



Physician Benefits of Lean Implementation

As an advisor to health delivery organizations pursuing Lean implementation within their operations it has become obvious that the physician support of the implementation from primary clinic, hospital and surgical perspectives, is absolutely essential to effect a fundamental change to the entire delivery performance and cost structure. The elimination of waste, the key definition of Lean, within the health services community requires the application of standards. Standards within the context of an individual physician's delivery process are counter to all of their training and culture. Yet without measurement to a standard there can not be a determination of an improvement. This concept is at the basis of the scientific method. Unless completely mercenarial, most individuals start out as scientist in their pursuit of the achievement of physician status. After achievement of the status and the privilege, the predominate theme is the continuing of individual education but very little reconciliation of individual process delivery performance and understanding of best practice among their peers of similar disciplines within the medical organization they are participating within. The resultant variation of tools, materials, equipment, techniques, complications, infection rates, length of stay, examination time, procedure time, to provide essentially the same health care process is the root cause of the high and continually growing cost of medical care.

How can a health care service enjoin the physician group to realize the opportunity and benefit of developing standards, measuring performance and then continuing to improve that performance? First the physicians must understand the categorical benefits to themselves. They are:

Altruistic motivations

- Community Service
- Improved Access
- Reduced quality issues
- Reduced legal issues

Quality of Life

- Fewer disruptions from complications
- Higher output with lower effort
- More time with their family
- Lower stress through reduced threat of litigation

Volume Improvement

- Revenue Value Units per annum increase
- Speed requires high quality
- Quality requires standards
- Standards facilitate improvement
- Adherence to standards are the best avoidance of litigation

Technology Change

The first medical service to break the glass ceiling of the root cause identified above will possess a new technology. The technology will be very valuable and salable to other medical organizations. The first medical organization by definition will be a continuing teaching organization internally will be able to charge for the service externally.

Increased organizational income from improvements

To be shared by all participants within the organization

To be measured in terms of :

Inventory Turns

Asset Utilization

Productivity

To be distributed on the achievement of improvement gates to the three metrics above and distributed to all organizational groups based on a sliding scale of contribution. The attached Excel file is an interactive tool to demonstrate the mechanics of the distribution.

This simple writing completes and delivers the logical thought process by which individuals should question the validity of continuing with the past philosophy and therefore continuing with the same performance of today with no hope of a fundamental improvement, or pursuing an adventure to a very new and effective future. Individuals who question the proposed direction should be challenged to produce a plan with as much foundation and promise and not be allowed to stall the inevitability of change.

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