Aspiring and Inquiring Minds Want to Know: How to Incorporate Lean Methodologies Into Orientation Programs to Meet Organizational and Learner Needs

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Aspiring and Inquiring Minds Want to Know:
How to Incorporate Lean Methodologies Into Orientation Programs to Meet Organizational and Learner Needs

Jill Hinnershitz, MSN, RN- BC & Tiffany Epting, MSN, RN-BC

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Who We Are

- 5 Campuses
- 1 Children’s Hospital
- 140+ Physician Practices
- 17 Community Clinics
- 13 Health Centers
- 11 ExpressCARE Locations
- 80 Testing and Imaging Locations
- 13,100 Employees
- 1,340 Physicians
- 582 Advanced Practice Clinicians
- 3,700 Registered Nurses
- 60,585 Admissions
- 208,700 ED visits
- 1,161 Acute Care Beds
Quality Milestones

2010
- America’s Best Hospitals for geriatrics-U.S. News & World Report
- No. 1 in PA and No. 2 in the Nation for Heart Attack Results-Centers for Medicare and Medicaid Services (CMS)
- Top 5 Academic Medical Centers in U.S.-University HealthSystem Consortium (UHC)
- NCI Community Cancer Centers Program-National Cancer Institute, U.S. National Institutes of Health
- 100 Most Wired and 25 Most Wireless Hospitals-Hospitals & Health Networks
- Top 100 Integrated Health Networks-SDI
- Leapfrog Top Hospital-The Leapfrog Group
- One of the 30 Best Hospitals in America-Becker’s Hospital Review
- 100 Best Places to Work in Healthcare-Becker’s Hospital Review
- Carolyn Boone Lewis Living the Vision-American Hospital Association (AHA)

American Hospital Association

2011
- America’s Best Hospitals for endocrinology, gastroenterology and geriatrics-U.S. News & World Report
- No. 1 and No. 2 Hospitals in the Region-U.S. News & World Report
- Magnet Hospital redesignation for nursing excellence-American Nursing Credentialing Center
- Top Performer on Key Quality Measures-Joint Commission
- Architecture and Design Award for environmentally friendly health care-GreenCare
- Top 100 Integrated Health Networks-Verispan
- 100 Most Wired Hospitals-Hospitals & Health Networks
- 100 Best Places to Work in Healthcare-Becker’s Hospital Review

2012
- America’s Best Hospitals for gastroenterology, orthopedics and pulmonology-U.S. News & World Report
- Leapfrog “A” Grade for Patient Safety-The Leapfrog Group
- Accredited Chest Pain Centers-Society of Cardiovascular Patient Care
- 100 Most Wired Hospitals-Hospitals & Health Networks
- NCI Community Cancer Centers Program (NCCCP) redesignation-National Cancer Institute, U.S. National Institutes of Health
- 100 Best Places to Work in Healthcare-Becker’s Hospital Review
- Computerworld Honors Laureate-Computerworld Magazine
- VHA Leadership Award for Supply Chain Management Excellence-VHA
- HealthGrades Emergency Medicine Excellence Awards (LHV and LVH-Muhlenberg)-HealthGrades
- Certified Comprehensive Stroke Center-Joint Commission

2013
- America’s Best Hospitals in 7 specialties-U.S. News & World Report
- Magnet Prize®-American Nursing Credentialing Center
- Leapfrog “A” Grade for Patient Safety-The Leapfrog Group
- America’s Safest Hospitals-AARP
- Most Wired Hospitals & Health Networks
- Integrated Health System to Know-Becker’s Hospital Review
- 100 Best Places to Work in IT-Computerworld Magazine

2014-2015
- America’s Best Hospitals in 7 specialties-U.S. News & World Report - 2015
- America’s Best Hospitals in 10 specialties-U.S. News & World Report - 2014
- Leapfrog “A” Grade for Patient Safety-The Leapfrog Group
- Circle of Life for Palliative Care-American Hospital Association
- Most Wired Hospitals-Hospitals & Health Networks
- “Above Average” In Aortic Valve Replacement-Consumer Reports
- Re-certified Comprehensive Stroke Center-Joint Commission
Objectives

- Explain Lean methodologies, why and how they are commonly utilized within Healthcare.
- Describe the process of incorporating Lean methodologies within the redesign of an orientation curriculum.
- Evaluate the implementation of an orientation redesign that utilizes front line staff to instruct learners.
Ping Pong, Anyone?
Directions

1. Shoulder to shoulder

2. Music starts: Pick up a ball one at a time and pass through the team
   - Must have air time
   - Must be touched by both hands
   - Can not touch the ground

3. Music stops: Stop passing

4. Number of balls in the box?
Round One

- Your team is tasked with getting as many ping pong balls as possible from one box to the other in 30 seconds.
Your team has undergone restructuring. You have the same amount of ping pong balls to get from one box to the other, in the same amount of time, following the same standards, but you lost 6 team members.
Your team has again undergone change. You now have the same amount of ping pong balls to get from one box to the other, in the same amount of time, following the same standards, but you lost 3 more team members.
Activity Debrief

- Feelings?
- Challenges?
- Changes?
Lean Lingo Bingo

- When you hear a Lean lingo term you have on the card, mark it off
- Shout out “BINGO” when you get a straight line, diagonal line or four corners
- Win a prize!
What is Lean?

- Create value
- Improve efficiency
- Minimize waste (*Muda*)
- Environment of Excellence (Standards)
Standard Work

- Current Process
- Forms a baseline
- Reduces Variability
- Improvement Maintenance
How Does Lean Work?

- Plan: Vision
- Do: Awareness
- Check: Metrics
- Act: Implementation
- Evaluate: Ongoing


A3 Problem Solving

- **What is an A3**
  - Structured problem solving
  - International size piece of paper
    - 11 X 17 inches
  - Captures organizational issues
  - Enables consistency
  - Provides guidance
  - Clarifies responsibility
Lean at Lehigh Valley Health Network

- Value stream in peri-operative services
- Finance revenue cycle process improvement
- Emergency Department (ED) Rapid Assessment Unit to reduce ED wait times
- Flow improvement and wait time reduction in Oncology infusion
- Education services
  - Curriculum redesign
  - Clinical services orientation
  - Nursing orientation
A3 Problem Solving Elements

- Title/Owner/Date
- Background
- Current Conditions
- Goals/Targets/Outcomes
- Analysis/Gaps
- Proposed Countermeasures
- Plan
- Metrics
- Follow up
Title/Owner

- Title
  - Administrative Partner Orientation Redesign

- Owners
  - Tiffany Epting and Jill Hinnershitz

- Multidisciplinary team
  - Director
  - Manager
  - Clinical education coordinator
  - Administrative partners
Background/Reason for action

- 2013 Reduction of department staff
- Completing priorities
  - Redesign placed on hold multiple times
- Business Case
  - Redesign process aligns with network goals
  - Reduce the total amount of orientation
  - Less time in classroom
  - More time in clinical
Current Conditions

- Total of 9 workshop/classroom days
  - 6 AP workshops
  - 3 multidisciplinary general orientation days
- Class days extend into week 4
- 6 weeks total orientation
- Non value added information
Goals/Targets/Outcomes

- Target state – 38 Days
- Develop an effective and efficient plan
- Identify necessary/required skills
- Implement new curriculum date
  - Began planning mid September 2013
  - Go live date scheduled for October 21, 2013
Analysis/Gaps

- **AP role applicants**
  - Requirements for AP applicants

- **Non value added information**
  - Current education not relevant to role

- **Workshops**
  - Identified need for additional clinical time
  - 9 workshops to 6 workshops
    - 3 days multidisciplinary general orientation
    - 3 AP specific workshops

- **Incorporate subject matter experts**
  - Clinical administrative partners teaching learners
Proposed countermeasure/Plan

- Standard work development
  - 3 workshops
    - Agendas
    - Course descriptions
    - Education records
- Orientation time decreased
  - 5 Weeks
  - Class days completed in week 3
- Obtain leadership approval
  - Propose redesign plan
- Implement curriculum
  - Go live date
Metrics

- **Evaluation method**
  - Electronic
  - Each workshop day – 3 evaluations
  - Speaker evaluation

- **Content/Outcome evaluation**
  - Unit educators
  - 1 month after orientation completed
Completed A3

Project Title: Administrative Partner Orientation Redesign
Project Owner: Jill Mnozleski and Tiffany Syring
Sponsor: Heather Rizzo and Cynthia Cuppel

Date: October 2013

Background

Reason for Action:

Purpose: In January 2013, the AP instructor retired after more than 15 years in this role. This position was not replaced rather the work flow was reassigned to another team member. The CSD team member who was responsible for the orientation and training of the administrative partners was displaced in September of 2011. Over the previous five months, major revisions to the orientation had been made however, there had not been a team member with a formal background in education involved in the process or input from the end users or leadership teams. Due to competing priorities, this redesign was put on hold several times. The volume of AP's hired on an annual basis is one of the lowest on the CSD team.

Business Case:

Primary: This aligns with the LVHN Fundamental Priorities of People, Quality and Service
Secondary: With the redesign of the administrative partner orientation, we have reduced the amount of time spent in the classroom from six days to three days. This will allow the learner to have three additional clinical days spent on their unit of hire so that they can learn their role with a preceptor. Opportunities for additional staff to teach in this course have been created. Our Coordinator of Clinical Education and current administrative partners will be involved in the education of administrative partners. This will allow education specialists to have the availability to teach in other classes. The administrative partner orientation will provide a warm welcome for our new employees and will create an environment in their orientation that instills confidence that they have chosen LVHN as their employer.

In Scope: New employees in Patient Case Services, Administrative partners.

Out of Scope: any role other than administrative partners.

Current Conditions:

- Administrative partner education is a total of nine workshop days:
  - Connections, Navigation Day one, Navigation Day two and six role specific workshop days. Mixed with clinical time orientations, the total amount of time is ten weeks.
  - Administrative partners attend workshops in week four, thus not allowing them to move to their shift of hire until week five.
  - Some of the information being covered in the workshop days is not relevant to the administrative responsibilities.
  - A total of two hours of orientation class time is spent on abbreviations and medical terminology. Medical terminology is a prerequisite upon hire.
  - One hour of orientation class time is spent reviewing anatomy and physiology with the administrative partners.
  - Two hours of orientation class time is spent reviewing and practicing the dovetail process.
  - Administrative partners have a review of information and a final exam on the last day of class.

Team Roster:

Director: Clinical Education – Cindy Cuppel
Manager: Clinical Staff Development – Heather Rizzo
Education Specialist: Jill Mnozleski
Education Specialist: Tiffany Syring
Coordinator: Clinical Education – Lisa Otto
Administrative Partners, Floor Food, Food Admin
Administrative Partners, RN/NC, DeWine/Stout
Administrative Partner, Kerri Vincent

Goals/Targets Desired Outcome

Our Target Date was 36 Days:

- To develop an informative and essential orientation curriculum for employees new to the administrative role
- Identify the necessary and required skills needed by administrative partners to perform their position successfully.
- Incorporate current administrative partners in the classroom orientation of employees new to the administrative partner role
- To go live with the administrative partner orientation redesign by the next group of newly hired administrative partners (Next hire date: October 21, 2013)

Analysis/Gaps

- AJ identified seven areas of information that is covered in the current administrative partner orientation was not important to LVHN and responsibilities.
- AJ identified the need to incorporate Subject Matter Experts (SME) into the orientation curriculum.
- AJ identified that a total of six clinic days was not needed in the administrative orientation plan.

Proposed Countermeasures:

Plan

1. Meet with leadership team and coordinator for clinical education to determine the plan and expectations for the administrative partner orientation.
   - Administrative partner orientation plan needed to be finalized by next hire group (October 21, 2013)
   - Classroom workshops days needed to be consistent throughout the month orientation plan to discuss continuing education opportunities and patient service level expectations.
   - Education specialists needed to meet with current SME’s to determine content that was covered in the workshops.
   - Education specialists needed to reach out and meet with SME’s interested in teaching content within the workshop redesign.
   - Education specialist meet with the SME to determine content structure, scheduling of classes and information covered in each workshop day.
   - Education specialist observed the fifth and sixth administrative partner class days with current instructor to observe the content that was covered.
   - After observing the fifth and sixth administrative partner class days and looking at the orientation content and scheduling, the education specialist determined that the fifth and sixth class days were a repeat of information that was already covered.
   - The education specialist also determined that the review of information and the final exam was no longer needed.
   - Education specialist meet with a current administrative partner that was interested in teaching the new learners coming to administrative partner orientation.

2. Develop standard work for the three workshop days for the administrative partners.
   - Agenda and timeline needed to be established.
   - Incorporate workshops days into orientation schedule.
   - Provide agenda to the interested administrative partners for feedback.
   - Develop course descriptions and educational records for the three workshop days.
   - Reviewed and revised Administrative partner orientation record.
   - Education Specialists created agendas and themes for the three workshop days.
   - Education Specialist meet with the SME’s and coordinator interested in teaching and agendas were reviewed.
   - Feedback from the SME’s was provided and agendas were revised to meet the teaching needs.
   - SME’s and coordinators were included in the agendas as recognized speakers.

3. Workshop days were incorporated into the six week orientation schedule. The last workshop day falls within the third week of orientation.
   - Education specialist developed course descriptions for the three workshop days.
   - Education specialist developed educational records for the three workshop days.

Plan

4. Obtain leadership approval for the proposed administrative partner redesign curriculum.
   - Meet with the leadership team to discuss proposed redesign curriculum.
   - Meet with clinical staff development leadership about the proposed curriculum.
   - Agendas, schedules, and educational records were reviewed.
   - Redesign curriculum was approved by the leadership team.

5. Develop curriculum with the involved SME’s teaching in the course.
   - Meet with selected SME’s.
   - Meet with Cindy, Deb and Kerri.
   - Agendas provided.
   - Schedules and times provided.
   - Handouts and materials provided.

5. Implement the administrative partner redesign curriculum.
   - First administrative partner redesign course will begin with the new hires on October 21, 2013.

Metrics

Proposed Metrics, Data Sources:

- Evaluation results from AP’s: Include an evaluation for each day so there will be a total of 3.
- Continued monitoring, coaching of new instructors in the course.
- Qualtrics survey emailed to Patient Case Specialist of the hiring units (sent 1/2014 for 11/13 AP hires).
Evaluation

- **Electronic evaluation**
  - Link sent in email to learner
  - **Pre implementation**
    - 1 evaluation for all 6 workshop days
  - **Post implementation**
    - Evaluation for each workshop day (3)
Please help us in assessing our educational programs. Your responses will help us in designing and modifying our educational activities to enhance patient care and safety.

**Date of Activity (mm/dd/yyyy):**

**Evaluation Content**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Undecided</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Does Not Apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>I learned new knowledge from this activity.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I will be able to apply what I have learned to my job.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I would recommend this activity to others.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>This activity will improve my job performance and productivity.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>
I learned new knowledge from this activity

Pre-Implementation
29 Total Responses

Post-Implementation
49 Total Responses
I will be able to apply what I learned to my job

Pre-Implementation
29 Total Responses

Post-Implementation
49 Total Responses
This activity will improve my job performance and productivity

Pre-Implementation
29 Total Responses

Post-Implementation
49 Total Responses
Learner comments

- Most of the activities did not match up to what I was learning on my unit.
- I wish the course gave a view into the everyday activities in detail.
- Too much time in class focused on downtime and hand transcription of orders.
- Classes could have been cut back by 2 weeks.
Learner comments

- I will feel more confident and have useful knowledge that I can use during my shifts.
- Everything will be very helpful in my new chapter as an AP.
- Overall the whole course was very helpful because it showed me step by step on what to do when I was out on my unit.
Unit Educator Evaluation

- The AP was appropriately prepared to complete tasks within their scope at the completion orientation.
- The AP displayed confidence and accuracy in assigned tasks.
Mentoring/Coaching

- **Subject mater experts**
  
  - **Evaluation results**
    
    - Learner comments:
      
      - The fact that an AP was here to actually show us step by step how to navigate through some of the applications.
      
      - All instructors were prepared to teach their subject matter and easy to listen to.

  
  - **Change in content**

  - **Confidence**
The Lean journey continues...

- LVHN inpatient Epic – August 2015
  - AP responsibilities changed
  - AP epic education
  - April 2016
    - AP role redesign
    - Multidisciplinary team
    - Standard work
    - Job description
    - Orientation records
    - AP education
    - Redesign- Go live May 16, 2016
Additional A3’s completed

- Clinical Services Orientation
  - Navigations
- Nursing Orientation Curriculum
  - Newly licensed RN’s
  - Experienced RN’s new to LVHN
- Critical Care Orientation Curriculum
References


Questions?

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