

25<sup>TH</sup> ANNUAL



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# Digital Last Planner System Solves Hospital Transition Planning Nightmare

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Health System

**25 YEARS OF LEARNING: SUPERCHARGE YOUR LEAN JOURNEY IN THE MOTOR CITY**

October 26, 2023



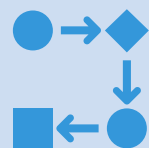
# Problem Statement



At our hospital, there was no standardized process for transitioning patients into patient units after Construction was completed.



Hospital staff changes often, and lessons learned from previous transition were lost over time.



Apply same construction pull planning principles, to a clinical process.

# Objective



**Introduce Transition Planning**



**Identify key players**



**Application of Lean Construction tools for Transition Planning**



**Provide examples of hospital Transition Planning**

# What is Transition Planning in hospitals?





# Transition Planning in Hospitals

- Application of an adapted Last Planner® philosophy for hospital operation use
- Period of time used for planning the activation of a unit
- Collaboration between 100+ people
- Transition plan could be for any type of building or project
- Organizes thoughts and operational processes in a cohesive plan to transition departments
- **Patient ready to occupy**





# Why do we Transition Plan in hospitals?



# Why do we Transition Plan in Hospitals?

- Transitioning into operational patient units is complex
- Challenges were repeatedly observed during transition
- Tested method that can be taught to any team member
- Builds trust





# Who Transition Plans in hospitals?





# Who Transition Plans in Hospitals?





# How does Jackson Health System (JHS) Transition Plan?





# How it started? (Chaos!)



- Early Lean adopters in construction introduced “the tool bag”
- Last Planner® philosophy was “borrowed” by clinical, IT, and Operations staff to plan for 1<sup>st</sup> patient day.
- Involved leaders from each department



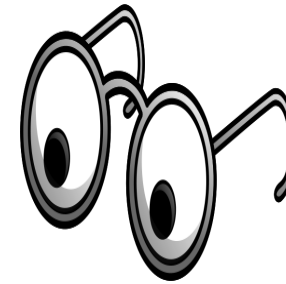
# How it's going? (Controlled Chaos!)



Technology  
implementation



This change was a  
significant  
improvement in  
engagement and  
sticky  
standardization



Provided a clear  
visual of plan



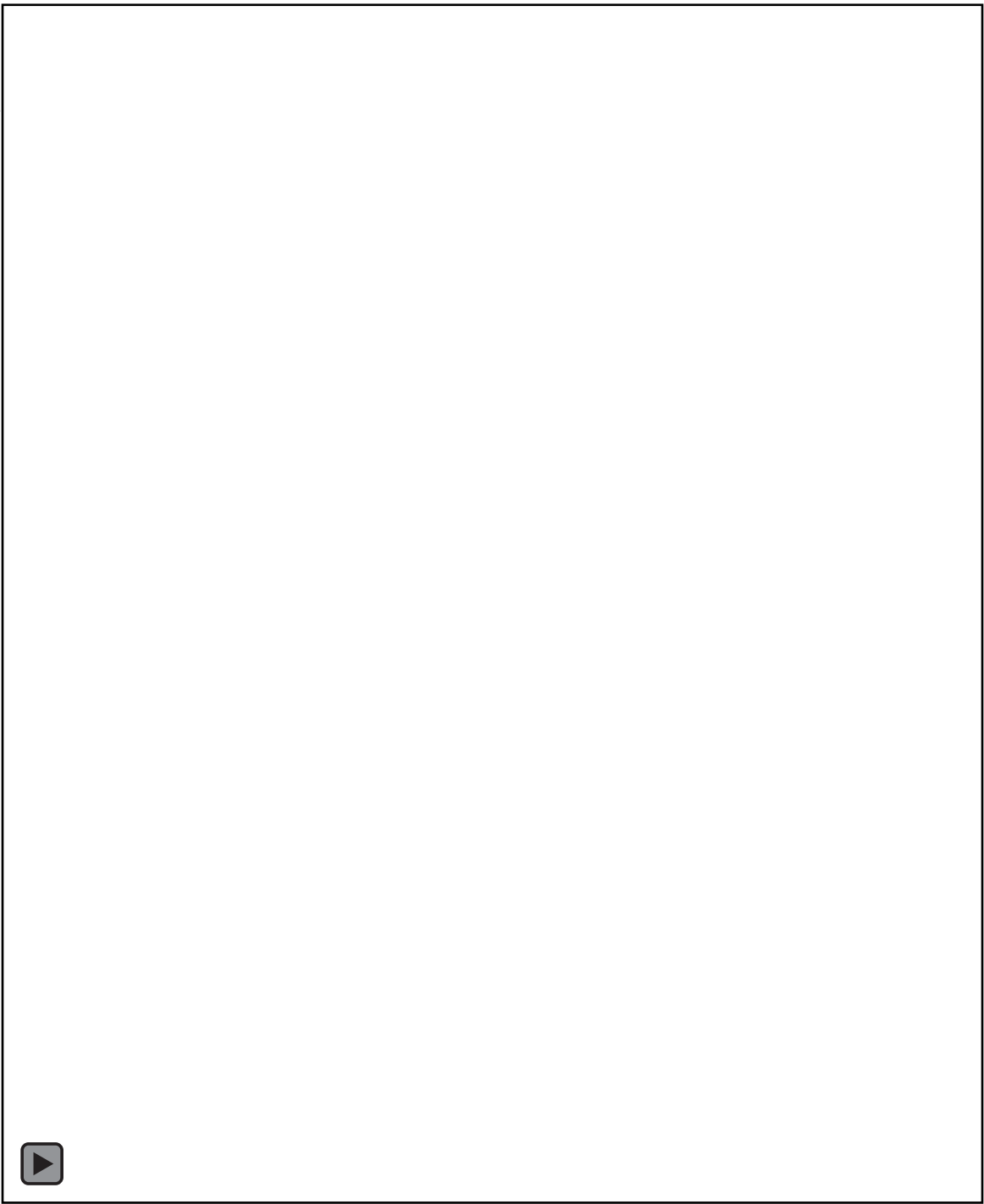
Quickly generated  
dependable plans



# Where are we now?

- Fine tuning - Visual representation of complete plan
- Technology implementation showed if departmental resources were over/under utilization
- Length of time to transition into the unit (gaps)
- Less time planning, more time delivering healthcare!







# Outcomes – Operational Failures



Delayed 1<sup>st</sup> patient day



Opening a unit without planning

Increased risk for patient care upon opening  
Rescheduling of ancillary departments



Financial impact



Reduced confidence from the hospital

# Outcomes – Operational Successes



Smooth move day



Adoption by Operations Team



Lessons learned between previous project loading/activation to project onset.



Cross training between clinical and construction, learning went both ways.



*Knowing the first patient day could help the staff forecast revenue.*



# Takeaways



ID TRANSITION PLAN  
CHAMPION/TEAM



START PLANNING  
EARLY



USE LAST PLANNER  
TOOL FOR TRANSITION



KEEP IT SIMPLE

# Questions?

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