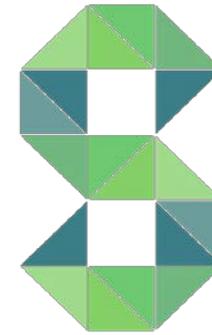# Utah OPS: Building on SUCCESS

September 8, 2016
Salt Palace Convention Center

Case Management for Case Movement:
Improving System Flow & Synchronization to Improve Lives

Jaideep Srivastav
Goldratt Consulting

Staci Ghneim
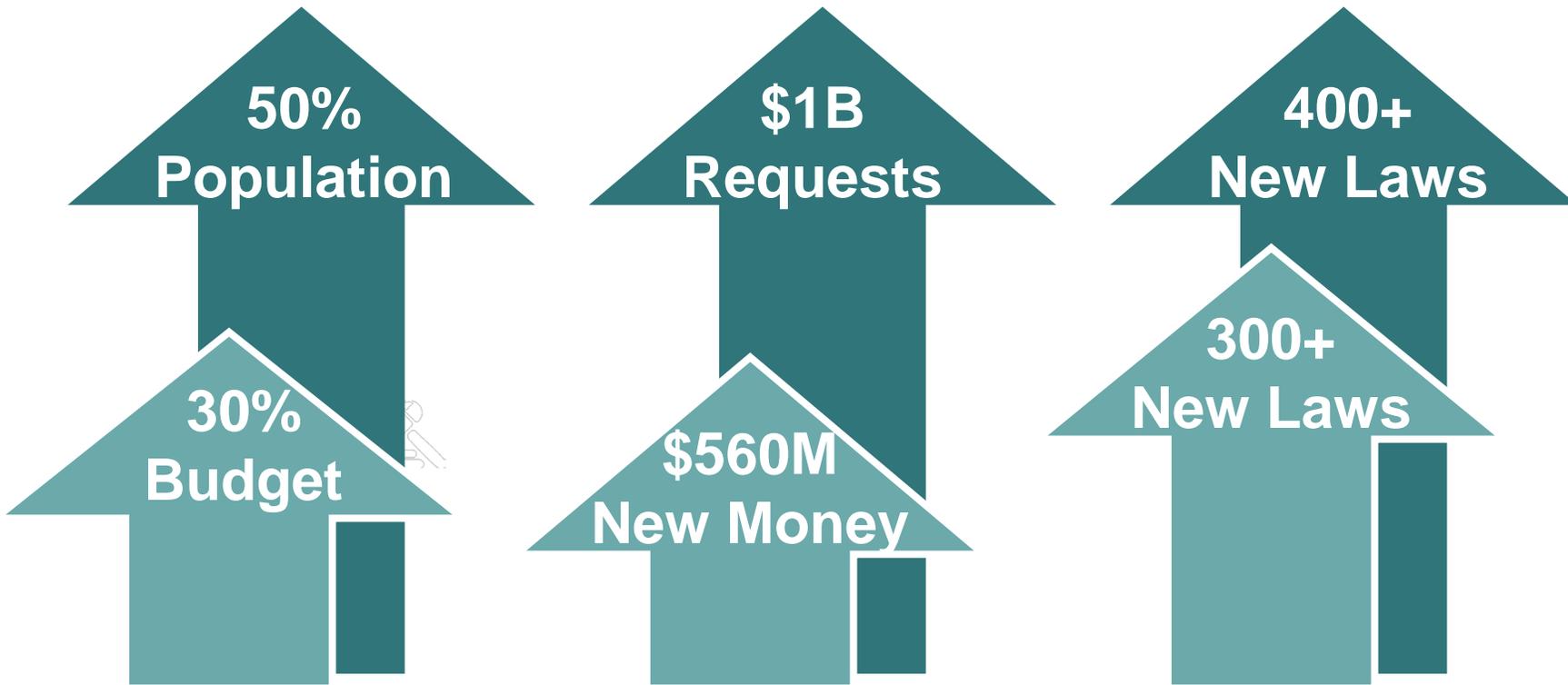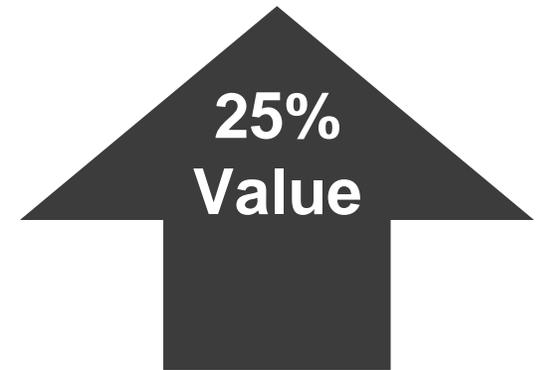Governor's Office of Management & Budget

- Orientation
- Flow and Synchronization Concepts
- Examples of Flow and Synchronization
- Direction of new approach – Coordinated Case Management
- Next Steps - Pilots
- Summary

What is it?

- In general, it is a management system for *moving* temporary projects through a process *to a particular end or result*
  - Similar to project management
  - It was intended to manage costs and improve results
  - Each field/profession has their own description

- In healthcare and human/social services, it refers to planning, coordination, and delivery of care and services
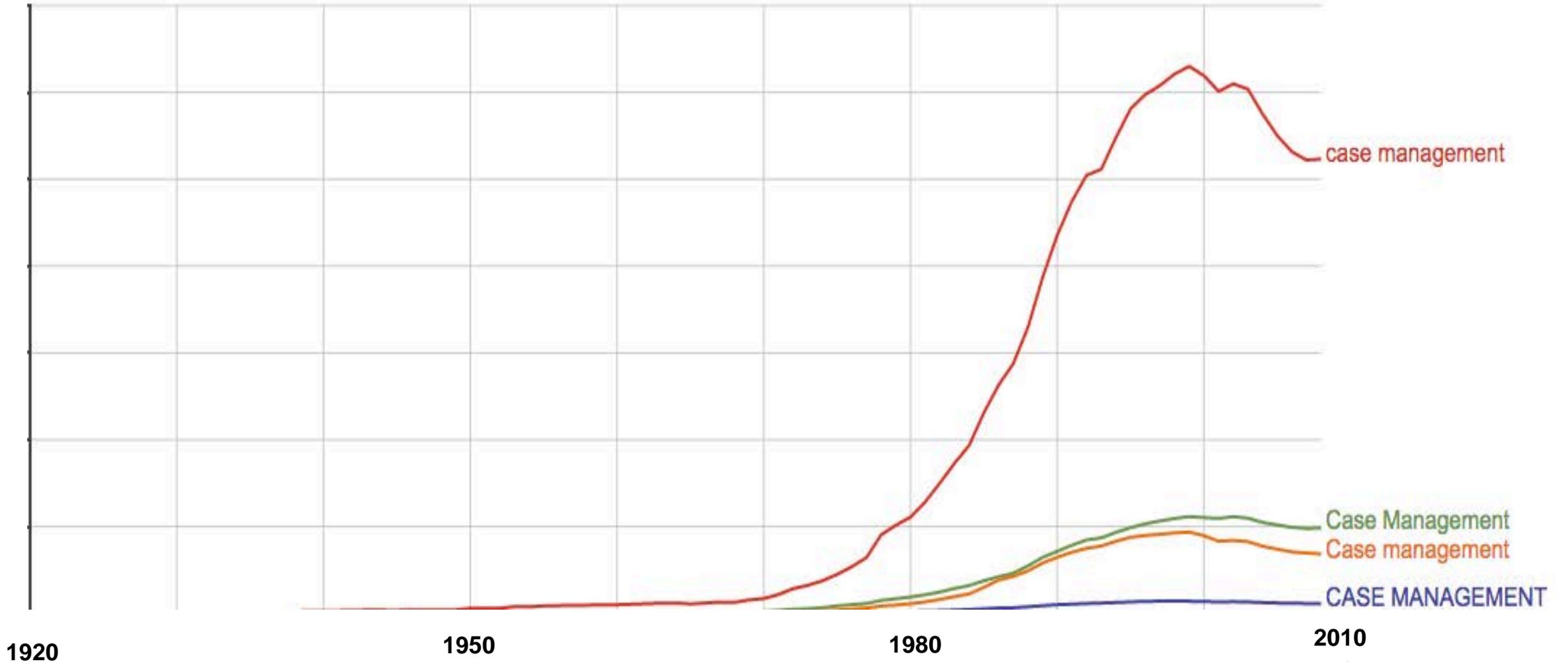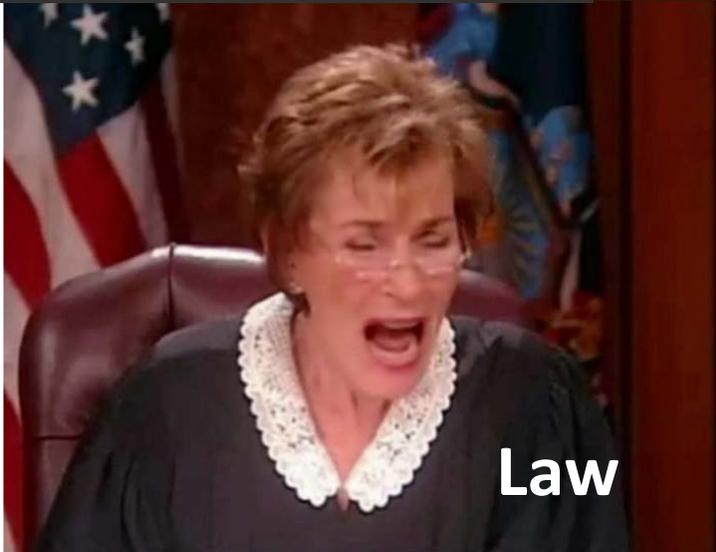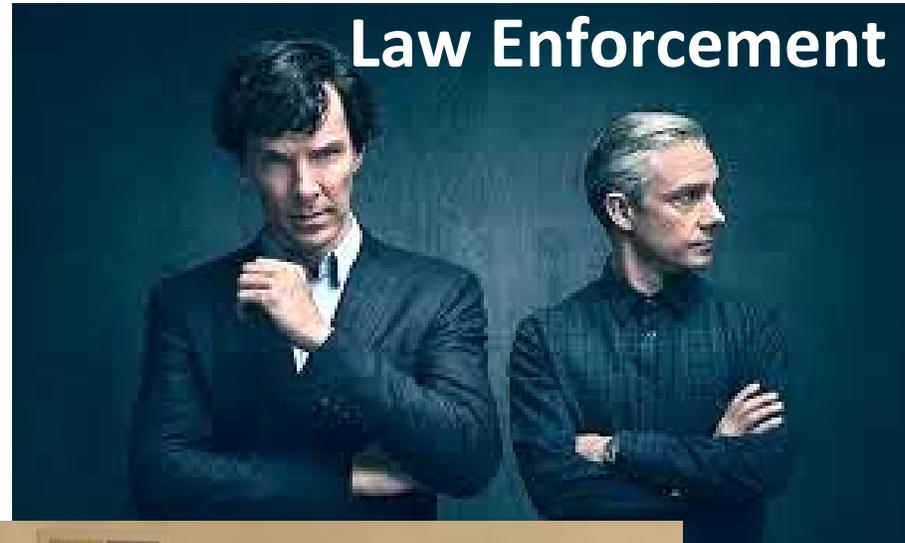
SUCCESS
FRAMEWORK

1920   1950   1980   2010

GOMB | SUCCESS FRAMEWORK

- Over $1B invested in case management-based systems

- Several hundred thousand cases represent thousands of Utahns

- Serve and protect Utahns often temporarily in crisis and/or permanently vulnerable in the most significant personal ways associated with all aspects of life---safety, health, livelihood, education, and quality of life

- Cases are often complicated, contingent, unpredictable, may be unable to be "controlled," and may not be understood nor coordinated across systems

- Case management is often high-stress and high-stakes with high turnover, complicated regulation and oversight, and incessant change and growth

- Policies, funding, measures, and strategies may inadvertently incentivize or prioritize multi-tasking, less-critical activities, and non-movement

- System conflicts: Individualize vs Standardize, Specialize vs Generalize, Centralize vs Decentralize

Lens

- *System* vs Subject Matter
- *Process* vs Content
- *Horizontal Flow* vs Vertical Org
- *Results* vs Activity
- *Special* vs Unique
- *Customer View* vs Others
- *Operational Solutions* for Operational Problems

Translating Terms

- *Flow:* Rate and nature of movement
- *Cycle Time* = Length of case or service
- *Dosage* = Intensity, frequency, duration, timing
- *Full Kit (FK)*= Everything needed for a customer or employee to start and complete a task, requirement, or plan
- *Triage* = Prioritize and categorize
- *Work in Process (WIP)* = Open cases or caseload

- What is flow?
- Why does it matter? To whom?
- How can improved flow apply or benefit?
- How do we measure flow?
- What are some signs of flow problems?
- What are some causes of flow problems? What vicious cycles associated with flow problems?
- If flow problems are operational in nature, what are operational solutions?

Time gained/lost in the critical activity is gained/lost for the whole system.

GOMB | SUCCESS FRAMEWORK

Do:

- Clearly identify and focus on the goal with a customer view
- Identify and measure process flow (with performance and status)
- Protect and prioritize critical resource (case manager) for critical activity
- Reduce and eliminate wait times and activities not required, critical, nor value-added for the customer
- Incentivize system flow
- Manage triage, full kit, and WIP— Parkinson's law and student syndrome
- Be careful what you build, they will come

Don't:

- Structurally reinforce or compound poor flow and non-goal performance with non-operational solutions: technology, money, reorganization, projects, training, policy, measures
- Don't perpetually add "one more thing"-- layers, projects, policy, people, measures, requirements
- Don't confuse advancing a plan or process for goal performance

More families achieve and sustain self-reliance sooner

- Reduce the overall duration a family is dependent on government services
- Reduce "reentry" or "recidivism"

GOMB | SUCCESS FRAMEWORK

- While the intent is to focus on families, the infrastructure or processes are not currently in place to make the vision a reality. As a result, agencies are duplicating work, over-assessing families, and often forcing them to engage in bad multi-tasking.
- The coordination and data exchange between the agencies is manual, difficult, and sometimes not possible due to legal/regulatory limitations.
- The group/committee that triages and sets the case plan may not be good at prioritizing the right levels of interventions.
- By default, agencies are already being forced to prioritize work—but it is done haphazardly and often out of sequence.
- Each agency is trying to do the best with their budget/ limited resources and also show their agencies great performance through local metrics.
- Existing pilots and programs are moving in the right direction, but are not scalable.
- The family is not always involved or do not participate in creating the case plan.
- Culture and language can be barriers to family participation.
- The triage process is not standardized/uniform—making it difficult to scale upward.
- New processes are frequently introduced.
- There is an over-reliance on employees to coordinate as compared to using a more systemic approach.
- Current coordination efforts are after-the-fact and result in rework as compared to addressing the issue up-front
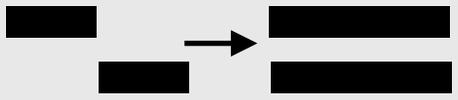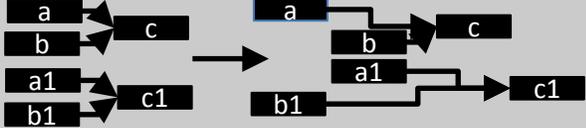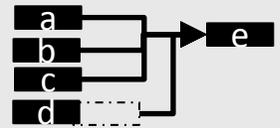
SUCCESS FRAMEWORK

1 2 3 4 5 6 7 8 9

M U L T I T A S K

1 M 2 U 3 L 4 T 5 I 6 T 7 A 8 S 9 K
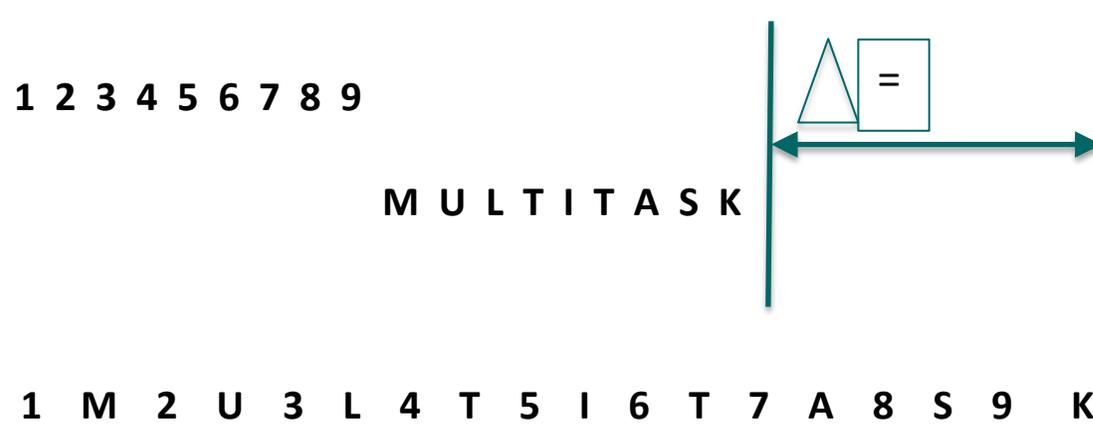
What will be the cycle time if we had one more task to do?

- Cycle time
- Quality

What is the key change???

Effects	How	Losses	Implications
Multitasking		• Switching (setup) cost • Wait time	• Low Productivity (Low TP) • Long Cycle time
Spreading thin (2 res on 1 tasks vs. 1 res on two task)		• Switching (setup) cost • Wait time	• Low Productivity (Low TP) • Long Cycle time
De-sync & Integration Points		• Wait times • Peaks and valleys	• Low Productivity (Low TP) • Long Cycle time • Lack of priority in ops • Lot of expediting
		• Wait times • Peaks and valleys	• Low Productivity (Low TP) • Long Cycle time • Lack of priority in ops • Lot of expediting
Management Multitasking		• Wait times due to slow decision making • Rework	• Low Productivity (Low TP) • Long Cycle time • Lack of priority in ops • Lot of expediting
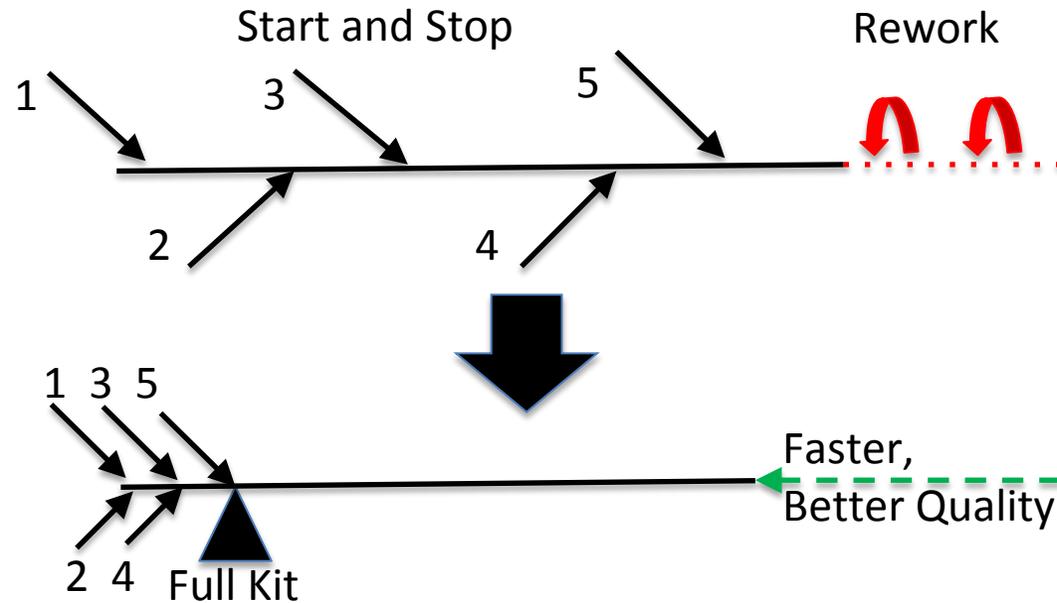
- *Full Kit is <u>proactive preparation</u> to execute for a <u>planned</u> duration (the longer the better)*
- *Usually, FK is a checklist that can be standardized for a standard task*
- *FK can be defined for a set dosage!*
- *For FK to be effective, roles, responsibilities, processes and metrics have to be defined*

- Low WIP/ Low Multitasking/ Clear Priorities can increase flow and synchronization
  - Resource concentration/ Deep Cleaning is equivalent of Dosage
- Full Kit can help with uninterrupted execution for a duration/ dosage

- Deep Cleaning/ Dosage and synchronization in Airlines Line maintenance
- Dosage (Deep Clean) and Full Kit in Adult Parole and Probation

AIRLINE CASE MANAGEMENT
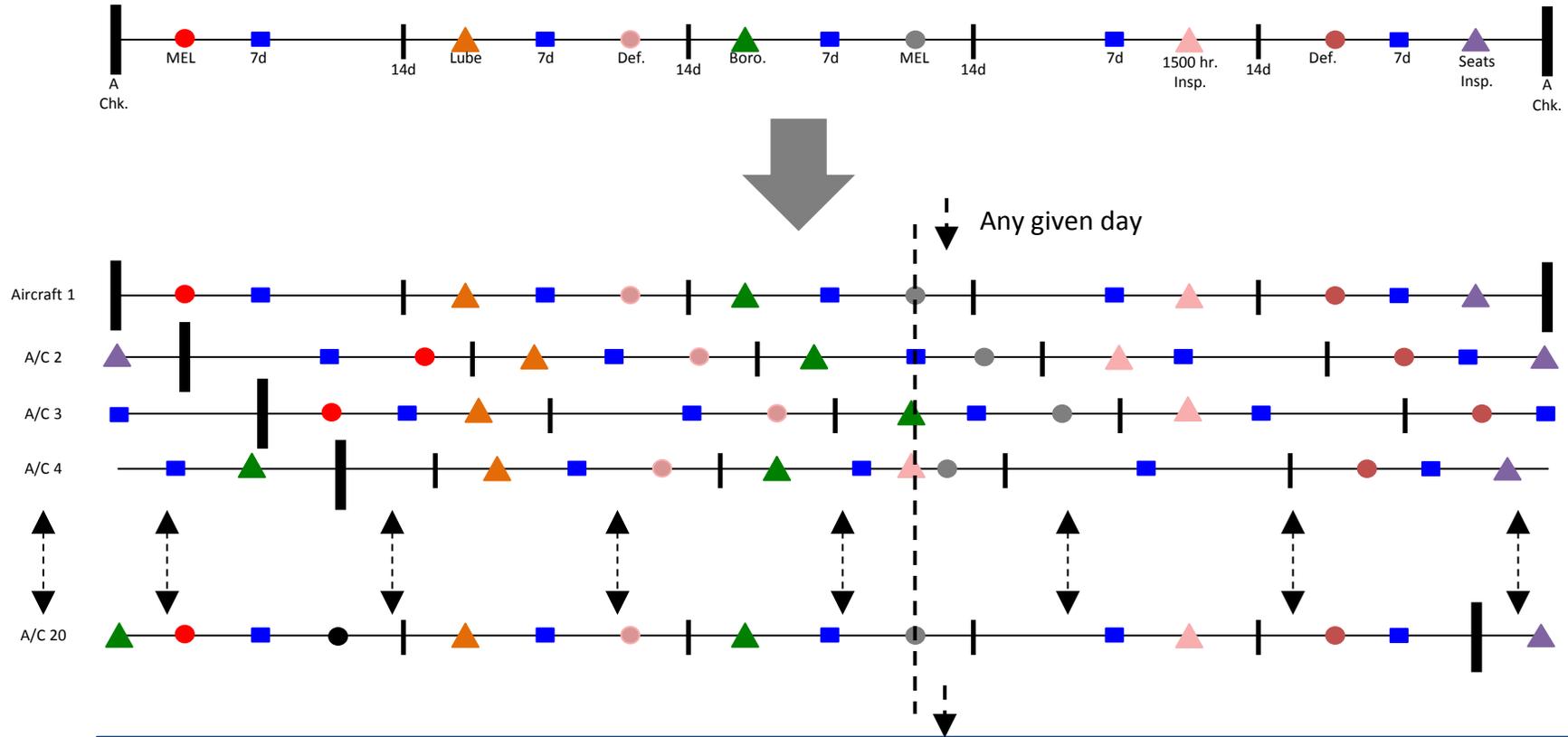
- Most aircraft have something that expires => forced to work on most aircraft
- Multitasking and spreading thin of mechanics, leads and supervisors
- Support departments (planning, engineering, materials) also spread thin
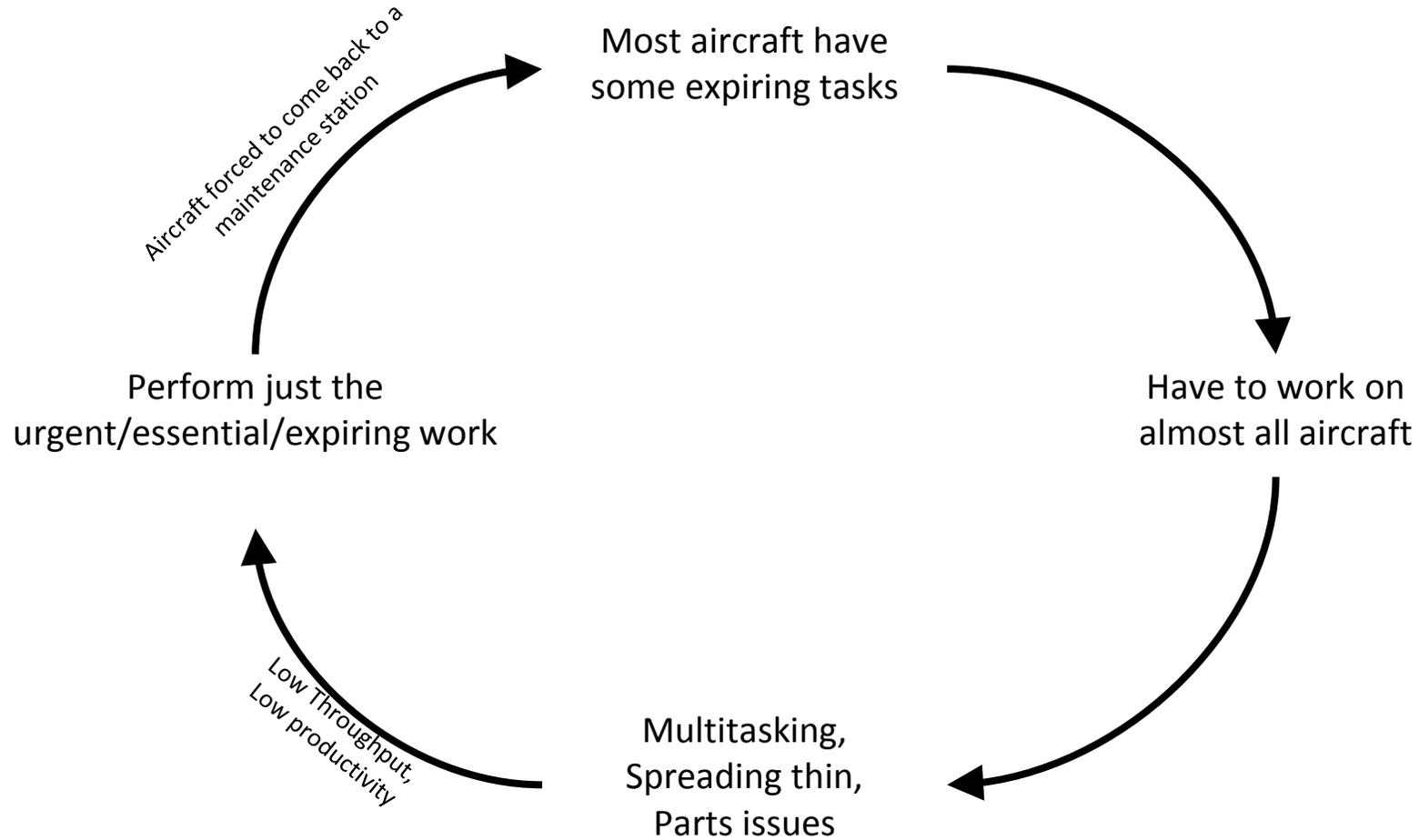
1. Low WIP and Deep Cleaning

2. Full Kit

3. Measure and manage flow

1. Schedule fewer aircraft every day for maintenance
   - Reserve some capacity for AOG and other daily tasks (oil svc., tire pressure chks, PDC etc.)
2. Perform ALL maintenance ("deep clean") on these aircraft to provide flexibility in scheduling maintenance for XX days
3. (if necessary) Re-organize maintenance program to increase flexibility
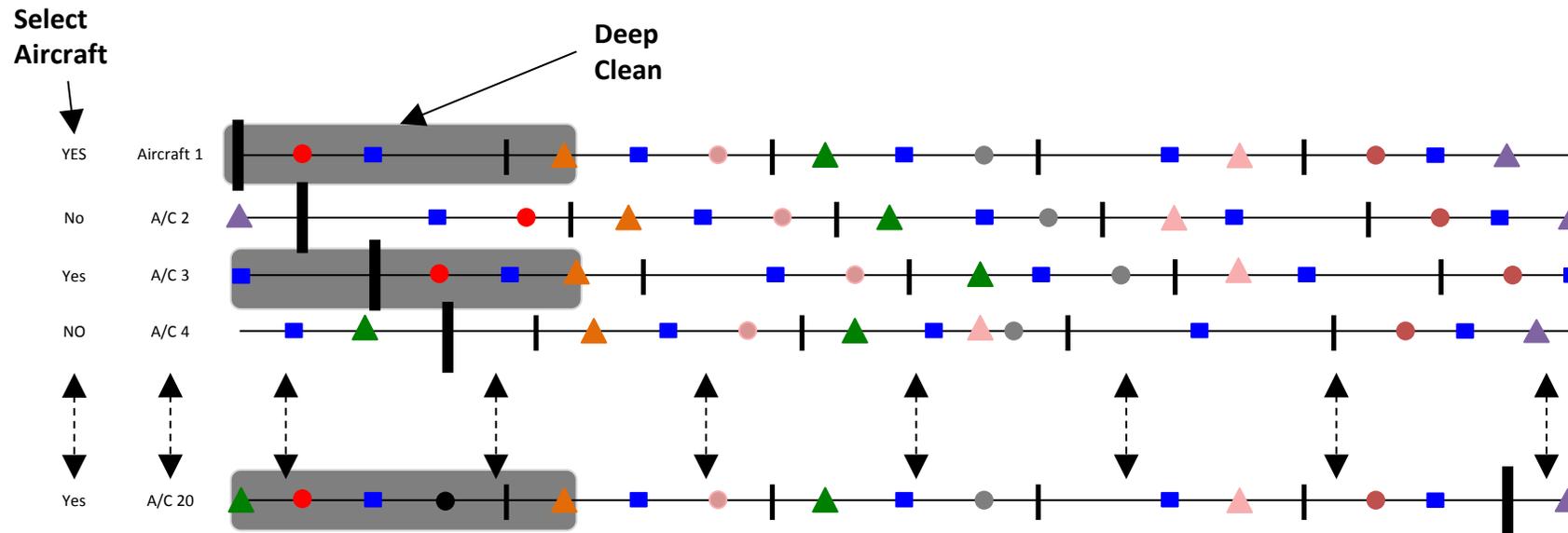
Adult Parole and Probation Solution Direction

SUCCESS FRAMEWORK
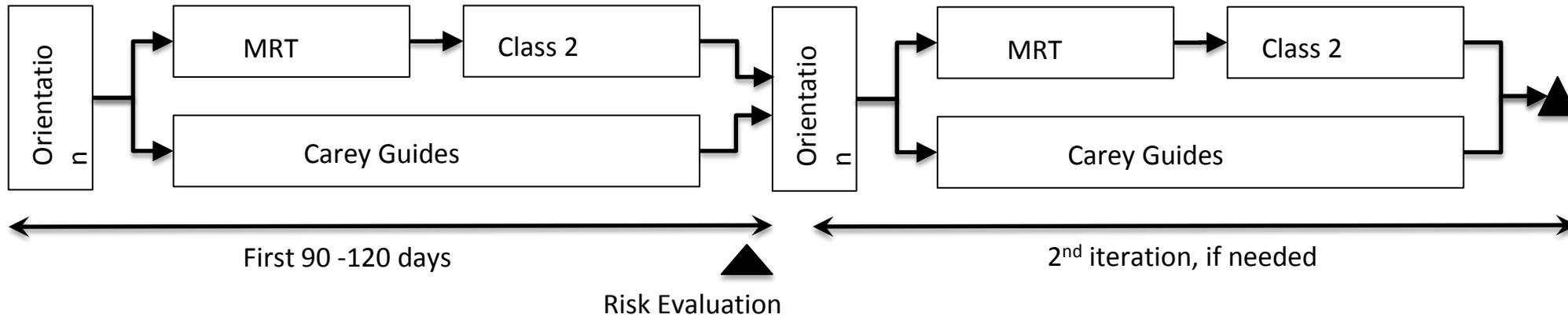
MULTITASKING/WIP CONTROL/DEEP CLEANING

- Concentrating dosage to address criminogenic behaviors during the first 90 days after sentencing, which is most influential time period to address offender risk.
- Disrupting the negative lifestyles common in moderate and high-risk offenders that lends itself to criminal activities by replacing free time with positive treatment.
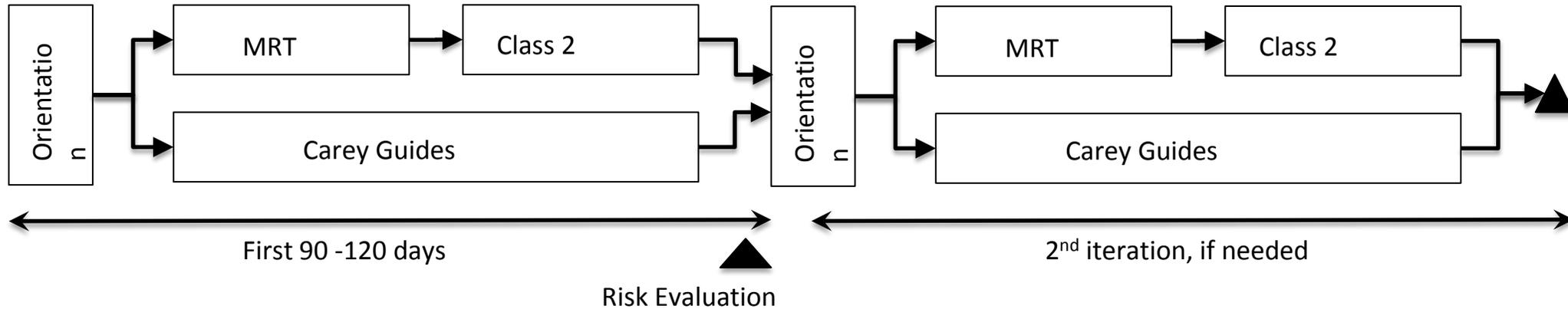
FULL KIT

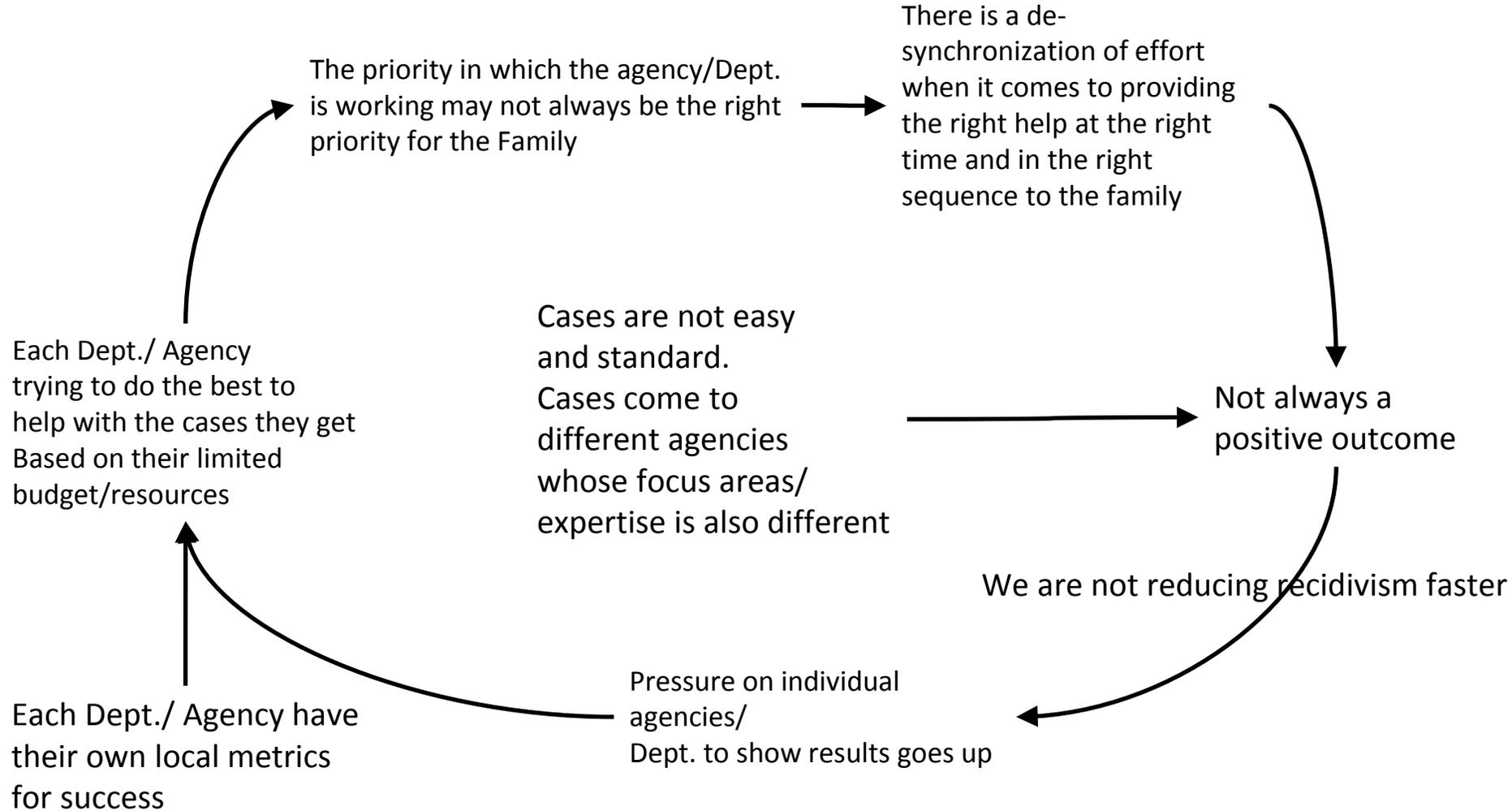- Leveraging the experts by using agents who know law enforcement and are skilled in motivational interviewing to develop a Case Action Plan (CAP) with the offender on the first visit and meet bi-monthly with the offender to jointly manage the plan and work toward successful completion. Carey Guides will be used to reduce offender risk.
- Conducting more efficient in-office visits, creating additional time for meaningful fieldwork to visit offenders in their natural environments (home and workplace).
- Leveraging existing tools by linking the Case Action and Clinical plans.

SYNCHRONIZATION

- Maximizing offender participation and buy-in of Case Action Plan to include:
  - Structuring and conducting an orientation workshop to obtain offender and family buy-in.
  - Creating a Case Action Plan with collaborative input from the offender.
- Leveraging Treatment Resource Center (TRC) services to conduct evidence-based classes that will provide offenders 80 to 100 hours of dosage during their initial 90 days on AP&P supervision.
- Obtaining buy-in from judges, county attorney, county sheriff, community mental health and substance abuse programs and Board of Pardons and Parole (BoPP) by establishing a Cache Valley Community pilot workgroup and developing a memorandum of understanding outlining roles and responsibilities for each stakeholder and support for the pilot.

SUCCESS FRAMEWORK | VICIOUS CYCLE

The priority in which the agency/Dept. is working may not always be the right priority for the Family

There is a de-synchronization of effort when it comes to providing the right help at the right time and in the right sequence to the family

Each Dept./ Agency trying to do the best to help with the cases they get Based on their limited budget/resources

Cases are not easy and standard. Cases come to different agencies whose focus areas/ expertise is also different

Not always a positive outcome

We are not reducing recidivism faster

Each Dept./ Agency have their own local metrics for success

Pressure on individual agencies/ Dept. to show results goes up

GOMB | SUCCESS FRAMEWORK

- **Triage and Prioritize from Family Perspective**: Complete a proper triage of the family and all its needs. Sequence and prioritize the help to be provided.
  - If a family needs help from 2-3 different agencies, prioritize the help and create a plan taking the priority and sequence in mind. Put a priority/sequence tag for the helping agency.
  - Obtain family buy-in/agreement regarding the sequence and priority of assistance.
  - When the case is given to other agencies, they must know/provide the sequence of help.
  - Standardize the triage process to the fullest extent possible.
- **Define a proper full kit for the family:** Create a higher level checklist at the family and at individual case level
  - Obtain full kit/checklist buy-in from the family and the assisting agency(ies)
- **Resource concentration/ Low Multitasking/ Low WIP and Dosage within each agency:**
  - Apply the Low WIP/ LOW Multitasking concept to case management.
  - Concentrate resources/ Dosage for most effective help and reduction in cycle time.
- **Adopt a family-based metric:**
  - The family-based metric should link the current local agency metrics to the family metric.
  - Most effective metrics are cycle time without compromising quality.

- Pilot of the Family Employment Program (FEP)
- The pilot will help validate and tweak our solution direction

- Over $1B invested in case management-based systems

- Several hundred thousand cases representing thousands of Utahns

- Serve and protect Utahns in significant and personal ways associated with all aspects of life---safety, health, livelihood, education, and quality of life

- We must work smarter to serve the most people at the best quality for the funds Utahns provide

SUCCESS

FRAMEWORK