

HealthEast's innovative new CEO and her new Lean Sensei are preparing to use lean to flourish amid the demands of a competitive health care market and the regulatory uncertainties of ObamaCare.

One day last Spring, Kathryn Correia, the recently named president and CEO of St. Paul's HealthEast Care System, showed up at 6:30 a.m. at the Andersen Windows manufacturing facility in Menomonie. She and 15 colleagues donned safety glasses and earplugs, hopeful that a survey of the leaned-up manufacturing efficiencies at Andersen might reveal some lessons that would apply to the world of health care.

Didier Rabino, a lean expert with 20 years' experience supporting lean transformations throughout Europe in the United States, led the visitors through a comprehensive half-day tour of the Andersen facility. Rabino had directed Andersen's effort to develop and deploy the Andersen Manufacturing System.

He would soon realize that Correia was no novice to lean in her own right. Her previous experience included eight years at ThedaCare in Appleton, Wisc., a national pioneer in bringing lean processes to health care, where she had been a senior vice president. Her experience at ThedaCare had been similarly inspired by a manufacturer, that time by Ariens, a manufacturer of snow blowers.

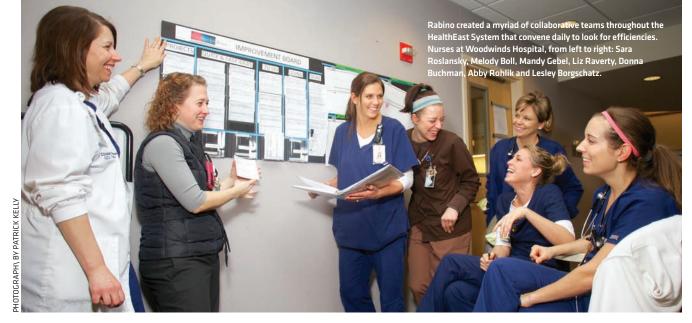
A worker struggled with a particular angle on a specialty window, due to a design changed. It slowed his process, which would have slowed completion time, which would have slowed delivery time, which would have impacted a key metric for on-time deliveries. She watched, as the Andersen team addressed and fixed the problem through a series of 30-second conversations up through the process. "Without lean, they would have known about it sometime in the future, when a report came out," she says. "Didier knew it as it was happening, when his team had the best chance of remedying the problem.

"It was clear to them what this would do to their performance metrics," she says. "It was amazing."

On the ride back to St. Paul, she mused to a colleague, "Wouldn't it be wonderful to have someone like Didier work with us?" The reply: "Why not Didier?"

A few months later, Didier was named Lean Sensei at HealthEast.

We met up with Correia and Rabino in January, to discuss how HealthEast's experience underscores the emerging importance of lean processes in health care. We convened in the modest 6th floor executive suite of Bethesda Hospital, a smallish St. Paul campus tucked a few blocks behind the intersection of Rice Street and University Avenue. From an office that boasts a dramatic panorama of the State Capitol, Correia oversees a \$1 billion integrated health care system that includes clinics, rehabilitation facilities, hospice, home care, and outpatient surgery centers. Its 7,300 employees



and 1,400 physicians serve St. Paul and its east-side suburbs through St. John's Hospital, St. Joseph's Hospital and the sprawling 30-acre Woodwinds campus in Woodbury. Rabino works close by in HealthEast's executive complex in the old Midway Hospital building.

To understand Correia's passion for lean, it might be useful to appreciate the industry's increasing urgency to identify and eliminate waste. In 2011, Americans spent approximately \$2.6 trillion on health care. This total is larded with an enormous amount of waste, as much as \$690 billion (not including fraud), according to a September 2012 report published by the Institute of Medicine.

This waste and inefficiency is spread across a wide spectrum of functions and processes, including care delivery, care coordination, overtreatment, administrative complexity, and pricing. It is clear the impending implementation of ObamaCare as well as market forces will constrict health care expenditures – and that identifying and eliminating waste is part of the solution.

Despite that environment of uncertainty, Correia admits to great enthusiasm about the prospects at HealthEast. From her early interviews with the board of directors, Correia emphasized the important role that lean processes would play in her vision for the company. When one said,

"we want you to bring lean, but we don't want you to change the culture," she responded," I'm sorry, I'm not coming. Because if we don't change the culture, we won't be doing lean."

Her experience at ThedaCare backed her up. "It is not just about doing lean, it is about doing lean for results," she says. "I had experience (at ThedaCare) of reducing expenses by 25 percent per in-patient

Kathryn Correia

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stay, and increasing staff satisfaction, and reducing medical errors, and getting better quality results. Those 'ands' are really important."

"Waste is inherently disrespectful, it inherently causes errors," she says. "Lean is the only thing I've seen that allows the improvement to be sustained over time. ...People in manufacturing know that the currency of lean is time: if you reduce time, you reduce waste."

## **Employee Buy-In**

Any lean manufacturer will attest that lean processes are only as effective as the psychic buy-in from employees will allow. Lean processes in health care are no different.

While doctors might be notoriously independent within a health system, Rabino says manufacturing has its corollary. "Engineers also have their ways of doing things," he says. "The similarity between an engineer and a physician is that they love the scientific method. They learn the scientific methods about how to do their work, but not how to improve the process."

Plus, he adds, not everybody is a doctor in healthcare. "We are dealing with people with multiple backgrounds and perspectives on process," he says. The level of support for his early initiatives surprised Rabino, who savored the new

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challenge in his career. "
I didn't think we would accomplish so much in four months," he says. He attributes part of it to having an activist CEO and upper management "who really want to do it, understand what it takes."

But Correia thinks the early success might be embedded in HealthEast's culture.

"Our faith-based heritage is woven into the fabric of HealthEast more than we know. The people here are more dedicated – this isn't just a job. That's maybe part of the reason there wasn't more pushback," she says.

For his part, Rabino concentrates on building grassroots support within an organization by finding early collaborators. "I'm always looking for baby birds with open beaks," he says. "As long as I have enough baby birds to feed, that will keep me busy for a while. By the time they are fed, other baby birds will be born. I'm looking for the ones who really strive to be on board. I'm not going to work on the people who are resisting."

Additional commitments will develop, he says, as people understand the process. Correia agrees: "Because lean is so respectful of people, the culture will change -- we don't lose our compassion, we're just more accountable, she says. "That you change a culture doesn't mean that you go from nice and caring to slash and burn."

## The Project

Rabino's early efforts established small groups that now convene daily throughout HealthEast to discuss opportunities for improvement.

Among his initial successes appear to be inefficiencies found in transferring patients who are discharged from the hospital and entering home care.

"We looked at the process and identified where we were working in silos, Rabino says. "The process took many, many "The similarity between an engineer and a physician is that ... they learn the scientific methods about how to do their work, but not how to improve their process."

DIDIER RABINO, Lean Sensei, HealthEast

days - end to end, when it should take only a few days."

Rabino created a team consisting of people from multiple departments that spent a week collaboratively identifying the steps involved in this process. Together, they analyzed what steps might be eliminated, combined, moved or simplified.

Over a week, they established new processes that Rabino says eliminate silos in favor of collaborative work cells.

"This is the first pass," says Rabino. "Because they did that, they learned the process. They had an idea of what they are doing, but nobody had a really good idea of the whole process."

Adds Correia: "What is so cool about this is that what the organization doesn't understand in a widespread way is that once we go back over that value stream again, we will have more success."



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## **Lean Legacy**

When she looks back on her first two years at HealthEast, Correia is peruaded that Rabino's efforts to lean up her organization will have contributed mightily to her company's ability to navigate through its competitive and regulatory challenges. The key to its success, she predicts, will be how quickly HealthEast can adapt the tools.

"Health care reform is coming at a rate that we don't control," Correia says. "The question is, can we learn the tools fast enough to be responsive and eliminate enough waste to take the hits that we're going to take on reimbursement?"

Lean represents "our ability to cope," she says. "I'm not overstating it. This is how I can sleep at night. If we create a community of problem solvers that work every day to create more value for patients, we will not only survive, but we will thrive. We need to take the waste out, remove cost and improve value for the whole community."

Her vision for this process includes creating a heath care delivery system that emphasizes the "front end:" more primary care, more prevention, and a more dedicated effort to engage the patient in preventive self-care.

Lean is not a magic pill, she says, but "you feel better because you know you have an approach that can work." In one year, she'd like to organization to "hit the wall," to understand that there are places where lean hasn't been sustained, "where we have to go deeper, where we have to push through with more resolve. If we can do that in two years, then that means that we've pushed forward. ... We'll have started to get our hands dirty, really dirty."

And in this case, even in health care, dirty is a good thing.

Kathryn Correia received her undergraduate degree from Denison University in Granville, Ohio, and her Masters degree in Health Administration from the Ohio State University. She previously served as president of Appleton Medical Center and Theda Clark Medical Center, and senior vice president of ThedaCare. She was also vice president for ambulatory care centers and administrative director for clinic operations at Geisinger Health System in Danville, Pennsylvania, and vice president of Central Ohio Medical Group in Columbus, Ohio.

**Didier Rabino** is Lean Sensei at HealthEast in Saint Paul, Minnesota. Prior to holding this position, he was plant manager at Andersen Corporation in Menomonie, Wisconsin. He also led Andersen's Lean Office to develop and deploy the Andersen Manufacturing System (AMS). He worked in Europe and in the United States for 20 years leading and supporting lean transformations and new process implementations. He holds a Wood Mechanical Engineering degree from the University of Nancy, France, a Business and Administration degree from the University of Perpignan, France and a Masters degree in Industrial Sciences from Louis Pasteur University in Strasbourg, France.



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