

What is Lean?

Lean is the process of identifying the **least wasteful** way to provide **value** (better, safer care, with no unnecessary delays at lower cost) to our **customers**

Value must always be determined by the customer

We spend 75-95% of our time doing things that increase our costs and create no value for the customer

Lean is being used across healthcare



Theatres



Sterile Services



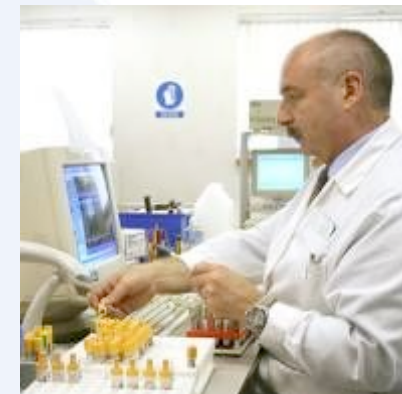
Pharmacy



Wards



Radiology



Pathology

Lean is being used across healthcare



Mental Health



Primary care



Physiotherapy



Finance



Ambulance Services

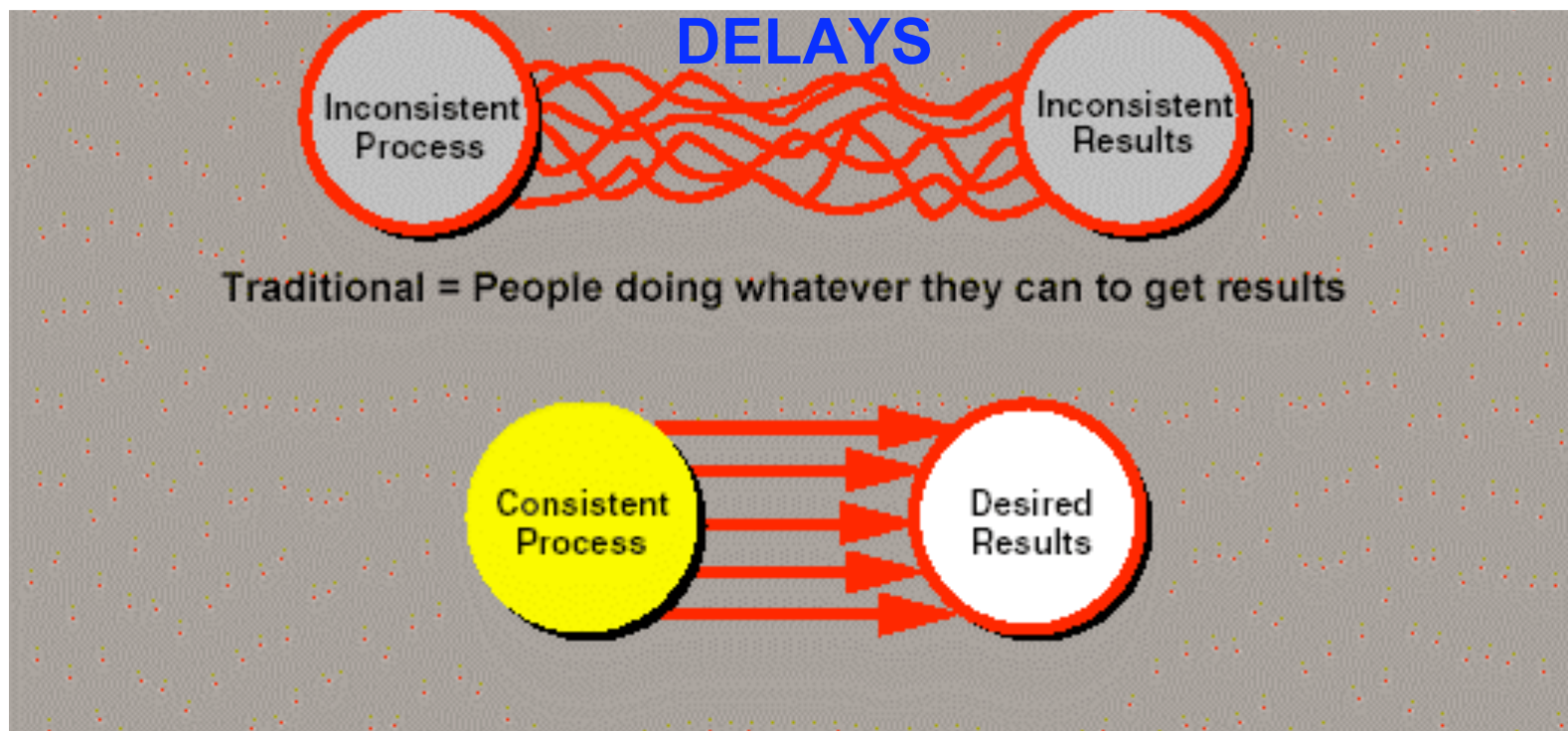


Outpatients

Critical success factors

<p>Lean must be part of long term Trust strategy</p> <p>This is not a FAD!!!</p>	<p>Staff must be empowered to make improvements</p>	<p>Board commitment and clinical leadership is essential</p>
<p>Dedicated service improvement resources accelerate change</p>	<p>Focus on the system, the flow that creates value, then apply the tools</p>	<p>Get results quickly – deploy a series of rapid improvement events</p>

Consistent processes = reliable, safe and quick healthcare services



Leaders need to shift the current thinking

CURRENT



FUTURE

- Provider first
- Waiting is acceptable
- Errors are to be expected
- Add resources
- Reduce cost
- Problems not visible
- maximise use of capacity
- Functional management

- Patient first
- Waiting is unacceptable
- Defect free processes
- No new resources
- Reduce waste
- Problems visible
- minimise cost of capacity
- End to end processes

Lean - improvement at all levels – who leads on what

Long term vision	Chief Executive and Board
3-5 year strategy	Senior leaders (clinical and managerial)
Yearly strategy and operational plan	Departmental leaders -Heads of Service - Matrons
Departmental and ward plan	Service managers and sisters
Rapid improvement events	Service improvement team with above
Daily problem solving	Everyone

Convert non value adding time to value adding time to improve productivity

Number of nurses per Trust = 800

Length of a shift = 480 minutes

Typically, 50 % of time is value adding = 240 mins per shift

50 % of time is non value adding = 240 min per shift

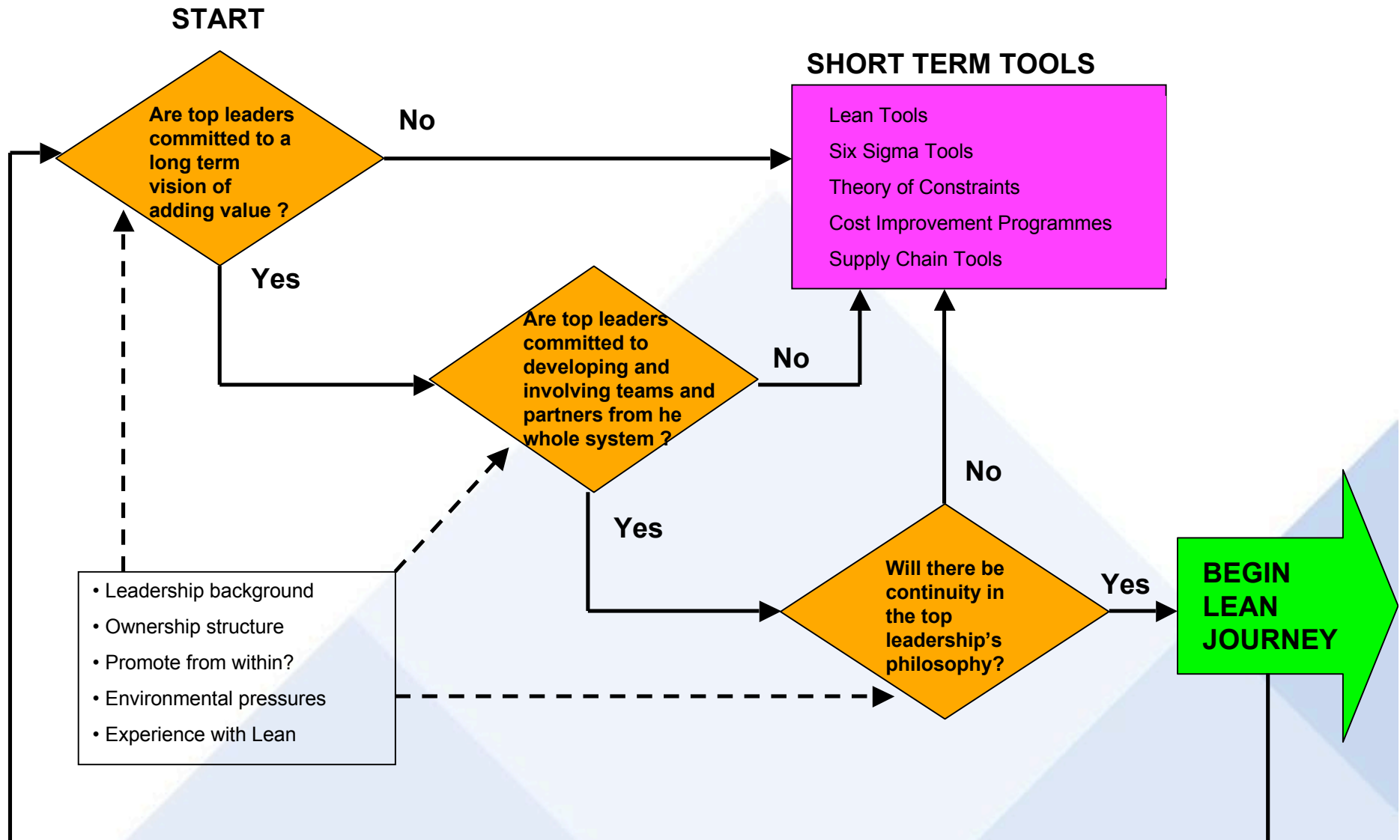
(searching for things, unnecessary movement, chasing results, redoing things)

Now, if we can convert 10% of non value adding time to value adding time
= 24mins extra value adding time

This is the equivalent to 38 extra nurses

(23 mins *800 nurses = 18400 extra value adding minutes)

Top Leadership's “commitment to Lean” journey



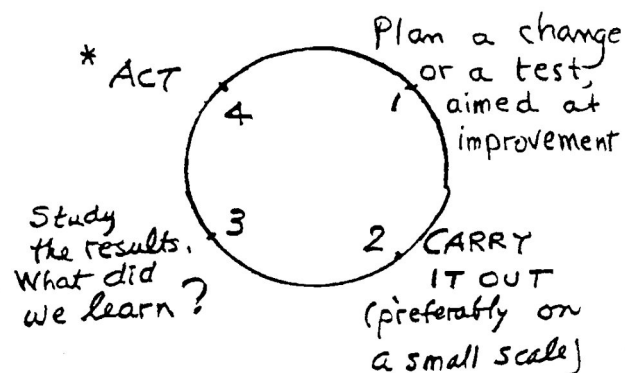
What do Lean Leaders need to do?

- 10 things to improve safety, improve quality, eliminate delays and reduce length of stay – and generate more income (profit) and lower costs

Practical steps leaders must do

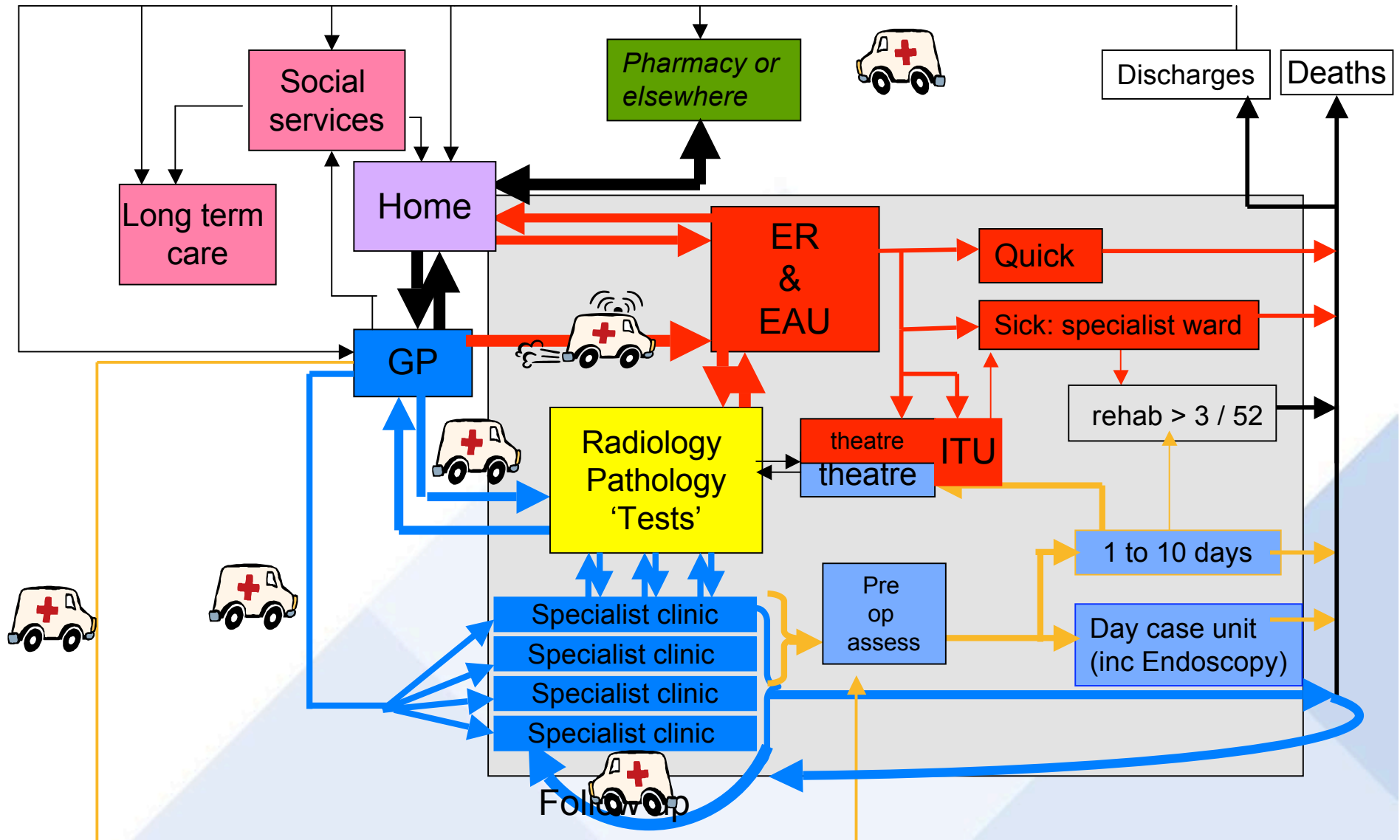
1. Embed problem solving approach in frontline staff. Learn by doing (PDSA) and empower staff to improve

P-D-S-A Cycle



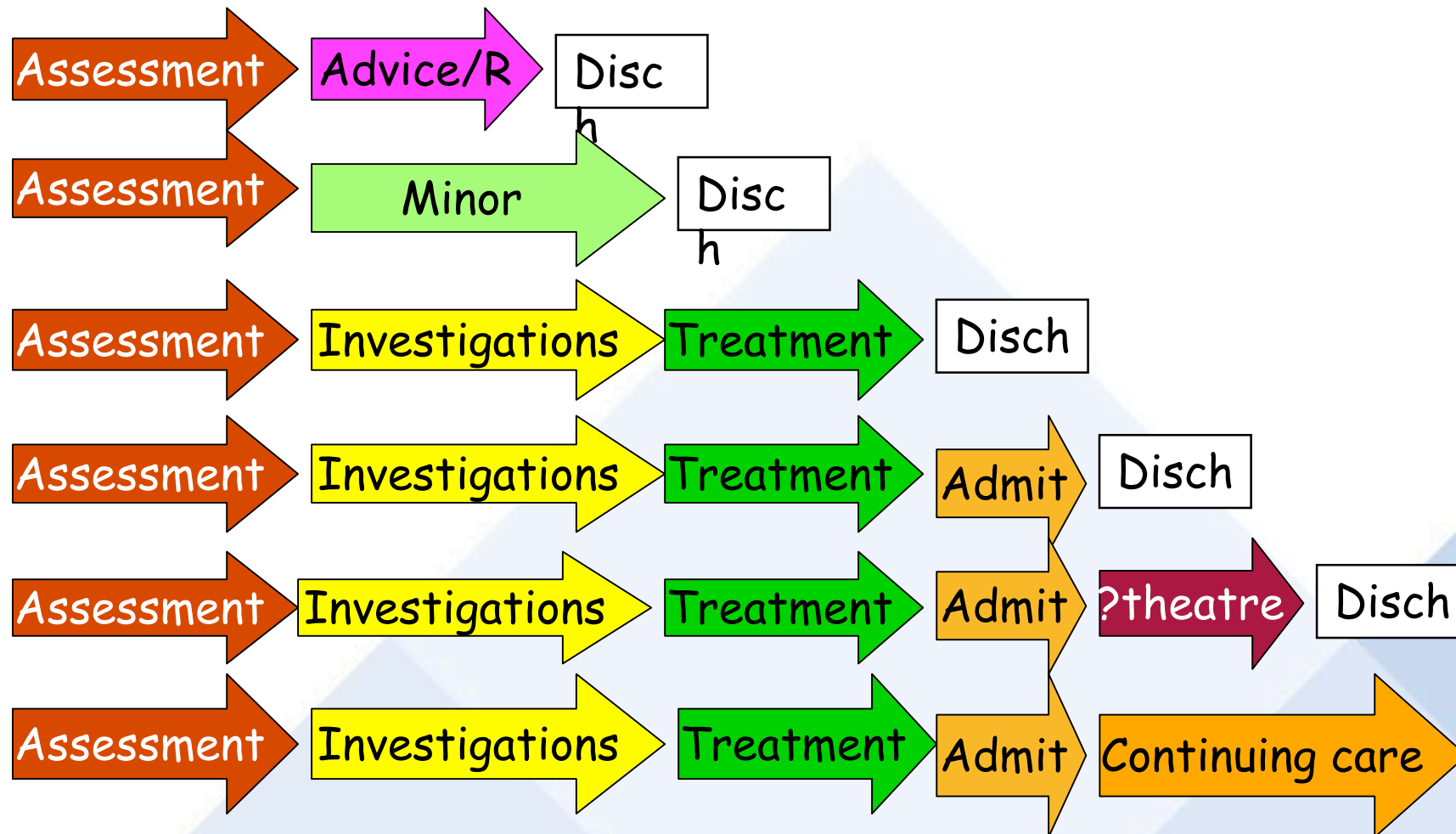
- * ACT. Adopt the change.
or Abandon it.
or Run through the cycle again, possibly under different environmental conditions.

2. Identify core value streams main patient journeys and eliminate waste



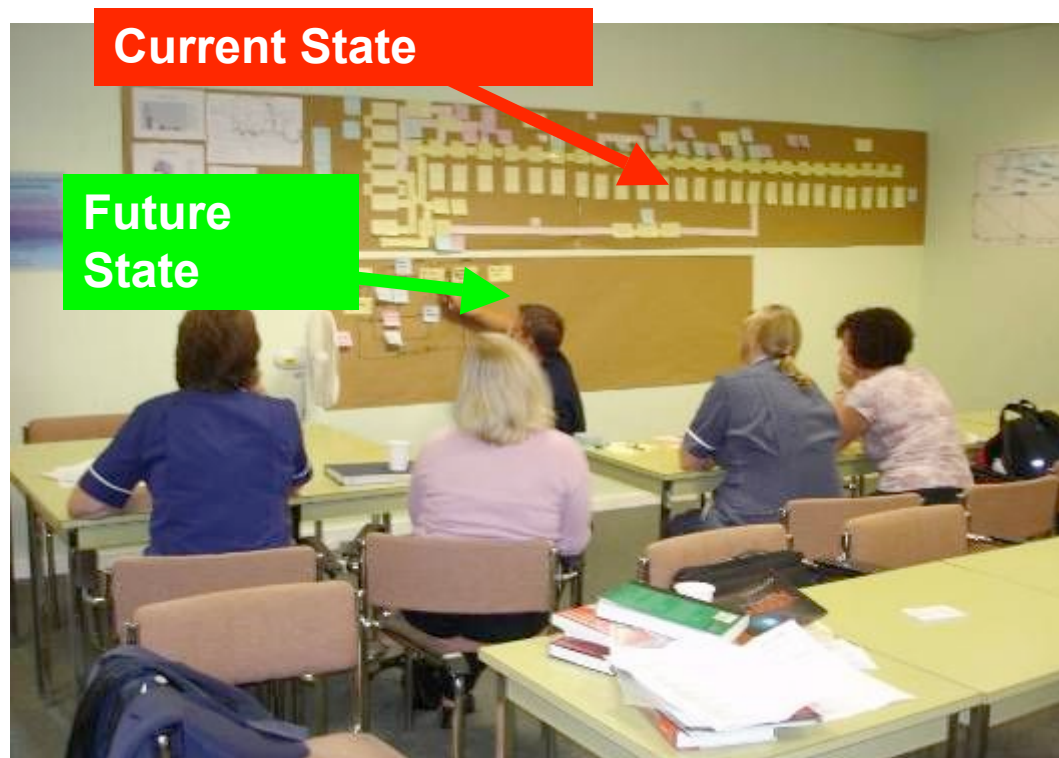
Source – Kate Silvester

2. Identify core value streams (main patient journeys and eliminate waste) - continued



Practical steps leaders must do

3. Participate in rapid improvement events



Future State – staff from Preoperative assessment, daycase and theatre work together to design the new improved system

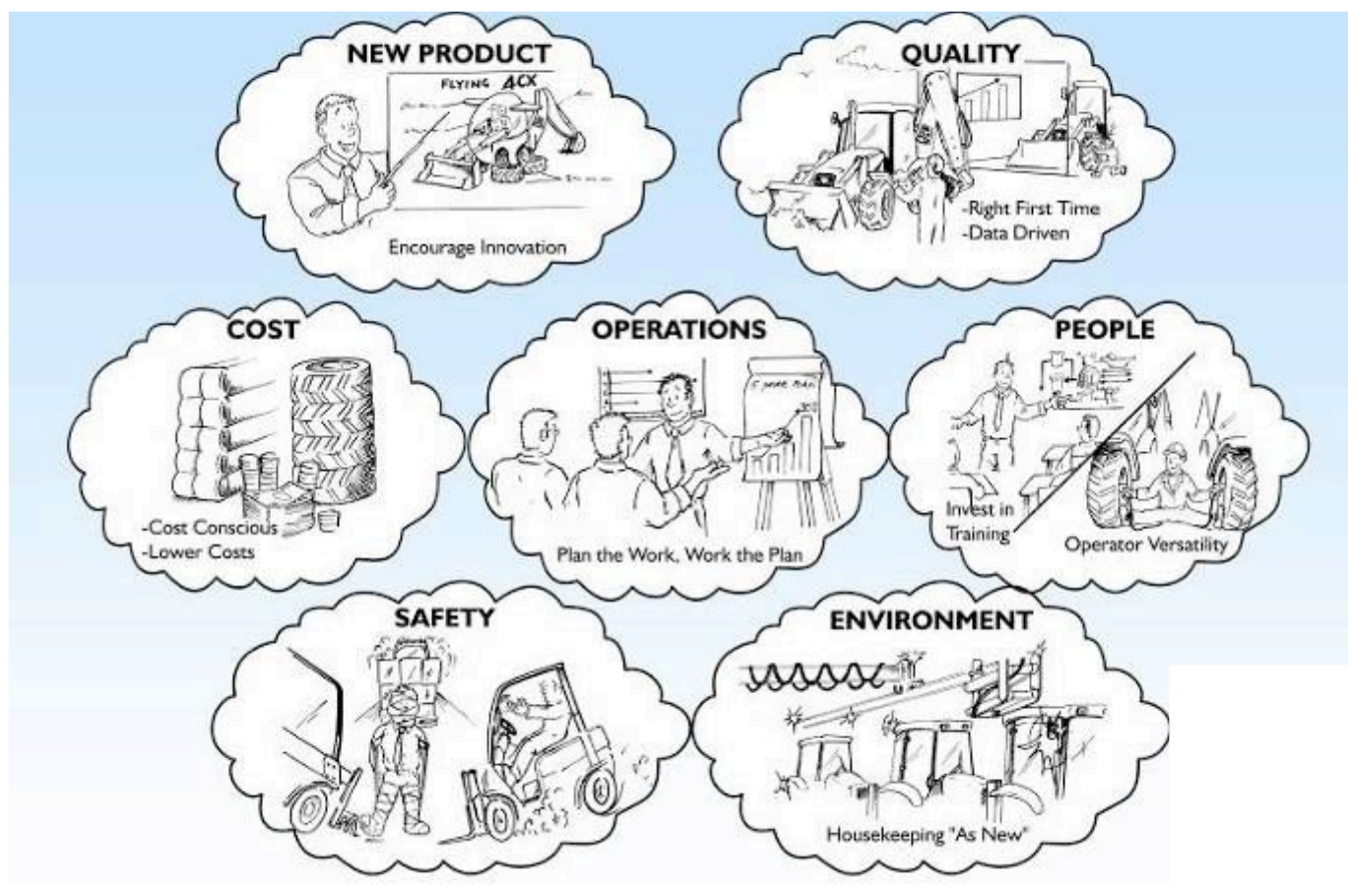


Chief Executive asks questions and challenges teams

Practical steps leaders must do

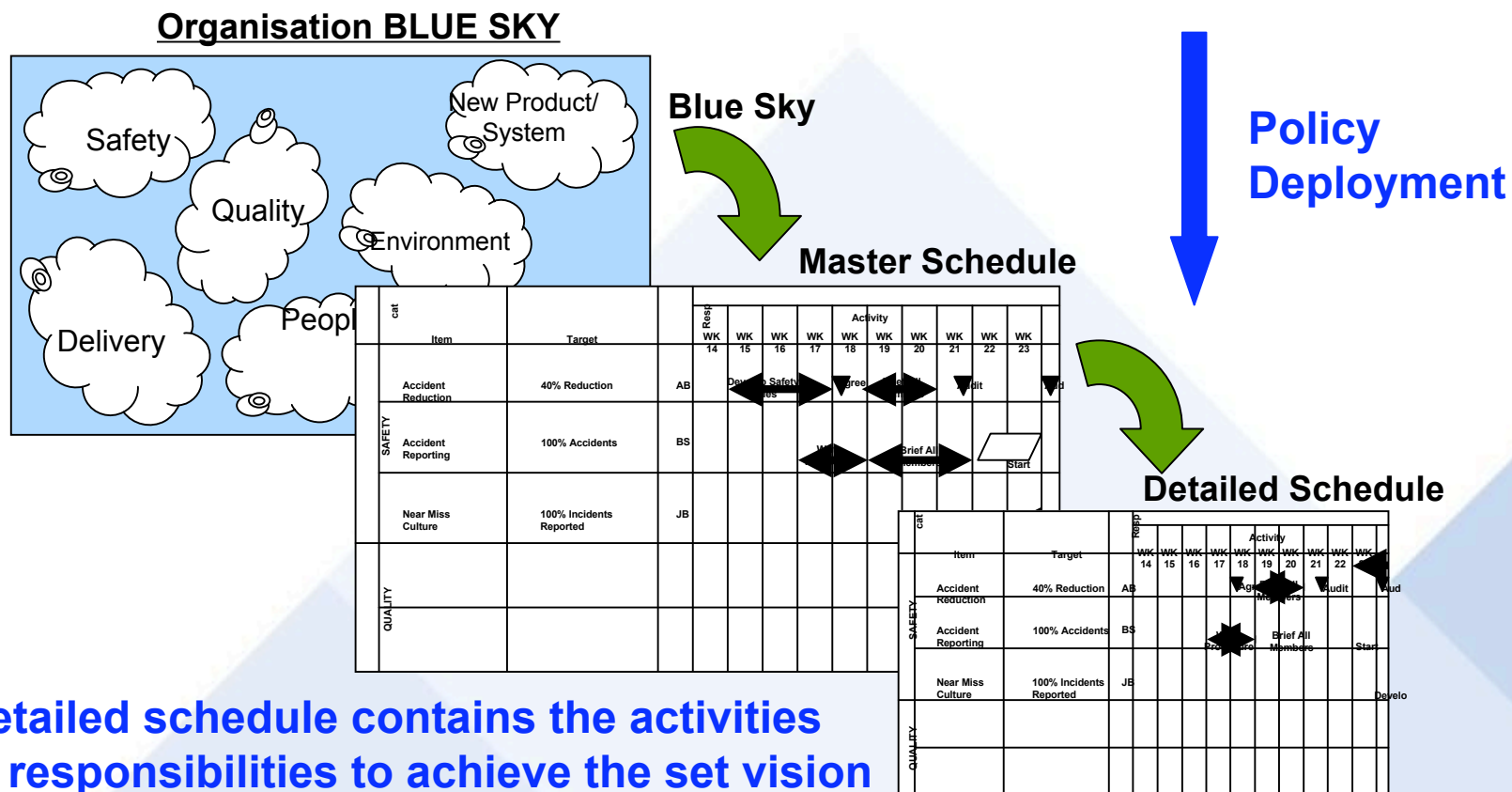
4. Make it part of your strategy

Blue Sky Categories



4. Make it part of strategy (continued)

A vision is translated from Blue Sky to Master Schedule into a detailed schedule.

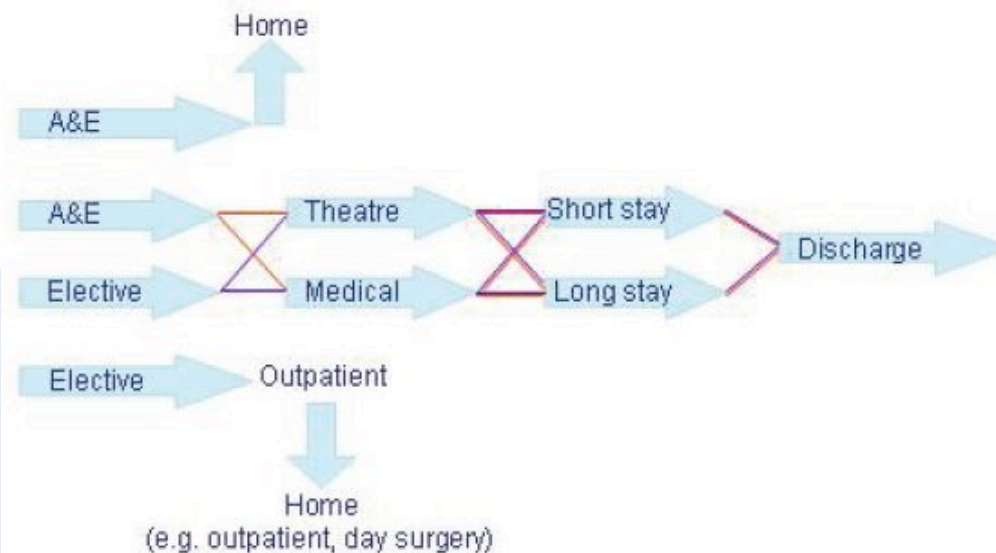


A detailed schedule contains the activities and responsibilities to achieve the set vision targets.

Practical steps leaders must do

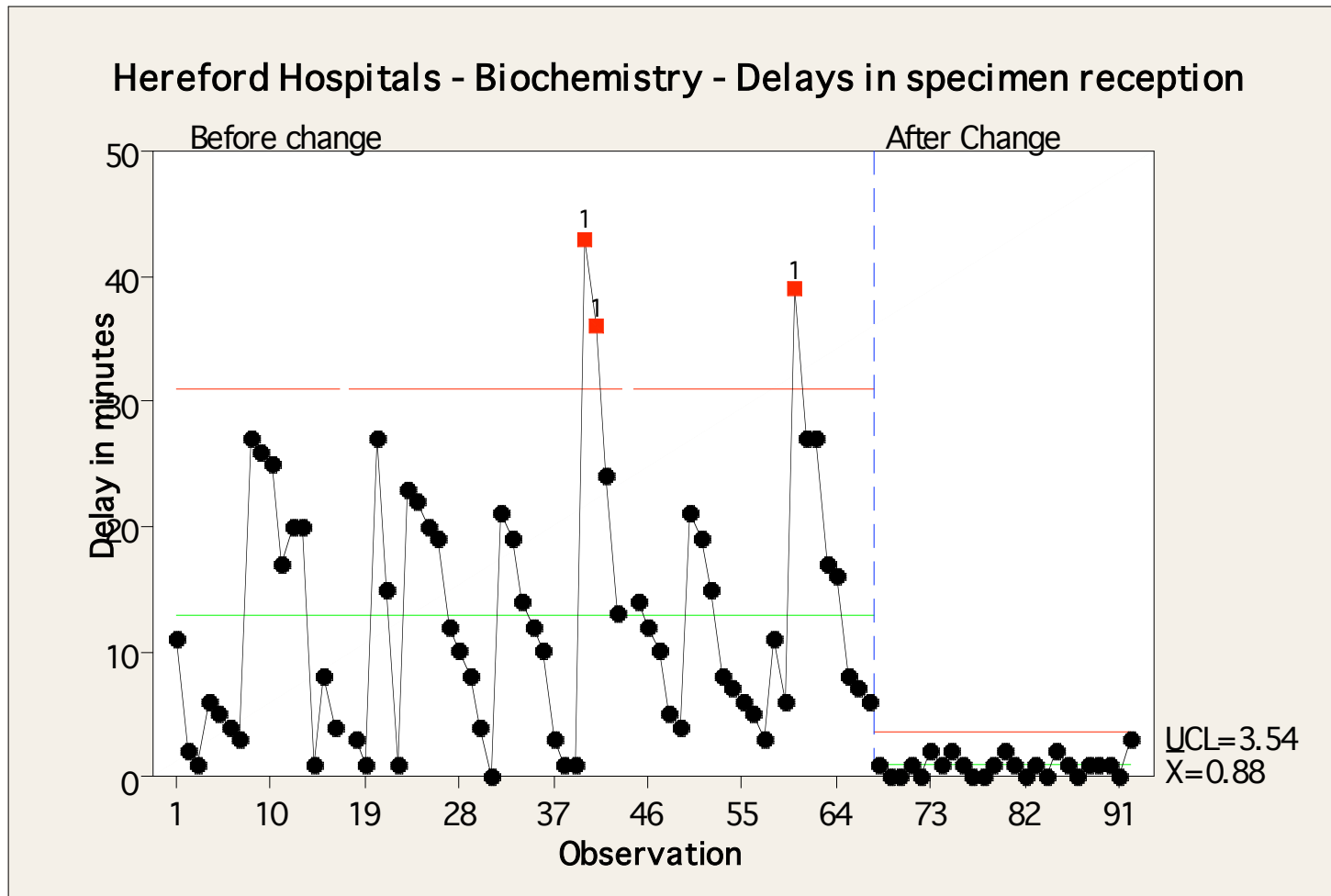
5. Leadership must commit to long term learning. Organise by value streams (patient journeys) – not be departments
 - appoint value stream managers responsible for the whole value stream

Different hospital value streams (simplified)



Practical steps leaders must do

6. Measure the change (before and after)



BEFORE LEAN



AFTER LEAN



More appropriate stock levels – based on clinical need

BEFORE LEAN



AFTER LEAN



There were some surprises!

BEFORE LEAN



AFTER LEAN



Practical steps leaders must do

7. Identifying opportunities for big financial impacts – get results

Metric	Before change	After change	Ideal state	Improvement	Saving £££ a year
Turnaround time (from receipt to results available)	62 minutes Up to 2 hours	38 minutes	30 minutes	40% reduction	2 beds a day ££££££ * A&E targets met

8. Grow and develop your own Lean culture. Adapt and make relevant for your environment.

Practical steps leaders must do

9. Develop leaders and coaches and to increase capability



10. Use experts for teaching and for getting quick results

Neil Westwood coaching Endoscopy staff

3 Simple things for Leaders to do

Go See.

- Senior managers must spend time in the workplace – listening and observing

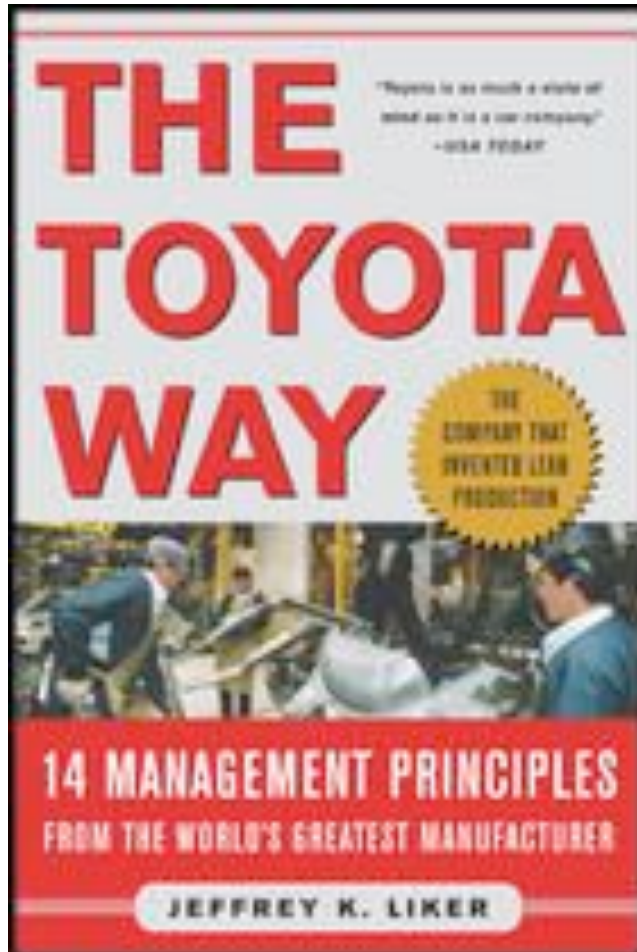
Ask Why.

- Use the “Why?” technique daily

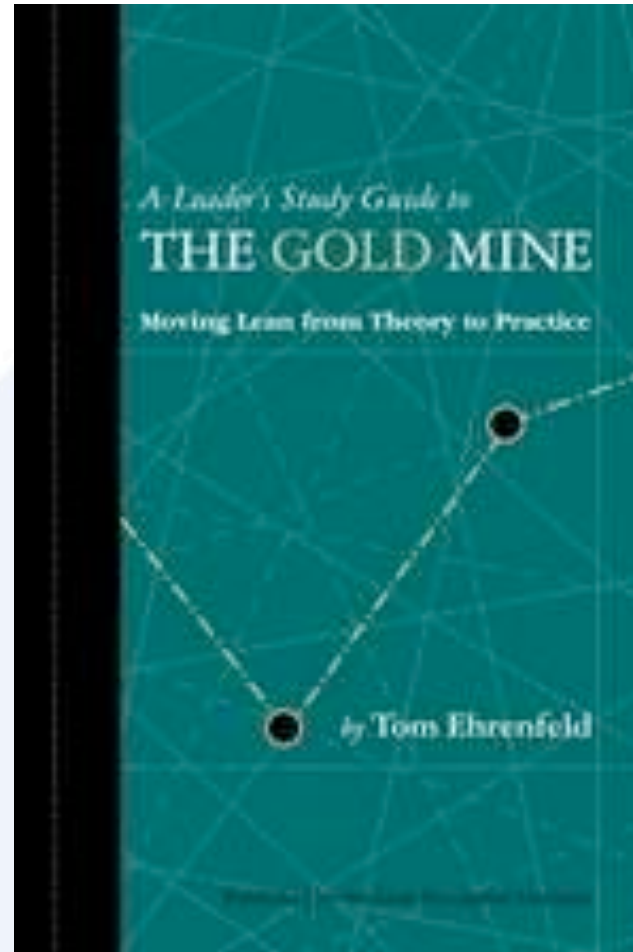
Show Respect.

- Respect your people – and people’s time!!
- Learn how the work gets done by getting involved and *doing*.
- Focus on the work and staff and ask questions
- Learn and revisit Standard Work.
- Use Value Stream Maps to expose the WASTE
- **Think of yourself not as a firefighter, but as a teacher/coach and process owner/designer.**

Lean Leadership issues



Must read Page 292



Take 45 minutes to read and explain what Lean leaders need to do