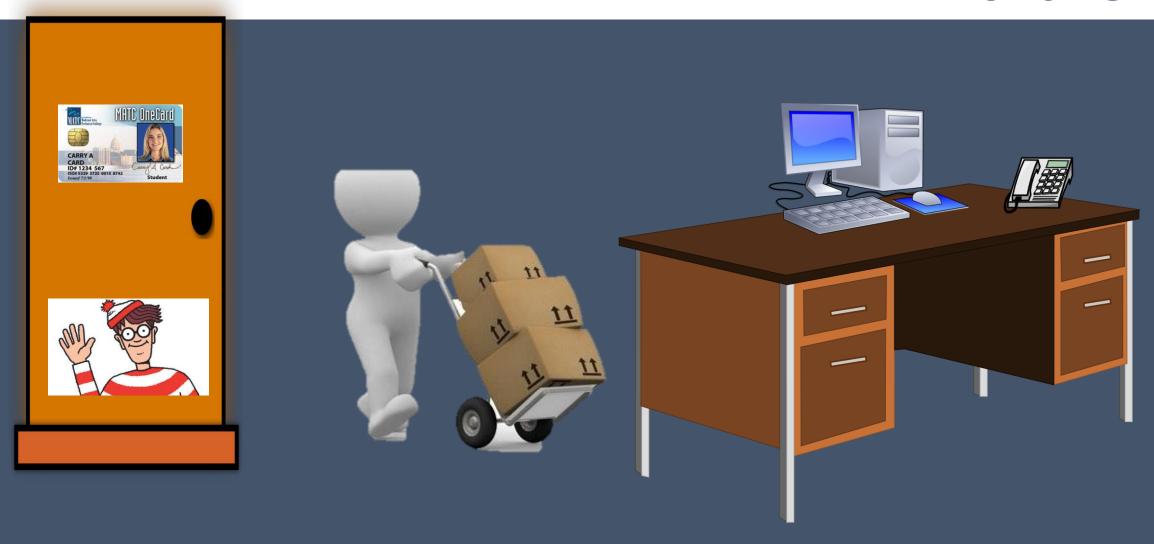


WHERE ARE OUR EMPLOYEES?

Kristin Polywacz | Process Analyst

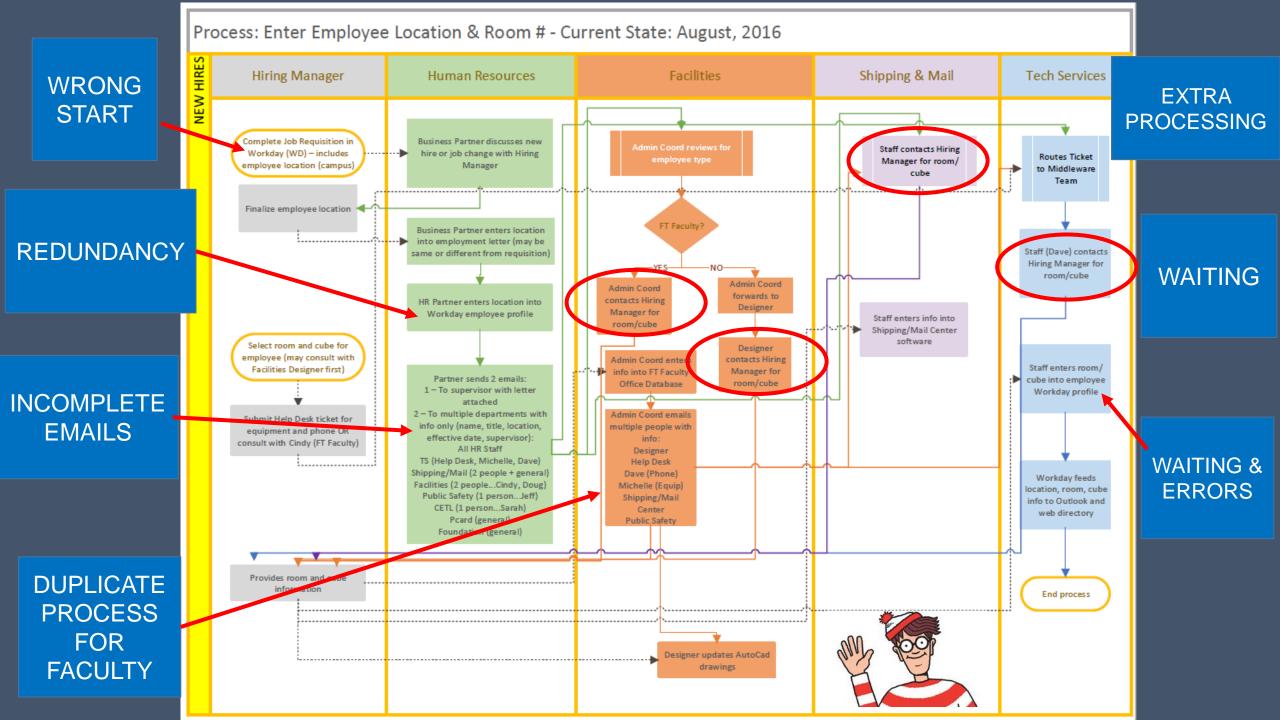


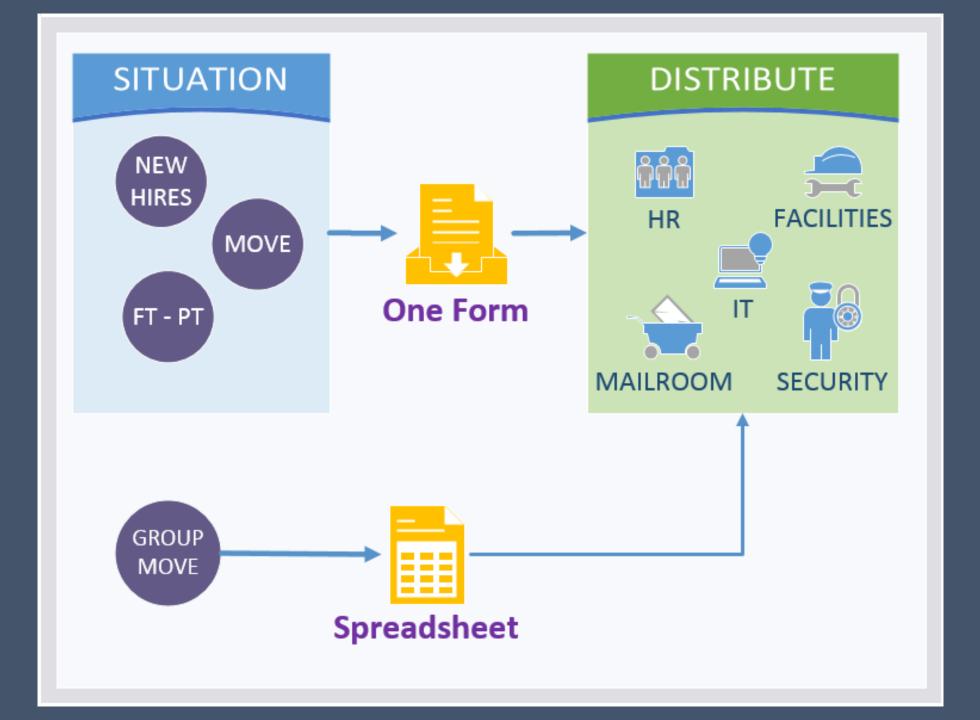
OBJECTIVE



ISSUE: Assign location of employees

GOAL: 100% accuracy





RESULTS

- 20 steps to 1 step
- Nearly 100% accuracy
- Right info, right departments, better service
- Time savings
- Established process owner
- Easier process for faculty seating
- Team that is proud and excited about their work!



NEXT STEPS & IMPACT

NEXT UP

- Monitor, improve form
- Separations
- LTE moving to PT

IMPACT

- PI not all bad
- Issue finally resolved
- Time savings
- Reduced frustration

Improvement may take longer than you expect.



Simplifying the Personal Care Product Process

Shannon Moloney

Quality Improvement Coordinator and

Collin Sainio

Resident Care Supervisor
CENTRAL WISCONSIN CENTER

October 27, 2017

Background

- No standard menu to order personal care products
- Uncontrolled variation within ordering process
- Ordering decisions personality dependent

Aim

- Reduce variation in five product categories
- Decrease time spent putting products away
- Decrease cost

Tools Used

- Survey
- Waste Walk
- Flow Chart
- Pareto Analysis
- Voice of the Customer
- Sort, Set, Shine, Standardize, Sustain
- Failure, Mode, Effects, and Analysis
- Define, Measure, Analyze, Improve, and Control

Changes Made

- Consulted direct care staff to identify top five product categories
- Assessed active ingredients to create new menu
- Developed system for ordering off-menu products
- Reorganized supply space
- Updated care plans

Results

- Reduced product variation by around 46% (26 products to 12)
- Reduced time spent putting away products
 - From 32.5 minutes to 22.5 minutes
 - o Process occurs weekly, sometimes twice a week
- Organized supply storage area
- Reduced cost spent on personal care products by 24% (average of \$1,387/month to \$1,056/month)

• 12

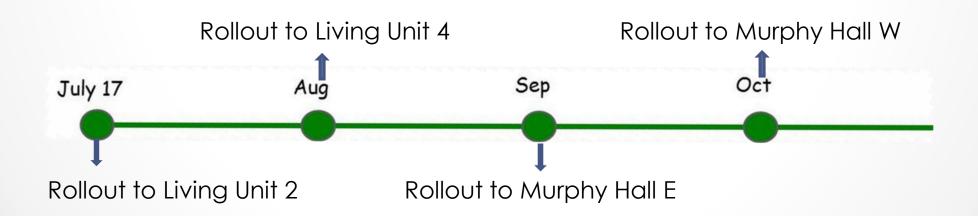
Results



13

Next Steps

- Revise forms.
- Complete rollout.
- Standardize other products.
- Continue quality checks.
- Share lessons learned.



Impact

- Created system of materials management
- Developed standard for product ordering and change
- Simplified ordering process
- Organized storage area
- Ensured residents have the correct products
- Improved quality of care
 - Increased staff knowledge
 - Improved understanding of care plans
 - Increased tracking of product efficacy

Beneficiary Designation Acknowledgement Process Improvement

PI-22

Maryann Hilt, Project Lead

Racheal Rolli, Facilitator



Process Problem

- ETF acknowledges over 23,000 beneficiary designations per year. Ideally, we would like to automate this process regardless of a member's status.
 - Currently, ETF uses WEBS to streamline the processing of active/inactive member confirmations, but complete an entirely manual process for acknowledgements for annuitants.
 - Based on internal performance tracking data, on average, it takes 2:46 longer to process annuitant confirmations than for active/inactive members. This results in an extra 351.12 hours per year in processing time.
 - Processing all beneficiaries in WEBS will optimize this process, save time, and resources.



Project Team & Objectives

- Reduce annuitant beneficiary confirmation processing time in half.
- Streamline the process in order to reduce overall processing time.
- Remove all unnecessary motion in the process.





Maryann Hilt Project Leader



Jaymee Meier Project Sponsor



Racheal Rolli Lean Facilitator



Caleb Johnson Team Member



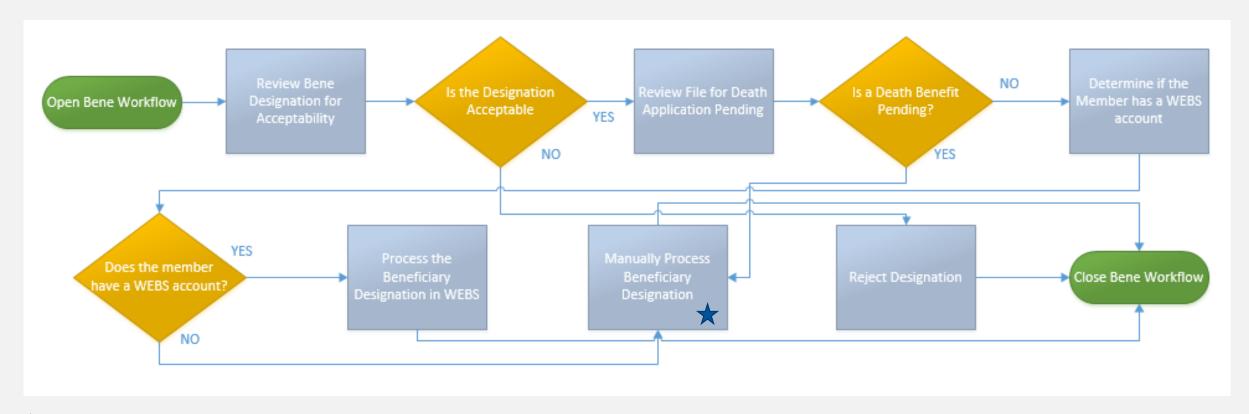
Lara Meinholz Team Member



Luis Caracas Team Member



Future State Map

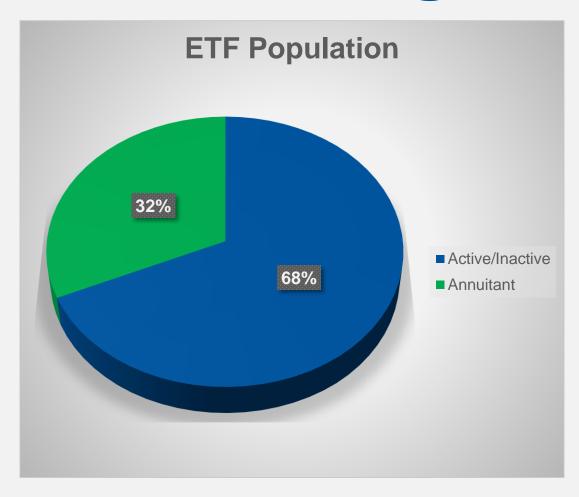




Manual Process only occurs if the member has no WEBS account or if there is a death benefit pending



Total Savings



- 23,799 acknowledged in 2016
- 32% of 23,799 is 7,616 per year
- 2:46 savings per bene provides a total time savings of 351.12 hours
- Average ECSB TFS Objective makes \$24.65/hour = \$8,655.11 cost savings per year



Impact

- Faster confirmations to members
- Decreased calls regarding beneficiary status
- Improved moral for beneficiary processers
- Reduced printing and resources in the call center
- Reduced motion in the process





DIVISION OF MEDICAID SERVICES

MilES Electronic Residency Verification Project

Presented by

Kofi Abaidoo & Vickie Campbell

Program & Policy Analyst – Advanced

- Milwaukee Enrollment Services



Objective

- Loss prevention
- ☐ Fraud prevention
- ☐ Case accuracy/quality control
- ☐ Eliminate waste







Changes/Process/Involvement



- Started February2016
- ➤ 45 days to complete after data drop

- ☐ Consortia receive ERV monthly report
- ☐ MilES staff research and investigate
- ☐ Case audit for accuracy
- ☐ Review all aspects of case



Results

		Medicaid cost	FoodShare cost	
Month	Total cases closed	avoidance	avoidance	Total savings (FS & HC)
Feb/Mar-16	39%	\$134,262.00	\$68,052.00	\$202,314.00
Jun-16	42%	\$155,340.00	\$31,668.00	\$187,008.00
Jul-16	38%	\$82,788.00	\$15,108.00	\$97,896.00
Aug-16	27%	\$238,968.00	\$43,650.00	\$282,618.00
Sep-16	30%	\$78,720.00	\$12,066.00	\$90,786.00
Oct-16	28%	\$117,930.00	\$22,734.00	\$140,664.00
Nov-16	27%	\$62,706.00	\$11,640.00	\$74,346.00
Dec-16	28%	\$78,294.00	\$18,528.00	\$96,822.00
Jan/Feb-17	21%	\$125,622.00	\$34,644.00	\$160,266.00
Mar-17	28%	\$78,180.00	\$10,290.00	\$88,470.00
Apr/May-17	27%	\$139,806.00	\$11,808.00	\$151,614.00
Jun-17	31%	\$99,156.00	\$12,294.00	\$111,450.00
Jul-17	32%	\$120,270.00	\$15,888.00	\$136,158.00
Aug-17	16%	\$108,690.00	\$24,144.00	\$132,834.00
Sep-17	28%	\$121,068.00	\$20,622.00	\$141,690.00
Total		\$1,741,800.00	\$353,136.00	\$2,094,936.00

	Average monthly cost avoidance		
Start of	Medicaid	\$115,281.00	
project	FoodShare	\$26,838.00	
Through	Medicaid	\$116,120.00	
9/30/17	FoodShare	\$23,542.40	

Average Montly Case Count 308





Next Steps



- **□** Maintain
- ☐ Continuous improvement
- ☐ Save in excess of over 2.5 million dollars in year

two



Impact



- ☐ Mindfulness with case accuracy
- Decrease in case error rate
- □31% of applicants are ineligible for FoodShare and Medicaid
- ☐Cost savings





THANK YOU

For questions contact Vickie Campbell at Vickie.Campbell@dhs.wisconsin.gov



Streamline High School Completion Intake & Orientation Process

Madison Area Technical College Connie Weisse - Institutional Effectiveness Analyst



The Problem:

- Information overload for students during orientation presentation
- Too much staff wait time during testing
- Too much student wait time before advising
- Not enough individual advising



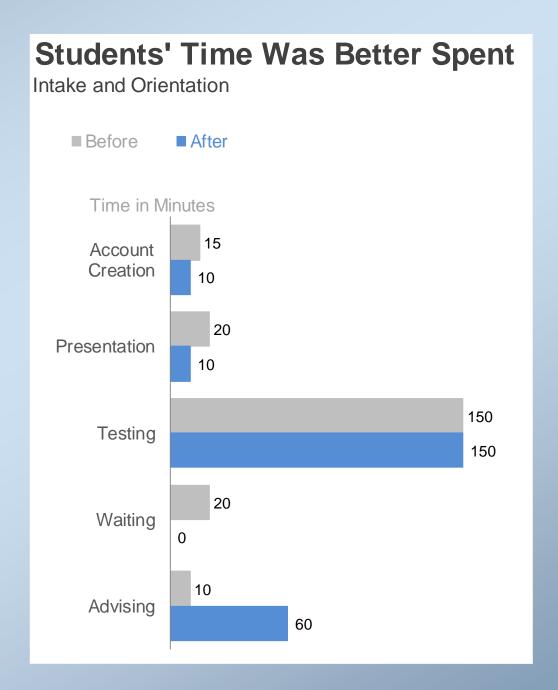
The Solution:



- Identify process steps that could be completed outside of the group session:
 - Create student account before the session
 - Schedule a meeting with an advisor after the session
- Utilize technology to share documents and follow up with students

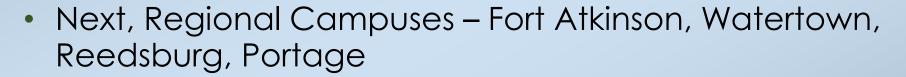
Results:

- Less time on Account Creation, Presentation, Waiting
- More time on Advising
- Test session was shorter, less overwhelming
- From 3 staff to 1 staff at test session



What's Next?

- Started with Commercial Ave Campus, Fall 2016
- South Campus, Fall 2017



Continuous Improvement team meetings



What Did We Learn?

Students had a more personalized experience and were more likely to enroll and attend classes



- Walked the process as the student
- Used a facilitated discussion with stake-holders
- Met regularly
- Split the project into phases
- Developed a process guide and flow chart

Timely Non-Annuitant Death Distributions

WI Lean Government 5 x 5

Presented by Laura Stella

Operations & Implementation Coordinator, Business Analyst

Benefit Services Bureau



Project Charter

Process: Timely Non-Annuitant Death Distributions

Scope: Improve the root causes of delinquency & standardize

process for all inputs.

Customer Output: % of funds not distributed by the deadline

Business Output: Cost of Funds not distributed by the deadline

Problem: A review of accounts from the 2015 Act 302 annual query revealed 59% (110/186) of non-annuitant death benefits totaling \$1.120 million were not distributed by the deadline.

Objective: Reduce the number of delinquent distributions from approximately 60% down to less than 10%.



LEAN PROJECT CHARTER

mely Distribution of Non-Annuitant Death Renefits

801 W Badger Road PO Box 7931 Madison WI 53707-7931

1-877-533-5020 (toll free) Fax 608-267-4549 eff wl.gov

Project Lead:	Laura Stella			
Project Sponsor:	Deb Roemer			
Process Owner:	Carley LeMahieu			
Process Teams: PHASE 1 Pam Moran Mary Preston Anne Wellnitz Linda Daane Carley LeMahieu Kay Kalvin Racheal Rolli (VSM Facilitator) Blain Parsons (Tax Policy Consultant)	PHASE 2 Carley LeMahieu Mary Preston Tami Licari Jim Kachel Eric Held Doug Hennick Peggy McCullick Peggy McCullick Brenda Hoffhein- Peter Kathy Westby PHASE 3 PHASE 4 Janice Faust Mike Hogard Carley LeMahieu Sally Lucey Linda Daane Pater Mary Preston Donna Volk Peggy McCullick Lynn Erickson Kristy Nelson Katie Sohmidt Laura Stellla (YSM Facilitator)			
Process Start Point: Discovery of Non-Annuitant Death Process End Point: Entire account balance paid to Beneficiaries				
Inputs:	MSB Abandoned Accounts Query BDAS and DHS Death Match Processes B166 and B166X Non-Annuitant Death Notices Annual Act 302 Query 30-Day Forced Distribution Notices			
Outputs:	### ## ## ## ## ## ## ## ## ## ## ## ##			
Primary Customer:	• IRS			
Requirements:	Accurate and timely payments & tax documents			
Secondary Customers:	Beneficiary Payee(s) Internal Audit			
Requirements:	To be identified and paid accurately Faster, standardized processes that meet state & federal deadlines and provide an accessible status or audit history; timelier notice of death.			

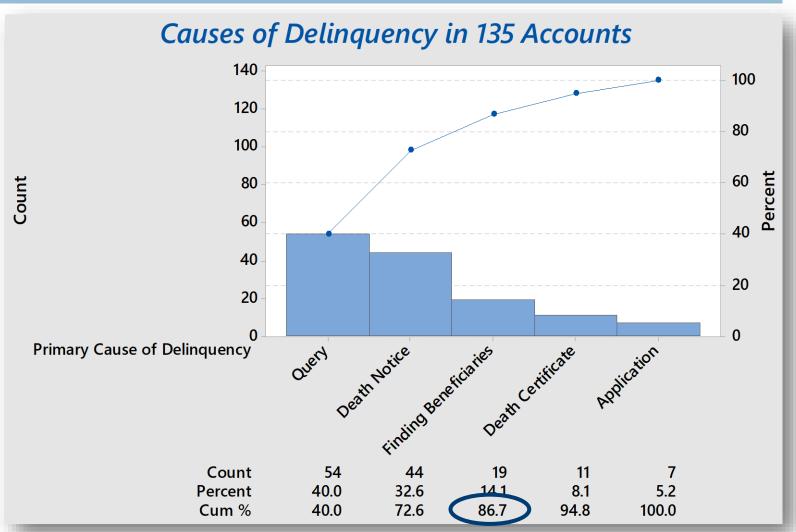
Page 1 of 7



Drill Down Pareto

Pareto Analysis revealed the top 3 causes (87%) of Delinquency were:

- (40%) Annual Act 302 query
- (33%) Late reported
 Death Notice received
- (14%) Issues identifying beneficiaries







Team Members



LEAN PROJECT CHARTER

Timely Distribution of Non-Annuitant Death Benefits

801 W Badger Road PO Box 7931 Madison WI 53707-7931

1-877-533-5020 (toll free) Fax 608-267-4549 etf.wi.gov

Project Lead: Laura Stella
Project Sponsor: Deb Roemer
Process Owner: Carley LeMahieu

Process Teams:

PHASE 1

- Pam Moran
- Mary Preston
- Anne Wellnitz
- Linda Daane
- Carley LeMahieu
- Kay Kalvin
- Racheal Rolli (VSM Facilitator)
- Blain Parsons (Tax Policy Consultant)

PHASE 2

- Carley LeMahieu
- Mary Preston
- Tami Licari
- Jim Kachel
- Eric Held
- Doug Hennick
- Peggy McCullick
- Brenda Hoffhein-Peter
- Kathy Westby

PHASE 3

- Connie Koberle
- Mike Hogard
- Carley LeMahieu
- Sally Lucey
- Linda Daane

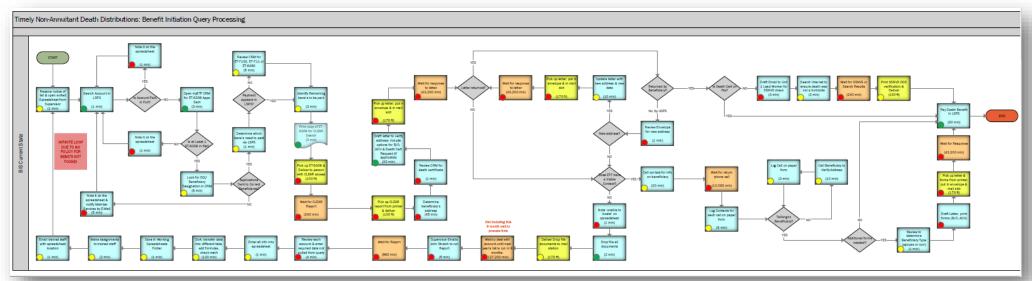
PHASE 4

- Janice Faust
- Brenda Hoffhein-Peter
- Mary Preston
- Donna Volk
- Peggy McCullick
- Lynn Erickson
- Kristy Nelson
- Katie Schmidt
- Laura Stella (VSM Facilitator)





Phase 1: Analyze "Value Stream Mapping Event"



Current State						
Category	Steps	%	Minutes	%	Feet	%
Value-Added	6	12.5%	69	0.0%	_	0.0%
Cost-Added	19	39.6%	207	0.1%	270	27.6%
Waste	23	47.9%	141,197	99.8%	710	72.4%
Grand Totals	48		141,473		980	

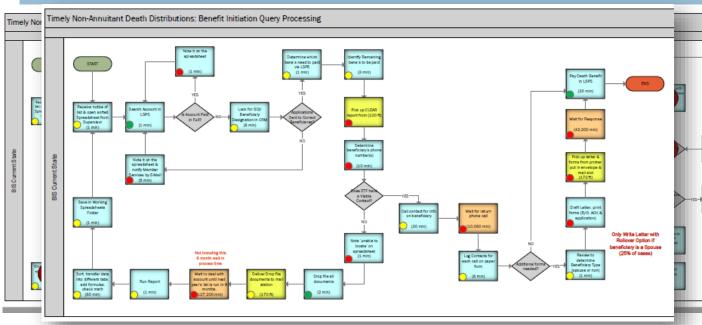
Goals:

- Reduce the number of process steps and overall processing time by 50%.
- Implement the changes by 6/1/17.





Phase 1: Improve



Ideal State						
Category	Steps	%	Minutes	%	Feet	%
,						
Value-Added	3	13.0%	33	0.1%	-	0.0%
Cost-Added	9	39.1%	53	0.1%	-	0.0%
Waste	11	47.8%	53,308	99.8%	100	100.0%
Grand Totals	23		53,394		100	
Percent Improvement	52.1%		62.3%		89.8%	

Results:

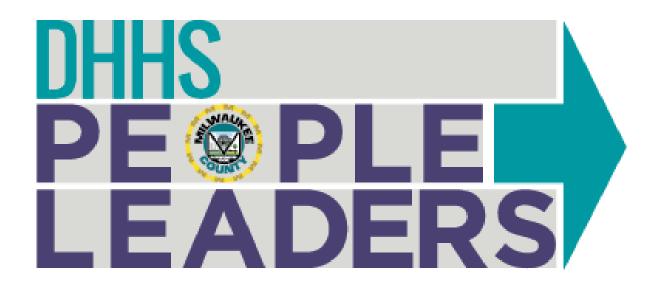
- Process steps reduced by 52.1%
- Processing Time (in minutes) reduced by
 62.3%
- Implemented June 2017.







Milwaukee County Department of Health and Human Services



Presented by: Rosemarie Forster & Erin Wichtoski



Purpose

- DHHS is committed to growing leaders who demonstrate behaviors to engage and empower the DHHS workforce to serve customers beyond their expectations
- Results from the 2016 employee engagement survey indicate DHHS employees have a great desire for growth, development, and opportunity for advancement
- Results also show a need to improve trust and two-way communication between leaders and their staff



Changes Made



- The Do The Right Thing employee led program to build a values based culture was such a success, we built on it to develop values and principles for leaders to instill the culture of PRIDE (Partnership, Respect Integrity Diversity Excellence) values
- Last October, all leadership meetings received a presentation on leadership styles followed by a
 discussion to identify which traits leaders themselves thought were important for effectively
 working with staff.
- A list was made of each trait and ranked by importance, resulting in a list of over 75 traits!
- Characteristics were ranked by information collected in the meetings (very important, important, helpful, nice-to-have)
- Additional research was completed to ensure alignment with the Milwaukee County Leadership Evaluation form and the Milwaukee County Leadership Development curriculum
- Similar to **PRIDE** values, **LEADERS** was developed





LEADERS



LEAD BY EXAMPLE – DHHS leaders are introspective, self-aware, demonstrating the PRIDE values by always Doing The Right Thing.

ENGAGE – Leaders engage the workforce with empathy, support, fairness, consistency, and recognition, resulting in a culture of trust.

APPROACHABLE/ACCESSIBLE – Leaders are approachable and accessible, acknowledging employees, taking time to listen and respond.

DRIVE THE MISSION, VISION, VALUES, PURPOSE – Leaders inspire workers to understand the DHHS purpose, where DHHS is going, and why. They develop and share a robust strategy, making it clear how each player's role ties into long-term objectives.

EMPLOYEE DEVELOPMENT – Leaders ensure organizational sustainability through employee development, providing skills and resources needed to meet personal and organizational goals of growth and excellence.

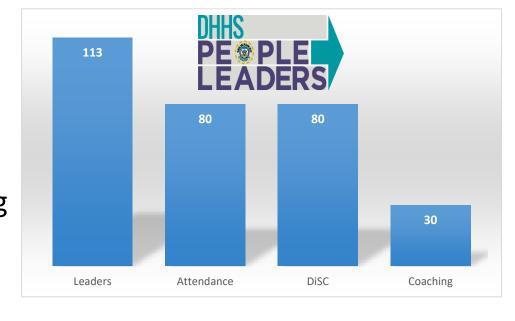
RISK TAKING – DHHS leaders drive a culture of intelligent risk taking, resulting in innovation in processes and results.

SERVE THE CUSTOMERS, WORKFORCE, COMMUNITY, AND STAKEHOLDERS – DHHS leaders look beyond the self and the organization to improve the community.



Results

- First Annual People Leaders Event
 - 80 of 113 (71%) of DHHS leaders -defined as having at least one direct report came together for the first time to discuss their roles as leaders



- All have been requested to take a DiSC assessment to identify their leadership style (71 % completed as of Tuesday!)
- **All** leaders were offered executive coaching and customized workshops to celebrate and support leadership strengths (27% as of Tuesday!)
 - Aligned with Baldrige Criteria, PDSA, and ADKAR change management methodology
 - Rooted in LEADERS values
 - Emphasizing how to leverage personal leadership style and work with other styles

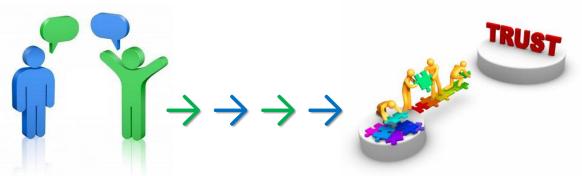


Next Steps

- All leaders who opted for coaching complete 360 assessment
- Scheduled workshops for leaders to discuss strategies on *Trust* and *Communication* around DiSC (top two drivers of employee engagement)
- Some division leadership teams coming together to:
 - Provide support
 - Provide peer coaching
 - Meet and discuss what the team is doing to build Trust and Communication
- Schedule a second People Leaders Event in January for all leaders
- Implement quarterly employee engagement pulse checks and be ready to respond to results



Impact



- Increased communication at all levels within and outside DHHS
- Increased awareness, introspection, internalization and, demonstration of values driven leadership behavior
- Increased leadership collaboration and integration across divisions within DHHS – breaking down silos
- Increased Trust and Communication between workforce and leadership at all levels
- Increased employee engagement to drive improvements in organizational excellence
- Helps quantify the understanding for the need, desire (WIIFM) and how to instill a "culture of quality"



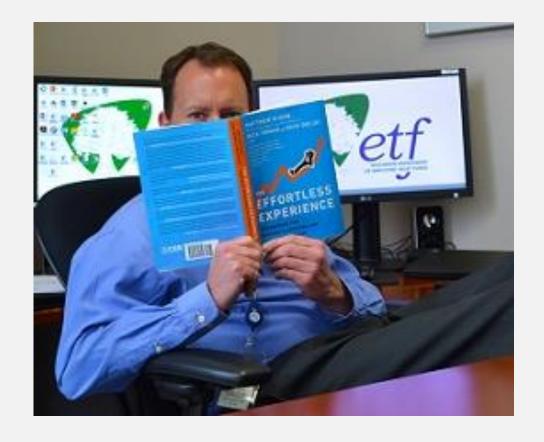
Background

- Prior plan: poor structure and process
- Multi-year strategic plan
- 4 focus areas
- Improved structure and process
- Problem: narrowing our focus



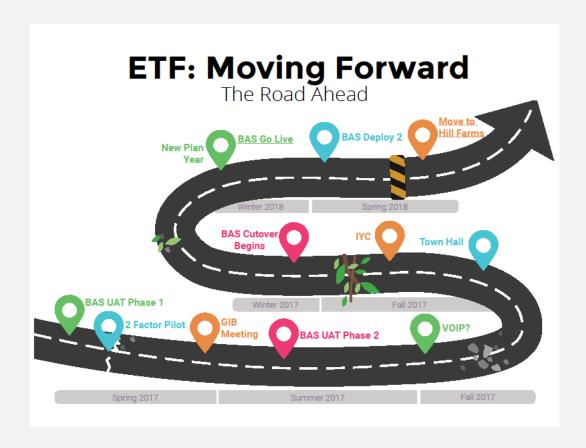
Changes

- Separated operational activities and strategic initiatives
- Applied PESTLE
- Kept SMART
- Focused on the "effortless" experience



Results

- Reduced strategic initiatives from
 72 to 15
- Identified top priorities
- Improved tracking and reporting of accomplishments... and problems
- Increased staff engagement



Next Steps



Impact

