



The Integrative Nurse in Value-Based Care - Lean as an Enabler

Presented by:



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Shocking State of Healthcare



- 90 million Americans with chronic diseases account for 70% of health care costs
- Health spending in the United States has reached an estimated \$2.9 trillion in 2013 while overall growth has remained low.
- Adoption of Lean remains in its infancy

Agenda

- State of Affairs in Healthcare
- Top-Five attributes of the Integrative Nurse
- Top-most challenges in realization
- Groups – how 'Lean Thinking' can close the gaps to realizing the vision
- Collaborate on the best 'Lean Methods' to leverage
- Facilitated audience discussion about what's possible with a 'Lean Thinking' approach in Healthcare



Let's Get to Know One Another

Form Groups: Discuss / Report-Out

Top Things We'd Like to Learn

Prepare to report out:

Group's Top 2 Objectives for this workshop?

Healthcare Expertise – 1 to 5 Scale

Lean Expertise – 1 to 5 Scale

Overview of State of Healthcare

- Aging Population, Longer Life Span & Prevalence of Chronic disease contribute to new demands on healthcare organizations.
- Triple/Quadruple Aim
- Nurse / Clinician Workforce
- ANA Healthy Nurse Healthy Nation 2017



What is an Integrative Nurse?

- Specific way of being-knowing-doing
- Relationship-centered interaction with patient, family & friends
- Skilled, purposeful, results-oriented, & structured
- Purpose of promoting achievement of whole person/whole system healing



Integrative Nurse Coaching is a vehicle for moving the integrative health care paradigm forward.

Attributes of the Integrative Nurse-Vision

- Mindfulness
- Engaged Resiliency
- Flexibility to Optimize the Environment (Internal & External)
- Connectedness to Purpose, Passion, and Healing
- Heart-Centered Listening



TOP-MOST CHALLENGES OF REALIZING THE VISION



1. The Clinician & Staff Experience

2. Cost of Care

3. Quality of Care

4. Culture Transformation

Group Exercise

- Form Groups, pick a facilitator, scribe and time keeper
- Discuss and capture on the provided worksheet:
 1. To what degree (low to high) can Lean Thinking and approaches work to close the gap on this (these) challenge issues?
 2. Which Lean Thinking methods or approaches or philosophies would make the largest impact on the challenge?
- Report Out (Scribe)



Continuum - Degree "Lean Thinking" Impacts Gaps to the Integrative Nurse Vision

#:	Topical area of discussion:	Column 1	Column 2	Column 3	Column 4	Column 5
1	The Clinician & Staff Experience - Gaps and Challenges include: Training, retention, personal well-being, being given a voice, tools to do the work and support their passion and purpose. Providing continual programs and development to cope with on-going changes to demographics, technologies and regulations.	Low Impact - Lean Thinking and Methods logically can NOT make much of a difference with these issues.	<<<<<< 25% of Gap <<<<<<	Lean Thinking and Methods can impact about 50% of the gap.	>>>>>>75% of Gap >>>>>>	Lean Thinking and Methods can make a HUGE difference on the gaps - up to 100%.
2	The Cost of Care - Gaps and Challenges include: Training and retention for the clinicians. Patients (consumers) preferences. Transitional process for the patient and the providers with the healthcare system, building long term relationships with patients, practitioners and healthcare systems. Providing a downstream versus upstream methodology in the way we deliver care.	Low Impact - Lean Thinking and Methods logically can NOT make much of a difference with these issues.	<<<<<< 25% of Gap <<<<<<	Lean Thinking and Methods can impact about 50% of the gap.	>>>>>>75% of Gap >>>>>>	Lean Thinking and Methods can make a HUGE difference on the gaps - up to 100%.
3	The Quality of Care - Gaps and Challenges include: Improving patients experience, engaging and involving them in sharing of information and creating a win-win scenarios. Clinicians, Staff & Patients: How they would honestly rank their trust in us as employers and providers of care.	Low Impact - Lean Thinking and Methods logically can NOT make much of a difference with these issues.	<<<<<< 25% of Gap <<<<<<	Lean Thinking and Methods can impact about 50% of the gap.	>>>>>>75% of Gap >>>>>>	Lean Thinking and Methods can make a HUGE difference on the gaps - up to 100%.
4	The Culture of Care- Gaps and Challenges include: Ensuring clinicians and staff being used to their full training and expertise. Changing the current 'downstream healthcare methodolgy' to one supporting the overall decreasing our cost and spending while at the same time being able to deliver better quality of care.	Low Impact - Lean Thinking and Methods logically can NOT make much of a difference with these issues.	<<<<<< 25% of Gap <<<<<<	Lean Thinking and Methods can impact about 50% of the gap. <i>Question: How can Lean help with the transition from downstream to an upstream methodology of care?</i>	>>>>>>75% of Gap >>>>>>	Lean Thinking and Methods can make a HUGE difference on the gaps - up to 100%.
Your Learning and Take Always:						
The top three things I learned today:						
The top three things I need to learn more about:						
The top three things I'll do as a result of today:						



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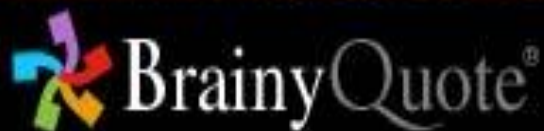
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**Insanity: doing the same
thing over and over again and
expecting different results.**

Albert Einstein



“

In the future which I shall not see, for I am old, may a better way be opened. May the methods by which every infant, every human being will have the best chance of health—methods by which every sick person will have the best chance at recovery, be learned and practiced! Hospitals are only an intermediate stage of civilization, never intended, at all events to take in the whole sick population.”

Florence Nightingale, 1893



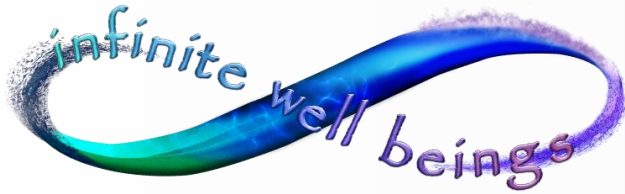
Lets' Reflect



What We Covered Today

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- Top-most challenges in realization
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Thank You – Q & A

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