Lost in Translation: Making Strategic Planning Meaningful

Kelly Frankson, Lean Healthcare Blackbelt
Lean Education Lead, Vancouver Coastal Health
Agenda

1. Introduction to VCH as an organization
2. Why do Strategy Deployment?
3. Case study: Strategy Deployment in Employee Engagement
4. Results and lessons learned
5. Q&A and discussion (30 min)
Vancouver Coastal Health

- VCH serves approximately one million people
- Provides 2.8 million patient days of care per year
- Annual budget of $3.2 billion dollars
- 23,000 staff and 2,500 physicians
- Divided into three Communities of Care: Vancouver, Richmond and Coastal
- Spanning 12 municipalities, 500 facilities
- Serving 25% of rural and remote population in BC
VCH Lean Journey

2006
- Point to Point Improvement Initiatives & Facility Design

2008
- Clinical improvements with Physician and Clinical Leadership

2010
- Formal Lean Project Education
- Regional and Lower Mainland Consolidated Projects

2011
- Lean Management Focus & Education in both Clinical and Corporate Departments

2013
- Strategy Deployment

Efficiency Innovations

Cultural Change
Why Do Strategy Deployment?
Aligning our Improvement Efforts

FROM THIS

Senior leadership
Program managers
Front-line teams

TO THIS

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Most common problems with existing forms of strategic planning

1. Too many priorities!
2. Insufficient detail in plans
3. Lack of active review
4. Lack of awareness by and contribution from staff and teams at all levels

Embedded from: http://dilbert.com/stripes/comic/1999-09-09/
Main Steps in Strategy Deployment

1. **Provide a focus** to the organization by setting long run and annual strategic priorities

2. **Align improvement efforts** in all programs/operations with these strategic priorities

3. **Integrate** the strategic priorities into the **daily management system** (how we measure day to day operations)

4. Ensure **coaching and structured review** of progress on these priorities (are we on track?)
Strategy Deployment as Problem Translation

“Here is our problem – what contributes to this in your area?”

“Here is what we think might resolve our problem – can we proceed?”

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“More than anything, hoshin kanri (HK) [strategy deployment] is a means of connecting the macro with the micro. This enables you to see the highest levels of organizational objectives being worked at the micro levels, and to understand corporate front-line (micro-level) capabilities, creativity and struggles at the highest levels.

What’s the most common misconception out there about HK? That it’s some top-down “deployment” process akin to MBO – Management By Objectives. In practice, in a mature HK organization, what you see is a dynamic top-down, bottom-up, middle-out thing of beauty...”

Source: John Shook, Policy Deployment: aka Strategy Alignment, aka Hoshin Kanri
Strategy Deployment at Vancouver Coastal Health
The Context for Strategy Deployment at VCH

MoH sets province wide goals, standards and performance agreements

VCH Board of Directors creates policy and direction (True North)

VCH Senior Executive is responsible for putting the Board’s policies and directions into action

Various Senior Leadership Teams responsible for improvement strategies across all programs

TRUE NORTH

- promote better health for our communities
- provide the best care
- innovate for sustainability
- develop the best workforce
- people first

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Many have traditional strategic planning in place

Some have tried X-Matrix as first step

Some have tried cascading A3 reports

Many are now mapping strategic priorities

Several teams now using catch ball process to align

Learning to do Strategy Deployment at VCH
Strategy Deployment: Employee Engagement

Initial planning meetings with VP EE
- Education regarding strategy deployment & catchball
- Agreement to use it
- Drafting top strategic priorities for VP

Reached out to each Executive Directors
- Make them aware of the process and next steps
- Walk through their strategic priorities

Executive Directors and VP strategic planning session
- Reiterated strategy deployment process
- Introduced the strategy deployment map as a tool to use in the first steps of the process
Executive Directors Meeting with the VP

Steps Followed

1. VP posted her priorities on the map,

2. On post-it notes, each Executive Director wrote all of the work that impacted or aligned to the VPs priorities

3. One at a time, Executive Directors put their work on board and told people why they think it aligned – over 100 priorities posted

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What happens if some of your work/priorities don’t align?

During the Meeting

Outside the Meeting

- Conversations continued regarding parking lot of items that didn’t quite fit
- Lean facilitators met with Executive Directors to develop priorities and also talk about work that did not align

**Starting the conversation was a valuable outcome of those first SD sessions**
In an effort to accommodate work that did not align, VP went from 8 strategic priorities to 3 broader priorities:

- 3 strategic priorities were too broad to be meaningful
- Went back up to 8 priorities and created a place on the strategy deployment map called the “Stop Doing List”
Final Product: VP to Exec Director Level

EMPLOYEE ENGAGEMENT: GROWING AND PROMOTING A CULTURE THAT THRIVES ON EXCELLENCE, CANDOR AND CHANGE.

1. Develop a patient-centered culture for VCH employees and clinicians.
2. Partner with CST project management to launch a comprehensive learning strategy across VCH and to integrate competencies.
3. Develop a high-performance culture with effective cross-functional leadership and care performance management programs and strategies for physicians, multiple and other VCH and VCH/Mining/Community Health initiatives.
4. Develop and execute orientation and education program for physician enhancement (e.g., shift, and division leaders), and other VCH leaders to support and improve performance and development in the critical care environment.
5. Establish an executive search program to source “star talent” for VCH executive and management positions.
6. Implement a new software to increase productivity in staff engagement, performance, and leadership management.
7. Influence provincial human resources strategy and NRM to promote VCH mining model and improve clinical, human resources so that COGs have the appropriate staffing to meet current and future care needs.
8. Promote “managing and delivering” the people to the people for whom they are intended.

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What Happened Next?

Exec Directors/Directors started catchball process with their Managers

- Created map of their own priorities, explained to staff
- Put managers priorities on the map, looked for alignment & gaps

Exec Directors used a standardized education package to their teams

- Made sure employees at all levels were aware

Managers talked to their program leads

- Translated it in a meaningful way with staff, ensured staff at all levels understood the units priorities

Further meetings with staff

- Develop action plans, work on continuous improvement daily using Lean Management process
The Map: VP-Director Level

The Process

- The VP-Exec Director Map was presented to all staff
- Key priorities were discussed
- Staff identified how work they were doing fit under the key priorities
- Working groups were formed to discuss specific areas on the SD Map
Results of Strategy Deployment

• Transparency leading to increased employee morale.

• Impacted day to day decision making
  – Priorities used as criteria during new project intake process
  – A “Stop Doing List” was developed

• Priorities determined through catchball process used on performance dashboard
  – Managers & Directors being held accountable

• Changed the way we interact
Quotes from Employee Engagement
Anne Harvey, Vice President, Employee Engagement

"The strategy deployment approach helped us to **reduce** the number of **priorities** we were trying to address and focus the nine different and discrete portfolios in our department to **shared goals.**"
“In addition to **clarity around priorities**, and more focus for our day to day work, the strategy deployment and engagement process allowed our teams to **look beyond siloes** of our teams work and see how we each support and partner with other’s work. It has been a **catalyst for thinking and working more as a larger EE team**, especially as new initiatives and pressures are brought our way.”
“The Strategy Deployment process was very open and engaging – *lets me* have a say in what my goals are and how my work gets done.”

“It has focused the team on leader driven objectives that support the organization. Helps them to see how they are contributing to the overall goals of People First.”

“As a manager, it made me more aware of what is driving the executive team. Focused my planning on activities that can support leaders in my organization. Brought a focus on service and Lean planning to my whole team.”

**Challenges**

“Catch ball process can take a long time to complete – so we went ahead with drafting plans in PerformanceLink while we were waiting for confirmation.”
Matt Summers, Advisor, Management Development

“Strategy Deployment has aligned our team and given us a clearer sense of purpose. It has allowed us another way to look at making decisions as it provides a greater scope to the impact that a decision makes on others”

“Getting insight into what the bigger picture is and to what my work connects with organizationally really shifts my engagement in how I do my work”

Challenges

“The process generates a lot of data and it takes time to sift through it all…but with a commitment to the purpose and outcome, allocating the time to identify where they work aligns makes the big picture much clearer.”

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Lessons Learned

• Start early with a problem definition focus when defining priorities – not your todo list, but what original problems they address

• Need to make sure people are aware of priorities – communication to all staff regarding the work being done – strategic map, etc.

• Clarify priorities at one level before proceeding to the next level

• Advantage of doing it in tandem with rest of department

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Discussion & Questions
Kelly Frankson
Regional Lead, Lean Education
Kelly.Frankson@vch.ca
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