The Recipe for Lean

in the NHS

(Rotherham Style)

Kim Ashall

Director of Service Improvement

Background

- New CEO
- Need to empower front line staff
- Seen lots of improvement methodologies, but 'lean' seemed to fit
- Purchased 6 months of consultancy time
- Then made it our own!

How to start

- **Push versus Pull**

- **Top down versus bottom up**

- **Corporate Improvement Committee**

- **Communication**

Rapidly **I**mproving **S**ervices for **E**veryone

Problem Solving Pathway – Submission Form

**Executive Lead………………………   Sponsor………………………   Team Leader…………………
QIF………………………**

Proposed Improvement – Outline description
Why do you want to review the process? - Why is this pathway being put forward
How is the current process performing? - How is it doing against the targets– waiting times, utilisation, cost?
What are you hoping to achieve by reviewing the pathway? – What are the measurable success factors

Predicted Benefits
Patients and Staff
CSU
Organisation

More submission process

Roles and Responsibilities

The Sponsor will be expected to*:*
- Give the appropriate time commitment to ensure the successful implementation of the revised pathway
  – Provide detailed brief to team
  – Meeting with team leader / activity facilitator as required
  – Attending at least some part of each day during any event week.
- Be in a position to be able to influence the pathway and to lead at any external customer meetings.
- Be responsible for monitoring sustainment

The Team Leader will be expected to:
- Give the appropriate time commitment to ensure the successful implementation of the outcomes.
  – Approx ½ day a week in preparation leading to the event (3-6 weeks)
  – Entire duration of the event
  – Approx ½ day a week developing and sustaining the outcome of the event (3-6 weeks)
  – Organising sustainment activities as required
- Not to lead more than 1 event at any time
- To identify team members and manage any deployment issues to ensure maximum attendance from each member
- To initiate the A3 sheets, with the help of the SI Team, but holding ultimate responsibility for their completion.

The Service Improvement Team will be expected to:
- Co-ordinate and facilitate activities leading to service development e.g. methodology training, mentorship, empowerment and transformation events
- Advice on type and duration of SI activity
- Assist in preparation acivities
- Provide support in project management and monitoring including benefits tracking
- Undertake projects assigned by CSIIC report on progress and barriers

Preparation

- **6 weeks work**
- **Data collection**
- **Best practice**
- **Photographs**
- **Patient survey**
- **Staff survey**

Recipe & Agenda

Day 1

- **Introduction – Team leader introduces the workshop**

- **The Current State**

- **Identifying the wastes**

Day 2

- **Tools for an effective workplace**

- **Ideal State**

- **Future State**

- **Action planning**

- **Round up (or at end of day 3 or 4)**

•Day 3 and 4 (optional)

- **Making the changes**

respect

Individual

Organization
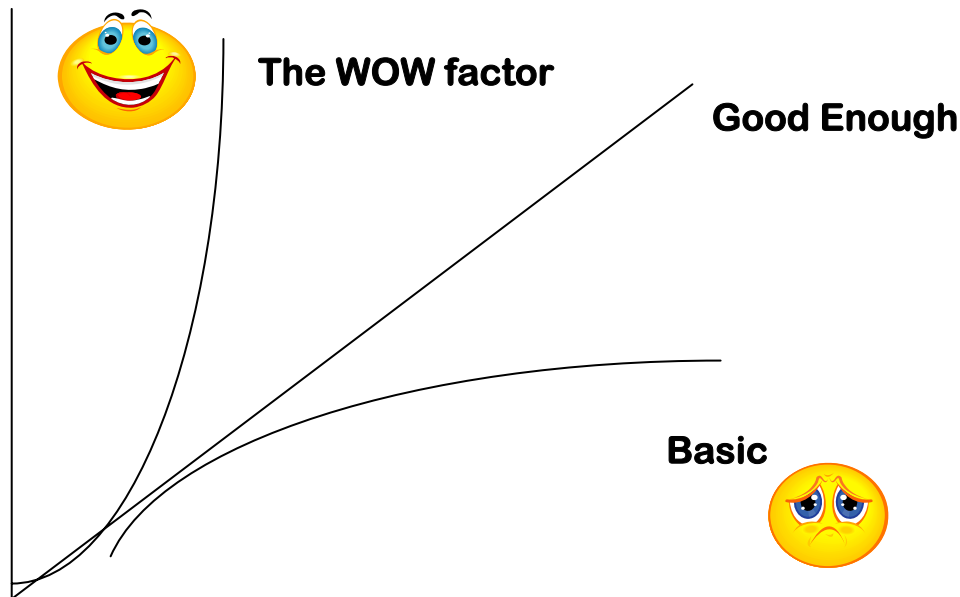
Work

RESPECT

Supervisor

Team Members

Rapid & Continual
Improvement is

reduce waste

So who are the users and what do they want?

- **Make a list of the users of the pathway**
- **How would they define value**

The current state

Map what happens now (not what should happen)

One post it per action

Focus on the 'runners', not the 'strangers'

Waste.....*(as opposed to VALUE)*

- any activity that does not create value

T	**Transport**
I	**Inventory**
M	**Motion**
(P)	**People**
W	**Waits and Delays**
O	**Over processing**
O	**Over production**
D	**Defect**

Some of our Excess inventory / stock

Reduce the waste

Waste	Value

Increase Value

Value is anything that positively and directly changes the condition of the patient, service of product

Waste	Value

**Typically processes are 90% waste
and 10% value**

Where does the process <u>not</u> meet the needs of the customers?

Root Cause Analysis
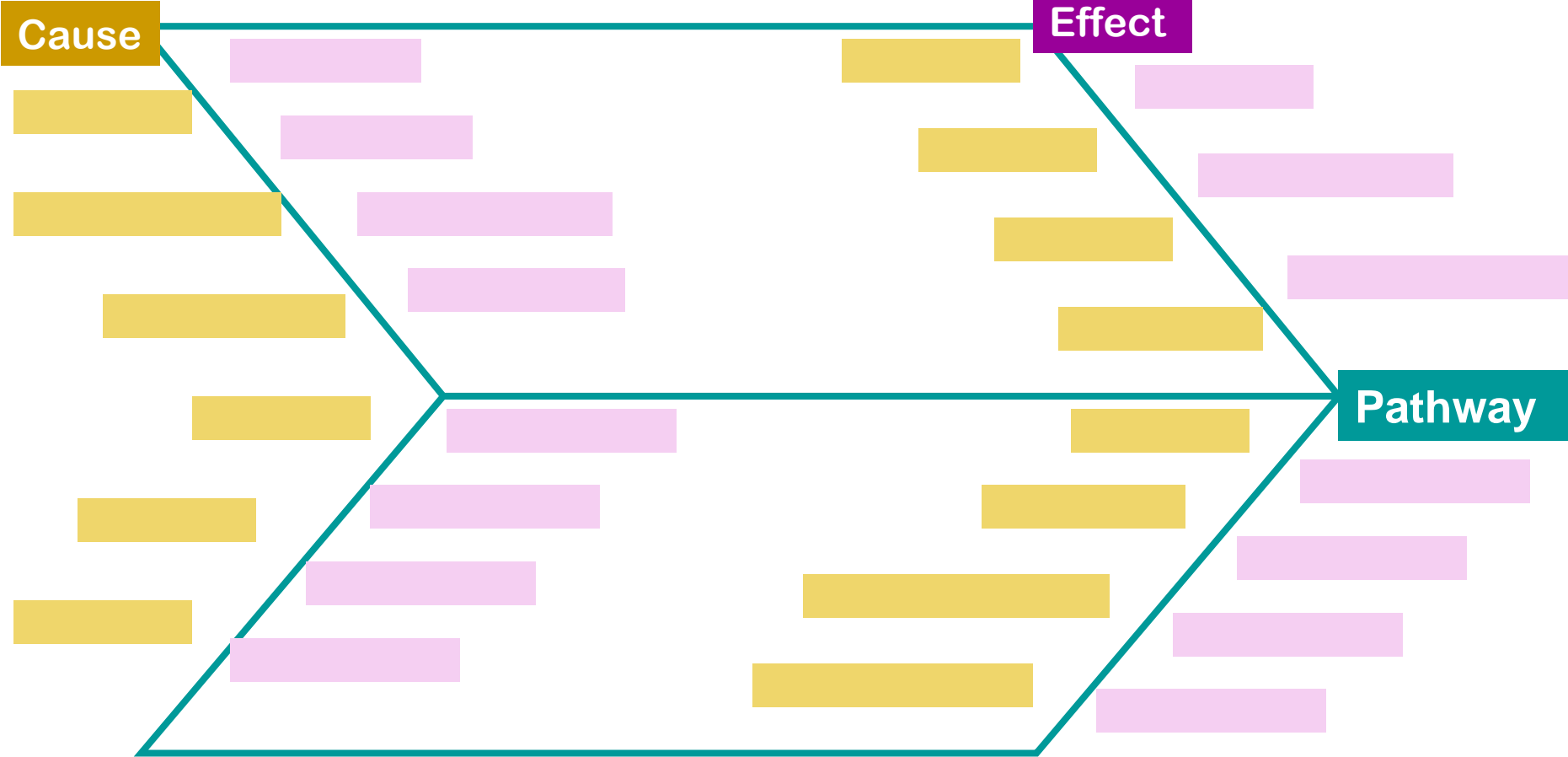
Significant red flag issue

Significant red flag issue

Cause

Effect

Pathway

Significant red flag issue

Significant red flag issue

Tools to improve a process

Rapidly Improving Services
for
Everyone

| Flow | Pull | 6s | SoP | Visual Control |

Effective Pathway / Work Environment

Flow

For continuous flow, we need to understand the demand for the service and avoid batching and queuing.
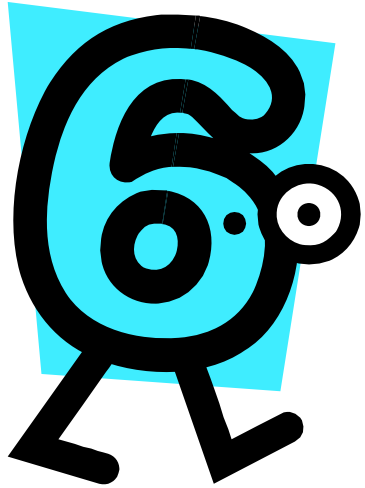
We should aim for one piece flow

Pull

When we take something from the end of a line, what's the signal to replenish it?

Processes or pathways need to be organised to pull parts or patients through a process/system not push. Aim to get things on demand

6S

Sort out	Get rid of everything not needed
Scrub	Clean up
Safety	Address anything that is not safe
Set in Order	Organise what is needed in the correct order
Standardise	Establish: who/ what/ when/ where
Sustain	Self discipline, care and monitoring

From **THIS**.......   ....**TO THIS**

Standard work must be:

- *VALIDATED*

(Tested & amended if appropriate)

- *AGREED*

- D*OCUMENTED*

- *IMPLEMENTED*

- *SUSTAINED*

Visual Management

Blood Pressure Recording Protocol- Stroke Unit

140/80 to 180/100	**Record BP:** • Four times daily (QDS) for first 7 days • Daily after first 7 days if anti-hypertensives **NOT** commenced • QDS for a further 7 days if anti-hypertensives **ARE** commenced or alltered
180/100 to 200/120	**Record BP:** • If on anti-hypertensives record QDS • If **NOT** on anti- hypertensives record ½ hourly • After 4 readings if BP remains between 180/100 and 200/120 inform the doctor • Continue with ½ hourly reading until further instruction from Doctor
Higher Than 200/120 or Lower than 100/50	**Record BP:** • Inform doctor immediately • Continue ½ hourly until further instructions from doctor

And yet more……

Challenging Paradigms
Ideal State
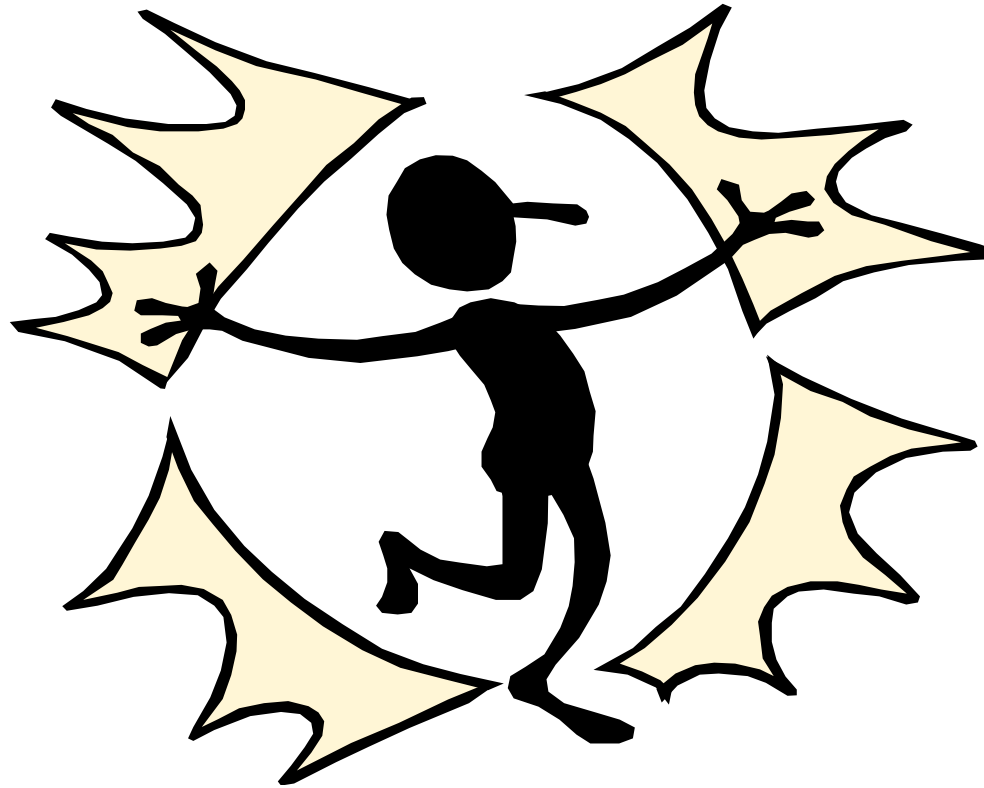
Barriers to shifting paradigms….

- **Done it / Tried it before**
- **Too expensive**
- **Won't be allowed to do it**
- **Too difficult**
- **It's always been done this way**
- **It can't be improved**
- **It doesn't need fixing**
    - **……….assumptions / values**

Why paradigms do end up 'shifting'

- **Lack of resources**

- **New discoveries**

- **Customer requirements**

Pick a company

- **Virgin**
- **John Lewis**
- **Apple Mac**
- **Disney**
- **Harrods**
- **Carlton Ritz**
- **Lidl**

Create an ideal state that is influenced by how that chosen company may run the process, making sure you incorporate the tools of an effective workplace
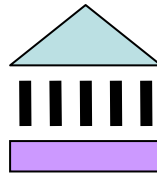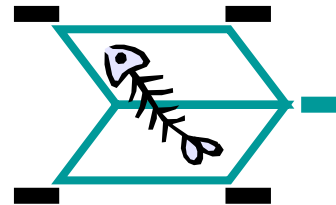
Create the future state......

1   2   3   4

Consider :

Avoid building in waste

Principles of an effective workplace

Root cause of the issues

Your view of the ideal state

Action Planning

	1 week	1 Month	3 months
Just Do Its!!			
Rapid Improvement Event			
Project			

Action

Who & When

Service Improvement – benefits realisation

What do we want to achieve?	Benefits / Risks	Changes needed to achieve benefit / mitigate risk	What can be done to help make changes	IT requirements to make changes
				E
				E
				E
				E

& some of the measures

Successes

- The amount of non NHS debt outstanding has reduced by £10,000 in 3 months

- Increased staff satisfaction with Estates has risen from 67% to 76% in one year

- The Estates team have released 617sqft of storage space

- One organisational wide pathway was agreed for the pre-operative assessment process.

- On 5 wards Productive Ward has released equivalent to 4.1 WTEs. This is over a range of bands of staff, but has been calculated at approximately £70,000.

- The wards taking part also saw a reduction in sickness levels, saving £70,000.

- Same day ordering for meals, has significantly reduced meal wastage, which has led to savings of £235,000.

- Piloted productive ward with some secretaries and consultants. This involved agreeing a set of team behaviours, standards of working practices and 6S'ing the secretaries office.

- CSSD team are reporting a 15% reduction in the amount of stock being held. This equates £28,000, in three months.

Benefits of lean

- **Inclusive**
- **Short timescale**
- **Visible senior support**
- **Focuses on respect & waste**
- **Reduces disagreements – customer focused**
- **A replicable methodology**

Lessons learnt

- **No redundancies**
- **Top down support critical – but also need to engage with middle managers**
- **Dedicated team in the first instance**
- **Brand helps**
- **Lots of energy and enthusiasm help**
- **Keep smiling**

Thank You