



Fostering Caregiver-Led Improvement: A Year of Impact with KaiNexus



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Manager of Innovation Programs,
Center for Innovation &
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UMass Memorial Health

FOSTERING CAREGIVER-LED IMPROVEMENT

A Year of Impact with KaiNexus

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The hospitals and services of UMass Memorial Health

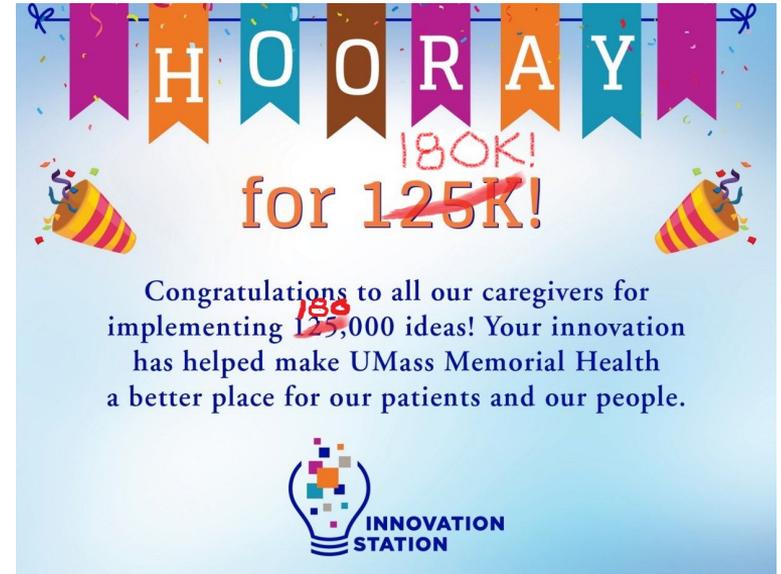
UMass Memorial Medical Center | UMass Memorial Medical Group
Harrington | HealthAlliance-Clinton Hospital | Marlborough Hospital | Milford Regional | Community Healthlink

WHY YOU MIGHT BE HERE



WHAT MAKES UMASS MEMORIAL DIFFERENT?

- Innovation happens at all organizational levels
- 180,000+ front-line caregiver ideas implemented
- Leaders hold regular huddles with their teams
- We listen to our workforce
- All new employees are trained on our idea system
- Ideas are welcomed, embraced and celebrated!



NATIONAL RECOGNITIONS FOR OUR UMMH INNOVATORS

BECKER'S
HOSPITAL REVIEW

Great hospitals in America | 2024

AMERICA'S
BEST-IN-STATE
EMPLOYERS

Forbes
2024

POWERED BY STATISTA



BECKER'S
HEALTH IT Leadership ▾ Finance ▾ Health IT ▾ Clinical Care ▾ Specialties ▾

Innovation

135,000 ideas and counting: How UMass Memorial Health drives change

Eric Dickson, MD, embraces a leadership philosophy that is focused on continuous improvement. At its core, his approach centers around a simple yet meaningful question: "What ideas do you have?"

By: Kelly Gooch Wednesday, December 11th, 2024



U.S. News Announces Inaugural "Best Regional Hospitals for Equitable Access" Recognition

More than 50 hospitals lauded for providing high-quality care to underserved populations.

Forbes 2024
THE BEST
EMPLOYERS
FOR WOMEN

POWERED BY STATISTA



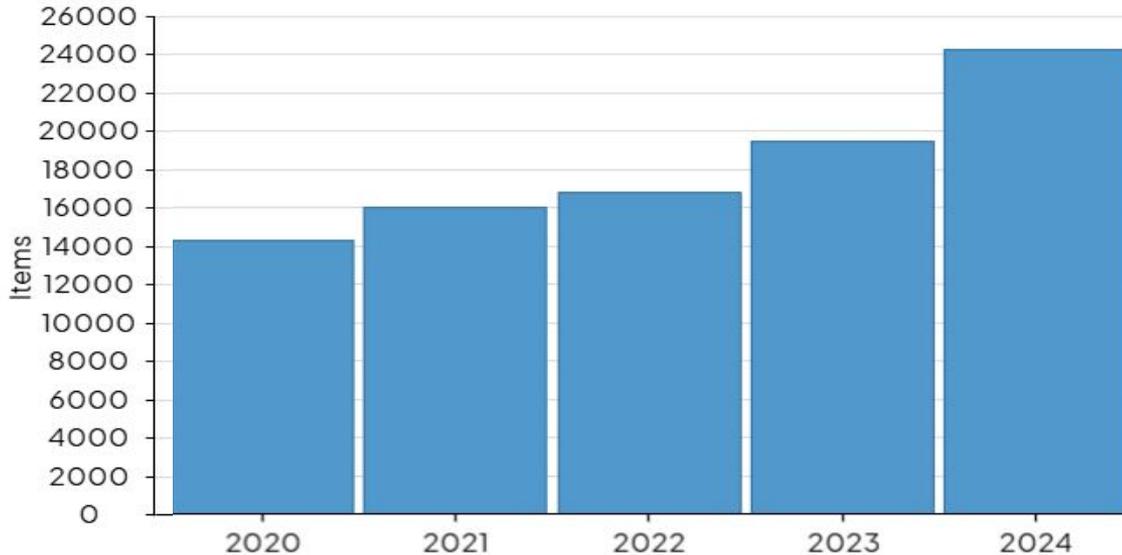
OUR HEALTH CARE SYSTEM



COMPLETED IDEAS TREND

"Every year, we implement more ideas than the year before." – Dr. Eric Dickson, CEO

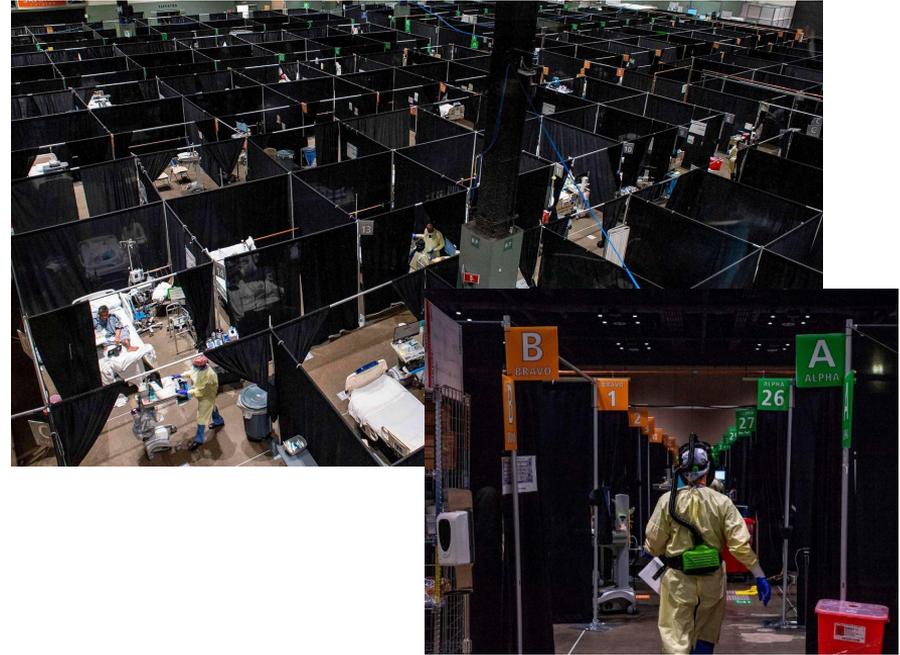
~14,000 – 24,000+ ideas per year



NICU Board Game for Neonatal Resuscitation

MORE THAN JUST METRICS IMPACT

Beyond metrics and financial impact, our Innovation systems have made our workforce resilient

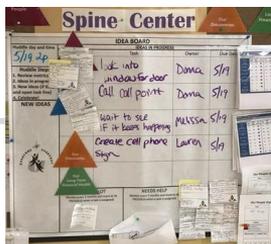


IDEA SYSTEMS TIMELINE

Explore

2014 & prior

Committing Foundational



Emerge

2015-2019

Metrics PDSA



2021-2022

Evolve Virtual Systematic



Emergency

Pivot Accelerate

Expand

2023 - 2025

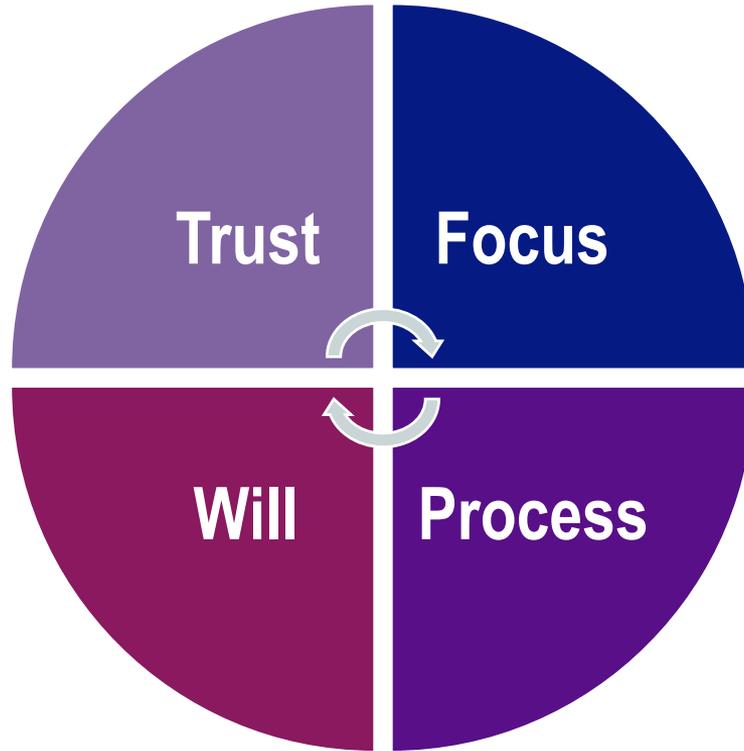
Recognition
Team behaviors
Impact metrics
+50% Innovation Grants
Standard Mgr Training

2026+

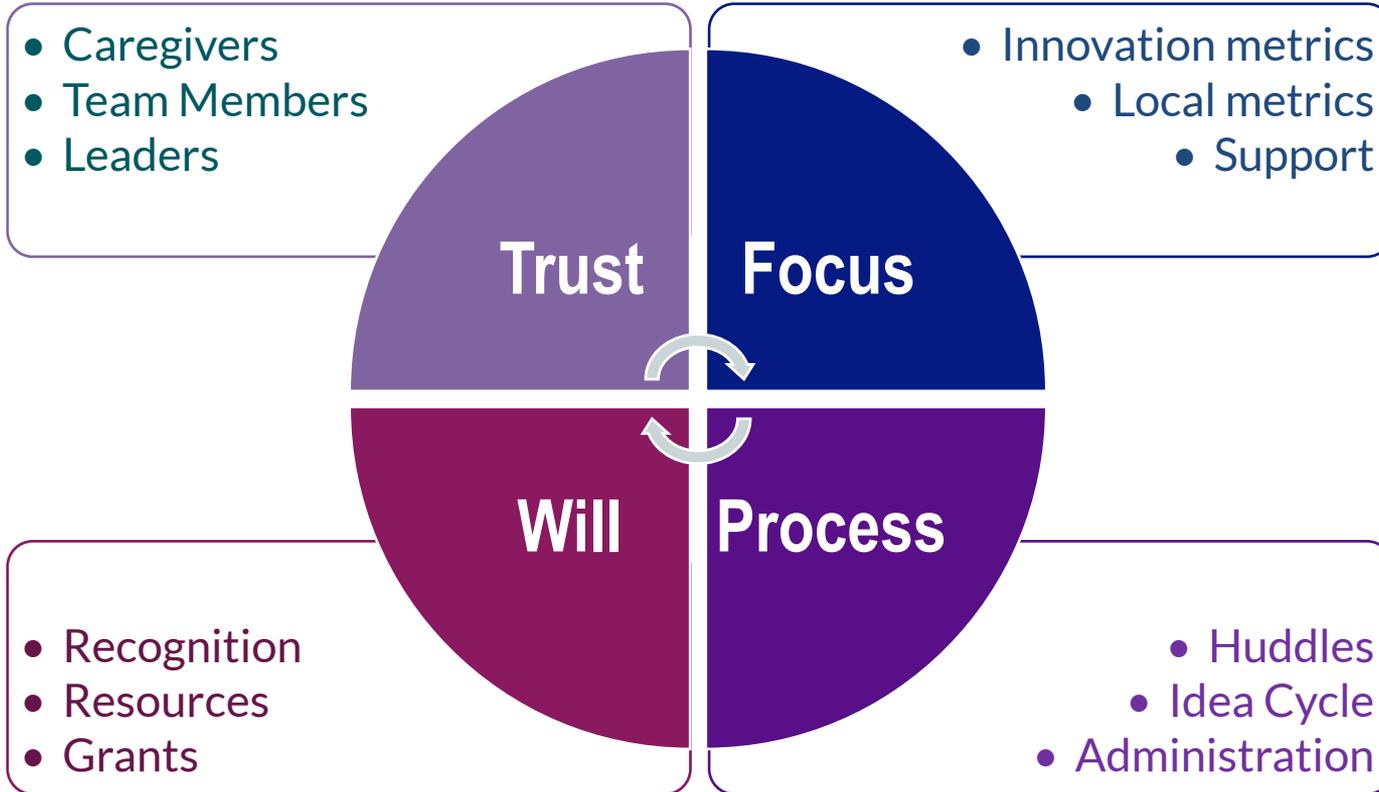
Elevate

Sustainable acceleration
Increase sharing
Require Manager Skill building
Clear collaboration processes

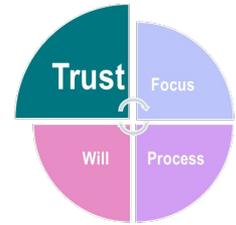
KEY INGREDIENTS



KEY INGREDIENTS



MULTI-LAYERED TRUST



Standards of Respect



TRUST IN THE INVESTMENT



"The effort up front is truly **an investment** that pays big dividends. We may 'lose' an hour of 'productivity' every week by making this protected time, but **this team gets more accomplished in the remaining 39 hours than they ever would have in 40 hours...**"

TRUST TAKEAWAYS



Get moving

- **Model cell:** Start where trust exists
- Build cross-functional teams to identify and **problem-solve around areas of mutual frustration** (start small if needed)
- Establish, measure and enforce **Standards of Respect**

Add the groove

- Roles, goals, standard work and expectations are **defined clearly**
- Work on **trust building** in all directions
- Address trust gaps, **don't ignore** (e.g. team & leader trust training)

Bring the flair

- **Empower teams** to huddle and work ideas without the leader
- Leaders naturally **recognize and support**
- **Complex problems and** change challenges are more feasible

CONSTANT CENTERING OF TRUE NORTH



2014 Idea Board



FY24 & YTD25 Impact

Patient care & experience (~34%)

Caregiver experience & time (~54%)

Our community (~2%)

Our future (~10%)

\$25,000,000



Percentages of ideas are based on caregiver-reported idea impact in the last 18 months (ramped up impact tracking)

DON'T HOPE, MEASURE IT: ACTIVE TEAMS



UMMH Active Teams

FY24 - FYTD25

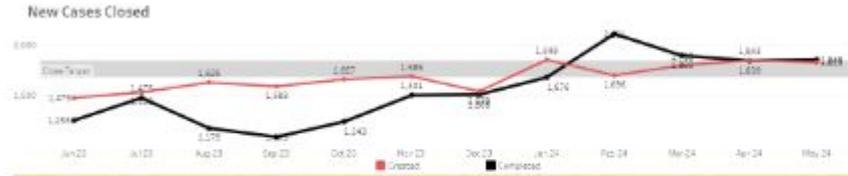


TRUE NORTH CASCADES TO DEPT METRICS TO FOCUS BOARDS

Teams add True North metrics to their huddle boards

Top Team Metrics

Dashboard for Data:



Actionable Findings Cases: Actionable Findings - Tableau Server (umassmemorial.org)

Team Shout Outs

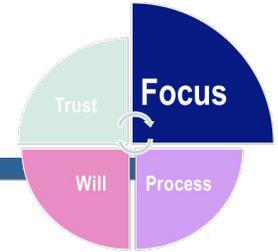
Welcome Kayleigh!

Awesome Job BIB 16587! What an accomplishment, you should be proud!

Congratulations on our Innovators of the Year nomination. Great job

Great job team on making the presentation board.

Shout out to the Team for being involved in the new manager interviews and providing input.



IMPACT MEASURES

Initial Impact Capture

Resolution

Was this successfully implemented?

Yes No

Impact(s):

- Our Future: Cost Savings
- Our Future: Revenue Generation
- Our People: Caregivers Time Savings
- Our People: Caregiver Better Experiences
- Our Patients: Safety & Quality
- Our Patients & Families: Improve Experiences
- Our Community: Supporting our Diverse Communities
- Our Future: Medical Advancements & Shareable Innovation

Metric-Specific Detail Entry

Our People: Caregivers Time Savings

Time Saved:

One-Time Recurring Unknown Amount

Amount

Hour(s) ▾

How did you base the above calculation?

Optional



FOCUS TAKEAWAYS



Get moving

- Don't let teams get overwhelmed by dept metrics – start with 1-2
- Measure & communicate innovation progress, evolve metrics
- Protect and focus dedicated support time, recruit champions

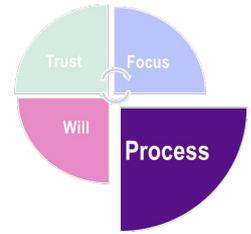
Add the groove

- Clearly align metrics / ideas to key strategies
- Evolve innovation and impact metrics, understand needs, barriers & root causes
- Expand support as the program grows

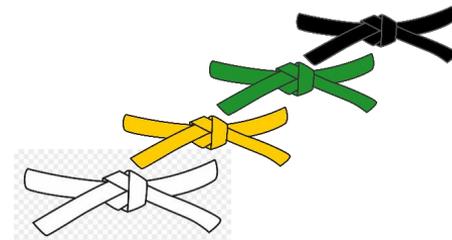
Bring the flair

- Seamless metrics cascade to departments and individuals
- Measure, communicate and reward higher-impact achievements
- Broad, multi-mode, scalable support balancing local and central

INTEGRATED IDEA SYSTEM



MEET TEAMS WHERE THEY ARE



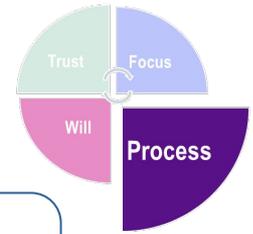
Custom Huddle / Innovation Station Coaching & Support

Lean Belt Training

Technology



PROCESS TAKEAWAYS



Get moving

- Establish a simple core process
- Let teams accomplish the objective their way
- Clarify & simplify where to go for support

Add the groove

- Establish related standard processes & links (e.g. onboarding)
- Train teams on advanced features after they establish foundation
- Use waste & standard work as a foundation for jump-starting ideas

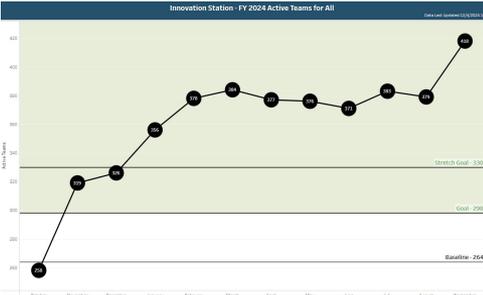
Bring the flair

- Link to related processes for larger projects, skills development
- Plan-Do-Study-Act (PDSA) is a verb: it's THE way of working
- Strong, clear processes for onboarding, collaboration and escalation

FOCUSED INNOVATION SUPPORT



**Innovation/Lean Coaching,
Training & Resources**



**Metrics Strategy, Reporting &
Communications**

Executive Dashboard

Search Locations... [X]

Level Type: [v]

Network Attribute: [v]

Location & Below ID: [v]

- UMass Memorial Health
 - Corporate Division-40
 - Community Healthlink
 - Harrington Hospital
 - HealthAlliance-Clinton...
 - Marlborough Hospital
 - Medical Center
 - Medical Group
 - Milford Regional
 - KaiNexus Support

Email InnovationStation@umassmemorial.org for Support or Coaching

Idea Board | True North Metric: Active Teams

Leading by Example Stack

- Leader & Executive Engagement**
 - Executives Who Have Logged-In During Past 3 Months: 27
 - Executives Who Used System During Past 3 Months: 14
 - Executives Who Have Not Logged In During Past 12 months: 17
 - All Executives: 58

Reports Stack

- Current FY Generated Ideas & UBT Ideas per L2 WMS**

Bar chart showing metrics for units: UMass, UConn, UConn, UConn, non-hospital, hospital, hospital, UConn.

**Infrastructure & Grant
Administration**



WILL TAKEAWAYS



Get moving

- Jumpstart with raffles, and non-monetary recognition (e.g. highlights)
- Focus people and teams with “no time for Innovation” on time savers
- Acknowledge successes & learnings: manage the change curve

Add the groove

- Communicate successes: recognition, skill building, reinforces will
- Leader accountability with education & coaching support
- Link grants to activity for motivation

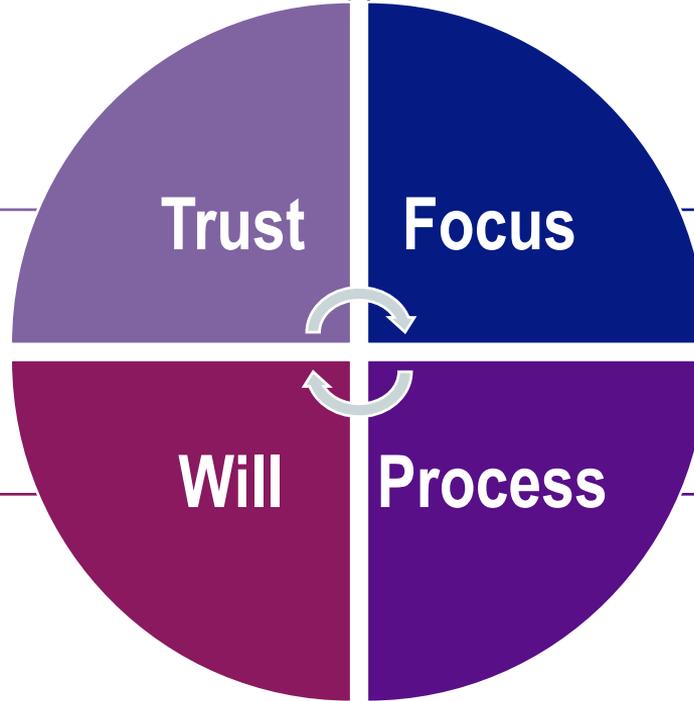
Bring the flair

- Smooth flow of ideas to and from daily work, projects, grants, etc.
- Pull demand from people and teams who are struggling
- Build scale and consistency into motivational elements

WHERE WE'RE GOING NEXT

- Accountability
- Trust-building

- Evolve impact
- Maturity model



- Recognition
- Expand scale

- Accelerate/share ideas
- Reduce waste, expand AI

NEXT STEPS



What is YOUR next test of change?

WE ARE TRANSFORMING THE WAY CARE IS DELIVERED

The Relentless Pursuit of Healing



UMASS MEMORIAL HEALTH IDEA SYSTEMS

APPENDIX

CENTER FOR INNOVATION & TRANSFORMATIONAL CHANGE (CITC)



Strategic Project Management

- Manage cross-entropy solution implementations on major strategic initiatives
- Includes major projects such as new buildings, arena Covid Field Hospital, mobile vaccines, etc.
- Project Managers & Analysts

Innovation & Process Engineering

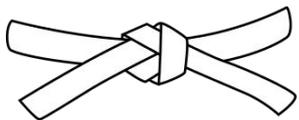
- Train & coach advanced problem solving & improvement across UMass
- Establish and implement Innovation strategy
- Lead major transformation programs and redesigns (solutions not known)
- Master Black Belts, Black Belts, Health System Engineers, etc.

Business Intelligence & Analytics

- Data and reporting in multiple platforms such as Epic, Tableau and others
- Data warehouse design and administration
- Data Analysts, infrastructure experts, report writers, etc.

CITC caregivers collaborate & have skills across functional areas in addition to their primary expertise

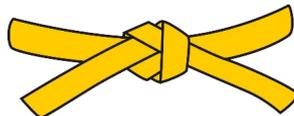
LEAN PROCESS IMPROVEMENT TRAINING



White Belt

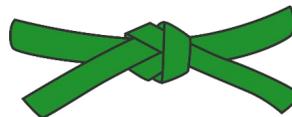
- Idea systems / innovation station
- Intro to Lean
- All Caregivers

Problem Solving A3 Title: Medication Ordering, Administration & Charting		Date: 11/20
<p>Problem Statement: Medication administration errors are a leading cause of patient harm. The current process for medication ordering, administration, and charting is inefficient and prone to error. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>	<p>Background: Medication administration is a critical component of patient care. Errors in medication administration can lead to serious patient harm. The current process for medication administration is inefficient and prone to error. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>	<p>Current State: The current process for medication administration involves multiple steps, including medication ordering, administration, and charting. This process is inefficient and prone to error. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>
<p>Current State: The current process for medication administration involves multiple steps, including medication ordering, administration, and charting. This process is inefficient and prone to error. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>	<p>Target State: The target state for medication administration is a streamlined, efficient process that minimizes errors and improves patient safety. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>	<p>Root Cause Analysis: The root cause analysis identified several key areas for improvement, including medication ordering, administration, and charting. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>
<p>Root Cause Analysis: The root cause analysis identified several key areas for improvement, including medication ordering, administration, and charting. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>	<p>Countermeasures: The countermeasures identified include standardizing medication orders, improving medication administration processes, and enhancing charting accuracy. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>	<p>Implementation Plan: The implementation plan includes standardizing medication orders, improving medication administration processes, and enhancing charting accuracy. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>
<p>Implementation Plan: The implementation plan includes standardizing medication orders, improving medication administration processes, and enhancing charting accuracy. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>	<p>Results: The results of the implementation plan show a significant reduction in medication errors and improved efficiency of the medication administration process. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>	<p>Lessons Learned: The lessons learned from this project include the importance of standardization, process improvement, and communication. The goal is to reduce medication errors and improve the efficiency of the medication administration process.</p>



Yellow Belt

- A3 problem solving for department issues
- Metrics introduction
- Basic Lean tools
- All Caregivers



Green Belt

- A3 problem solving for department issues
- Intermediate Lean and analysis
- Caregivers and leaders who will draft standard work, lead improvements, help with metrics development and may be on larger project teams



Black Belt

- A3 problem solving for cross-department & cross-entity issues
- Advanced Lean & analytics
- Coaches and mentors of others
- Caregivers and leaders who lead the most complex, challenging & strategic improvement programs across UMass

IMPROVEMENT RESOURCES



Lean Education & Resources

- Improvement guidance:
- Reference materials
 - Reporting teams
 - Links for Training
 - For more information

I Need Data!

- Reporting help:
- Reference materials
 - Reporting teams
 - Links for Training
 - For more information

OUR BLUE-SKY FUTURE FOR INNOVATION & LEAN

Leaders living key behaviors

- ☐ Everyone is empowered: Leaders show what needs to be done, don't tell team members how to do it
- ☐ Entities are self-sustaining: "Everyone is a coach"
- ☐ More clear & fast translation of True North to Dept key metrics

Powerful, flexible platform

- ☐ "Hey Siri, log my idea"
- ☐ Universal system to seamlessly manage Lean training
- ☐ Ideas are easily replicated / systematized
- ☐ Caregivers easily know/can find where to go for help (e.g. IS/Epic, facilities, etc.)
- ☐ We seamlessly "connect the dots"

100% buy-in: 100+ ideas per person!

- ☐ Everyone feels trusted & ideas are valued
- ☐ Providers all in
- ☐ Accessible to all caregivers even if not on a computer (e.g. RNs, housekeeping)
- ☐ A way of life, not an extra task.... Just something we do
- ☐ Healthy biome of prioritized ideas
- ☐ Ideas sustain over time & beyond people

Exceptional Impact

- ☐ Patient-generated ideas w/ feedback loops
- ☐ Key metrics/ideas have significant & sustainable patient / external impact
- ☐ Momentum of idea generation to completion
- ☐ Ideas have more clinical focus and enhance Joint Commission compliance
- ☐ Ideas and Lean projects are financially essential (CFOs call us regularly)

We are known as an Innovative Organization!

- ☐ We are getting and offer continuing Innovation education
- ☐ Prospective employees know we are an employer of choice because of our Innovation Culture
- ☐ The Central MA community is aware & confident in us
- ☐ Other hospitals globally and the Lean Community looks to us as a best practice: we are a benchmark
- ☐ We continue learning about other best in class practices

PAM CONNOR



- **Streamlined Check-in and Check-out Processes**

Pam and the team optimized workflows, significantly reducing patient intake effort needed.

- **Staff Reallocation**

With increased efficiency, Pam was able to reallocate staff to more critical areas, maximizing resource utilization.

- **Creation of a Centralized Call Center**

By centralizing patient communication, she enhanced service delivery and improved patient satisfaction.

- **Operational Efficiency Gains**

The clinic saved time and resources, resulting in a smoother experience for both staff and patients.

- **Strategic Leadership**

Pam's leadership in implementing these changes empowered her to focus on greater strategic initiatives.

CHRIS NAVIS

Before Chris, 7 West experienced severe staff turnover, negatively affecting morale and patient care. Through the idea system, Chris engaged caregivers who implemented ideas focused on patient experience, falls, and length of stay, including:

- ✓ Staff notification of patient meals
- ✓ Rowalker for pre-transplant patients
- ✓ Rounding with patient
- ✓ Adjusted Clinical Kidney Pathway



7 West has become a sought-after floor, known for its innovative culture and exceptional team collaboration.

EVOLUTION OF VIRTUAL BOARDS

VIRTUAL IDEA BOARD OPTIONS

Many of us have had to do our work a little differently as we've been remote due to the COVID-19 pandemic. Here are a few quick and easy tools to set up an electronic Idea Board for your teams to review on a virtual huddle.

EXCEL



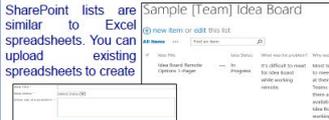
Excel can be used to create simple columns that align with the Idea Card:

- Idea Originator
- What's the problem?
- Why is it happening?
- Idea
- Date Implemented

Different tabs can be used for both new ideas and completed ideas. The Ancillary Applications team created a main Idea Board tab (above left) with additional tabs for more specific idea details.

SHAREPOINT

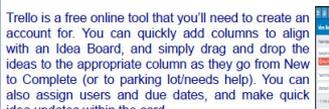
SharePoint lists are similar to Excel spreadsheets. You can upload existing spreadsheets to create



lists, or create one directly from SharePoint. Columns can align with the Idea Board card. Ideas can be submitted from grid view (above) or form view (left). Users can easily change the status of an idea (New, In Progress, Complete), and add more detail in the respective columns.

TRELLO

Trello is a free online tool that you'll need to create an account for. You can quickly add columns to align with an Idea Board, and simply drag and drop the ideas to the appropriate column as they go from New to Complete (or to parking lot/needs help). You can also assign users and due dates, and make quick idea updates within the card.







INNOVATION STATION



1. Facilitator (co-facilitator reflecting, posing questions, "Op of the day, other")
2. Review team performance metrics
3. Go to Ideas in progress; and share updates
4. Review parking lot ideas for consideration
5. Go to "new ideas" and review and prioritize
6. Celebrate!

UMatter Central - Reach 55% registration (milestone by Sept. 30, 2021 employees only, not contractors)

Innovation Station - Reach 90% activation across network (including trainings) by Sept. 30, 2021. As of June 5th, 96.4% of all Clinicians are active (54,695/56,541)

Caregiver Engagement - Exceed FY2020 survey participation (50 to 75 TBSD)

Recognition/Appealation - FY 2021 focus is on UMatter Central registration. In FY22, shift metric from UHC registration to UHC usage (TSD)

New Ideas		Ideas in Progress - Assigned, Planned, & Active	
Title	Author	Title	Owner
Entity Engagement - Potential "Club Hub"	ROBERT PITNEY	Improving Team's A.R.E. training completion rates	JENNIFER ADAMS

Resources

Links to Boards in Innovation Station

Resources & Training Basics 101 Videos PICK Chart

Team Encouragement Dashboard

Parking Lot

No results matched your filters.

Needs Help - Escalation

Title	Escalation
UMatter Central	Grant Funding

Resolved Ideas (FY)

Title	Completed
Do monthly idea of the month	Jul 01, 2021
CX Identity	Jun 07, 2021

IMPACT MESSAGING EXAMPLE

We need You!

Now more than ever, we need you - **our army of innovators** - to call out ways to save money and operate more efficiently. We've made it easy to share your cost-saving ideas with us. Three cost-related flags have been added allowing you to tag an idea as:

 Saves Money / Increases Revenue

 Green / Sustainable Idea

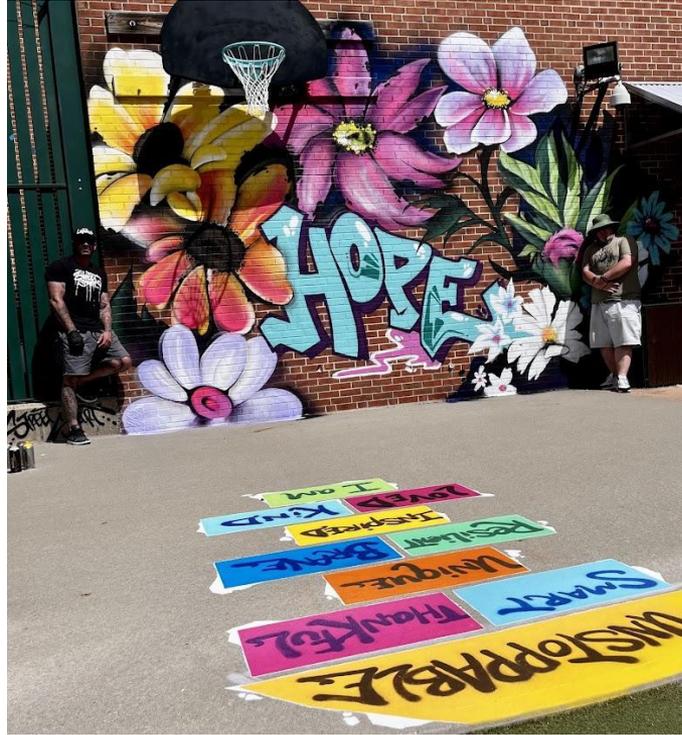
 Potential System Financial Benefit - Need Leadership Support

When you create a new idea, chose one or multiple tags from the new "Flag" drop-down list. If your idea will need help from leadership, chose "Potential System Financial Benefit" and the idea will be escalated to our Financial Recovery Workgroup for review.

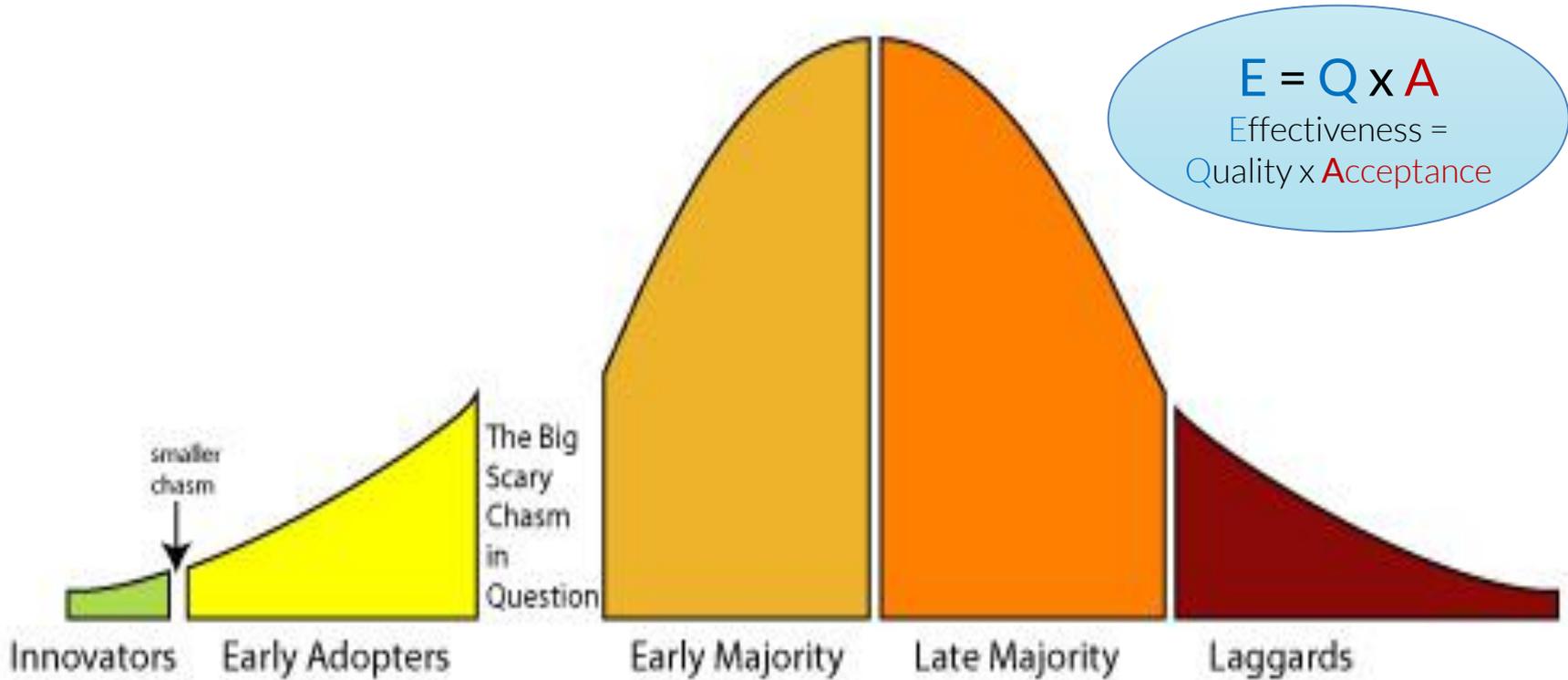
[On the Hub](#) -- [Message From Eric: Next Steps Toward Financial Improvement](#)

Continue

MORE GRANT EXAMPLES



MANAGE, DON'T AVOID REALITY



Geoffrey Moore's 'Crossing the Chasm' diagram
circa 1991

INNOVATION: A PROCESS WITHIN OUR MANAGEMENT SYSTEM

- 1 Strategic Planning and Execution
- 2 Annual Goal Setting, Alignment, and Performance Management
- 3 Continuous Daily Improvement
- 4 Large-Scale Improvement Events (Kaizen)
- 5 Standards of Respect
- 6 Operating Budget
- 7 Business Development and Capital Investment
- 8 System Development and Support Services
- 9 Philanthropy
- 10 Governance

