

The background of the slide is a detailed architectural drawing of a hospital floor plan. It includes various rooms such as 'BED RM 2' (10'0" x 12'4"), 'FOYER', 'STOLE WALL', and 'BALCON ABOVE'. Dimensions like '56'-8"', '20'-0" x 21'-4"', and '16'-0"' are visible. In the top left corner, there is a 3D rendering of a desk lamp. At the bottom, there are several drafting tools: a large set square, a compass, a yellow ruler, and four different colored markers (green, blue, black, and red).

THE UNCOMMON LEADER

A PROCESS TO CREATE
THE NEW AMERICAN HOSPITAL



TUL OBJECTIVES

CUSTOMER SATISFACTION (HIGH SATISFACTION)

1. IMPROVE CUSTOMER RETENTION (PROFITABILITY) & ABILITY TO ATTRACT NEW BUSINESS (SHARE).
2. CREATE “STRATEGIC CUSTOMER RESPONSE” MINDSET & RETROFIT ORG FOR USERS AND DOERS.
3. INCREASE ORG FLEX, “LOOSENED UP” SYSTEM FOR RAPID, ON-TARGET CUSTOMER RESPONSE.


QUALITY IMPROVEMENT (HIGH QUALITY)

4. IMPROVE & STABILIZE BOTH QUALITY OF PEOPLE & WORK PROCESSES.
5. ACCELERATE CLINICAL & NON CLINICAL WORK PROCESS STANDARDIZATION TO MINIMIZE VARIANCE (ERRORS, COST, WASTE, REWORK, RISK EXPOSURE).
6. REDUCE MANAGEMENT VARIANCE: NEW SYSTEMS, TOOLS, “WAYS OF DOING THINGS.”

COST & EFFICIENCY STREAMLINING (LOW COST)

7. COST EFFICIENCIES ON KEY BUSINESS PROCESSES BY EFFECTIVE MGMT OF TIME, PEOPLE & DOLLARS.
8. MAKE DECISIONS ON BASIS OF COMPETENCE & NEARNESS TO PROBLEM, NOT POSITION.
9. IMPROVE SERVICES COMPETITIVE POSITION SERVICES BY REDUCING CYCLE TIMES & GRIT REMOVAL.

PEOPLE STRENGTH (BEST PEOPLE)

10. CREATE LEADERSHIP CADRE ABLE TO CHANGE, ACHIEVE KEY RESULTS & MEET ORG DEMANDS.
 11. INTENSIFY VALUES & MISSION; INCREASE TEAM COOPERATION; BREAK DOWN BARRIERS.
 12. PROMOTE AGGRESSIVE “CAN DO” ATTITUDE & TEAM SPIRIT AMONG STAFF: MOVE FROM PASSIVE DEPENDENCE TO CHANGE ORIENTED INTERDEPENDENCE.
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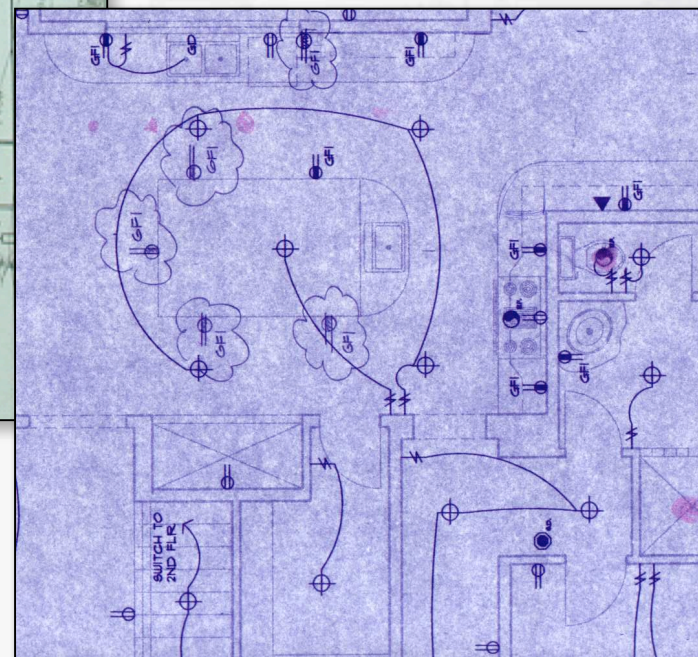
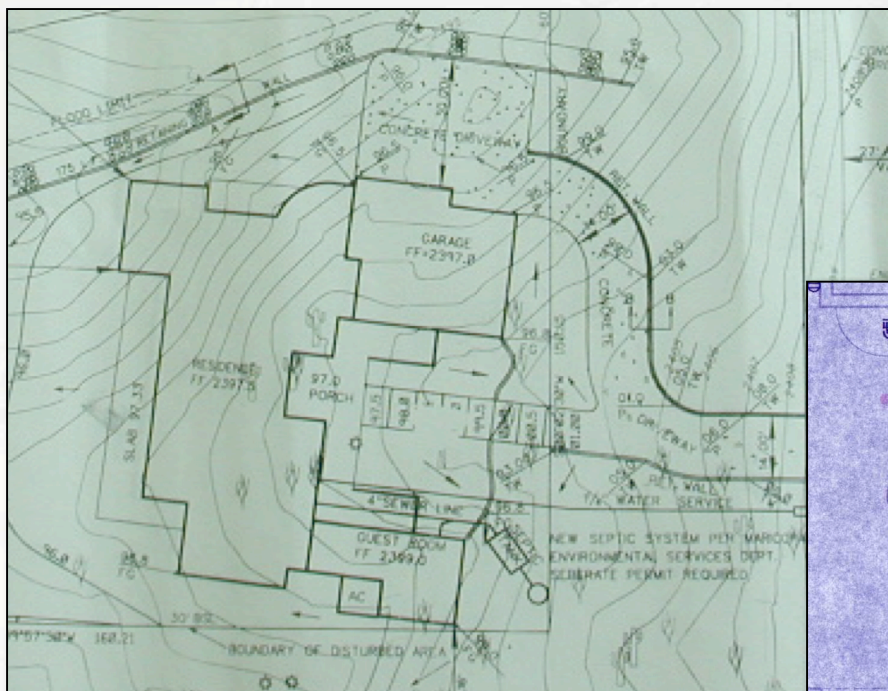


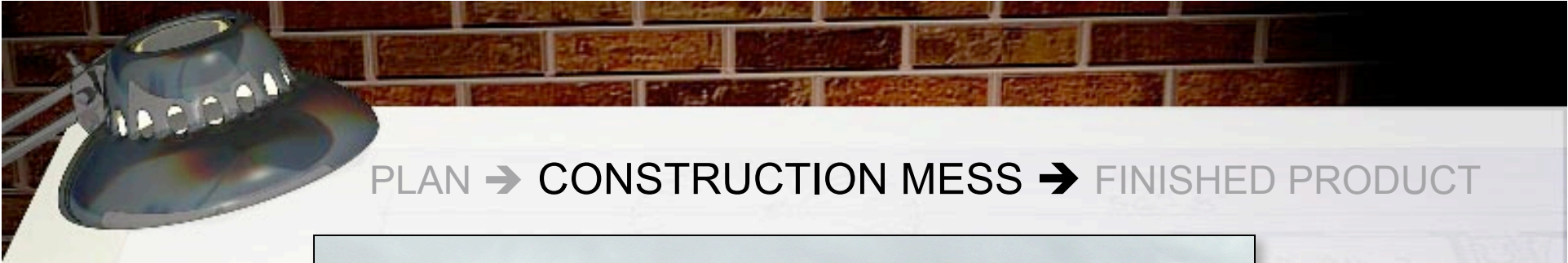
TUL CHARACTERISTICS

1. FULLY INTEGRATED APPROACH, CUSTOMER, EMPLOYEE & PHYSICIAN SATISFACTION; QUALITY MGMT; COST MGMT
2. CUSTOMIZED TO EACH ORGANIZATION'S NEEDS
3. SYSTEMIC TRANSFORMATION, NOT PROGRAMMATIC TWEAKING
4. LASTING CHANGE IN ORGANIZATION CULTURE
5. ALIGNS CHANGE/PERFORMANCE WITH MISSION/VALUES
6. BEST PRACTICES FOCUS + HIGH STANDARDS + OPEN-ENDED
7. EXECUTIVE LED, MANAGEMENT DRIVEN, ASSOCIATE OWNED
8. REPLACES SEGREGATION WITH INTEGRATED TEAM UNITY
9. BUILDS ACCOUNTABILITY INTO THE SYSTEM
10. FAST PACED; PARTICIPATION FROM ALL



PLAN → CONSTRUCTION MESS → FINISHED PRODUCT





PLAN → CONSTRUCTION MESS → FINISHED PRODUCT



PLAN → CONSTRUCTION MESS → FINISHED PRODUCT



TRANSFORMATION PLAN

**MD: TEAM
& MUSCLE
BUILDING**

READINGS
ASSESSMENTS
CASE STUDIES

2 WKS.

2 DAY
SEMINAR
SESSION

2 WKS.

MANAGEMENT
FILM SHOWCASE/
WORKSHOPS

EVERY 2 MOS.

5 MORE
SESSIONS

MANAGER
BEHAVIOR
CHANGE

MANAGEMENT
LIBRARY

MANSYS

ASSIGNMENTS &
MENTORS

WORKOUT
SESSIONS

CHANGE MODULES
• BHAG COUNCILS
- HIGH SATISFACTION
- HIGH QUALITY
- LOW COST
- BEST PEOPLE
• DETAILED ACTION PLAN

**OD: HIGH
BUSINESS
PAYOFFS**

ORGANIZATION
CHANGE
IDEAS

DO IT
GROUPS

EVERY 2 MOS.

5 MORE
CHANGE
MODULES

ORGANIZATION
& SYSTEM
CHANGE

JUST DO ITS

IDEA ENGINE
• CUSTOMERS
• VENDORS

RAPID DIG
EXPANSION

**SUPPORT:
SYSTEMS
& SKILLS**

COORDINATION COUNCILS
• VISION
• MANAGEMENT ACTION
• SOCIALIZATION ACTION
• COMMUNICATION ACTION
• TRAINING ACTION
• RECOGNITION ACTION
• PHYSICIAN ACTION

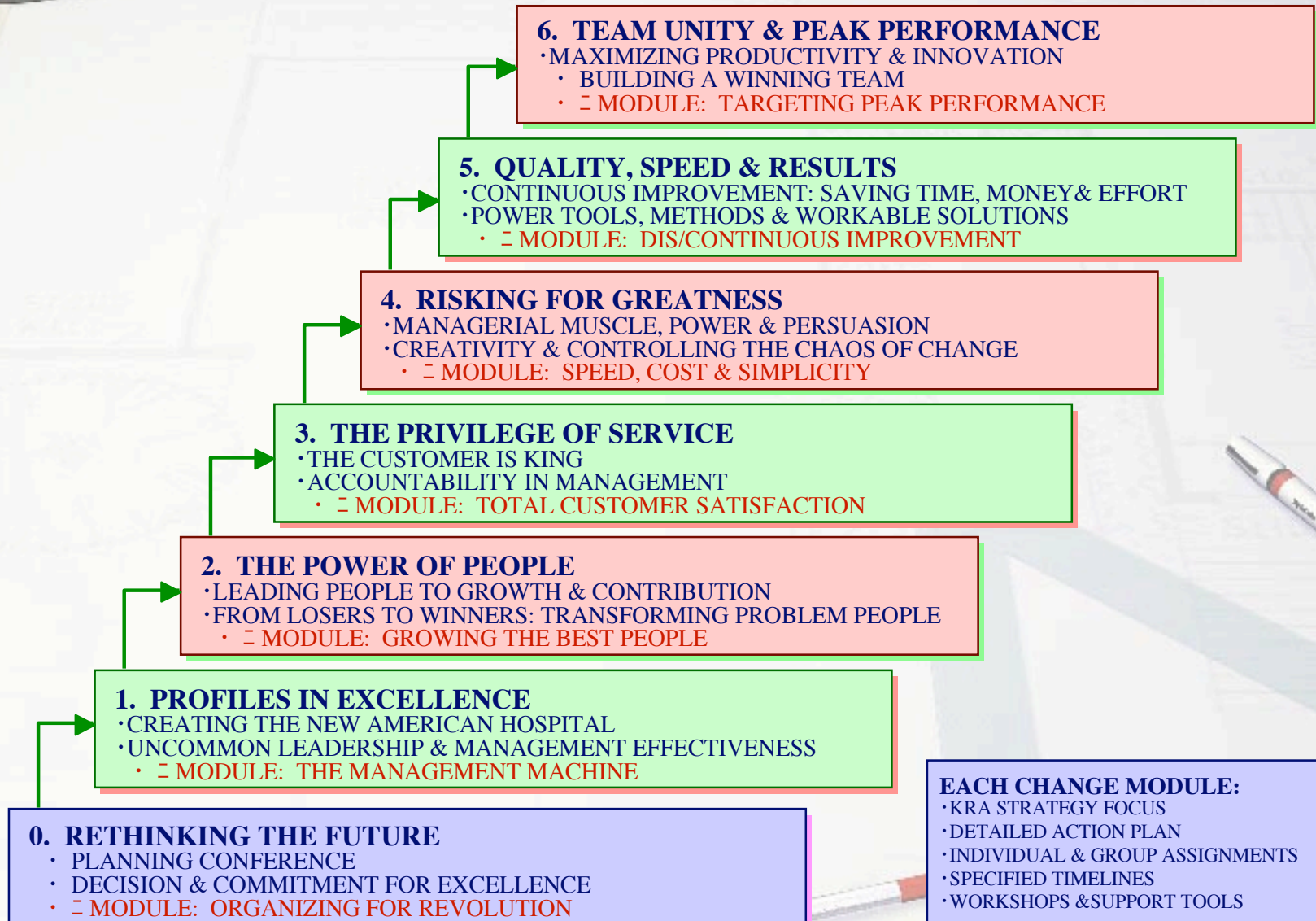
MASS CASCADING
• ASSOCIATES
• PHYSICIANS

ORGANIZED &
DRIVEN CHANGE
EFFORT

MANAGEMENT
INSTITUTE
• GUIDES, WORKBOOKS
• CORE CURRICULA

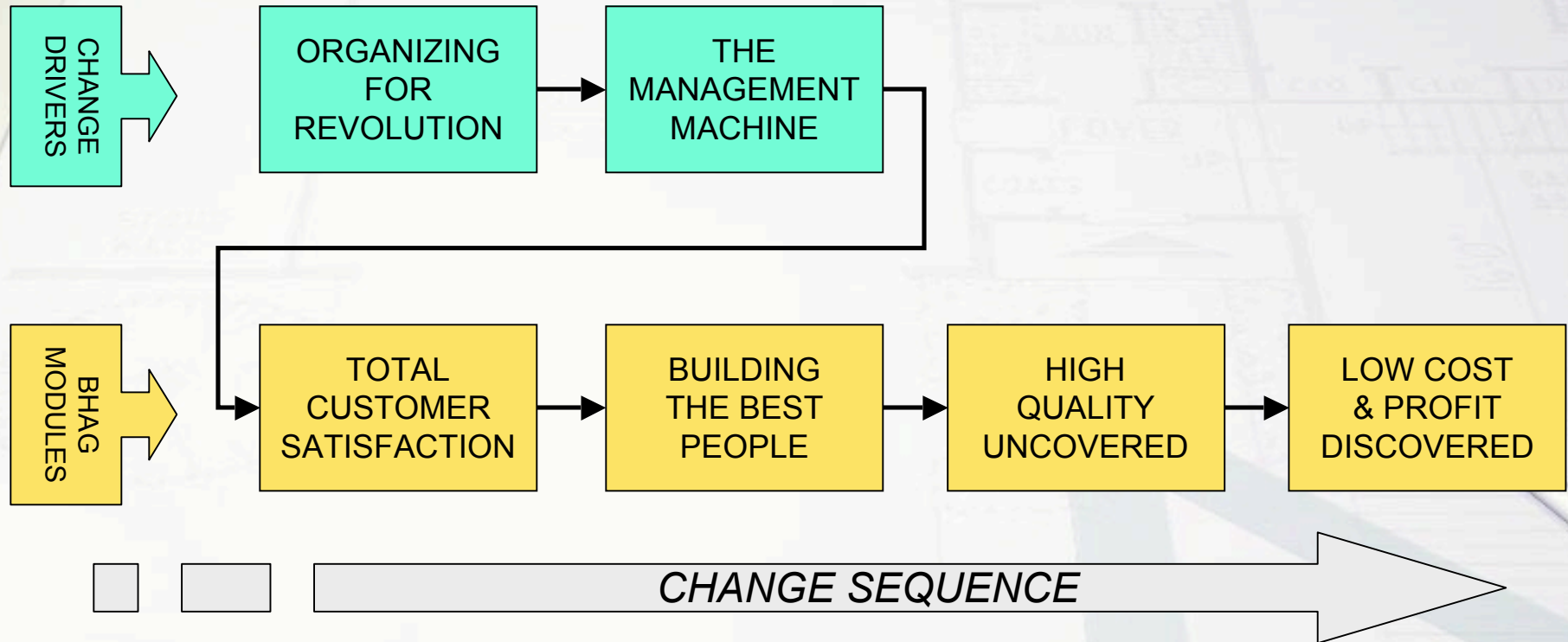
EXECUTIVE ROLES
• STRETCH GOALS/BHAGs
• LEAD THE CHANGE!
• OUTLIER REMOVAL
• STRUCTURE CHANGE

A MODULAR APPROACH LINKING MD, OD & HUMAN EFFORT



MODULE LEADERSHIP

MANAGING CHANGE IN CHUNKS



WINDS OF CHANGE

PHYSICIAN FEEDBACK

MODULE GUIDES TO
BEST PRACTICES

CUSTOMER FEEDBACK

MANAGER NEEDS

EMPLOYEE FEEDBACK

TOP
DOWN

ANGER
CONFUSION
FRUSTRATION

STRAIGHT TALK
NEW SKILLS
PARTICIPATION

WORK³

RESULT\$!

BOTTOM
UP

JDI

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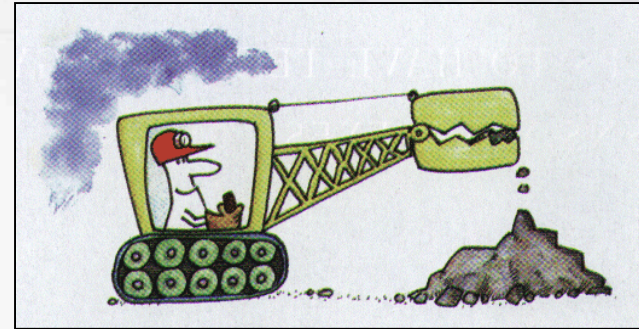
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DO-IT GROUPS

- FOCUS: KRAs, VALUES, EXCELLENCE—OR DON'T DO IT!
- INVOLVE 3-7 PEOPLE & KEY UNITS—30 DAY DEADLINE!
- PICK DOABLE PROBLEM

*—90% OF WHAT MUST BE DONE = “LOW HANGING FRUIT”
—MANY DIGs CAN PIECEMEAL HUGE PROBLEMS*

- IMPROVEMENT, NOT PERFECTION = C.I.
- MASSIVE CHANGE—GOAL IS 2 OR 3 X FTE COUNT
- PEOPLE GROWTH MORE IMPORTANT THAN SOLUTION
- SOLUTION MUST BE PRACTICAL, AFFORDABLE





LEADER ASSIGNMENT COMPLETIONS

MANAGERS > 90%								
GRAD REQUIREMENTS %								

IN-HOUSE INNOVATION (DIGs & JDIs)—CUMULATIVE

INNOVATION

# IDEAS RECEIVED								
# IN PROCESS								
# DONE								

ASSOCIATE PARTICIPATION

% NAH/VALUES TRAINED								
% DIG TRAINED								
% ON 1 DIG								

RESULTS

R.O.I. ESTIMATE

HARD TANGIBLE \$								
CONSERVATIVE SOFT \$								

CUSTOMER SATISFACTION

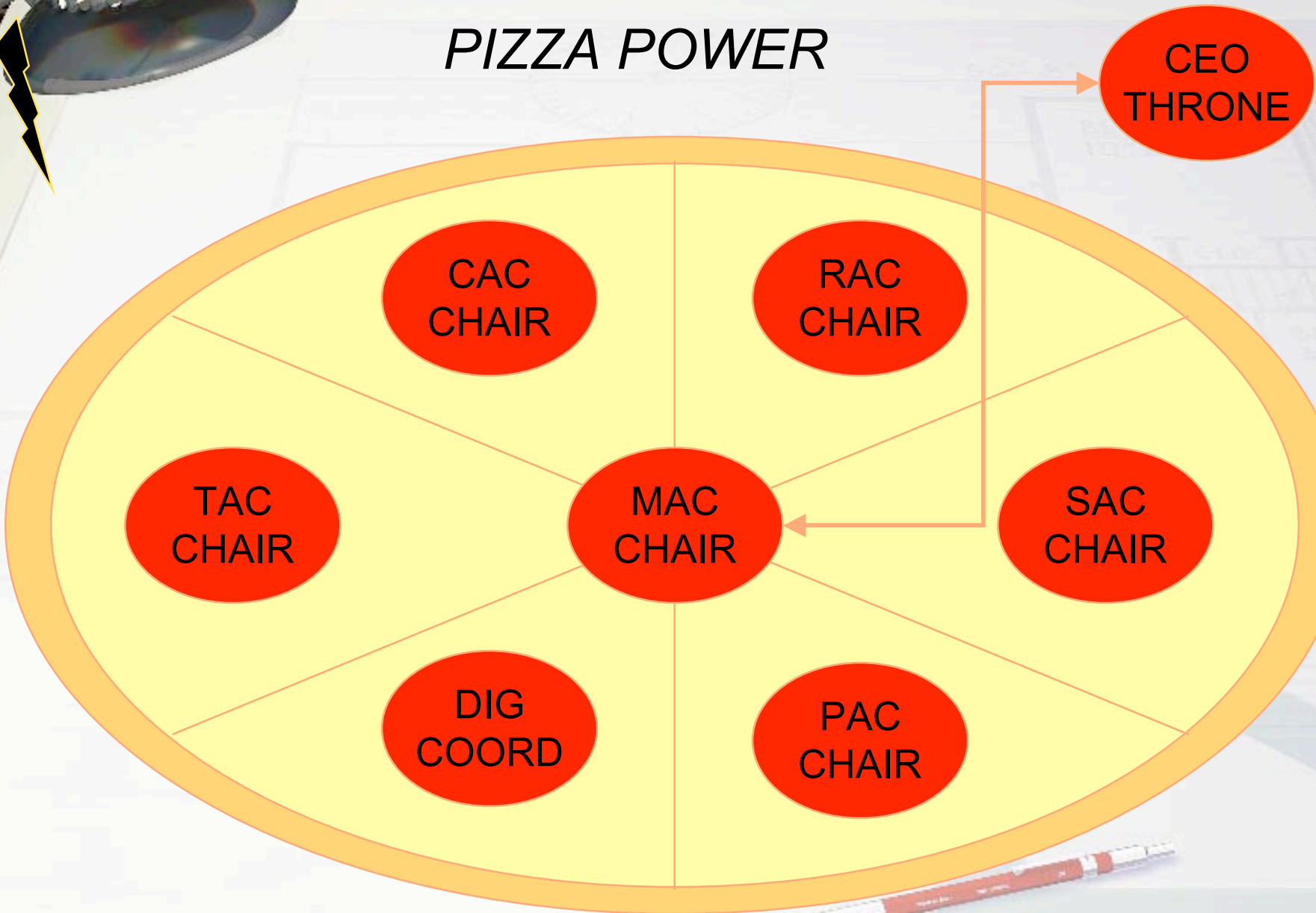
% ABV AVG & EXCELLENT								
% EXCELLENT								

ASSOCIATE MORALE

% RECOMMEND ORG								
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PIZZA POWER





INITIAL TRAINING NEEDS

WAVE I

- VALUES IN SIMPLIFIED FORM
- DIG PROCESS/ROLES/FORMS/EXPECTATIONS
- ROI CALCULATIONS
- DIG CHAIR TRAINING

WAVE II

- DO-IT PROCESS
- CUSTOMER SERVICE STANDARDS
- PROFESSIONAL PRESENTATION

WAVE III

- MANSYS FORMS
- CI RESOURCE PEOPLE

WAVE IV

- TEAM LEADERSHIP ASSESSMENT

THE NEW TRINITY: MEASURES OF OUR SUCCESS

TNT BHAGs

2002 Scoreboard

Current Period and Targets reflect YTD results

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HIGH PATIENT SATISFACTION

MEASURES	2001 Baseline	Current Period	BHAG Target
Patient Satisfaction – Overall Percentile Ranking	44 th	25 th	95 th
Inpatient	27 th	12 th	95 th
Outpatient Surgery	71 st	55 th	95 th
Outpatient Testing & Therapy	63 rd	34 th	95 th
ER	22 nd	13 th	95 th

HIGH QUALITY

MEASURES	2001 Baseline	Current Period	BHAG Target
Overall Clinical Effectiveness	93.6%	94.7%	94.3%
CHF Readmission			
30 Day	19.8%	19.8%	5%
90 Day	34.0%	24%	25%
% of ED Asthma Patients educated	41.3%	50%	100%
% of Patients stating pain was successfully controlled	83%	86.5%	100%
C-Section Rate	23.3%	22.3%	19.5%

LOW COST

MEASURES	2001 Baseline	Current Period	BHAG Target
Cost per Adjusted Discharge	\$4,630	\$4,805	\$4,795
Days in A/R	63.28	56.14	60
Operating Income	Breakeven	\$351,000	\$30,000
Average Length of Stay	4.09	4.08	4.00

BEST PEOPLE

MEASURES	2001 Baseline	Current Period	BHAG Target
Learning Hours Completed Per Associate	29.34	33.5	40
Associate Satisfaction Survey Percentile Ranking	99 th	99 th	99 th
Total Turnover Rate	17%	15.88%	<14%
# of Ideas Implemented	821	1,201	4,000





EXECUTIVE BEHAVIOR EXPECTATIONS

GETTING ROI OUT OF INTELLECTUAL CAPITAL

1. DIRECTION—ESTABLISH ORG/DEPT BHAGs
2. LEAD BY EXAMPLE—DIG PARTICIPATION
3. SPEED APPROVALS → RESULTS & MOTIVATION
4. ATTACK SYSTEM BARRIERS, REMOVE RED TAPE
5. RECOGNITION—INDIVIDUAL IDEA RESULTS,
CONSIDER HOUSE-WIDE PAYOFFS!
6. MONITOR IMPLEMENTATIONS BY DEPT → 2-4/FTE
7. RESPOND TO POOR/NON PERFORMERS
8. FOSTER OPEN CULTURE/LEARNING ORGANIZATION



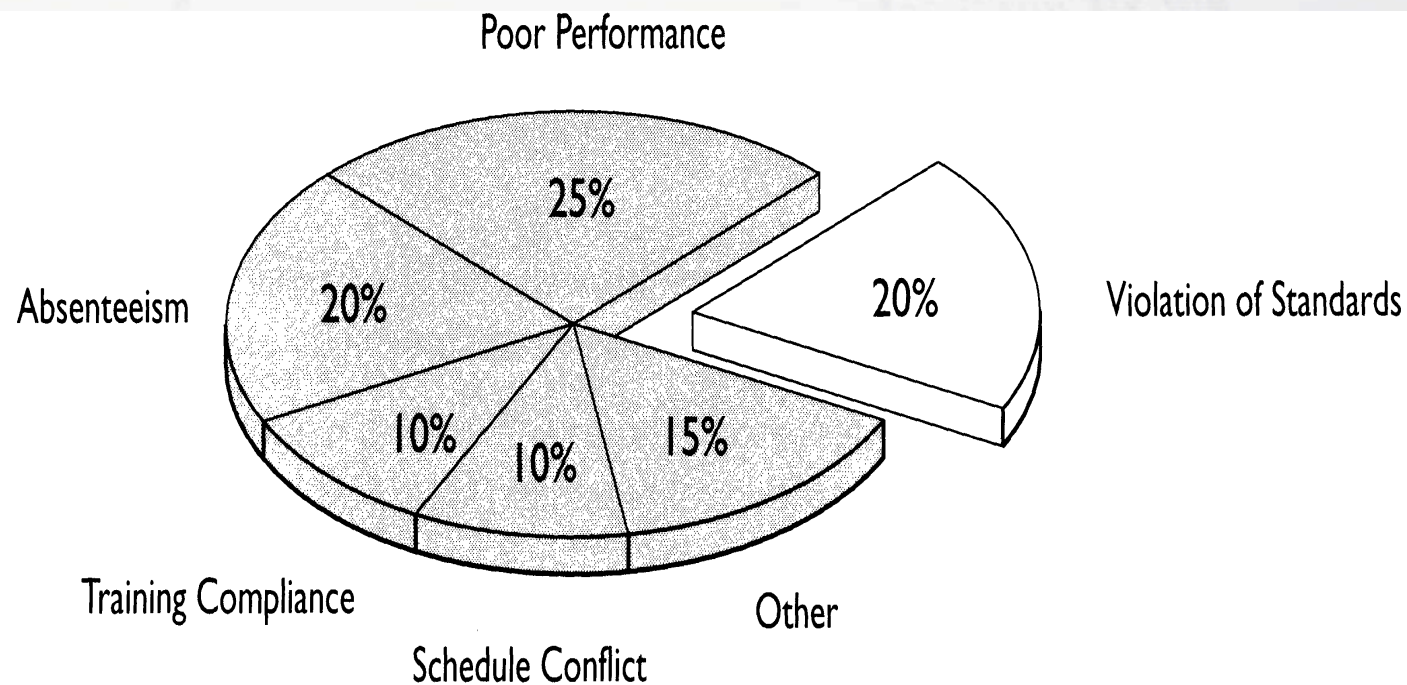
15 BASIC MISTAKES OF SURVIVING ORGANIZATION CHANGE

1. EXPECT SOMEBODY ELSE TO REDUCE YOUR STRESS
2. **DECIDE NOT TO CHANGE**
3. ACT LIKE A VICTIM
4. **TRY TO PLAY THE NEW GAME BY THE OLD RULES**
5. SHOOT FOR A LOW-STRESS WORK SETTING
6. **TRY TO CONTROL THE UNCONTROLLABLE**
7. CHOOSE YOUR OWN PACE OF CHANGE
8. **FAIL TO ABANDON THE EXPENDABLE**
9. SLOW DOWN
10. **BE AFRAID OF THE FUTURE**
11. PICK THE WRONG BATTLES
12. **PSYCHOLOGICALLY UNPLUG FROM YOUR JOB**
13. AVOID NEW ASSIGNMENTS
14. **TRY TO ELIMINATE UNCERTAINTY & INSTABILITY**
15. ASSUME "CARING MANAGEMENT"* SHOULD KEEP YOU COMFORTABLE.

*LETTING YOU STAY IN YOUR COMFORT ZONE COULD BE THE MOST COLD BLOODED MANAGEMENT MOVE OF ALL. CARING MANAGEMENT DOES WHAT WORKS & GETS RESULTS WHICH KEEPS THE ORGANIZATION ALIVE & PROVIDES ALL OF US WITH A JOB.

—From a report of now defunct Arthur Anderson

TAKING SERVICE VIOLATIONS SERIOUSLY



—Taken from the Pensacola Baptist Turnaround Case
Health Care Advisory Board

EXCELLENCE IS ATTITUDE



START WITH A "K" CAR...



BOYS AND GIRLS, THERE AIN'T NO FREE LUNCHES IN THIS COUNTRY. AND DON'T GO SPENDING YOUR WHOLE LIFE COMMISERATING THAT YOU GOT THE RAW DEALS. YOU'VE GOT TO SAY, "I THINK THAT IF I KEEP WORKING AT THIS AND WANT IT BAD ENOUGH I CAN HAVE IT." IT'S CALLED PERSEVERANCE.

—Lee Iacocca

→ ...TO GET TO PROWLERS & VIPERS

