



ASIAN PRODUCTIVITY ORGANIZATION

PROJECT NOTIFICATION

13 December 2016

1. **Project Code** 16-IN-85-GE-SMN-A
2. **Title** Study Mission to a Nonmember Country on Lean and Advanced Technology in Healthcare Services
3. **Timing and Duration** 5–9 June 2017 (five days)
4. **Venue** Palm Springs, CA, USA
5. **Implementing Organization** APO Secretariat
6. **Number of Overseas Participants** Up to 18 qualified participants
7. **Closing Date for Nominations** 9 April 2017

8. Objectives

To learn about and exchange information on advanced technology and future trends in the healthcare sector for accelerated productivity growth and competitiveness, observe the transformation of healthcare technology in providing services to end users, study the best practices of process improvement through lean applications in the US healthcare sector, and establish networks with experts and professionals working in this field.

9. Background

The Economist reported that the healthcare industry in Asia has the biggest potential for growth. With more than half of the world population living on this continent and backed by factors such as rising incomes and spending power, greater awareness of healthy lifestyles, and aging populations, the need to receive better health treatment has increased. At the same time, people are also demanding better service provision and quality. Therefore, a transformation of the entire healthcare ecosystem is required, from pharmaceuticals to makers of health devices, and from insurance companies to hospital chain operators. One of the largest transformations will be the merger of healthcare and technology, be it home healthcare, home monitoring, or wearable devices. The use of smart technology such as smartphones, connected medical accessories, and health-related apps has increased in the past two years. Consumers, especially the millennial generation, prefer to monitor and diagnose their health anytime, anywhere through mobile apps. Overall, this could improve the service quality of healthcare organizations by squeezing out administrative waste, reducing costly errors, managing chronic conditions better, and understanding consumer preferences more

rationally. This has happened in countries such as the USA, and it is expected that it will also occur in APO members like Indonesia, Malaysia, Singapore, and Thailand.

In the meantime, healthcare providers need to improve their internal processes continuously to deliver effective services. Process improvement activities such as lean management that were confirmed to be effective in manufacturing are now being expanded to other sectors, including healthcare. Originating from the production system established by Toyota Motor, lean operating principles and methods have been proven to help organizations increase productivity and create maximum value for customers by reducing unnecessary waste and waits. Although healthcare differs in many ways from auto manufacturing, there are also similarities in building a vehicle for customers and providing healthcare for patients, since multiple complex tasks given to employees create unnecessary waste that decreases the value of the product or service in both.

Against this background, this study mission is being organized to study advanced technology and lean applications in the USA. In conjunction with the Lean Healthcare Transformation Summit 2017, participants are expected to learn, share, and network with healthcare practitioners and leaders from around the globe. Participants will also have the opportunity to visit several excellent healthcare organizations during this mission. Furthermore, this project aims to expand the coverage of APO programs for the service sector.

10. Scope and Methodology

Scope

- a. Discussions on productivity improvement initiatives , emerging and future trends impacting the healthcare sector in member countries and the USA;
- b. Lessons learned from healthcare communities including providers, employers, purchasers, and patients on lean applications leading to transparent performance, speedy delivery, and value creation in the USA;
- c. Attending the Lean Healthcare Transformation Summit 7–8 June; and
- d. Observational study visits showcasing advanced technology in the healthcare sector.

Methodology

Site visits, expert presentations, facilitated discussions, and group work.

The tentative program of the study mission is given below:

Date/Time	Activity
Sun., 4 June 2017	Arrival of participants in California, USA
Mon., 5 June 2017	Opening session Presentations on issues, challenges and emerging trends in the healthcare sector productivity
Tues., 6 June 2017	Study visits to selected healthcare centers
Wed., 7 June 2017	Attending the Lean Healthcare Transformation Summit
Thurs., 8 June 2017	Attending the Lean Healthcare Transformation Summit
Fri., 9 June 20017	Study visits to selected healthcare centers Summing-up and closing session
Sat., 10 June 2017	Departure from California, USA

11. Qualifications of Candidates

The participants are expected to possess the following qualifications:

Present Position	Healthcare professionals involved in quality management, representatives from government agencies involved in healthcare reform, healthcare service providers, manufacturers of healthcare products, and professional consultants involved in lean management.
Experience	At least five years of experience in the position described above.
Education	University degree or equivalent qualification from a recognized university/institution.
Language	All proceedings of the project are conducted in English, and participants are expected to engage in discussions and make presentations. They must therefore be proficient in spoken and written English. Those who are not proficient in English will not be accepted.
Health	Physically and mentally fit to attend an intensive project requiring participants to complete a number of individual and group activities and strenuous fieldwork. It is therefore recommended that member countries do not nominate candidates likely to suffer from physical and mental stress.
Age	Candidates who fit the above profile are typically between 30 and 50 years of age.
APO Certificate	Participants are required to attend the entire program to receive the APO certificate of attendance.

12. Financial Arrangements

To be borne by participants or participating countries

- a. International airfare between the international airport nearest to the participants' place of work and California, USA.
- b. Any travel expenses related to travel insurance costs, passport, visa fees, and airport taxes.
- c. Participants' insurance premiums: All participants must be fully insured against accident and illness (including hospitalization and death) for a principal sum equivalent to USD10,000.00 for the entire duration of the project and travel and must submit to the APO Secretariat a copy of the comprehensive travel insurance certificate before participation. Such insurance should be valid in the host country. This insurance requirement is in addition to existing government insurance coverage in some member countries. If any participant is unable to insure himself/herself as stipulated above, he/she should secure this insurance in the host country at the commencement of the project and

pay the premium himself/herself, if necessary, from the per diem allowance provided. Neither the APO nor the implementing organizations will be responsible for any eventuality arising from accident or illness.

- d. Any expenses incurred by participants for stopovers on the way to and from the project venue as well as for extra stay at the project venue before and/or after the official project period on account of early arrival or late departure, for example, due to either limited available flights or any other reason.
- e. Any cancellation charges for airfare and hotel accommodations arising from withdrawals after letters of acceptance have been issued by the APO.

To be borne by the APO

- a. Per diem allowances and hotel accommodations for up to 18 overseas participants for up to six days at the rate to be specified later.
- b. All assignment costs of resource persons.
- c. All local implementation costs.

13. Actions by Member Countries

- a. Each participating country is requested to nominate three or more candidates in the order of preference. Please ensure that candidates nominated meet the qualifications specified under section 11 above.
- b. No form of self-nomination will be accepted. All nominations must be endorsed and submitted by an APO Director, Alternative Director, Liaison Officer, or their designated officer.
- c. Please note that nomination of a candidate does not necessarily guarantee that he/she will be selected. Selection is at the discretion of the APO Secretariat. A basic criterion for selection is the homogeneity of the participants in terms of qualifications and work experience. Nonselection therefore does not mean that the candidates concerned are not competent enough. Sometimes candidates are not selected because they are overqualified for a project.
- d. Each nomination should be accompanied by the necessary documents. A nomination lacking any of these documents may not be considered: two copies of the candidate's biodata on the APO biodata form together with a passport-sized photograph. The biodata form can be downloaded from the APO website (www.apo-tokyo.org). We encourage submitting the biodata form to the APO Secretariat in electronic form as an attachment to a cover e-mail message from the APO Director, Alternate Director, or Liaison Officer. The nomination documents should be sent to the Industry Department, APO Secretariat (e-mail: ind@apo-tokyo.org, fax: 81-3-5840-5324).
- e. The APO Medical and Insurance Declaration/Certification Form. Every candidate must complete and submit a copy of the APO Medical and Insurance Declaration/Certification Form with his/her biodata at the time of nomination. Please note that self-declaration is

sufficient for candidates without any of health conditions or illnesses listed on the reverse side of the medical form. However, for all others, medical certification by a licensed physician on the reverse side of the medical form is required.

- f. Necessary documents are to be submitted electronically. In that case, there is no need to send a hard copy by postal mail. However, if the documents are submitted by fax, member countries are requested to mail the originals of the documents to the APO Secretariat as well. If a digital photograph of a nominee is not attached to the electronic biodata form, a hard-copy photograph should be sent to the APO Secretariat by postal mail. Please give the candidate's name and the project code on the reverse side of the photograph.
- g. Member countries are requested to adhere to the nomination deadline given on page 1. The APO Secretariat may not consider late nominations as they have in the past resulted in considerable difficulties to the implementing organization in its preparatory work for the project.
- h. For member countries where nominations are required to be approved by higher government authorities and require a longer time, the APO Liaison Officers/NPOs are urged to send the names of nominees on or before the deadline, indicating that government approval will follow.
- i. If a selected participant becomes unable to attend, he/she should inform the APO Liaison Officer/NPO in his/her country immediately and give the reason for withdrawal. The NPO concerned is requested to transmit that information to the APO Secretariat and the host country promptly.
- j. NPOs are requested to inform the selected participants that they are not to bring family members or to engage in any private business activities during the entire duration of the project.
- k. Each selected participant should be instructed to arrive at the venue one day before the start of the official project. Also, he/she is expected to return home upon completion of the official project because he/she is visiting the host country for the specific purpose of attending this APO study mission.
- l. NPOs should inform participants that they must attend all five days of the project to qualify for the certificate of attendance.
- m. NPOs should assist the APO and/or host country in collecting amounts corresponding to cancellation charges arising from participant withdrawal, as provided for under item 12.

14. Actions by the APO Secretariat

- a. Under normal circumstances, candidates who are selected will be informed of their acceptance at least four weeks prior to the start of the project.
- b. If some candidates fail to qualify or be unable to participate after selection, or if some member countries fail to nominate any candidate, their slots may be filled by alternates from the same or another member country on a merit basis.

15. Postproject Actions

All participants are required to prepare action plans based on their learning from the study mission for follow-up and share the plans with their NPOs. The APO will also request participants to submit progress reports six months after completion of the study mission.

16. Evaluation of Participants

If the conduct/attendance/performance of a participant is not satisfactory, these will be reported to the APO director concerned.

17. Guide for Participants

Other conditions for participation are given in the *APO Guide for Participants*, which is available from APO Liaison Officers/NPOs in member countries and on the APO website (www.apo-tokyo.org).



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