The Center of Operational Excellence is grateful to have you take the time out of your day to read our quarterly publication. Over the last several months, we have continued to make significant strides in improving process and engagement across the State. Recently, we graduated another class of process improvement coordinators to become certified Green Belts. During this process, they completed over 16 improvement projects which were identified and selected by their agencies to help improve performance. In addition, the COE has taken steps toward working with leaders in the overall Nebraska community to further process improvement across both private and public organizations. With everything that has happened in the last few months, I wanted to take a brief moment to reflect on the ideals of the State’s process improvement program and why we do what we do.

Last month we mentioned the Silver Tsunami, the large amount of potential retirements that are going to hit us in the near future. We discussed the need to ensure that future generations of State employees are set up for success in their roles for the benefit of all State team members. This quarter, I would like to discuss a reason for process improvement that is close to my heart: removing “pain points” and obstacles for front line workers.

I have been managing teams for the better part of two decades, everything from sales and service to operations teams. Regardless of the type of team I’m leading, one of the biggest concerns that has always made its way to my office is specific issues with a process (or processes) causing stress and anxiety for my team members. More often than not, it is something that has been done a certain way for many years and no one even knows the real reason it has to be done that way. Usually, there is a fear around changing it, that everything surrounding the process will come undone. It can be hard on a team member to do the same thing every day knowing deep down inside it can be done more efficiently and with fewer headaches. That is why I am a believer in Lean Six Sigma.

For every project we do, we create an SOP, or standard operational procedure. By doing so, we take the guesswork out of what the right way to do something is. But before the project team creates the SOP, they must go through all the process steps and ask themselves, “Why do we do it this way?” If there is not a good reason, the project team has the ability to change the old way of doing things. By giving the power back to the front line workers, we get a more accurate view of which steps we can remove and which steps are vital for success. This is the true nature of Lean Six Sigma and certainly one of the major reasons for the State’s process improvement program. It has the ability to turn a “headache” process into dream process, overnight!

As you read the rest of this publication, I challenge you to ask yourself, “Do I have any ‘pain point’ processes that I do every day? And if so, how can I leverage my agency’s process improvement program to help make changes around it?” After all, helping you do your best with the resources you were given is what it is all about.
Last quarter we discussed what it means to be a yellow belt. We learned that yellow belts are truly the leaders who will be the key to the success of the COE’s Lean Six Sigma program. They will utilize tools to better manage daily work, problem solve, and uncover issues that need to be addressed. Now it is time to actually meet some of these yellow belts and her team to gain a better understanding of just how these tools work!

Meet Eve Lewis and her team!
(Team Members: Eve Lewis, Linda Stenvers, Dan Taylor, Donna Jobman, and Karen Drews)

Their goals are:
**Quality** – 85% of deficiencies processed meet the Principles of Documentation.
**Delivery** – 100% of survey results are uploaded within 90 days from exit.
**Inventory** – 75% of Facility Administration changes are in the system within 2 days.
**Productivity** – 80% of facilities needing a federal remedy are referred to Regional Office within 70 days from exit.

They manage process for long-term care facility licenses. Eve had a background in quality assurance, so she was very excited when she heard the State of Nebraska was implementing a Lean Six Sigma program. After going through the yellow belt training, she was eager to get started putting together metrics for her team to track during their daily morning huddle. It was important to Eve that she made sure her team was bought into the process, so she had them very involved with determining the team measures and goals.

Eve noted, “The team was excited to have real data and not just act on anecdotal information. They liked the visual representation of what was going on and being able to actually see where the problems were. This helped us make better decisions as a team.”

During a huddle, a team will look at the previous day’s metrics. If they reach the goal, then it is a green day. If they do not reach the goal, then it is a red day. Eve talked about how the team began to realize that red and green days were equally important. “It is great to celebrate reaching a goal. It really does help boost morale and the team’s sense of satisfaction and ownership. However, red days really do help the team identify the real issues. Without these red days, we would never be able to improve and finally be able to reach the green days.”

Donna Jobman is extremely thankful for their team’s huddle. “We had a backlog of 123 surveys that were pending over 90 days. Now we usually only have 20, and they are pending less than 90 days. We got here because we were able to see how the workload was distributed among the team. We could then adjust and determine who needs help and where the priority should be focused for the day. We have also been able to identify areas where there was duplication of work and unnecessary steps. All of the data and information helped our team problem solve to figure out faster ways to do things.”

Eve had some great advice for teams who are just starting to put together huddles. “Don’t try to solve world hunger. Work with your team to identify the issues you are facing. If they are bigger issues, break them down into smaller parts. Pick some areas that you know can be quick wins. This helps build team unity and buy-in.”

Donna added, “Just go for it! You never know what you are going to find until you dive deep into those details. It has allowed our team to succeed in areas we did not think were possible.”
Meet Katie Weidner and her team!
(Team Members: Katie Weidner, Kendra Wiebe, Korene Krzycki, Lelia Razey, Kim McFarland, and Mary Conaway)

Their goals are:
Quality – Welcome packet for new providers sent within 5 business days of request.
Delivery – Inventory of Client and Agency Plannings (ICAP) are processed and returned within 5 business days of receipt.
Inventory – 20 Extended Family Home (EFH) surveys will be processed per day.
Productivity – 95% of paper claims will be processed daily.

Katie is a program manager for the Division of Developmental Disabilities. When she first discussed tracking daily metrics with her team, there were a couple team members who were slightly hesitant. They were concerned about what was being measured and how it was shared. However, Katie did an awesome job with sharing the purpose and intent of these measures is to continually improving upon their work. After the first couple of weeks of huddles and tracking metrics, her team was sold. They were able to put data to a lot of the work they had been doing. The team was able to identify trends they had not realized before happening. This helped them determine how to manage their work in more efficient ways.

Katie also shared her love of data and why it is important. “In my experience, data has not always been a point of focus for DHHS. Some areas feel that it is hard to put numbers to their work. While it may seem impossible, you can track much of the work through metrics. Some areas may take a little more brainstorming, but we should always be striving for some sort of goal. Data helps us make decisions on the real picture, versus anecdotal assumptions. It is a tool to help staff determine success and areas where we need to improve.”

Katie also had advice for teams starting huddles. “Make it easy to use and friendly to read for those who may not be as familiar and comfortable with data. Data is a great tool, but only if your staff can read and attribute value to it. Check in with your staff to ensure they understand the data presented and make adjustments if they do not. You want to make sure you do everything you can to positively engage your staff in the huddle. Data tracking should not be used as a way to micromanage, but instead to empower your team to problem solving ways to continue improving.”

While at first nervous about tracking metrics, Lelia Razey talked about how she now greatly appreciates the team huddles. “Our daily huddles keep us on task. It is easy to see where we are on projects, and determine as a group if we need to change our strategies on anything. This process has truly helped us better focus on how to best move forward and plan for the day.”
A Brief History
This tool was initially developed by Sakichi Toyoda as a tool to resolve root causes of problems. The intent of the tool is to identify a root cause for problems by asking why the problem exists. This tool does not mean that always and only should 5 whys be asked but rather the 5 is an approximation or an anecdotal number chosen to illustrate the need to dive into problems not merely scratch at the surface symptoms.

How To Use, When To Stop
The most common way to use the 5 why is to list it out much the same as a bulleted list. In this way, you can explore multiple potential causes. Most demonstrations show a linear process with clear cause and effect, unfortunately life is not that clear. There will be times where the why could lead to more than one reason and writing out the 5 Why on paper or a whiteboard can help to track multiple potential root causes.

Where possible, it is best to follow a linear path to one potential root cause, make the correction, and then observe the results for desired effect. This can be done along each possible root cause, observing the effects. So how do you know you have reached a root cause? Usually, the root cause will loop back to a previous symptom, and that is when you know you are either at or close to the root cause. Make the appropriate changes and again observe the results.

How is it used most often at the State of Nebraska?
In the State of Nebraska, the 5 why is a useful tool on QDIP boards to identify why a particular issue keeps recurring. Asking why can get you to a root cause to prevent the issue from recurring in the future. Nevertheless, not just QDIP boards benefit from an understanding of 5 why. In the Department of Public Health, in the Licensure Unit, in the Office of Long-term Care, where they monitor facilities that provide elder care, surveyors and managers use a variant of the 5 why to evaluate corrective action plans. This helps them to evaluate preventative measure to ensure that they are preventing issues and accidents from occurring in the first place. The 5 Why has a single purpose to help identify root cause.

This is but one tool, use when needed
Root cause analysis – looking for the root problem. Sometimes 5 why works best but it is not the only tool. The goal of identifying root cause is to eliminate the creation of problems. Sometimes Lean Six Sigma Greenbelts will use a variety of tools for data analysis looking for trends that may not always be as obvious. If you are using 5 why and are not having success, Contact your agencies Process Improvement Coordinators, or the Center for Operational Excellence, they have resources to help you identify root cause and improve your processes. Remember Process Improvement is not a destination it is a journey, and a culture we aim to implement and improve, one “why” at a time.

EXAMPLE: 5 Whys
The stone of the Washington Monument is wearing away.

Why?
Strong cleaners are used on the stone.

Why?
Strong chemicals needed to clean up pigeon droppings.

Why?
Pigeons eat spiders at the Monument and leave droppings.

Why?
Spiders hunt gnats around the monument.

Why?
Gnats are attracted by lights at the Monument.

Why?
Lights come on too early and attract gnats.
This month’s featured Green Belt is Travis Haberman. Travis is the Process Improvement Supervisor for the Nebraska Department of Transportation (NDOT). Travis began his career at the State of Nebraska in March of 2013 as a Training Coordinator within Human Resources for the Nebraska Department of Roads. In this role, Travis worked to provide training in leadership, management, and employee development. In May of 2014, he was promoted to Training and Development Manager. Travis helped coordinate heavy equipment training for the maintenance yards and served on the Engineer’s Professional Development Committee. In October of 2016, Travis began his new role as a Process Improvement Supervisor.

Hobbies and life outside of work? Travis is originally from Oxford, Nebraska, and retired in 2013 after 30 years of service to the U.S. Air Force and the Nebraska Air National Guard. Travis and his wife Carolyn enjoy attending their children’s schooling and sporting events, and are members of St. Wenceslaus parish in Wahoo, Nebraska. He’s a Cornhusker/KC Royals fan, likes to read history, and tend to his family’s acreage.

Describe the projects you completed for your Green Belt Certification: “I partnered with a group of highway maintenance yard employees to improve the layout and organization of their primary work area. We reviewed and studied the yard mechanic’s operation and initiated improvements using the 5S technique in Lean Six Sigma. The other project was primarily an effort to improve NDOR’s process of gathering and reviewing contractor insurance certificates, a process which reduces liability risk to the agency.”

What were the major successes in the projects? “Reduced waste - in terms of the time it takes to complete tasks and to serve internal and external customers. In the case of the maintenance yard, the mechanic’s work area now includes visual cues to make the space more manageable; there is a ‘place for everything and everything in its place.’ Removing extraneous clutter, introducing color coded visual cues, and labeling items in the work area enhanced efficiency. This project team created an environment where the mechanic and other yard employees retrieve and return equipment, tools, and parts quickly.”

What do you enjoy most about Lean Six Sigma? “I like introducing employees to Lean Six Sigma concepts and working with project teams. For many employees, Lean Six Sigma is a new approach but when understood and applied, it provides many business and work team benefits.”

Advice you would like to share about process improvement? “In our daily routines and in our roles as employees or managers, we sometimes get stuck in a rut. We get used to doing tasks or processes the same old way. That’s comfortable. But the way to get better is to stretch your comfort zone. The folks at NDOT have the ideas for improvement and the Lean Six Sigma method is one of the best avenues out there to make good ideas a reality.”
Department of Banking & Finance - Mail Delivery
We realized it took 8.5 hours to deliver the mail, so our goal was to reduce lead and process time by 50%. We met with the director to discuss his SMART Goals and found one of his goals was to create a Rapid Response Unit inside Consumer Affairs. Because the mail delivery was the first step in this Rapid Response process, we had a unique opportunity to approach process improvement. By streamlining processes and developing a simpler system, we had great success in revamping the mail system while at the same time working towards the Rapid Response SMART Goal. Mail is now delivered at 9:00 am instead of 11:15, and online complaints are no longer printed, but rather sent electronically to the administrator. Lead time for online complaints was reduced from 8.5 hours to four minutes.

Department of Health and Human Services - Triage Work
The Office of Long-Term Care processes all the triage work for our facilities and then shares them with the applicable program area within the licensure area to determine the priority of patients’ treatments based on the severity of their condition. However, the program areas will often re-triage intakes before taking action on them. For the 2016 calendar year, the complaint intake had a 67% accuracy rate and resulted in several reworks at the end of the process. The goal was to meet Centers for Medicare and Medicaid Services (CMS) performance standards, which included increasing the accuracy of priority level triages from 67% to 90% and decreasing lead time from nine days to two days.

We reviewed the number of re-triaged intakes to get an understanding of why there was so much rework. We also reviewed the accuracy rating from CMS in an effort to pinpoint reasons the accuracy was low. In the end, we focused on a solution that would bring us closer to a First Pass Yield of 90%. We made the decision template as mistake-proof as possible. In the pilot phase, the template idea was proven to work and implemented for a single facility type.

Moving forward, all facilities have completed individualized templates, which have in turn been tested and will continue to be revised to improve accuracy. The team created templates specific to a variety of license types and within these templates the triage workers could identify the sources of information and describe in detail the justification for their decision analysis, whether they chose a triage priority or not. This will give CMS reviewers a clearer understanding of the justification for the triage priority and it provides the program areas a means to provide specific training on areas of disagreement over the triage priority.

Department of Transportation - Road Oil
Road oil is purchased, delivered, and used by all eight districts of the Department of Transportation for construction and maintenance projects. The road oil ordering process was identified by management as having too many steps and consuming too many labor hours during the busy season when order numbers increase and staff availability is limited.

Initially, we mapped out the current process and collected data to validate the process time and lead time for the current state. Next, the team analyzed the data and brainstormed creative solutions that would have the greatest impact on the process. A pilot test of the new process revealed process steps were reduced from 27 to nine steps, lead time was reduced from nine days to five days, and process time was reduced from 36 minutes to 7 minutes, among other improvements.

“We were over-processing how NDOT Procurement receives and places orders for road oil for the Districts,” said Rita Kucera, Highway Procurement Manager. “I am proud of this team for really questioning the current processes and being open to looking for efficiencies and in doing things differently and not just falling back into ‘this is the way we have always done it.’”
The Nebraska Department of Correctional Services (NDCS) has saved over 1,900 hours of overtime by taking a look at just one process inside their health services department, travel orders. Travel orders, simply put, are requests to take an individual in the custody of NDCS from one place to another; in this case it would be to take those individuals to medical appointments with providers in the community.

The new medical director, Dr. Harbans Deol, and his team at NDCS brainstormed a solution that would reduce the number of travel orders that NDCS staff would have to perform outside of their institutions. The solution was simple: meet with institution staff to evaluate the need to take the individual to a provider in the community. NDCS employs medical professionals who can provide the same level of care as providers in the community. By better utilizing their medical professionals, NDCS can improve the quality of care provided by eliminating the delay in getting individuals assessed and on a treatment regimen.

When asked about the benefits of the new process Scott R. Frakes, director of NDCS, said “One additional benefit that is hard to measure, but highly valuable, is the fact that we reinforced with our health care staff that we trust and value their talents. They deliver excellent health care to our population.”

The new process was piloted at the Nebraska State Penitentiary with great success in reducing travel orders and was introduced to all institutions. NDCS has saved over 1,900 hours of overtime and hundreds of thousands of dollars in expenses. Unmeasurable is the impact on public safety and the safety of NDCS staff because each time an individual is taken out of prison into the community a risk is involved.

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**Medical Team Embraces Process Improvement**

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**Ceremony Adds Nine Green Belts, Three Executive Green Belts**

On June 27th, 2017, the Center of Operational Excellence hosted its second Green Belt Ceremony at the Governor’s Residence. Nine state team members became certified Lean Six Sigma Green Belts and three became certified Executive Green Belts.

**Green Belts**
- Jill Aksamit
- Andi Bridgmon
- Justin Detrick
- Roger St. Aubyn Euter
- Chris Gadken
- Travis Haberman
- Chelsey Norval
- Thad Sears
- Mark Watson

**Executive Green Belts**
- Don Arp, Jr.
- Byron Diamond
- Matt Miltenberger