



PATIENT VISIT REDESIGN™

Selecting a Redesign Team

Recruiting the Best Redesign Team Members

Team Selection in a Nutshell

1. Put the wrong folks on a team and your chances of success are around zero.
2. The right candidates for a redesign team are described as “lovers of change”, “problem solvers”, “open to new ideas”, expressive, and “team players”. Every team member should possess all these characteristics.
3. For team size, small is beautiful. Five-member teams are ideal. Four-member teams are possible for small offices.
4. No team member should directly report to another team member unless the size of the practice (or some other compelling reason) makes this unavoidable or even desirable.
5. The highest ranking manager possible is responsible for team selection. In a community health center, this would be the CEO. In a hospital, a Senior Vice President. The managers who help The CEO/Senior VP may wish to elicit the help of a few key managers to select the team.
6. Do not begin team selection if you are not prepared to guarantee team members eight hours a week “offline” from their regular duties to complete the redesign work. (Don’t worry, though: about a third of the offline time is devoted to test clinics that are more productive than your current process.)
7. A startlingly clear cycle-time performance mandate for the team is the prerequisite to dramatic performance improvement.
8. After team selection is completed, you must personally (face to face) recruit your final candidates individually. You will need to impress them with the importance of this project and your personal commitment to their eventual success.

Setting a Performance Mandate for the Team

Redesign is neither top-down, nor bottom-up. It is a hybrid. One of management's key roles in redesign is to tell the redesign team "which mountain to climb", but then let the team figure out how to climb it.

We are embarking on a journey to climb "the mountain of dramatically reduced patient visit cycle time." Therefore, it is the job of top management to give each redesign team a performance mandate based on cycle time. "Top management" refers to the CEO/Senior VP and top managers working together as a single group.

There is little likelihood of a goal being achieved if its progress cannot be measured, so the performance goal must be quantitative in nature. In fact, it is by the very nature of a quantitative goal that a redesign team can determine internally whether it is making progress or not. In taking a vacation by car we use the same concept to keep us focused until we reach our goal. "Our destination is 600 miles from home and we've gone 300 miles. Wow, we're halfway there!" A quantitative goal is not open to individual interpretation.

Also, the goal should be hard, though not impossible, to reach. The performance goal is neither "the ideal goal", nor is it a "realistic" goal. In healthcare, "realistic" is often another way of saying "mediocre performance". Our favorite cycle time goal for a primary care clinic is:

"90% of patient visits will be completed within 45 minutes."

The reality is that it is not always appropriate to have a particular visit completed within 45 minutes. Thus, only 90% of all visits are subject to the goal. The shorter the cycle time goal, the greater expectation for change by top management. Performance mandates for primary care clinics customarily range between 30 and 60 minutes. If your performance goal is greater than 60 minutes, there should be a very compelling reason.

The patient visit performance mandate you set—i.e., 30 or 45 minutes—should be between 2.0-2.5 times the average amount of time a clinician spends with a patient. In primary care this average is around 15-18 minutes. If this is also statistically true for you, your cycle time goal should be within the 30-45 minute range. It is a mistake for you to set a modest mandate. Redesign is not about incremental improvement.

The CEO/Sr. VP should determine the performance mandate and relay the decision clearly to the redesign team. We strongly encourage you to pick a challenging goal—your team will try hard to live up to your expectations, and your patients will thank you for it!

Selecting Initial Team Candidates

This guide is written for the managers who will be held responsible by the CEO or Senior VP for bringing the redesign project to a successful conclusion. Your best shot at doing this is to choose the best team possible. Your management team will likely need to meet for two hours, uninterrupted, to complete this step.

Before the management group meets for the team selection meeting, however, each of you must develop a written roster of seven or eight candidates that is then shared in the group session. Keep this initial roster of candidates confidential. Do not discuss your list with any other managers.

Michael Hammer, who coined the term “reengineering”, describes the perfect reengineer as a female engineer with a marketing background. While such a powerful combination brings sensitivity, communication abilities, analytical and problem solving skills to the team, the odds of finding such a person in a health care setting are slim to nil. While Hammer’s theoretical reengineer is a rarity, her key characteristics are still those we value in every team member.

For each candidate you consider seriously, you should be able to give an unequivocal and resounding “Yes” to each of the following questions:

- > Does this person LOVE change? (Provide examples).
- > Is she/he described consistently as a TEAM PLAYER?
- > Is he/she an EXCELLENT COMMUNICATOR? (Don’t put “quiet” people on your team!)
- > Is the person a PROVEN PROBLEM SOLVER? (Provide examples).
- > Is she/he FRUSTRATED by your current processes?
- > Does the candidate INTERACT WITH PATIENTS regularly in her/his current job?

After every manager on the management team has come up his or her own list of seven or eight candidates, you’ll need to meet as a group and share your lists of top candidates and distill them into a single roster of seven to eight candidates. Choose a facilitator for this task and very thoughtfully review each manager’s candidates for the redesign team. Discuss the pros and cons of each of your choices, being mindful of the attributes listed above. Decide on the seven or eight candidates that you all agree would be the best potential redesign team members

Here are some tips for selecting powerful and effective redesign teams:

- > No team member should have a direct reporting relationship to another. This is necessary if we are to create a team of equals.
- > Most team members should have a solid familiarity with the details of the processes they are to reengineer. That means a clinician should be on the team.

- › Team members should not be selected according to job function or role, but rather on the basis of how well they meet the characteristics outlined above. Any missing “talent” can be recruited to help the team once it is organized.
- › Any manager or staff member is eligible to be on the redesign team as long as the candidate possesses the individual characteristics listed above.
- › The team should have at least one “in-your-face” person. This person can candidly deliver bad news. This person prizes truth above artificial harmony.
- › A team member can be from outside the area/site/clinic that is being redesigned, but only if travel logistics do not make it too impractical.
- › Most successful teams have a team member who was the inside “reengineering champion” prior to management’s deciding to redesign. This person is already turned on by redesign. Make sure you put this person on the team.

On the REDESIGN TEAM CANDIDATE ROSTER worksheet at the end of this Advisory, list the name of the candidate, position, phone number/extension, and email address, along with a few sentences about your rationale for nominating this person for the team. Do not share this roster with anyone yet—especially not with potential redesign team members. You have one more step to take before you have your final roster of candidates.

Final Round and Balancing Your Team Chemistry

Let a couple of days go by before having your next meeting. The management team should now meet a second time, for approximately an hour, to complete the selection of the redesign team.

“Team chemistry” refers to optimal and creative interactions among team members. The better the chemistry, the faster the team moves, and in redesign, momentum is everything. If team chemistry is poor, the team will be forever hampered by troubling team dynamics. Looking at your initial seven to eight candidates, which four to six candidates will produce the best team chemistry and balance? Try different combinations of people until you come up with the strongest possible configuration of team members. Take your time and explore multiple combinations—this step is worth doing carefully.

Now, are you satisfied with the composition of the team? Your team roster is not considered final until your CEO/Senior VP has approved it.

Successfully Recruiting Team Candidates

This final step is perilous for most organizations and abounds in pitfalls. There are many ways to squander the opportunity to recruit great redesign team members. Don’t think of this as “recruitment” so much as “convincing candidates to join the team voluntarily and enthusiastically”. The recruitment process should incorporate the following considerations:



- > A face-to-face recruitment between the highest possible level of management and the individual candidate. When recruiting redesign team members, you need to explain the following:
 - > Why this project is important to you.
 - > Why it is important to you to have her/him on this team.
 - > That a candidate cannot be “drafted”, but must decide whether to accept a position on the team. (If a candidate needs to think, give her no more than 48 hours).
 - > Your performance goal (“90 percent of all visits will be completed in 45 minutes or under”) and intent (e.g., “Streamlining the patient visit so it takes less time, eliminates most waiting time, and reduces paperwork for staff.”). Explain why the goal is important to you.
 - > The seriousness of the time commitment. Team members will dedicate six to eight hours weekly to the reengineering effort.
 - > Your role and commitment in ensuring the team gets adequate time to complete its redesign work.



Redesign Team Candidate Roster

1. Site or area to be redesigned (e.g., Pediatrics, 2nd floor).

2. Identify the Performance Mandate for this team.

90% of all visits will be completed within minutes.

3. In the table below, please list the initial REDESIGN TEAM CANDIDATES.

Final	Name	Title/Position	Phone	Email
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