# Lean Healthcare Rapid Improvement Event Internship

***A partnership of Montana Flex Program and Montana State University Industrial and Management Systems****.*

**PROJECT BACKGROUND & DESCRIPTION**

Montana State University’s Industrial and Management Systems Engineering (MSU-IMSE) Program provides two interns to conduct rapid process improvement projects at eight Critical Access Hospitals (CAHs) across Montana. The interns will spend two weeks at each selected CAH to implement a pre-determined and focused process improvement project selected by each facility under the direction of an appointed hospital contact and the CAH CEO. The interns’ work will be supervised and coached daily by a graduate of the MSU-IMSE program with experience in Lean Healthcare with additional training and consulting provided by MSU-IMSE faculty advisors. The ultimate goal of the project, when possible, is implementing and testing a solution based on the analysis while the interns are onsite. This is typically the most rewarding and insightful part of the project for interns and facility staff; bridging the theoretical environment with hands on application. The interns will then conduct a follow-up conference with the appointed hospital contact and the CAH CEO two to four weeks after completing the onsite project.

**MT Flex Program COMMITMENTS**

* Collaborate with MSU-IMSE Department in the delivery of this project.
* Create and coordinate a means for MSU-IMSE interns to apply their knowledge and skills in a rural healthcare setting.
* Request periodic reports regarding progress/outcomes from MT CAH.

**MSU-IMSE Intern COMMITMENTS**

* Apply and incorporate lean process management principles at MT CAHs via a rapid improvement event.
* [May] request data from the hospital related to each project.
* Collaborate with existing Lean projects when applicable.
* Comply with each hospital’s HIPAA requirements.
* Prepare and submit a final report for the facility and MT Flex by September 9, 2022.

**CRitICAL ACCESS HOSPITAL COMMITMENTS**

* CEO involvement with intern in project development. *This is essential.*
* Ensure the key members of the department affected by the project are **on**-**board** and **available** for project participation.
* Hospital staff to cooperate with intern and ensure, to the best of their ability, a positive relationship with the intern.
* Hospital staff to provide the intern with the tools, information and materials that will enable them to complete the project.
* Provide historical data, for process analysis, to be made available to the students at the time of their arrival at the facility.
* Provide housing for intern while on site for two weeks.
* Provide at least one meal per day; preferably two per day.
* Communicate any problems/issues with MT Flex in a timely manner.
* The main project contact and the CEO (if available) participating in a follow-up interview with MSU/MT Flex (scheduled approximately four weeks after the on-site project).

**Eligibility REQUIREMETNS**

* All Montana CAHs are eligible to apply for participation in this project.
* Only complete applications will be considered. A complete application consists of pages 3-7 of this document.
* Complete applications must be received by: **March 31, 2022.**
* If a chosen facility determines they are unable to participate in this project, the next acceptable applicant will be offered the chance to participate.
* Applications are reviewed by MSU-IMSE faculty advisor and project coach for efficacy and appropriateness given the short time frame of the rapid improvement event.

**Project Milestones (subject to change)**

|  |  |
| --- | --- |
| March 1 | Project applications distributed to MT CAHs |
| March 31 | Application Deadline |
| April 20 | Applications reviewed, facilities and interns selected |
| April 20 | Project definition form sent to accepted facilities. |
| April 30 | Intern to facility assignments and schedules finalized |
| May – July | Conduct project planning & scoping calls.  Scheduled 2-4 weeks prior to student arrival. |
| June – August | Interns on site! |
| August - September | Projects completed and summarized. Assessment interviews completed. |

**MT Flex Program Contact**

Jennifer Wagner, Rural Hospital Improvement Coordinator  
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**Application  
Lean Healthcare Rapid Improvement Event Internship**

**Facility Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CEO Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEO EMail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Main Project Contact NAme: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*The Main Project Contact must be available during the project period.*

Will your facility require a background check for the student? This will have no bearing on your selection, but is to help us prepare and plan for the student being on site to do variable time lags in background checks. \_\_\_\_\_\_\_\_\_\_\_YES \_\_\_\_\_\_\_\_\_\_\_\_\_\_No

**Schedule Your Project**

Indicate *all* dates when you can accommodate intern activity at your facility. Key staff members from the department(s) affected by the project and the main project contact **must be available** during the time period.

Rank by preference 1 - 4 or NA

|  |  |
| --- | --- |
|  | June 6 – June 17 *(Must be able to accommodate both interns for this session)* |
|  | June 20 – July 1 |
|  | July 11 – July 22 |
|  | July 25 – August 5 |

**Facility responsibilities and expectations AGREEMENT**

Each must be initialed by both the CEO and the Main Project Contact (MPC) before application will be considered

|  |  |  |
| --- | --- | --- |
| CEO | MPC |  |
|  |  | The main project contact must be available during the project period. |
|  |  | The main project contact will spend time with the intern and assist in defining the project and help with problems that may arise. |
|  |  | The facility is able to provide housing for the intern(s) while on site. |
|  |  | The facility can provide, at minimum, one meal per day, preferable two. |
|  |  | The facility can provide a work station for the intern with internet access. |
|  |  | The main project contact will provide the intern with materials and information necessary to complete the agreed upon project. |
|  |  | The main project contact will pull and provide relevant data before the arrival of the intern, if possible. |
|  |  | The department affected by the improvement project will be informed of project goals and expectations and will actively participate in any analysis and implementation efforts. |

**Describe Your Project Ideas**

Briefly describe 2 rapid improvement events for implementation at your facility in priority order. See list on pages 8-9 for examples of possible projects and their associated metrics. Project selection is determined by mutual agreement between the CAH, MSU-IMSE faculty, project coach based on efficacy and reasonableness.

**PRIMARY PROJECT CHOICE:**

Describe the rapid improvement project the intern will address:

List all stakeholders in the project be sure to include all staff and departments affected?

Explain the issues/problems are you experiencing with the current process.

What metrics will be used to measure the improvements made during the project (see pages 8-9)?

What do you hope to achieve by the end of the two-week event? State in clear, specific terms that are measurable.

Is there existing data available to be used for tracking these metrics?  
 Can collect data prior to intern’s arrival but may need assistance.  
 I may need help determining what data to collect  
 Interns will be able to observe enough events to fully understand the issues/problems in a   
 short period of time.

Yes (please describe)

**SECONDARY PROJECT CHOICE**

Describe the rapid improvement project the intern will address:

List all stakeholders in the project be sure to include all staff and departments affected?

Explain the issues/problems are you experiencing with the current process.

What metrics will be used to measure the improvements made during the project (see pages 8-9)?

What do you hope to achieve by the end of the two-week event? State in clear, specific terms that are measurable.

Is there existing data available to be used for tracking these metrics?  
 Can collect data prior to intern’s arrival but may need assistance.  
 I may need help determining what data to collect  
 Interns will be able to observe enough events to fully understand the issues/problems in a   
 short period of time.

Yes (please describe)

**Required signatures**

***Applications without required signatures will not be eligible for consideration.***

**I have read and understand the timeline, guidelines and criteria for participation in the Lean Healthcare Project.**

Main Project Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_

CEO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_

**APPLICATIONS MUST BE EMAILED OR FAXED NO LATER THAN MARCH 31, 2021!**

**Late, unsigned or incomplete applications will not be considered for this project.**

**A complete application package consists of Pages 3-7 of this application.**

**Send to:**

[**Jennifer.wagner@mtha.org**](mailto:Jennifer.wagner@mtha.org)

**406-457-8039**

|  |  |  |
| --- | --- | --- |
| **Area** | **Department(s)** | **Example Metric(s)** |
| Financial Performance | Business Office | Decrease Time to Process Funds Received |
| Decrease Billing Cycle Time |
| Transcriptions | Reduce # of lines waiting for transcription |
| Reduce # of days/hours of documentation |
| Front Desk/ Check-in/ Admissions/Check-out | Increase accuracy of insurance information |
| Decrease # (non)Insured Patients w/unpaid balances |
| Increase # upfront collections |
| Decrease # of unpaid/unprocessed visits |
| Inventory Management | Supply/ Inventory/ Pharmacy | Reduce amount of inventory ($ or days) |
| Reduce loss associated with outdated inventory |
| Reduce ordering time/errors |
| Reduce search time/ travel time |
| Reduce # of billable items that are not billed out |
| Decrease the amount of $ in lost supplies |
| Patient Scheduling | Clinic/Outpatient Services/Lab/Clinic | Increase the accuracy of time allotted for scheduled appt's |
| Decrease # walk-ins/ increase # scheduled appt's (follow-up visits) |
| Decrease patient cycle times (check-in, lab services, etc.) |
| Staffing/ Cycle Times | Any Department | Reduce amount of non-value added time in any process |
| Decrease search time/travel time |
| Reduce travel distance (layout changes) |
| Decrease set-up/ break-down time |
| Decrease change over time |
| Maximize staffing requirements/ utilization |
| Patient Satisfaction & Patient Safety | Any Department | On time delivery of service (Increase accuracy of arrivals at scheduled start time) |
| Decrease admissions/discharge process times |
| Decrease # of possible patient confidentiality infringements |
| Increase bar code scanning accuracy |
| Increase hand washing events |
| Increase use of preventative measures for those with Falls Risk |
| Increase the documentation of use of preventative measures (Falls) |
| Increase number of falls patients receiving follow-up care/instructions |
| Increase visibility of patient safety measures (call lights, signals, etc.) |
| Improve patient communications with providers/ nurses |

**Project Ideas and Examples**