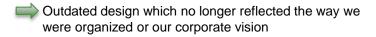
# LEAN PROJECT MANAGEMENT "THE HARD WAY"

11.18.11

Mary Heger Vice President, Information Technology and ASC

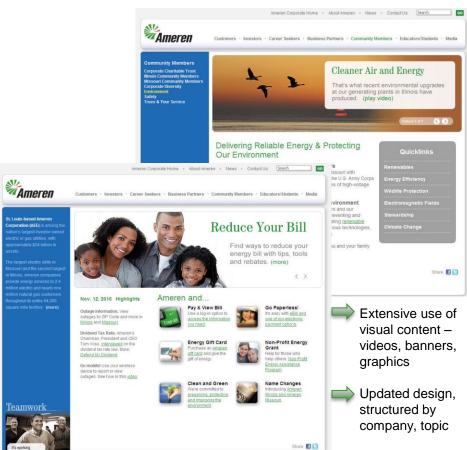


#### THE CHALLENGE



Minimal use of interactive or current internet technologies, like mobility, social media, desktop widgets, etc.



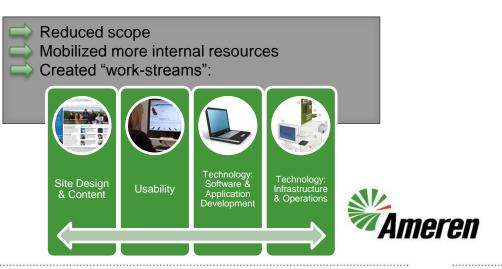




#### **ACTIONS & RESULTS**

	Month													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Original Project Estimate: 14 months, \$5.2M														
	Prep	Plan & Design			Phased Build/Test & Implement by Site									Close

Actual Project: 6 months, \$3.2M									
Prep	Plan &	Phased Build/Test by	Implement						
	Design	Site Group	& Close						



#### **HOW IT WORKED**





# APPLYING LEAN PROJECT MANAGEMENT CONCEPTS

- Value Delivery
  - "Brutal" Scope Control "Hard" Target Date
    - 80% vs 100%
    - Break into pieces
    - Defer 20%
  - Executive Sponsorship
    - Strong leadership from business sponsor
    - Decision turn-around requirements
    - Decision Log
    - Weekly sponsor meetings
  - Results
    - Delivered a functioning website in record time



#### Project Flow

- Organization
  - Program Manager
  - Project Manager for each work stream
  - Internal and External resources
- On-Going Management
  - Sense of Urgency from Day 1
  - Specific tasks/assignments
  - Daily stand-up meeting
- Tools
  - Microsoft Project
  - Sharepoint collaboration
- Team Members
  - Empowered to make decisions and run project



#### IN RETROSPECT....

#### Advantages

- Business value delivered quickly
- Avoided risk of long project with associated overruns
- Team could tolerate intense 6 month project
- Burning platform for scope control
- Budget and plan for postponed scope

#### Disadvantages

- Extremely aggressive work plan and schedule team fatigue
- Could have managed scope more effectively
- Budget and plan for postponed scope
- Applying Lessons Learned
  - Divide projects into small stand-alone components
  - Deliver value quickly 6 month delivery cycles
  - Manage schedule and budget risks



# Lean Construction and Integrated Project Delivery

Timothy M. Gunn - Project Director

Alberici Constructors

November 2011

**Presented to PM Symposium** 



# Symptoms of a broken system

- Numerous RFIs and change orders
- Re-design
- Delays
- Cost surprises, spiraling project cost
- Loss of scope to "stay in budget"
- Claims and disputes and lawsuits
- Changing cast of players
- Poorly functioning, un-maintainable designs
- Unmet expectations
- Productivity losses
- No fun



# What makes your work unproductive?

- What are the typical roadblocks that make your work unproductive?
  - ✓ Access to the work area
  - ✓ Schedule bottlenecks
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  - ✓ Material deliveries
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- ✓ Sequence, wall studs too early
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- √ Moving material
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## **Lean Production Theory**

- Taichi Ohno Toyota
- Waste
  - 1. Overproduction
  - 2. Waiting
  - 3. Unnecessary Transport
  - 4. Over-processing or Incorrect processing
  - 5. Excess Inventory
  - 6. Unnecessary Motion
  - 7. Defects



#### **Production Control: Last Planner System** ™

Master Scheduling

Phase Scheduling

**Look-ahead Planning** 

**Weekly Work Planning** 

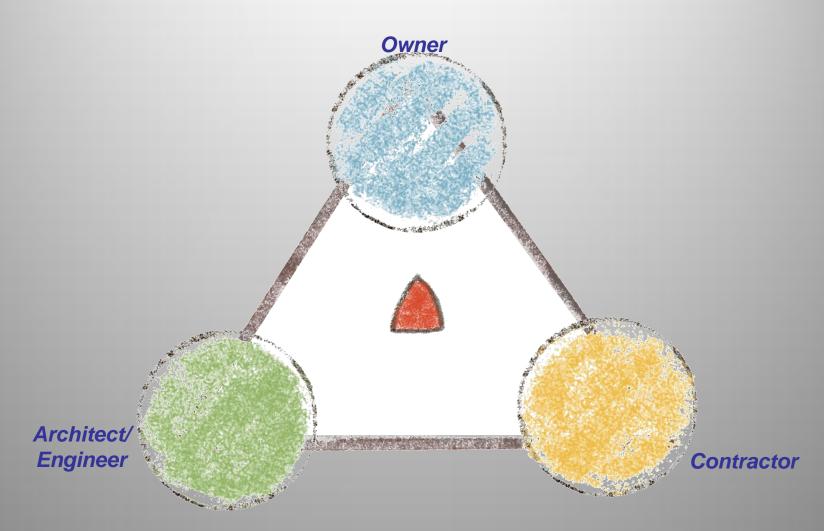
**Learning** 







#### **Integrated Project Delivery (IPD)**





# **Integrated Project Delivery**

#### Integrated Project Delivery

- Redefines relationships
- Intensifies collaboration
- Improves communications
- Aligns parties
- Utilizes lean construction techniques
- Drives out waste



### So what Is Integrated Project Delivery (IPD)?

- Relational Contract Agreement
- Core Group
- Team Selection
- Target Value Design Process
- Financial/Incentive Agreement
- BIM/3D Modeling
- Production Control System

Based on model behaviors

**Collaborate**Intensely

Optimize the Whole

**Improve Continuously** 

**Innovate** 

**Build Trust** 



#### Part 3: Project Outcomes

- SSM Cardinal Glennon Children's Medical Center
  - \$46,000,000
  - 120,000sf addition
  - 60 private NICU rooms
  - 10 OR's
  - Completed August 2007
- SSM St. Clare Health Center
  - \$153,300,000 Replacement Hospital
  - 430,000sf
  - 180 beds
  - 54 acre site
  - First Patient March 30, 2009

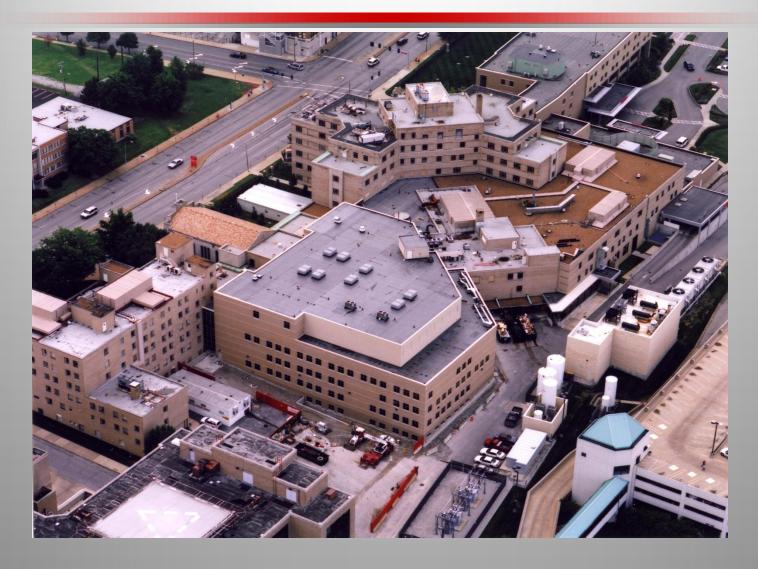


#### Positive Outcomes at Cardinal Glennon

- Schedule
  - All interim milestones met in 18 month schedule
  - Achieved Substantial completion 1.5 months early
- Budget
  - 40% of original Construction Contingency intact
  - No Owner CO's written
- Safety
  - 275,000 total hours, 34,375 WH per incident
  - Clean, efficient site. No facility disruption
- Design
  - On time, as needed, design team engaged, fully coordinated, Owner understood design
  - 63 RFIs



#### Cardinal Glennon - Aerial View



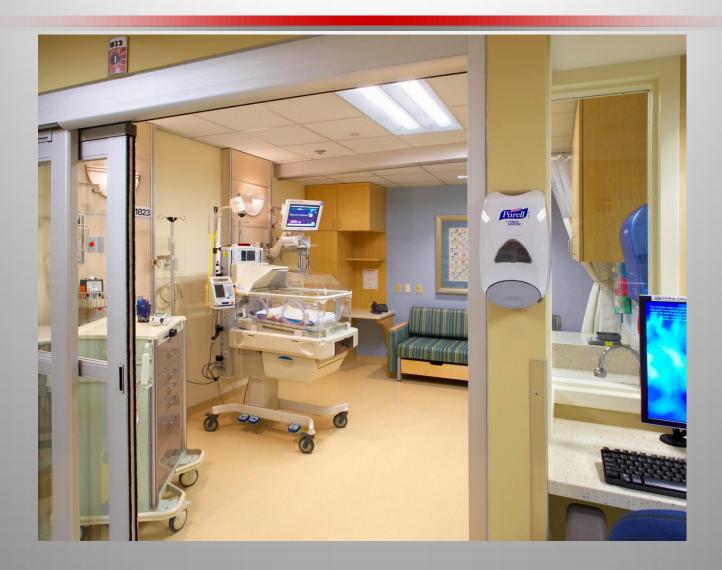


## **Cardinal Glennon - NICU Corridor**





## **Cardinal Glennon - NICU Patient Room**





#### **Cardinal Glennon - PACU**





# **Cardinal Glennon - Operating Room**





#### Positive Outcomes at St Clare

- Schedule
  - First Patient March 30, 2009 On Schedule
  - Overcame record Spring 2008 weather and fundamental patient room design change
- Budget
  - On Budget = \$153,300,000
- Safety
  - Over 1.15M workhours
  - OSHA Recordable rate = 0.1739
- Design
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#### SSM St. Clare Health Center





# **East Courtyard**





# **Visitor Lobby**





## **Patient Room**





#### **Conclusions**

- There is waste in conventional construction delivery.
  - Cost of assigning risk
  - Protective behavior of parties at risk
  - Working & thinking in isolation
  - Dis-incentives for collaboration
  - Neither designer nor builder can optimize by themselves
  - Non-value added work abounds
    - RFIs
    - Duplication of effort (e.g. design docs redrawn as submittals)
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#### **Integrated Project Delivery Offers Real Benefits**

#### By eliminating waste:

- Schedules can be optimized
- Design can be optimized
- Workplaces are safer
- Quality is increased
- Costs can be reduced
- Management can focus on real issues.



# **Thank You**



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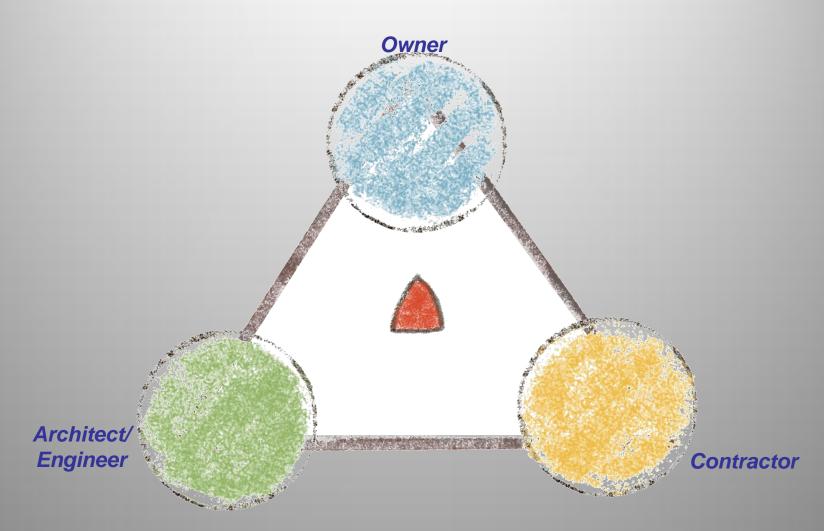
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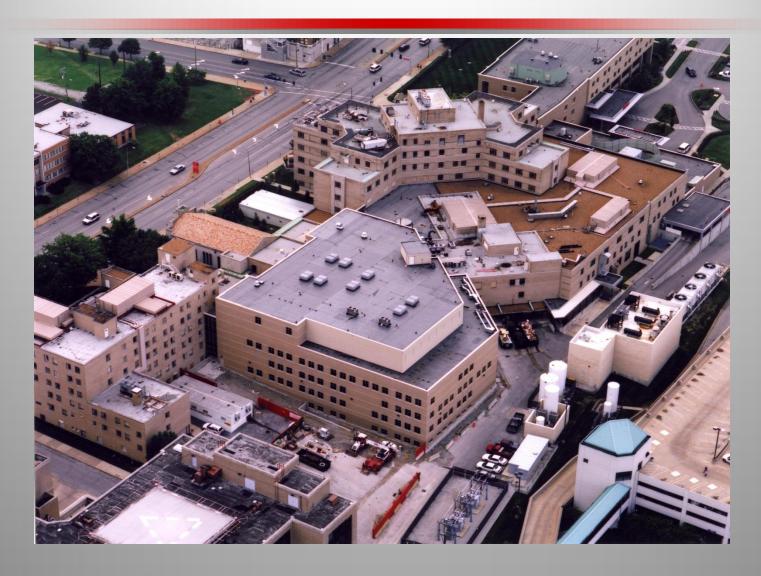


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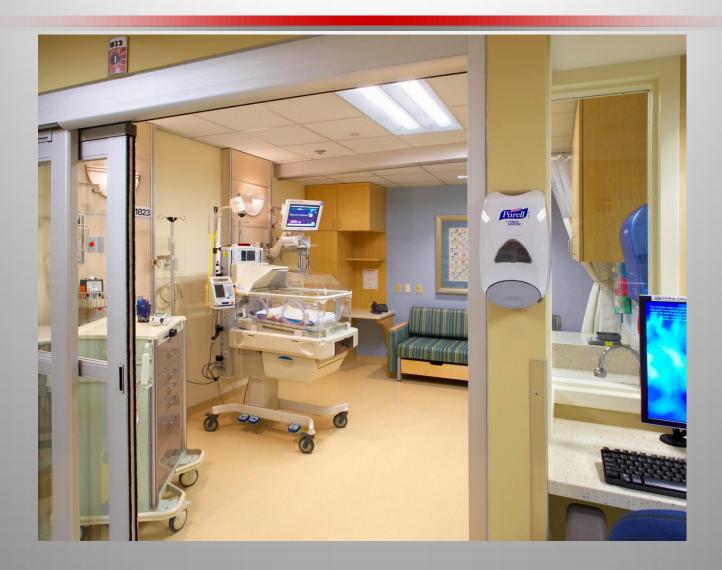


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