

# Designing your management system to drive quality results with a whole system approach

15 May 2023

# Welcome and Introductions



**Gary Kaplan, MD, FACP,  
FACMPE, FACPE**  
CEO Emeritus Virginia Mason  
Franciscan Health  
Member Board of Trustees,  
CommonSpirit Health,



**Wendy Korthuis-Smith, Ed.D.,**  
Executive Director,  
Virginia Mason Institute



**Dr. Amar Shah,**  
Chief Quality Officer  
East London NHS Foundation Trust

# Disclosures

We have no conflict of interest to disclose with regards to this presentation.

# Plan for today's session

- The story of two organisational journeys
- Two focused discussions on
  - Leadership
  - Integrating the parts of the management system
- Coffee/Tea Break at 2:45 pm – 3:15pm

# Transforming Healthcare: The VMFH Story

By Dr. Gary Kaplan  
CEO Emeritus Virginia Mason Franciscan Health  
Member Board of Trustees, CommonSpirit  
Health





# Virginia Mason Franciscan Health

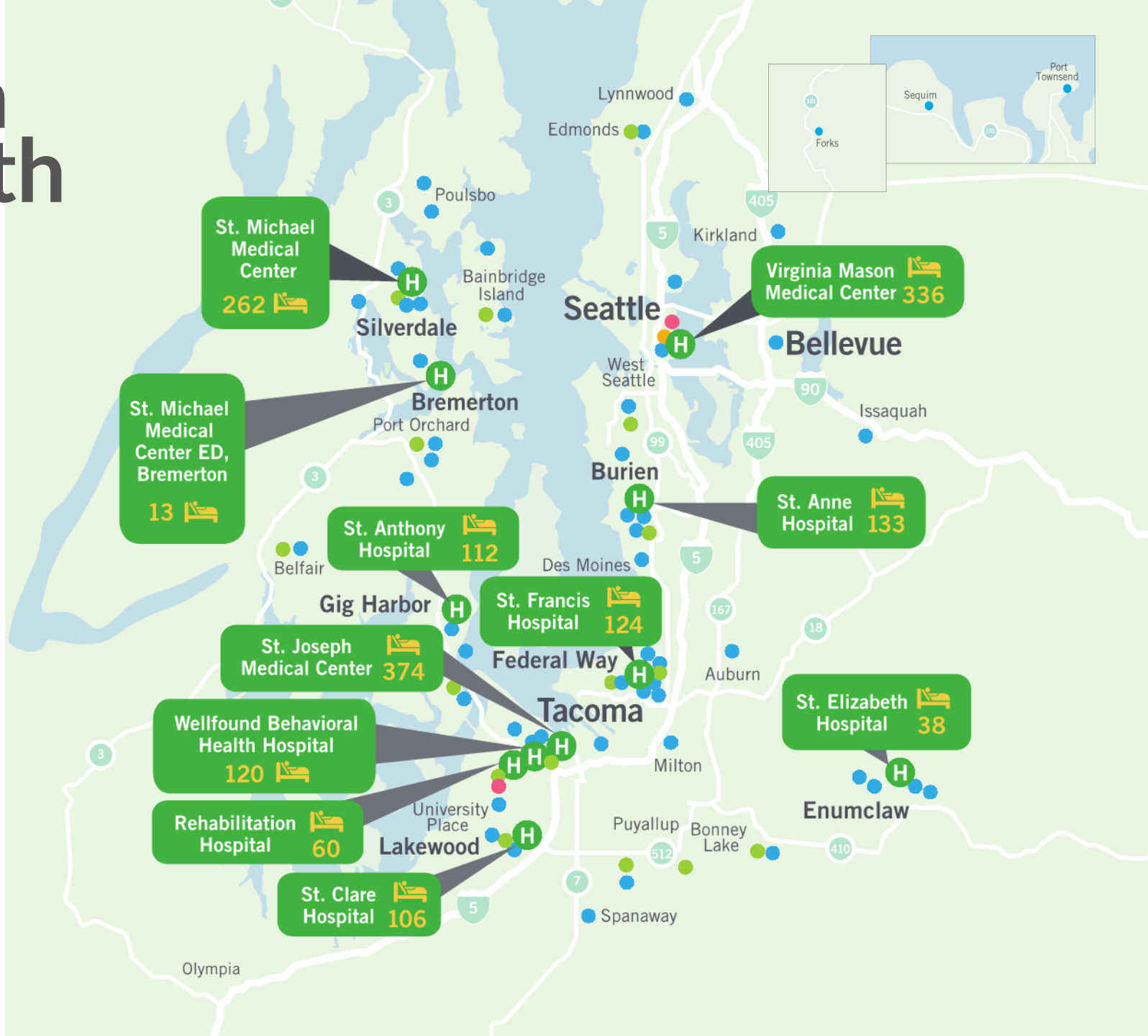


## An Integrated Health System

- H** Hospitals: **11**
- 🛏** Bed Count: **1,678**
- Outpatient Centers: **223**
- Urgent & Prompt Care Clinics: **15**
- Franciscan Hospice House, Bailey-Boushay House
- Benaroya Research Institute

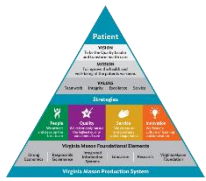


A system of 140 hospitals and over 1000 care sites across 21 states



# Virginia Mason's Journey

Executives to Japan



2002

2004

Mrs. McClinton



KPO Established

Healthgrades Distinguished Hospital Award



2006



Kaizen Fellowship Program



Virginia Mason Institute Formed

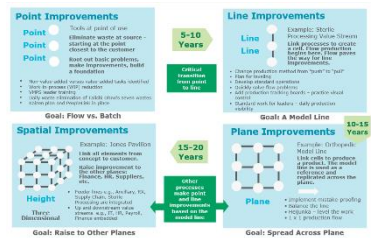
2008

Leapfrog Top Hospital of the Decade



Super-flow RPIWs

Model Line Standards Formed



Respect for People

THE VIRGINIA MASON EXPERIENCE: PATIENTS & FAMILIES, TEAM MEMBERS, COMMUNITY

Respect for People Training

2012



Patients as Partners with our improvements

Experience Based Design training

Can You Tell Us About Your Experience with Heart Surgery?									
How did you feel when you learned you needed heart surgery?	At ease	Worried	Scared	Depressed	Satisfied	Hopeless	Confident	Grateful	Disappointed
How did you feel about the information you received prior to surgery?	Satisfied	Worried	Scared	Depressed	Satisfied	Hopeless	Confident	Grateful	Disappointed
How did you feel about the care you received?	Satisfied	Worried	Scared	Depressed	Satisfied	Hopeless	Confident	Grateful	Disappointed
How did you feel about the staff's communication with you during your hospital stay?	Satisfied	Worried	Scared	Depressed	Satisfied	Hopeless	Confident	Grateful	Disappointed
How did you feel about leaving the hospital?	Satisfied	Worried	Scared	Depressed	Satisfied	Hopeless	Confident	Grateful	Disappointed
How do you feel about your recovery at home?	Satisfied	Worried	Scared	Depressed	Satisfied	Hopeless	Confident	Grateful	Disappointed



Virginia Mason and Franciscan Health merger

Daily Kaizen introduced



2016

First Advanced VMPS Cohort

Healthgrades America's 50 Best Hospitals Award



Partnered with Amazon on COVID 19 SuperVax



Exploring scaling VMPS across CommonSpirit



VMFH declares VMPS as Management System

2022

# Evolution of VMPS<sup>®</sup> as our Management System



WHERE WE HAVE BEEN

2002-2020

VMPS<sup>®</sup> as the Management System



WHERE WE ARE TODAY

2021-Current

VMPS<sup>®</sup> becoming the shared Management System for the new organization



WHERE WE COULD GO

2022-Current

Exploring the value of VMPS<sup>®</sup> across the system with activity in several initial sites

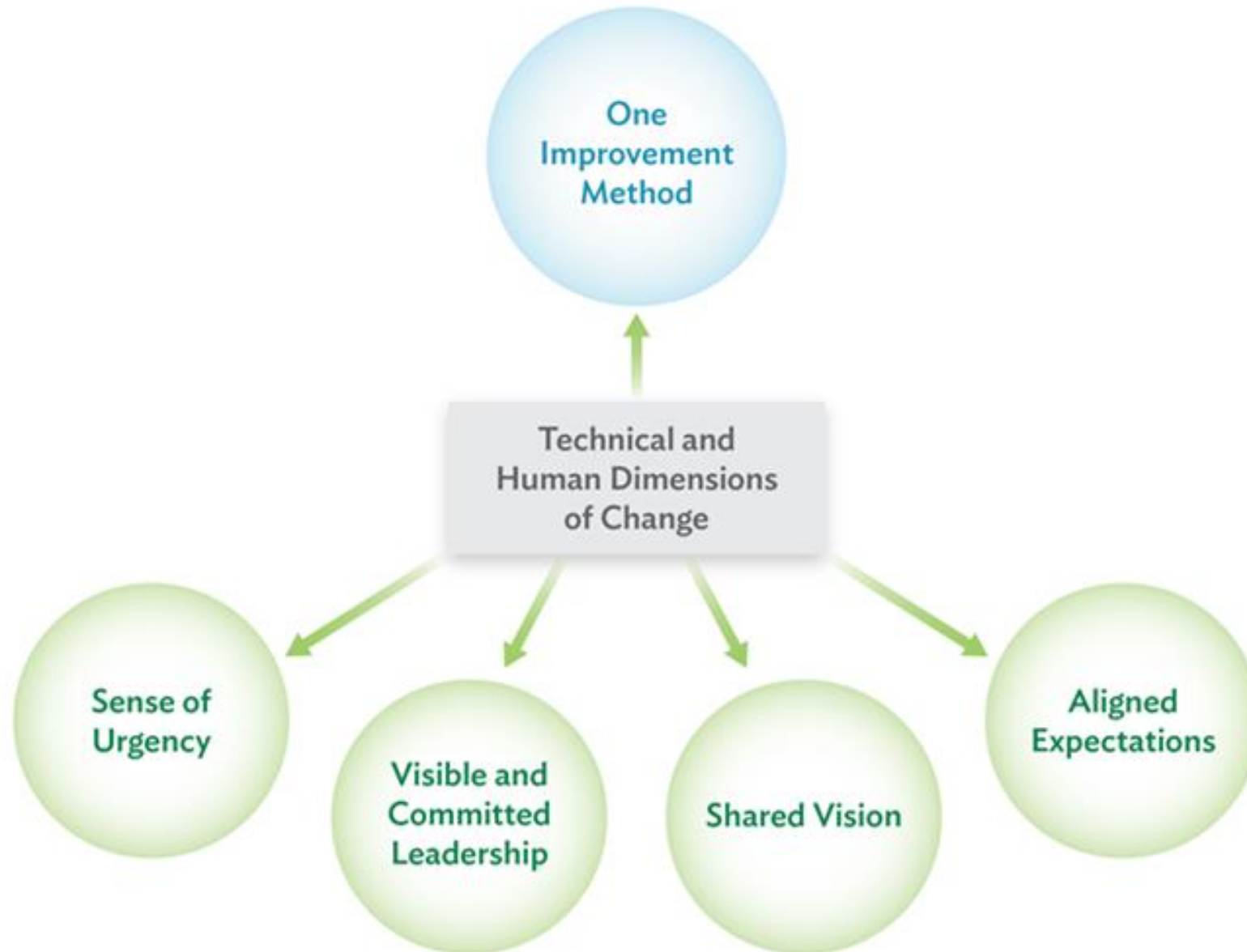


“Embracing change as opportunity and making continuous improvement a priority are essential to remaining relevant in a changing world.”

Gary Kaplan



# Technical and Social Aspects of Change



# See Feel Change: Elements of World-Class Management

Leaders have two jobs:

**Run your  
business**

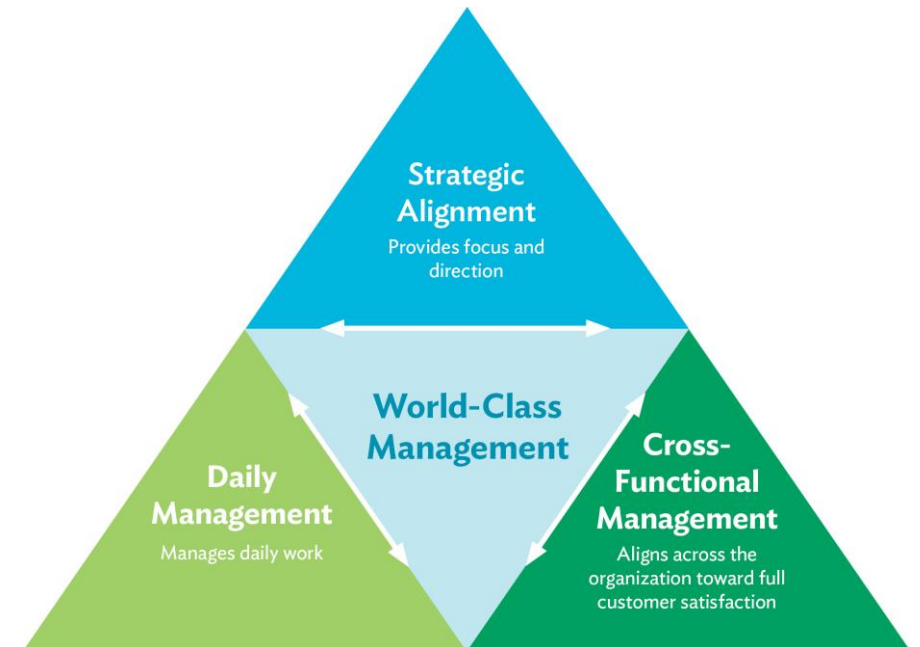
## **Creating stability and reliability**

Leaders engage in daily activities and behaviors to identify abnormal conditions and ensure customer demand is met

**Improve your  
business**

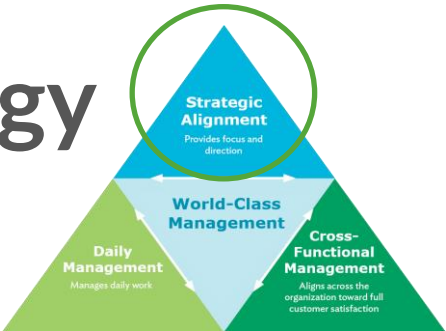
## **Leading improvement and innovation**

Leaders create kaizen plans, lead improvement and innovation events and activities, and coach everyday lean ideas

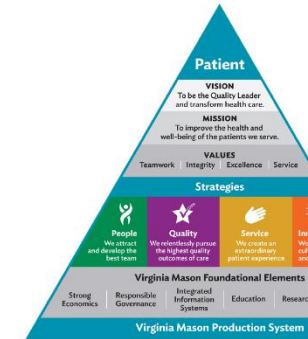


The **world-class management system** is a leadership system that provides focus, direction, alignment and a method of management for daily work.

# Strategic Alignment: Aligning Vision and Strategy



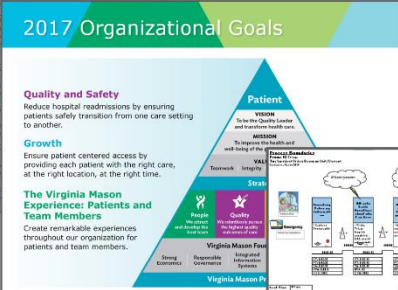
## Long-Term Vision



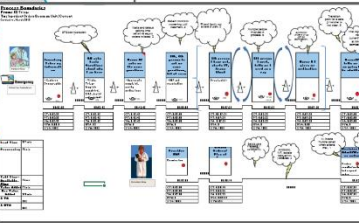
## 5-Year Plans

VMHC 2013-2017 Strategic Quality Plan We relentlessly pursue the highest quality outcomes of care			
GOAL	STRATEGY	KEY FACTORS (1-3 YEARS)	METRICS
1. Establish governance structures and support requirements to increase evidence-based clinical decision-making throughout our integrated delivery system.	1. Create systematic delivery of outcome, effective and appropriate preventive health interventions and management of chronic/complex conditions for our patients.	1. Identify methods for assessing the health care including evaluating metrics, culture, and people.	1. Value Based Purchasing Scorecard 2. Diabetes Outcomes 3. Meaningful Use 4. Patient Satisfaction
2. Establish formal systems that promote trust and transparency and engage our patients, families, staff and community in the design of safe and successful care systems.	1. Create a high reliability system that detects and prevents errors, improving patient safety and shared accountability for our staff.	1. Develop and implement systems that enhance safety and shared accountability for our staff.	1. Patient and Family Satisfaction 2. Hospital Readmission Rates 3. Inpatient Mortality Rates 4. Inpatient Length of Stay
3. Develop innovative systems for care coordination and information sharing to optimize the flow of healthcare at every point of service.	1. Develop and implement systems that enhance safety and shared accountability for our staff.	1. Develop and implement systems that enhance safety and shared accountability for our staff.	1. Patient and Family Satisfaction 2. Hospital Readmission Rates 3. Inpatient Mortality Rates 4. Inpatient Length of Stay

## Annual Goals



## Value Streams



## Departmental Plan/Goals

Be There ☒ Share ☒ Prepare ☒

**Be There**

- Be present with our patients; demonstrate that we know them and care.
- Treat every call, every message as our patient.
- Just say yes/ Offer patients care when, where and how it is desired.
- Engage patients in using MyVirginiaMason to improve their health and well-being.

**Share**

- Help us grow! Champion our locations, services and quality to provide our patients what they need.

**Prepare**

- Optimize new workflows using our electronic medical record (EMR).

## Individual Goals

VM SMART Goal Setting Worksheet

Visible - Measurable - Specific - Achievable - Timely

Goal Name: \_\_\_\_\_ Expected Completion Date: \_\_\_\_\_

My SMART goal is: \_\_\_\_\_

By when your goal meets the SMART criteria by answering the questions below:

1. How will I make this goal **specific** making me to track my progress?

2. How does this goal **measure** and **quantify** me?

3. **Specifically**, what exactly will I accomplish?

4. How will I and others **prepare** this goal?

5. How is the goal **aligned** with my department goal and overall Virginia Mason's goal?

6. Is this goal **achievable**, and can challenges be met with the available resources and support?

7. At which **time** will you achieve the goal?

I need the following **resources** from my manager/department/department to be successful in accomplishing this goal:

No leader and I will gather **feedback** from others to gauge the progress of my goal, I.A.A. respect for people resources and job skills.

My **best** client/manager to accomplish this goal are, and I will complete them by:

## Daily Management

DATE	TIME	LOCATION	DEPARTMENT	STATUS	COMMENTS
1/1/2018	8:00 AM	1000	ED	OK	See patient
1/1/2018	9:00 AM	1000	ED	OK	See patient
1/1/2018	10:00 AM	1000	ED	OK	See patient
1/1/2018	11:00 AM	1000	ED	OK	See patient
1/1/2018	12:00 PM	1000	ED	OK	See patient
1/1/2018	1:00 PM	1000	ED	OK	See patient
1/1/2018	2:00 PM	1000	ED	OK	See patient
1/1/2018	3:00 PM	1000	ED	OK	See patient
1/1/2018	4:00 PM	1000	ED	OK	See patient
1/1/2018	5:00 PM	1000	ED	OK	See patient
1/1/2018	6:00 PM	1000	ED	OK	See patient
1/1/2018	7:00 PM	1000	ED	OK	See patient
1/1/2018	8:00 PM	1000	ED	OK	See patient
1/1/2018	9:00 PM	1000	ED	OK	See patient
1/1/2018	10:00 PM	1000	ED	OK	See patient
1/1/2018	11:00 PM	1000	ED	OK	See patient
1/1/2018	12:00 AM	1000	ED	OK	See patient

# Strategic Alignment: What we work on

External Trends vs. 2016 Strategic Goals & Other Priorities		External Trends vs. 2016 Strategic Goals & Other Priorities									
Grouped by Source for External Trend		Grouped by Source for External Trend									



# Cross-Functional Management

## Creating accountability across a value stream



Throughout the patient's experience we will improve

Home → Access to Clinic → Clinic Day of Visit → ED Length of Stay → Acute Length of Stay → Home

### Quality of Care

- Surgical variability (smoothing patient flow)
  - Falls with injury
  - Readmissions
- Hospital-induced delirium
  - Glycemic control
    - Sepsis
  - Hypertension

### Supply Chain

- The right supplies are available when and where they are needed – just-in-time (JIT).

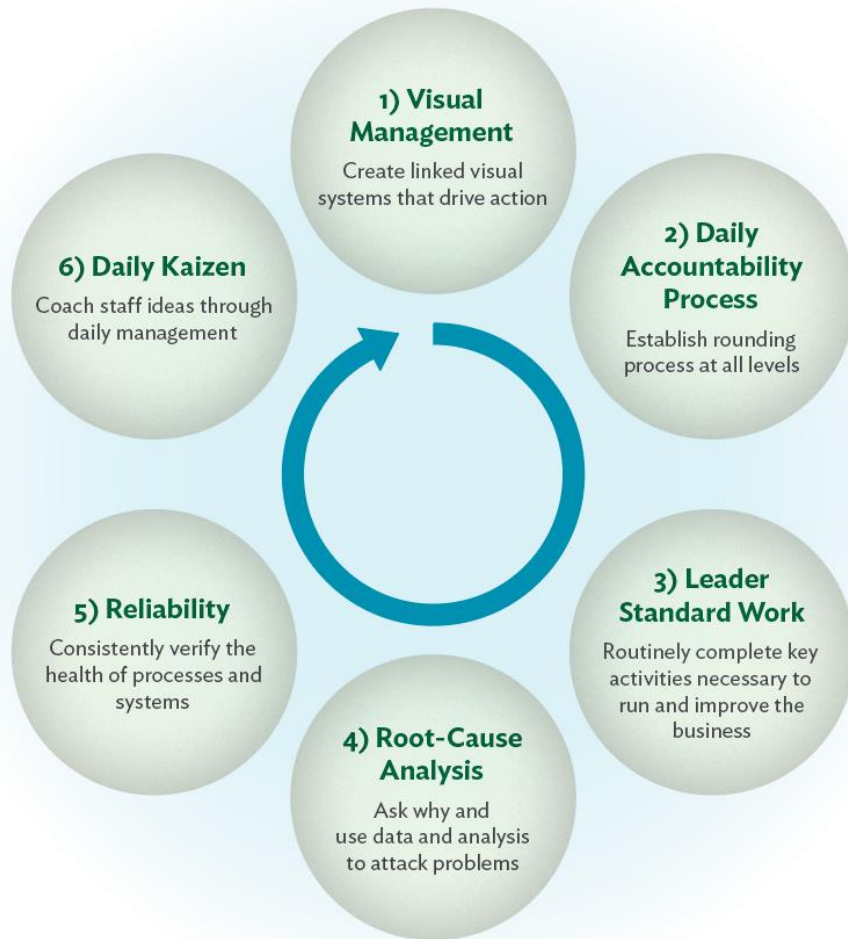
### Daily Management

- The system we use to perform daily activities – standardize operations and identify and eliminate waste with root-cause analysis. Our system uses data to ensure we are continuously improving our business.



# Daily Management:

## Creating real-time accountability with tier reporting

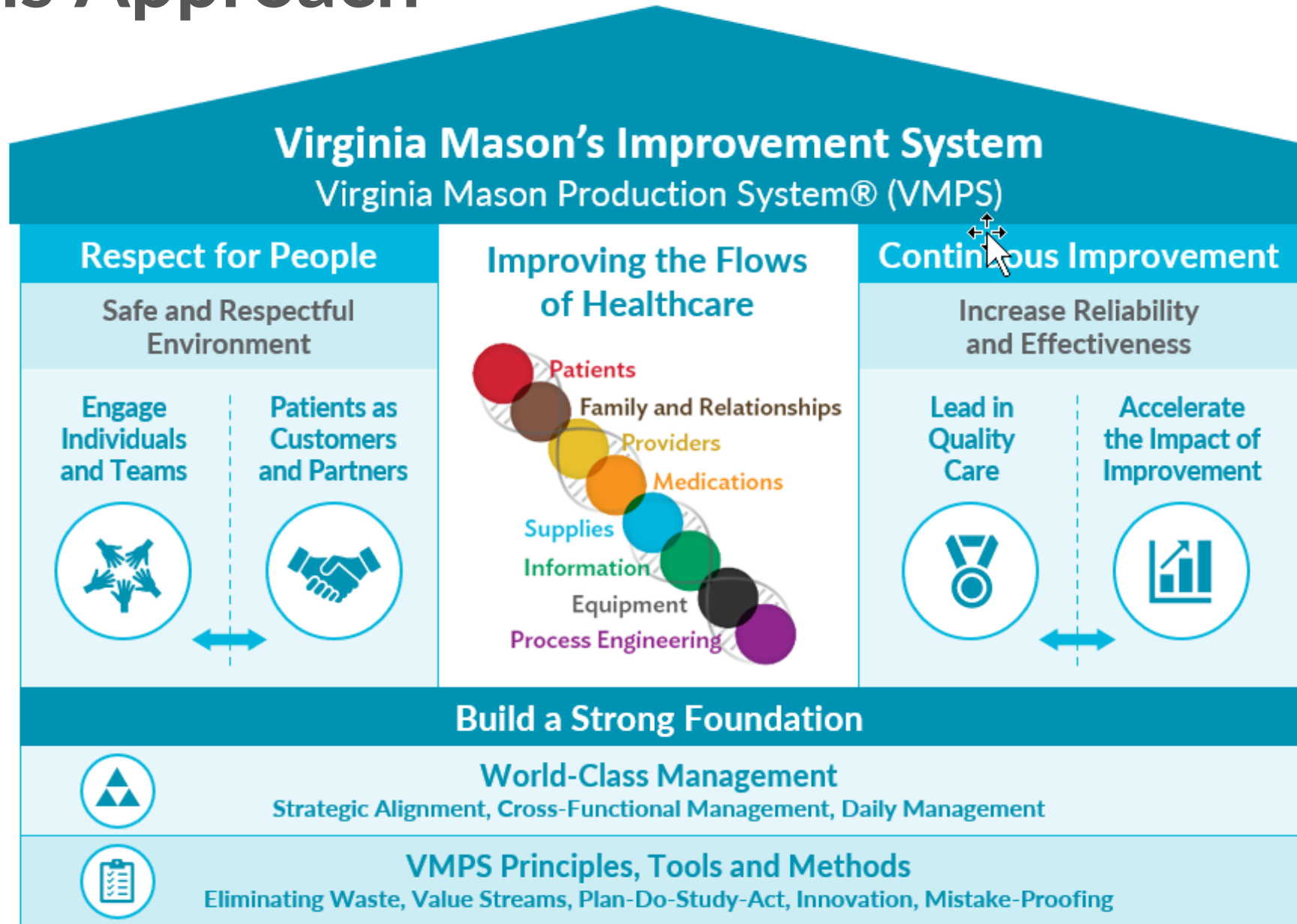


**Tier 1 Reporting:**  
Senior executive leadership reports updates on key metrics to the board of directors

**"Stand Up" Tier 2 Reporting:**  
Vice presidents, KPO and administrative directors report updates on key metrics to the chief executive officer

**PeopleLink Tier 3 Reporting:**  
Managers report to department staff and administrative directors

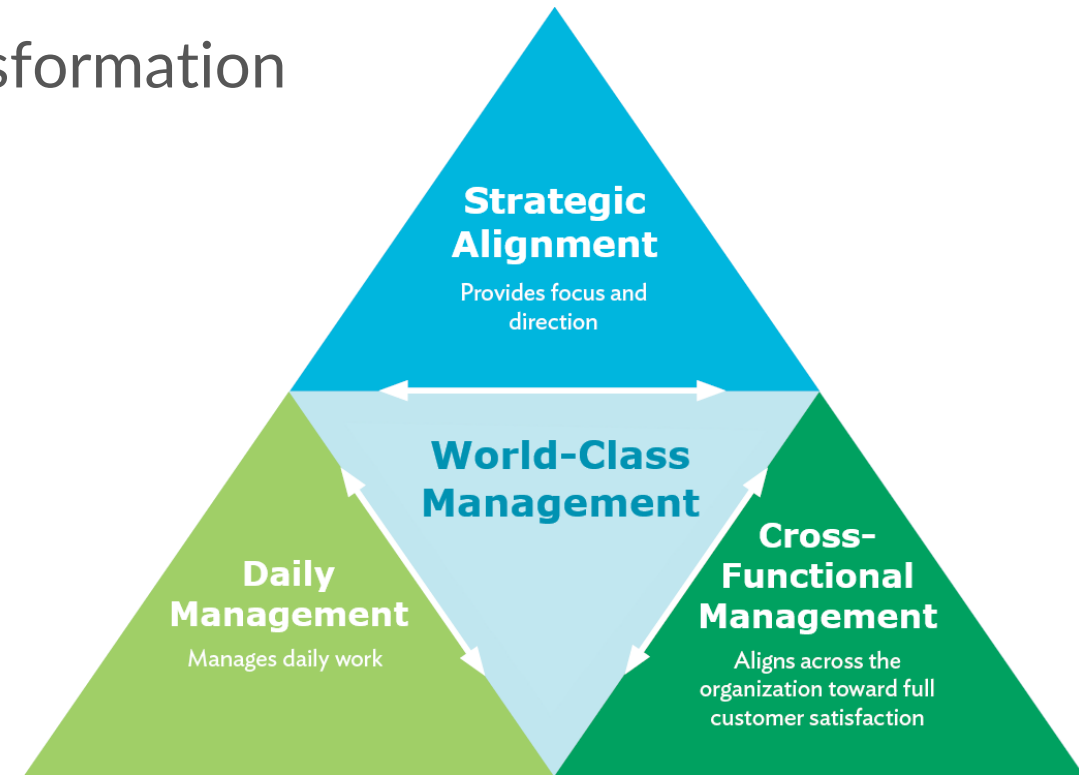
# A Systems Approach



# World Class Management Leadership Requirements

Leadership requirements needed to sustain transformation

1. Set priorities that align with the vision
2. Use VMPS tools & methods
3. Lead change across value streams
4. Allocate resources to VMPS
5. Require accountability
6. Implement standard work for leaders





**East London**  
NHS Foundation Trust

# The East London NHS Foundation Trust story



2010



# Trust Board Scorecard Q4 2009/10

KEY MONITOR, NATIONAL, PARTNER AND LOCAL TARGETS	2009/10 Target	2008/09 Actual	2009/10 Q3	2009/10 Q4	Trend Q3-Q4	Comment
<b>Monitor Targets</b>						
Annual number of MRSA bloodstream infections reported	0	0	0	0	→	
Reduction in C. Diff	0	0	0	0	→	
CPA inpatient discharges followed up within 7 days (face to face and telephone)	95.0%	99.5%	99.0%	99.1%	→	
Patients occupying beds with delayed transfer of care	7.5%	3.5%	1.8%	1.8%	→	CQC Indicator definition covers only April-Aug 2009
Admissions made via Crisis Resolution Teams (end of period)	90.0%	98.3%	99.0%	96.7%	↓	
Number of Crisis Resolution Teams	7.1	7.3	7.3	7.3	→	
<b>Other National/CQC Targets</b>						
Completeness of Ethnicity Coding – PART ONE. Inpatient in MHMDS (Year to date)	85%	98.1%	97.3%	97.3%	→	Local target 95%.
Completeness of Mental Health Minimum data set – PART ONE (As per 2008/9)	99%	97.6% Underachieved	99.4%	99.4%	→	Target assumed 99% as per CQC threshold 2008/9. MONITOR have confirmed 99% threshold for 2010/11 for this indicator.
Completeness of Mental Health Minimum data set – PART TWO (New – confirmed 22/12/2009)	TBA	Not Used	45.0%	45.0%	→	No threshold set by CQC or MONITOR for 2009/10 therefore cannot assess compliance.
Patterns of Care – assignment of Care Co-ordinator within Mental Health Minimum data set	80%	99.6%	93.2%	93.2%	→	
CAMHS - National Priorities - Six targets graded 1 (lowest) to 4 (best)	24	22	22	24	↑	Maximum Score 24
Annual Staff Survey (Job Satisfaction)	Benchmarked	Satisfactory	N/A	TBC		Survey based - Annual, threshold not available yet
Patient Survey	Benchmarked	Below Average	N/A	TBC		As above
Drug Misusers in effective Treatment	90.0%	95.5%	92.9%	92.9%	→	
Access to healthcare for people with a learning disability – report compliance to CQC	Yes	Not Used	N/A	Yes		
Best practice in mental health services for people with a learning disability – Green Light Toolkit Score	48	40/48 Underachieved	42	46	↑	Max Score 48
Maximum waiting time of four hours in A&E from arrival to admission, transfer or discharge	98.0%	97.5%	98.3%	98.3%	→	Partner target for acute trusts. This will be excluded from future reports.
<b>PCT Contract and Mandatory Targets</b>						
Number of Early Intervention Services Teams	3	3	3	3	→	
Early Intervention Services Caseload	511	569	534	544	↑	
Newly diagnosed cases of first episode psychosis receiving Early Intervention Services	176	243	199	248	↑	
Number of patients receiving Adult Crisis Resolution Services (Episodes for Year to date)	2280	2,346	1874	2552	↑	
Specialist Addictions – % of discharges retained 12 weeks or more	85.0%	96.1%	92.9%	92.9%	→	
Specialist Addictions - Number of drug misusers in treatment (snapshot at period end)	678	710	780	776	↓	
CAMHS Service protocols	12	12	12	12	→	Maximum Score 12
Mixed Sex accommodation breaches	0	0	0	1	↑	Reported as required to PCTs, no penalties or compliance issues.
<b>Patient Experience - Community</b>						
Assessment within 28 days of referral	95%	Not Used	88.2%	92.8%	↑	Local target of 95%
CPA patients - care plans in date	95%	93.1%	93.3%	94.2%	→	
<b>Patient Experience - Inpatients</b>						
Adult Acute Inpatient Bed Occupancy Year to Date (excluding home leave)	95%	95.3%	98.3%	97.3%	↓	See graphs overleaf for more detail.
<b>Information Governance/Assurance</b>						
Information Governance Toolkit score	90.0%	87.0%	87.0%	90.9%	↑	Next assessment expected October 2010



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# theguardian

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## Mental health

# Three patients die on psychiatric ward

Three patients have died within 12 months on the same ward following warnings from unions about budget cuts

Mark Gould

Tuesday 12 April 2011  
13.10 BST



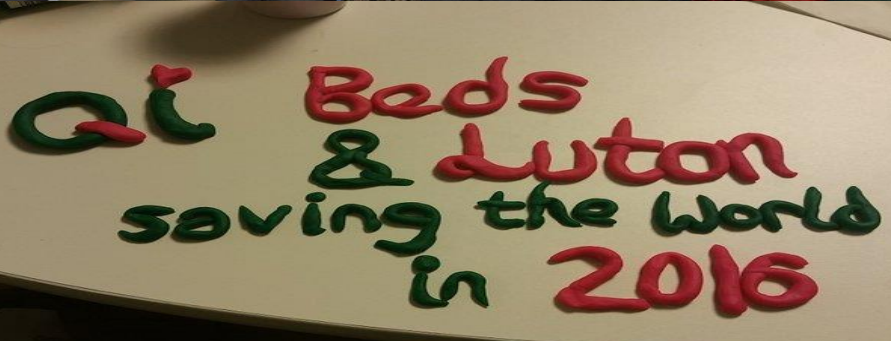
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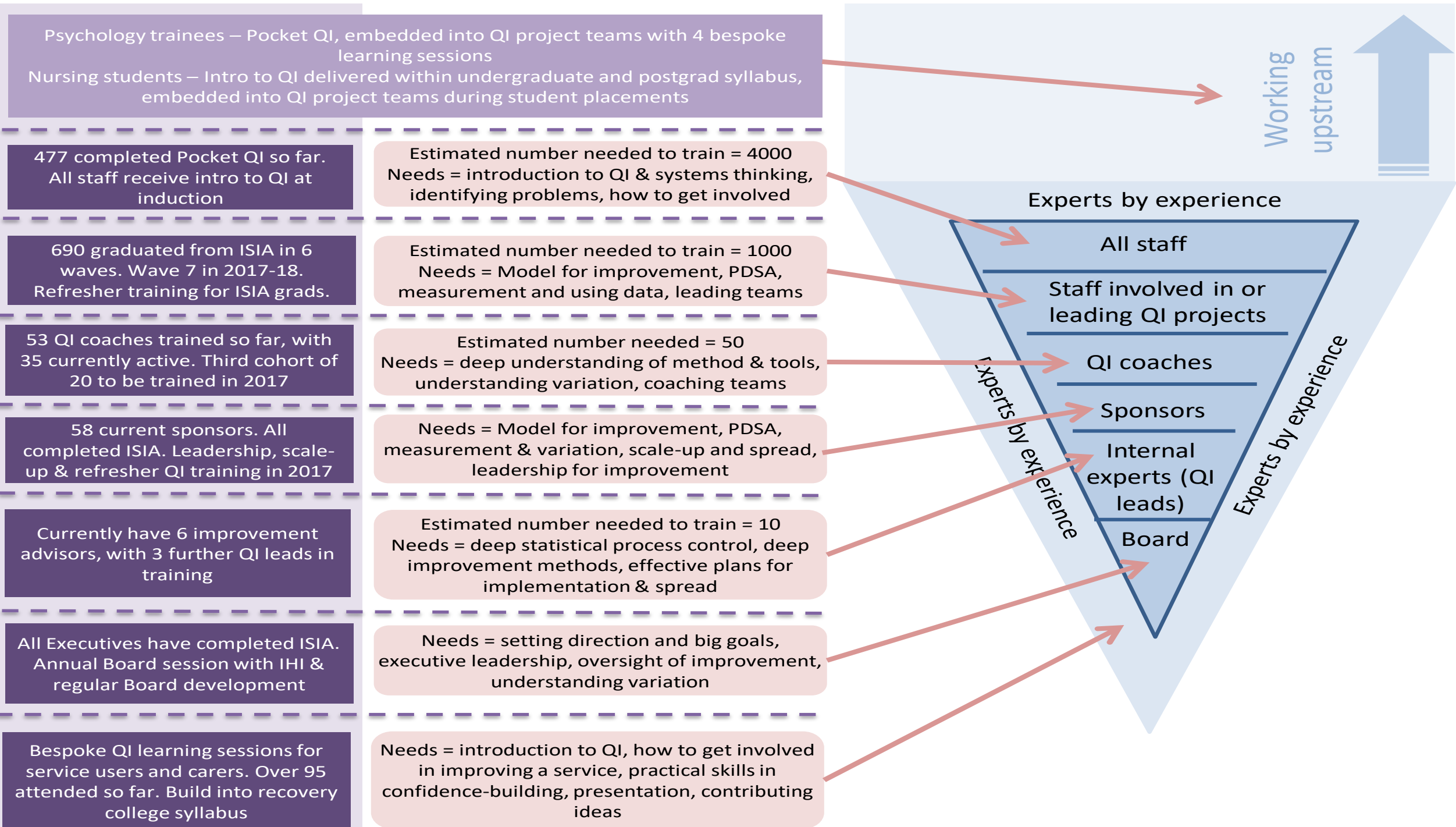
## Spike in mental health patient deaths shows NHS 'struggling to cope'

2014











# Support around every team

## Project Sponsor



## QI Coach



## QI Team

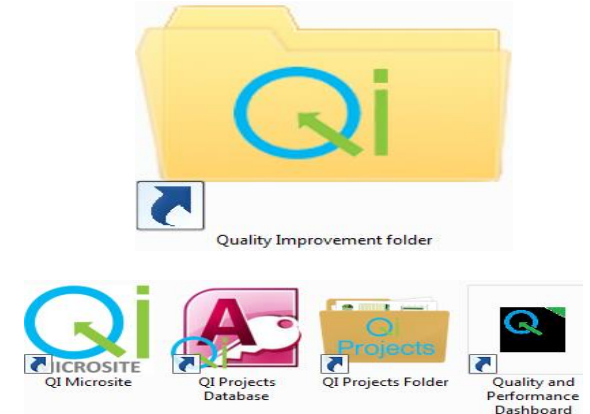


## QI Forums



## Service User Input

## QI Resources



Use of data to  
guide decision-  
making

Stop solving  
problems at the top

Give people time  
and space to  
solve complex  
problems

“Go see”  
“Gemba”  
Executive  
WalkRounds



Paying  
personal  
attention

Manage the  
expectations

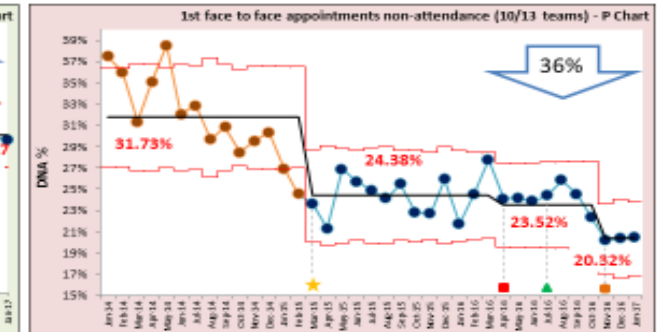
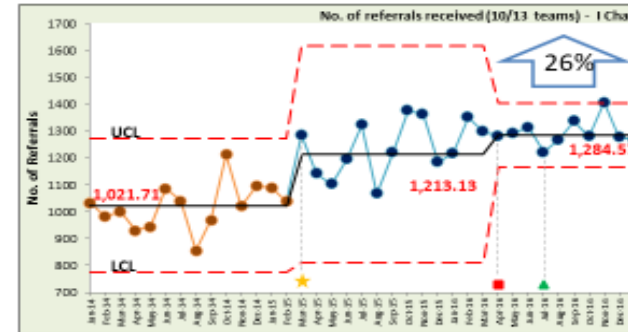
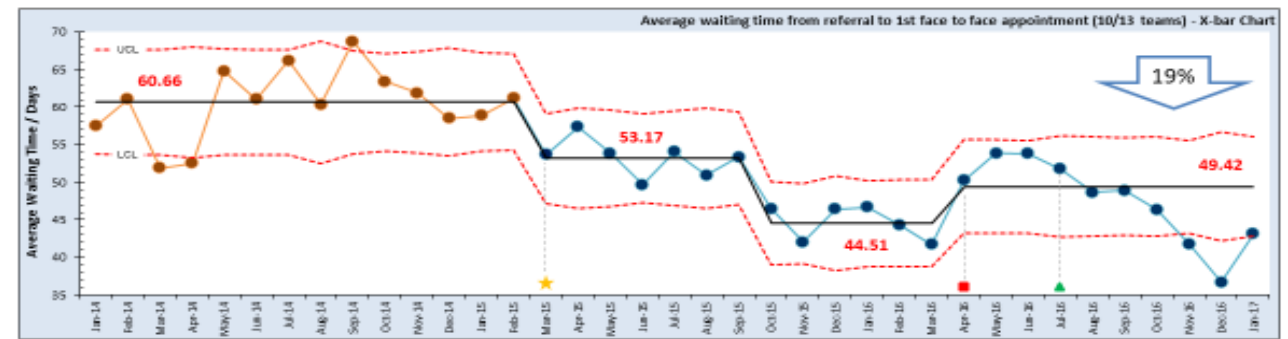
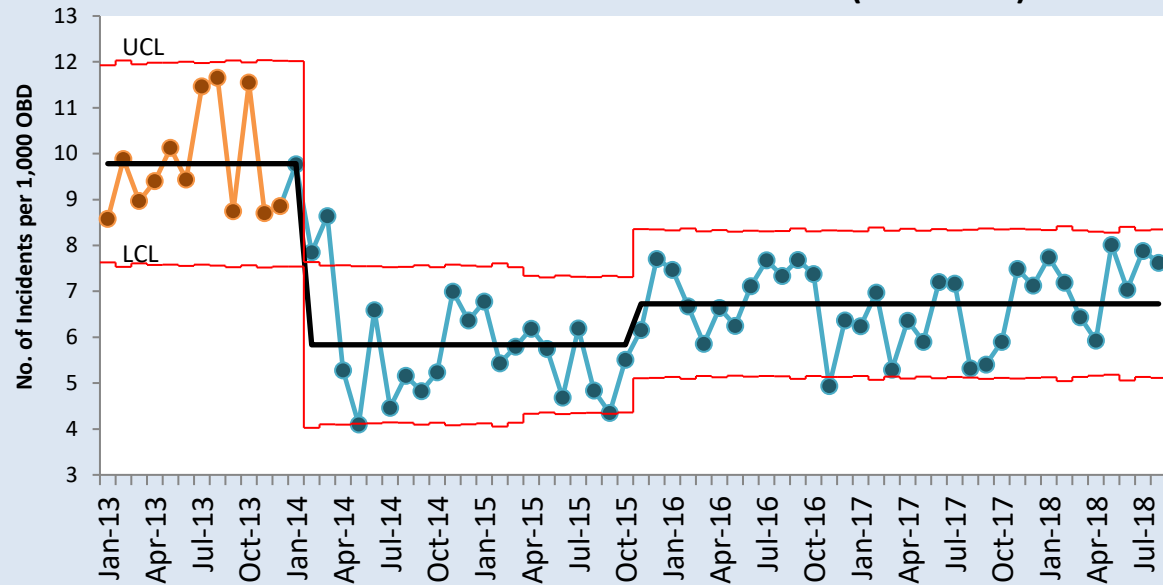
**ROLE  
MODELLING**



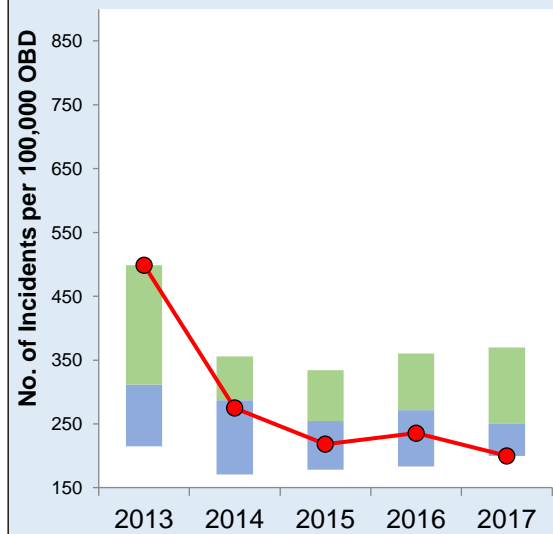
IMPACT



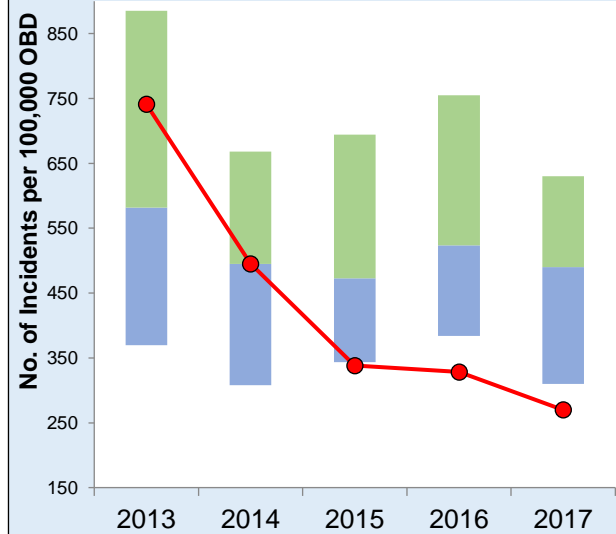
### Incidents resulting in physical violence (Trustwide) - U Chart



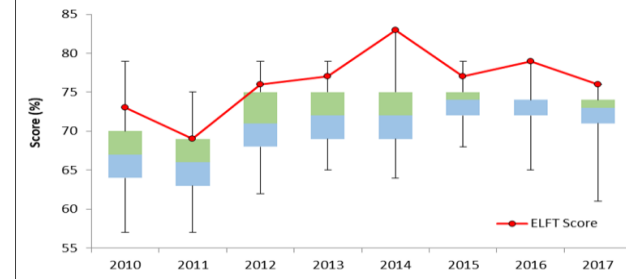
### Physical violence to patients (per 100,000 occupied bed days)



### Physical violence to staff (per 100,000 occupied bed days)



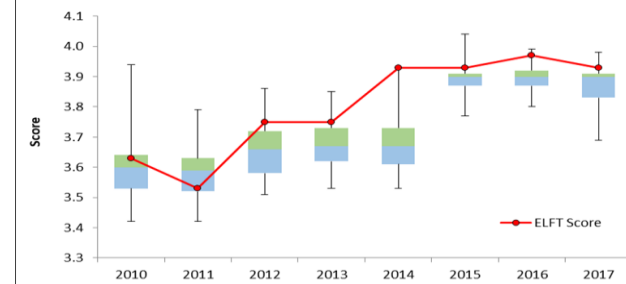
### Staff able to contribute towards improvements at work



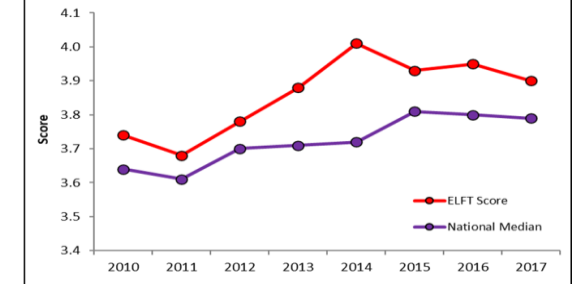
### Staff Motivation to Work



### Staff job satisfaction



### Overall Engagement Score



2017



## Mission

WHAT IS OUR ROLE  
IN SOCIETY?

## Vision

WHAT DOES OUR CORE  
PURPOSE NEED TO BE?

## Strategic outcomes

WHAT ARE THE BIGGEST FACTORS THAT WILL  
HELP US ACHIEVE OUR MISSION?

## Specific outcomes

WHAT DO WE NEED TO WORK ON, FOR EACH OF OUR  
STRATEGIC OUTCOMES, TO ACHIEVE OUR MISSION?

To improve  
the quality  
of life for all  
we serve

By 2022 we will  
build on our  
success and lead  
on the delivery of  
integrated care.

ELFT will do  
this by working  
purposefully in  
collaboration with  
our communities  
and our partners,  
always striving  
towards continuous  
improvement in  
everything we do.

Improved population  
health outcomes



We will:

- Tackle with our partners and service users the wider determinants of health
- Help people lead healthier lifestyles and improve prevention of ill health
- Reduce health inequalities
- Deliver more integrated health and social care services

Improved  
experience of care



We will:

- Improve access to services
- Improve service user experience and the outcome of their care , addressing inequities
- Increase the numbers of people positively participating in their care and in service improvement
- Improve service user safety and reduce harm
- Support more service users to meet their recovery goals

Improved  
staff experience



We will:

- Improve fulfilment at work
- Develop the skills of our staff to deliver integrated care
- Improve leadership and management practice
- Improve how we listen to staff and support them to continuously develop

Improved value



We will:

- Increase productivity while maintaining quality
- Reduce waste
- Reduce variation in clinical practice

## Mission

What is our role in society

## Strategic Outcomes

What are the biggest factors that will help us achieve our mission?

## Specific Objectives

What do we need to work on, for each of our strategic outcomes, to achieve our mission?

To improve the quality of life for all we serve

Improved population health

- Prioritise children and young people's emotional, physical, social and learning development
- Support service users, carers and the communities we serve to develop skills & to access meaningful activity and good quality employment
- Support service users, carers and the communities we serve to achieve a healthy standard of living
- Contribute to the creation of healthy and sustainable places, including taking action on climate change
- Champion social justice, and fully commit to tackling racism and other forms of prejudice
- Prioritise prevention and early detection of illness in disadvantaged groups

Improved experience of care

- Address inequalities in experience, access and outcomes in our services
- Deliver on our commitment to integrated care, including multidisciplinary teams working around neighbourhoods
- Get the basics right through reducing waiting times and increasing access to services, meeting existing and new demand
- Continue to build our approach to coproduction, people participation and programmes such as peer support and befriending
- Build on the innovation that we saw during the pandemic to transform and improve our clinical delivery, strengthening our ability to adapt and remain flexible and resilient to future challenges and opportunities

Improved staff experience

- Develop and embed trauma-informed approaches into clinical practice and in our work with communities and partners
- Prioritise quality of care and develop our patient safety approach, applying quality improvement to all that we do
- Enhance our digital and data infrastructure so it works effectively in service of our teams
- Get the basics right through supporting our staff and teams to thrive and be happy and healthy, including work-life balance
- Develop and grow our workforce, offering lifelong learning, professional development and creating new and exciting opportunities for staff, service users, carers and local communities

Improved value

- Extend the financial viability programme, engaging all in reducing waste, improving financial and environmental sustainability
- Work collaboratively across the system with our partners to improve value and reduce waste



# The ELFT quality management system

## Quality planning

Identify the needs of the customer & population  
Develop service models to meet the need  
Put in place structures & process to manage the service

## Quality improvement

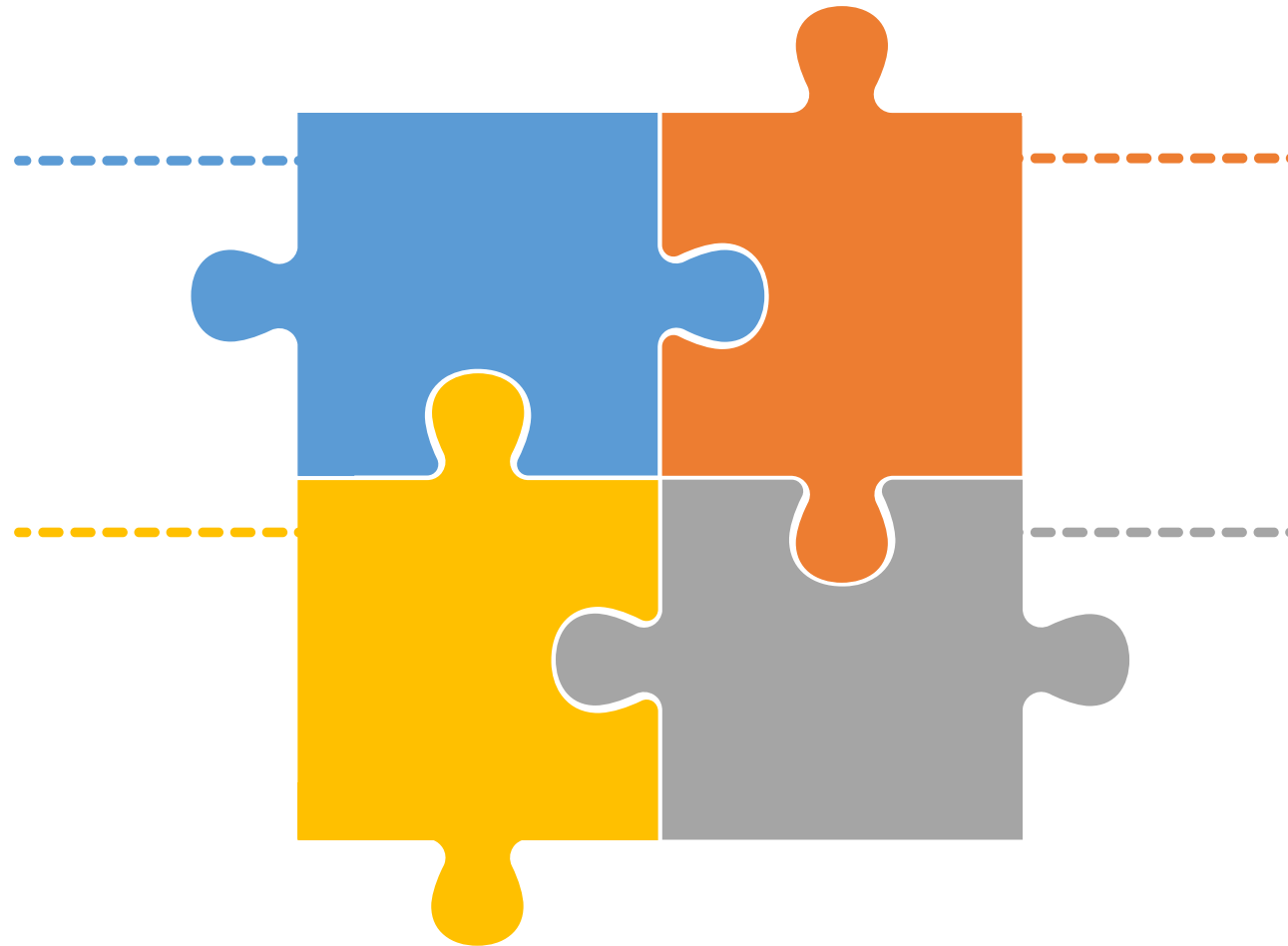
Identify what matters most  
Design project and bring together a diverse team  
Discover solutions through involving those closest to the work, test ideas, implement and scale up

## Quality control

Identify clear measures of quality for the service and monitor these over time.  
Take corrective action when appropriate.  
Internal vigilance to hold gains made through improvement

## Quality assurance

Periodic checks to ensure the service is meeting the needs of the customer & population  
Actions to address gaps identified





## Leadership behaviours we should all display

Act in a way that's consistent with  
the Trust values

Be kind to others, and yourself

Actively listen, involve others and  
be aware of the needs of others

Try to find solutions

## Additional leadership behaviours for those who lead teams

Make decisions when needed, and  
involve others in decision-making

Be visible, accessible and  
approachable

Build meaningful relationships,  
focusing on "what matters to you"

Ensure regular time for reflection  
and focus on wellbeing

Promote and celebrate the work of  
the team

Encourage people to speak up and  
try new ideas

## Additional leadership behaviours for senior leaders

Frame challenges in a way that  
gives hope and invites solutions

Demonstrate curiosity

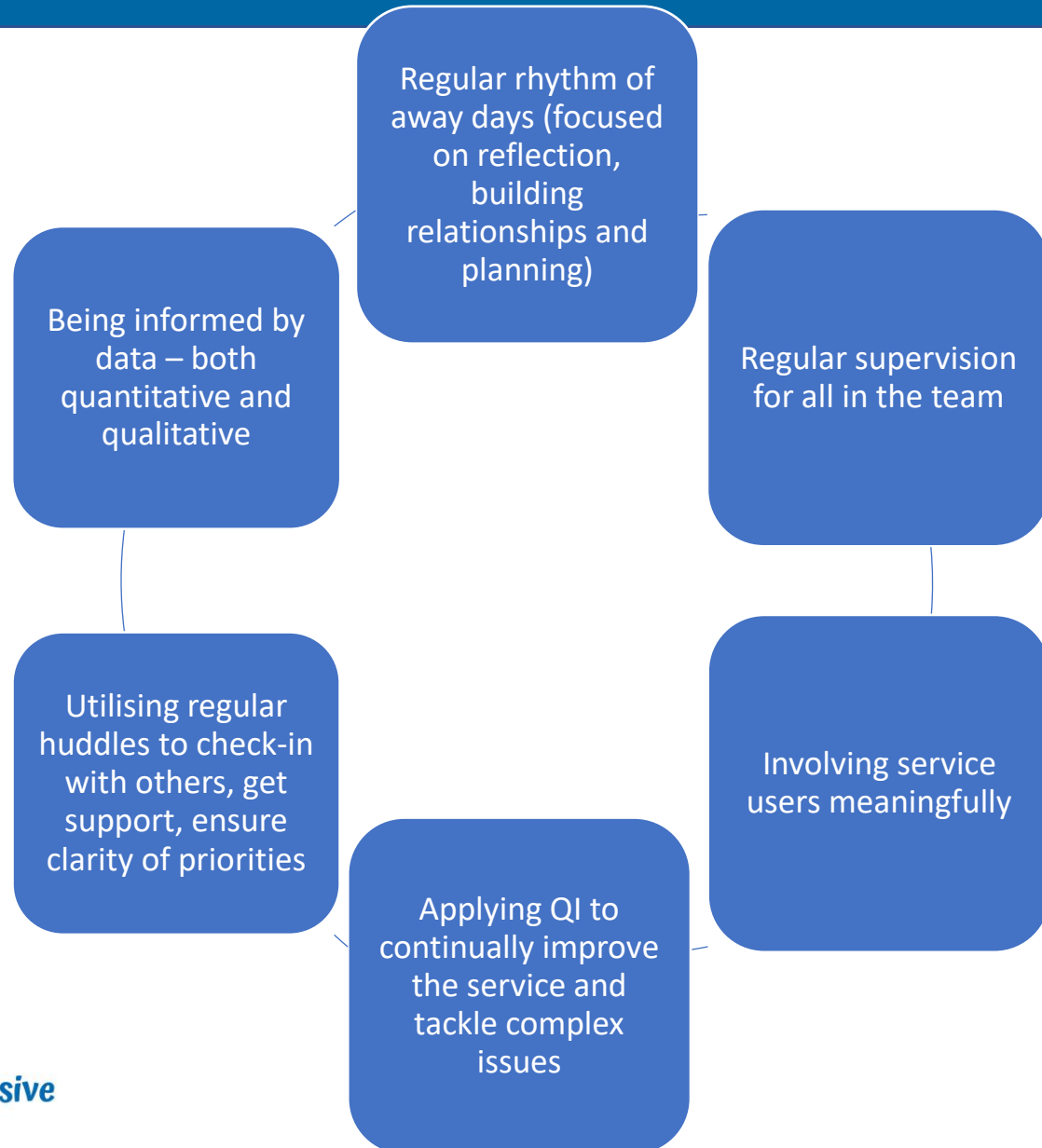
Regular time out and with  
services

Be willing to tackle difficult  
issues

Connect people to purpose



**We care**  
**We respect**  
**We are inclusive**



**We care**  
**We respect**  
**We are inclusive**

Deep dive

Topic 1

Leadership





# Traditional Leadership Styles and Behaviours



# Effective Leadership Behaviours



Systems thinker



Being present at the Genba



Listens to the front line



Promotes accountability



Transparent



Focused and inspires alignment



Frames problems



Continuously learns



Inclusive & promotes safety

# Leading a Culture of Respect, Inclusion, and Safety

## Respect for People Behaviours



1 | Be a team player



2 | Listen to understand



3 | Share information



4 | Keep your promises



5 | Speak up



6 | Connect with others



7 | Walk in their shoes



8 | Be encouraging



9 | Express gratitude



10 | Grow and develop

## Psychological Safety

High psychological safety

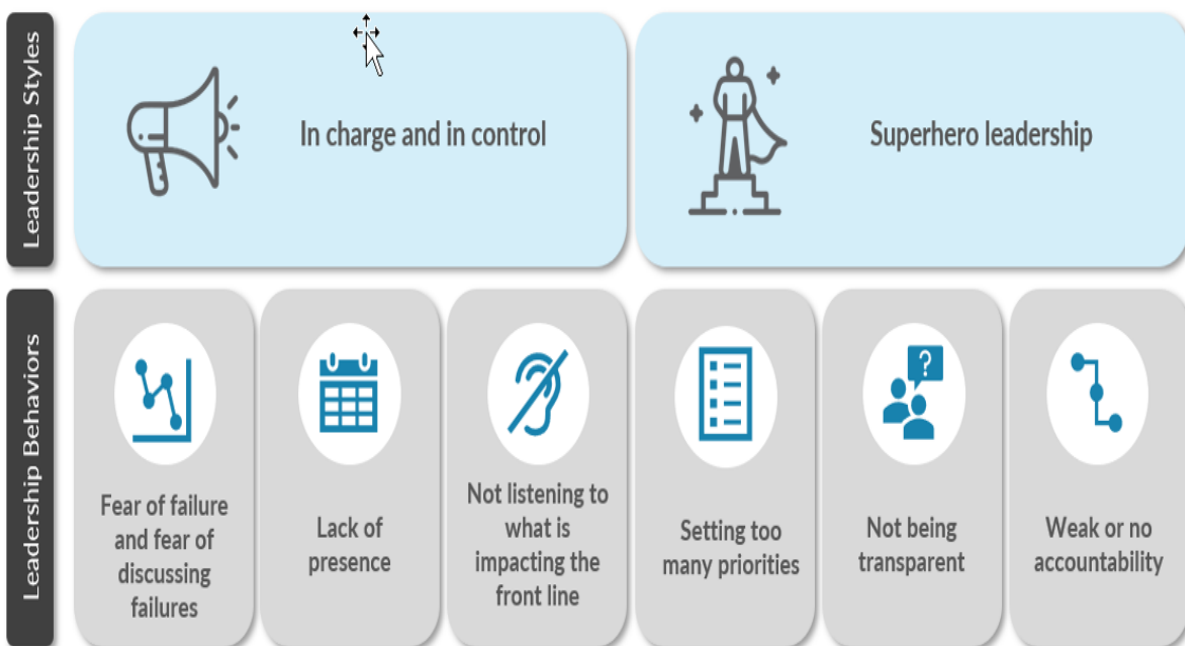




# Making the Shift

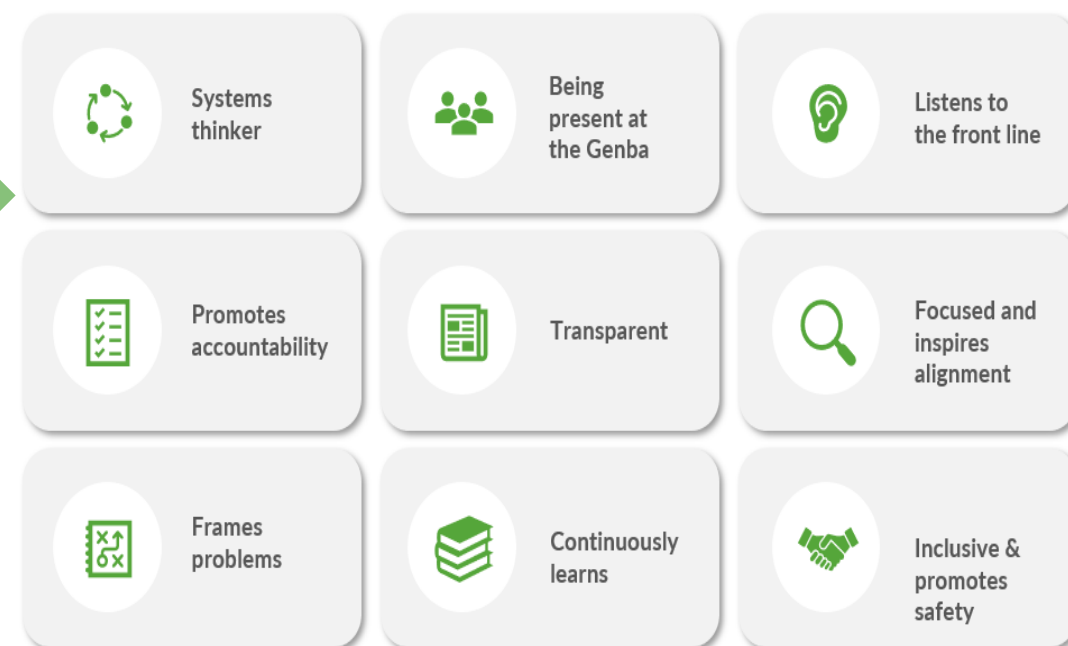
From

Traditional Leadership Styles and Behaviours



To

Effective Leadership Behaviours



# Concept of Unlearning



# Questions for table discussion...

- What leadership behaviour do you struggle with the most?
- With this behaviour, are there specific mental models or assumptions that are outdated and need to be reframed?
- What “unlearning” may be needed? What is holding you back?





***“In times of change, learners inherit the earth, while the learned find themselves beautifully equipped to deal with a world that no longer exists” - Eric Hoffer***





# Coffee/Tea Break

A full-page background image showing a diver's silhouette against a deep blue background. Sunlight rays stream down from the top center, creating a dramatic, ethereal effect. The diver is positioned vertically in the center-right of the frame, facing away from the viewer towards the light source.

Deep dive

Topic 2

Integrating the parts of your management system

# The quality management system

## Quality planning

Identify the needs of the customer & population  
Develop service models to meet the need  
Put in place structures & process to manage the service

## Quality improvement

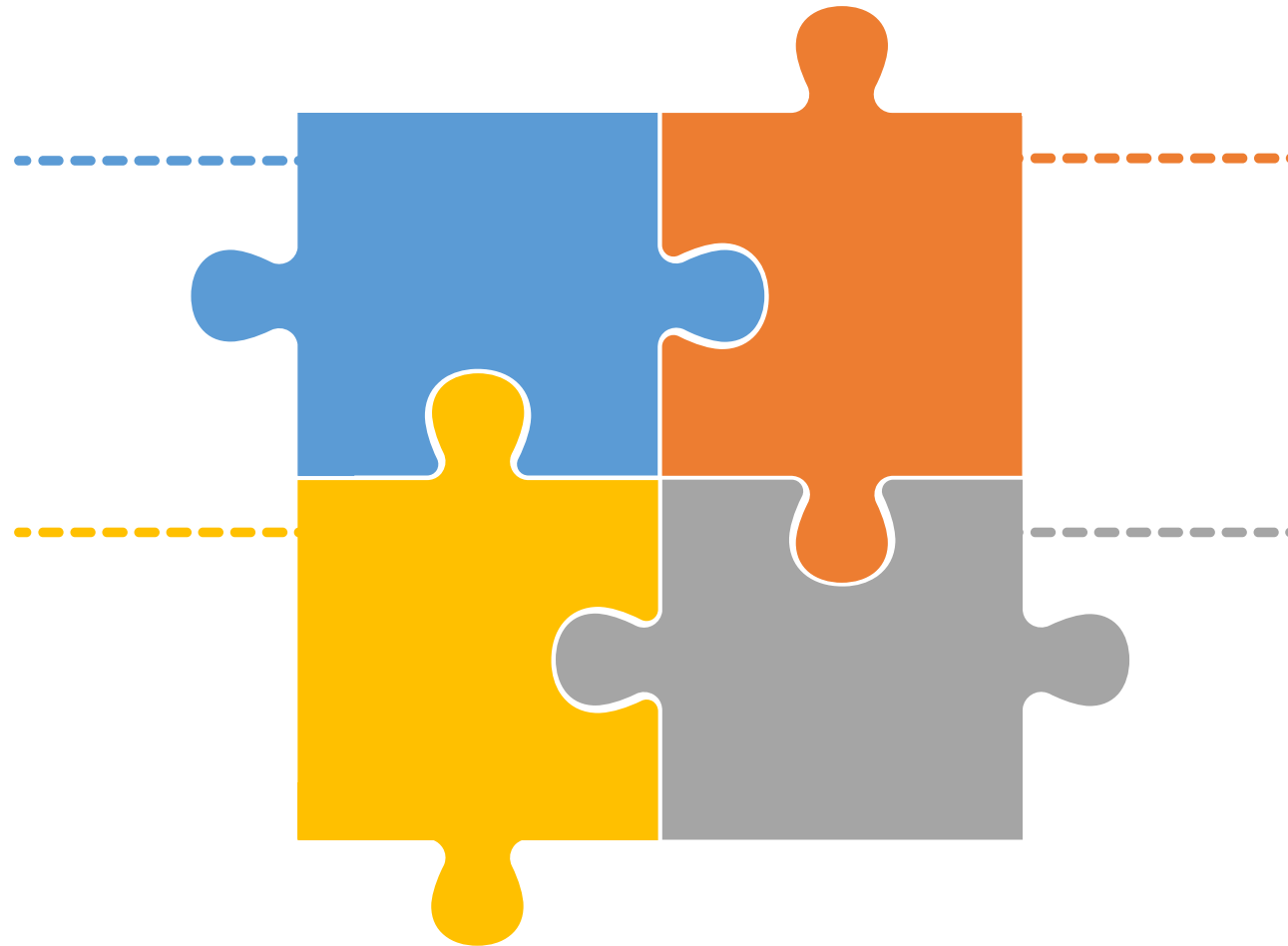
Identify what matters most  
Design project and bring together a diverse team  
Discover solutions through involving those closest to the work, test ideas, implement and scale up

## Quality control

Identify clear measures of quality for the service and monitor these over time.  
Take corrective action when appropriate.  
Internal vigilance to hold gains made through improvement

## Quality assurance

Periodic checks to ensure the service is meeting the needs of the customer & population  
Actions to address gaps identified

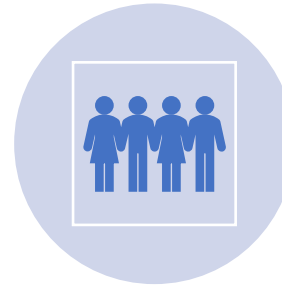




# Innovating our quality assurance approach



Reducing waste



Greater patient involvement and leadership



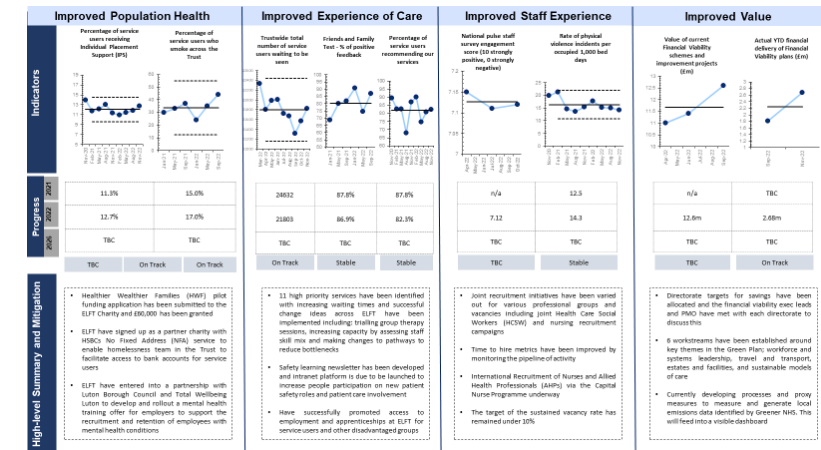
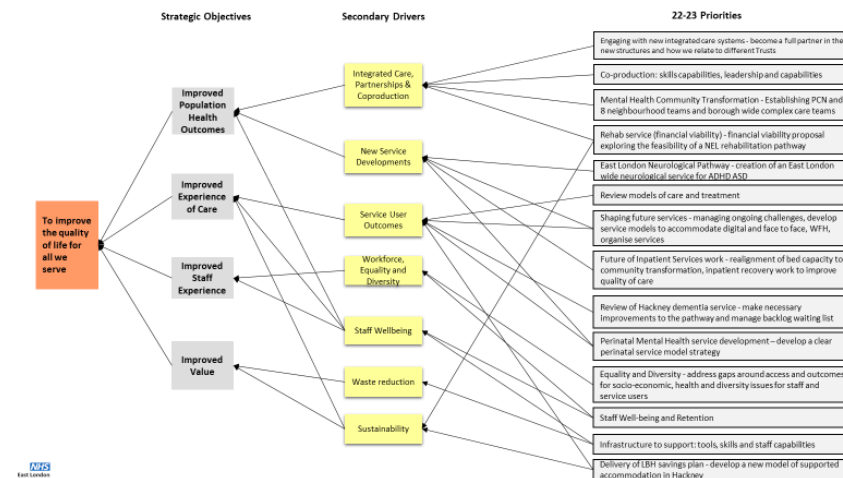
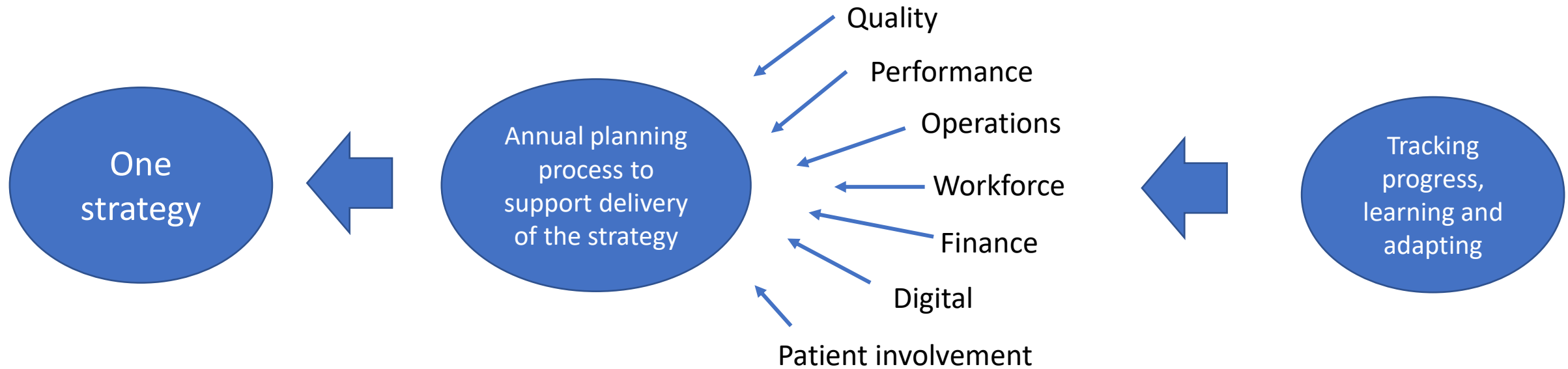
More local ownership

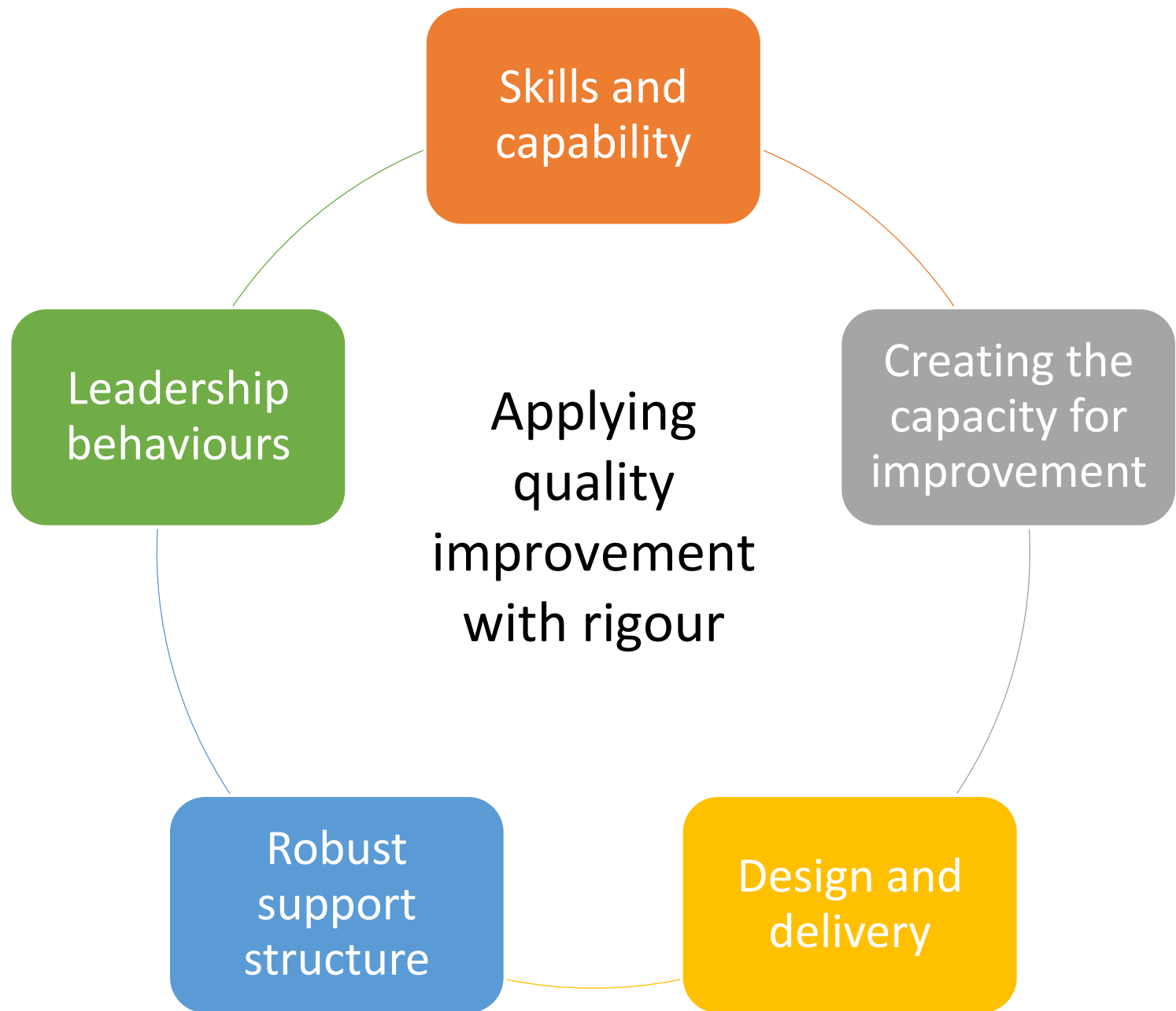


Peer-review



# An integrated annual planning & delivery process

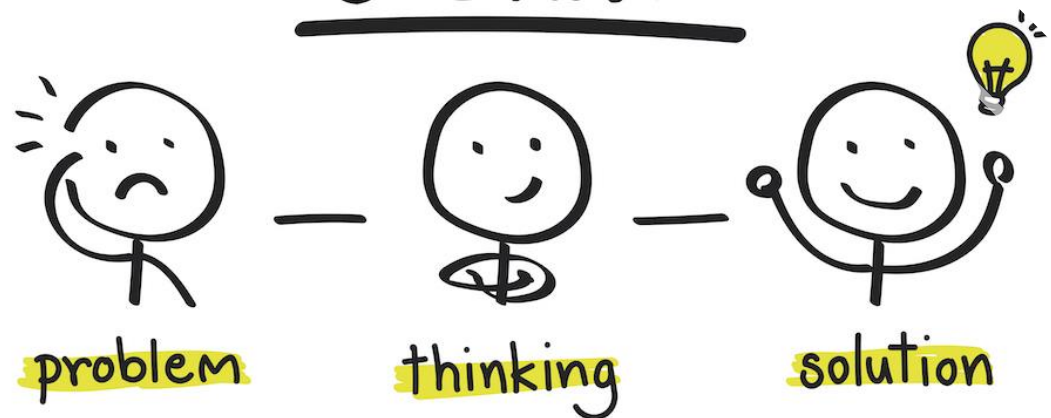






Elements of best practice Quality control

# PROBLEM SOLVING

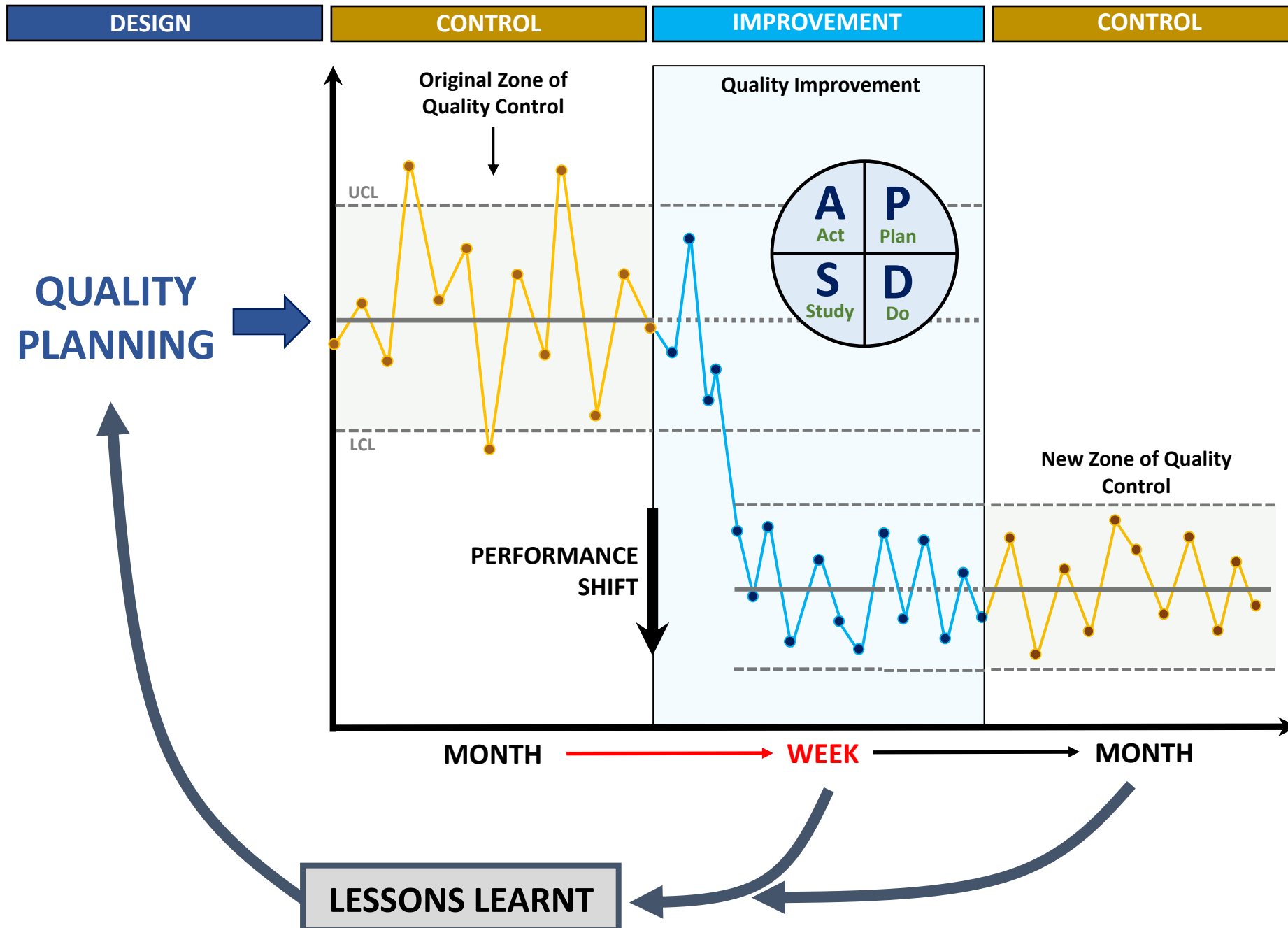


Everyone's Responsibilities					
Task	Daily	Weekly	Monthly	As required	Tools required
Put dots on the safety cross as an incident happen on the ward	X				Red/Orange/Green/Purple dots or pens Definition of incident types (colour dots)
Change the safety cross (frequency depends on type of safety cross used by the ward)	X		X		Printed copies for daily or monthly safety crosses
Call/Participate/record safety huddle at least twice a day	X				Safety Huddle book
Follow up on safety huddle plans/actions	X				
Active/Lead/Guide/participate in safety discussion in community meetings		X			Bring safety cross to meeting
Participate in patient led safety huddles		X			
Access to LifeQI for violence reduction data		X			LifeQI log ins
Starters				X	Welcome packs

Specific Responsibilities					
Managers					
Data		X			
Community meetings			X		LifeQI log ins
Performance (review), As required (react)			X		Data







# Questions for table discussion...

- Where are you with each element of quality management?
- What steps might you take to better link and integrate different elements?



# Summary