qu'Appelle, “which set the stage for other leaders, (executive directors, department heads and, managers), to support staff and physicians to become involved in this new way of doing business.”

The Region decided to take on seven value stream projects representing diverse areas of

operation: MRI Screening, Mental Health Clinic, Building Maintenance, the Pioneer Village Home for Seniors, Practitioner Staff Reappointment, Attendance Support, and Patient Flow in Acute Hospitals.

Cross-functional teams of frontline staff, physicians and managers involved in the projects identified key issues standing in the way of providing care to patients. For example, a team looking at MRI screening noted that patients scheduled for scans were sometimes turned away at the door. Naturally, this created a negative experience for the patient and a poor care outcome. Some of the issues identified were incomplete patient assessments, issues with pain management, claustrophobia, and other issues resulting from poor preparation of the patient.

Essentially, the root of the problem was broader than many had believed. “We all thought we knew what the cause of the problem was when we started,” said a MRI team member, “and we assumed we knew what we should improve. After using Lean mapping techniques we better understood the process, and identified several additional points where we could improve the system.”

Following the identification of current and future states, the MRI team held interactive rapid improvement sessions to develop specific solutions. Improvements include a redesigned assessment form, a brochure distributed to all patients on how to properly prepare for the scan, and the establishment of clear EMS ambulance transport criteria.

Early results have been impressive. At the Regina General Hospital, MRI cancellations were reduced from 12.5 per week to just one. EMS ambulance wait times were reduced from 160 to 30 minutes, and overall MRI productivity increased by 6.7 per cent. The key to these improvements was a collaborative effort on behalf of front line staff and physicians from the three departments involved in MRI screening procedures.

Other teams identified a wide range of issues in their mapping exercises that were

subsequently taken on in the ensuing rapid improvement sessions. The maintenance team, for example, spearheaded a series of initiatives to improve information flow between the department and the units it provides service to. The Maintenance Department now conducts “ward rounds” in which maintenance staff regularly make scheduled visits to all hospital units to proactively identify opportunities to complete small repairs without requiring a requisition. This in turn significantly reduced the number of requisitions submitted to the Maintenance Department.

Through another team’s efforts, the Mental Health Clinic has seen a decrease in paperwork, and a marked improvement in patient interaction with physicians and nurses. An improved booking process means that care workers now have direct access to patients when scheduling appointments. Access to intake staff has been improved through a standardized electronic form, and patients now have a broader timeframe in which to re-access psychiatric services. These processes are expected to result in a significant reduction in the clinic’s wait list – addressing a key concern for the Region.

The Region’s expertise in quality improvement has contributed to teams identifying key issues, and has allowed multiple value streams to be pursued. “The mapping sessions have been wildly successful,” says Christian Wolcott, Senior Consultant for Lean Advisors. “They have great competence in managing projects, and they have a great understanding of Lean.”

Johnson cites leadership and staff willingness to change the organizational culture as key factors in the Region’s early success with Lean. “First and foremost, Lean is about relationship building,” says Johnson, “and moving away from criticism and distrust. Lean is also hindered by a command and control, top-down type of approach. Multi-disciplinary front-line staff (nurses, pharmacists, housekeeping, maintenance, etc) and physicians need the freedom and support to re-design processes within our region.”

“Regina Qu’Appelle brought folks into the workshops who were regular hourly workers, and they were sitting next to department heads,” said Wolcott. “That’s exactly what we want to

have happen. We want to have the issues, we want to have the strategies and the tactics all assembled by these many hands, because these many hands are who and what is serving the patient.”

Impressive as the initial results are, Johnson is hoping this is just the beginning of a fundamental change in the way all people at Regina Qu’Appelle perceive system problems. “It’s about looking at the processes that are driving everyone crazy, and are preventing us from providing world-class service to our patients,” said Johnson. “There’s a phrase in the world of Lean: ‘learning to see.’ I think that’s what we have to get to, that will be our tipping point.”

The phrase ‘learning to see’ says it all; real Lean transformation requires an ongoing learning process that ultimately involves every person within the organization. With their strong commitment and growing knowledge of Lean, the Regina Qu’Appelle Health Region’s Lean journey will be one to watch.