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Webinar Series

Both sessions are from 11 a.m. – 12:30 p.m. Central

Toyota Systems Management Methods and Hospital Improvement:

*Leadership Perspectives, Operational Examples
and Path to Performance Excellence*

TWO-PART SERIES

Thursday, Sept. 17

Toyota Production Systems/Lean Introduction and Approach

Thursday, Sept. 24

**Toyota Production Systems/Lean Challenges, Proven Results
and Path Forward to Sustained Change**

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Series Overview

Hospitals are the latest casualties of the economic crisis. As their investment incomes tumble, hospitals' already stretched operating budgets are being squeezed even further. At the same time, they must treat an increasing number of patients who are uninsured or cannot pay their medical bills. Recent Obama administration health care policy initiatives inject uncertainty about the financial impact to the health care segment. Currently more than half of the nation's hospitals are operating in the red, according to a recent Thomson Reuters study, and credit rating agencies are downgrading hospitals. Across the country, hospitals are cutting staff and services; many being forced to close their doors. Despite these numbers, there is no government bailout for ailing hospitals and no FDIC intervention. While health care reform is stated as a top priority for the Obama administration, hospitals need a remedy now.

Toyota Production Systems (Lean Improvement) strategies help hospital personnel save wasted time and money – so they can devote more time to patient care while simultaneously improving the bottom line. This methodology, surprisingly, comes from building cars. It is a methodology originally invented and perfected by Toyota. Despite its heritage in manufacturing, it is profoundly human. It's not about making rules but changing staff's behavior. It is not about a team of experts who come in with better methods or technology. Instead, it is about enabling staff in the unit, on the floor, to come up with their own intuitive solutions to improve work methods and processes.

The Toyota Production Systems strategies help hospitals by:

- Instilling a culture for sustainable change management and getting hospital staff more engaged in what they do;
- Reducing medical mistakes and improving the quality of care by standardizing ways of doing everyday tasks;
- Reducing costs by focusing on improvement to activities that support patient care, adding value to the patient experience and thereby increasing patient satisfaction. Organizational outcomes become more predictable and consistent from defined savings, improved revenues and positive trending metrics measured against benchmarks and baselines over time;
- Driving problem-solving activities at the staff level ensuring buy-in and participation; and
- Aligning vision statements into workable area improvement plans that staff can use to be more self driven.

Texas Hospital Association

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Target Audience

This Webinar series will benefit chief executive officers, chief operating officers, chief financial officers, chief nursing officers, and other leadership team members including directors of continuous improvement and service line department heads.

Session Overview and Learning Objectives

Part One: Sept. 17

Toyota Production Systems/Lean Introduction and Approach

In this session, you will learn the issues driving executives to adopt Lean health care in these tough economic times. Participants will gain insight into how process, organization, culture and technology innovation – via Lean, Toyota Production System-based strategies and solutions – have helped hospital administrators and their staffs minimize errors and reduce waste, optimize workforce/workplace performance and profitability, and maximize patient safety and outcomes. Speakers will address the challenges facing many health care executives today, while providing insight with regard to the initial roadmap and direction for change. You will learn methods for becoming more efficient operationally, while delivering higher levels of patient care.

Learning objectives:

- Discuss the current economic climate as it relates to issues impacting health care executives' business plans/strategies.
- Explain the effectiveness of the TPS/Lean continuous improvement methodology.
- Recall how to determine initial project application areas and priorities.
- Identify organizational commitments and resources required to be successful.
- Assess the seven wastes and their impact on medical, staff and patient satisfaction.
- Discuss the importance of an honest appraisal of where your organization or service line operationally stands today.
- Explain the key stages of a successful TPS/Lean rollout and transformation.
- Assess typical measurement, audit and management reporting/communication strategies.
- Evaluate typical roadblocks and sources of resistance as planned rollout begins.

Part Two: Sept. 24

Toyota Production Systems/Lean Challenges, Proven Results and Path Forward to Sustained Change

Learn how a Lean implementation's rewards outweigh the drawbacks or cultural resistance that initially can be encountered, and how the investment in a Lean transformation typically is recouped within a year. Speakers will share insights and change aspects of successful Lean implementations at leading hospitals. Participants will see how hospitals can respond immediately and

long term to thrive and prosper – while improving the quality of care and ensuring a deep and systemic cultural transformation. Participants will learn how to utilize a TPS/Lean-based process to planning, assign responsibility and accountability, establish timelines, implement a problem-solving methodology and measure progress toward the improvement goals. Speakers address the role of governance in detail through a discussion of lessons learned on successful implementations.

Learning objectives:

- Recall how TPS/Lean governance and communication process are key drivers of success.
- Name five strategies that all hospitals should employ to improve operations, connect with staff and foster change.
- Evaluate TPS/Lean success stories from hospitals of different geographical regions and bed sizes (ranging from 60 to 600 beds).
- Compare how leaders at hospitals of all sizes made changes and difficult decisions regarding engagement, response or change strategy, when operational issues occurred.

Faculty



Michael R. Brown joined RWD in 2000 and was named director of RWD's Performance Solutions Practice in 2005. He brings 20 years of experience in the adoption, training and implementation of the Toyota Management System. He helps clients in strategic planning and design of hospital operating systems to provide excellence in patient care. In addition, Brown provides executive coaching and mentoring in implementing Toyota Management principles.

His deep understanding of the Toyota Production System, and the many phases necessary for sustainable implementation of Lean, was built through his experience as a member of the founding team at Toyota Motor Manufacture Kentucky. He has undergone extensive training in TPS philosophies at TMMK in Georgetown, as well as Kamigo and Tahara Toyota facilities in Japan. His involvement from new product and facilities launch to staff and leadership recruiting, training and development has allowed him to see the direct application in health care, enterprise support, industrial and service industries.



Dean Bliss is a Lean improvement specialist for the Iowa Health System in Cedar Rapids. He is a member of the team responsible for leading the Lean management process for the system and affiliated organizations. He is an original member of the Iowa Healthcare Collaborative's Lean workgroup, which has conducted statewide Lean health care conferences and Lean learning opportunities since 2005. Bliss joined IHS in 2005, after a 25-year career at Rockwell Collins, an aerospace and communications electronics company. His experience at

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Rockwell Collins includes finance, human resources, information technology and facilities management. Bliss holds a bachelor's degree in business administration from Iowa State University. He has spoken at numerous Lean conferences and seminars throughout the country.



Glenn Crotty Jr., M.D., FACP, a 2009 Baldrige National Quality examiner, is the executive vice president and chief operating officer of the Charleston Area Medical Center in Charleston, W. Va. Crotty oversees the operations of a three-hospital system with 2,100 open-heart procedures per year, a level

one trauma center and a women's and children's hospital with level three NICU and PICU. He is responsible for CAMC's Quality Improvement Program and is the corporate sponsor of CAMC's Six Sigma Program. Crotty led the change of its quality program, introducing CAMC to Six Sigma Lean Methodology, developing and enhancing both the quality and safety infrastructure with Six Sigma tools and Lean methodologies, with methods and tools from the Institute of Healthcare Improvement. The quality program has improved several key issues related to patient care, Centers for Medicare & Medicaid Services quality indicators, supply chain improvements and pharmacy improvements. In addition CAMC is utilizing Six Sigma design methodology to install new enterprise-wide software applications to enhance quality, safety and management of hospital operations. The Six Sigma program is in its ninth year with more than \$50 million in savings to the organization.



Mark LaRocco, Ph.D., D(ABMM), F(AAM) is the vice president, patient safety officer at St. Luke's Episcopal Hospital in Houston. He began his tenure at St. Luke's as a director of clinical microbiology more than 15 years ago. His extensive background as a health care executive with academic and clinical

experience lends itself to his accountability as vice president and patient safety officer. At St. Luke's, he ensures that quality services are provided in pathology, oncology, respiratory care, sleep medicine and pharmacy within a financially effective framework. He also leads the hospital's programs in patient safety and performance improvement and is in charge of regulatory affairs and accreditation.



David C. Pate, M.D., J.D., is chief executive officer of St. Luke's Episcopal Hospital in Houston. He is administratively responsible for hospital operations, including all clinical patient care departments and support services of the hospital. A graduate of Rice University with a bachelor's degree in

biochemistry, Pate earned his medical degree from Baylor College of Medicine. He completed his internship and residency through Baylor affiliated hospitals and served as chief resident at St. Luke's in 1986. He is board certified in internal medicine and serves as a clinical assistant professor in the Department of Internal Medicine

at Baylor College of Medicine. In 1996, he earned his law degree cum laude from the University of Houston Law Center. Pate serves as an adjunct professor at the University of Houston Law Center and has authored a textbook entitled "*Regulation of Health Care Professionals*," released in November 2002, and a cumulative update on health law, released in August 2005. Along with his many other accomplishments at SLEH, he set the vision and led the strategic planning for the successful multi-year Lean transformation effort.

In September, he becomes president and chief executive officer of St. Luke's Health System in Boise, Idaho. St. Luke's Health System is a regional nonprofit health system that provides a range of health services to residents of Idaho, eastern Oregon and northern Nevada. The system includes four general acute care hospitals. Its flagship facility is 435-bed St. Luke's Boise Regional Medical Center, which also includes a full-service children's hospital. St. Luke's runs a network of cancer care sites under the name Mountain States Tumor Institute, as well as diagnostic imaging and breast cancer detection centers.



Mike Reno, FACHE, CHSP, is vice president of operations, Bryn Mawr Hospital Main Line Health System, Bryn Mawr, Pa. Reno oversees the main hospital facility administration and operations, including facility master planning, architecture and construction services, property management, pharmacy, laboratory, endoscopy, case management, the neuro-

interventional program, the hospitalist group and more. Reno serves as the health system's emergency management and hazard mitigation director and safety officer and is the system's executive sponsor for Lean. He also co-chairs the patient safety and quality committee, and chairs the health system environment of care committee.

Prior to joining Bryn Mawr, Reno was vice president at St. Luke's Episcopal Hospital in Houston, where he had executive oversight and service line responsibility for the cardiology, cardiovascular and neuroscience services, and was administratively responsible for diagnostic and therapeutic imaging, radiology and nuclear medicine. He co-chaired the patient safety and quality committee, tasked with ensuring compliance with various regulatory agencies, including The Joint Commission Environment of Care Standards, served as the hospital's emergency management coordinator and was the executive sponsor for the implementation of Lean, where the three-year transformation of staff-driven continuous improvement initiatives has made significant gains.

The views expressed by the speakers do not necessarily reflect the policies or opinions of the Texas Hospital Association.

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Upon registration and submission of payment, registrants will receive a registration confirmation, via the e-mail address provided on the registration form, with instructions for accessing the program materials and passwords. If you have not received confirmation at least five business days prior to the event, please contact the THA Registrar at 800/252-9403, ext. 1057, or via e-mail to registrar@tha.org.

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