

David Hopkins



22 months CDMH

33 Years in industry

Engineering apprenticeship

Shop floor Change Over setter

Metrology laboratory

Quality - Supplier Development

HR - Training – Management Development

Manufacturing Director - USA Automotive Company

Started my own Consultancy 5 years ago

(First 3 years with automotive companies)

'22 months ago'

22 months CDMH

23 months ago – I thought I had seen and overcome every obstacle and resistor to change



Background

My Concern – why was / is basic Operational Management so hard to install and sustain

Current State

What is in place today

What you will **see** this afternoon

Analysis

The observed behaviours that contributed to the Current State being so hard to Install and Sustain Operational Management

Conclusions

Repeat, Standard and Knowledge and Skill differential

Background

My Concern – why was / is basic Operational Management so hard to install and maintain

- Myself and my colleagues are used to working with failing and problematic environments system and people
- The last 22 months have been the most 'FRUSTRATING' of my past 35 years
- Some of the people I am working with now have had this frustration for much longer than 22 months

Current State

What is in place today

What you will see this afternoon

- NO EVENTS, NO BLITZES, NO TRAINING COURSES
- A DAILY GUIDING PRESENCE EVERY DAY 'WHERE THE WORK IS'
- ENCOURAGING, HELPING, DIRECTING, SUPPORTING, LISTENING

Current State

What is in place today

What you will see this afternoon

Hospital Management Meeting:-

- Staffing by shift for a rolling 7 days (**repeated every day**)
- Patient discharges – Planned versus Actual (**repeated every day**)
- Patient admissions versus discharges (**repeated every day**)
- Bed occupancy CDMH + Community (**repeated every day**)
- Delayed transfers of care – Action review (**repeated every day**)

Ward Activities:-

- Patient Journey – Planned versus Actual (**repeated every day**)
- Clinical Consumable Goods Management (**repeated every day**)
- Q C D S M dashboard measures (**repeated every day**)
 - Soon to become the wards focus for improvement)
- Visual staffing, who, when, where, NIC (**repeated every day**)

Analysis

The observed behaviours that contributed to the Current State being so hard to install and sustain

- During the past 22 months CDMH has had 7 different managers

(Louise Herbert, Tracy Morgan, Ann Griffith-Jones, Jane Grey, John Trezise, Angela Wilson and Jane Thornton)

- Some Managers spend too much time in their offices
HOWEVER most will TALK about the importance of being on the floor / ward
- Most Managers / observers immediately suggest changes
- Managers have knowledge of Operational Management but no implementation SKILL
- In general Managers very knowledgeable about interpersonal skills but don't appear comfortable applying

Analysis

The observed behaviours that contributed to the Current State being so hard to install and sustain

The Six Deep Causes

1. Lack of standard process
 - Little understanding for the need for standard work
2. Changing priorities
 - Usually the latest fire, uncontrolled de-selection
3. Lack of understanding of 'methodology'
 - Say what's wrong, rarely able to help the 'how'
4. An informal approach
 - No SMART objectives, rarely reviewed, no consequence
5. Not enough time / resource
 - Don't feel able to improve, just fire fight
6. Lack of Operational Management
 - Capacity, time frames, problem solving

Conclusions

Repeat, Standard and Knowledge and Skill differential

- Repeating to Standard is an underrated SKILL
 - Only when you can REPEAT to STANDARD, do you ever earn the right to suggest improvement
- The gap between KNOWLEDGE and SKILL is ever widening
 - If we are not careful we shall become too clever for our own good
- The only reason Operational Management has made progress in CDMH is the “Team” has engaged with the most influential group in the hospital, The Ward Managers, 3 out of 4 of them are here today. 22 months ago I don’t think they felt very influential, they now know they can make it or break it.
 - They want it to work