

Fact - Lean Works in Healthcare

In experiments where lean thinking has been applied properly, the results – in terms of patient care, costs and quality – have been extraordinary.

Hypothesis - Lean will never take root in Healthcare as it stands.....

Because lean contradicts with the way Healthcare is currently managed: when Healthcare managers come across lean they are often enthusiastic about its potential but they cannot and do not create the conditions for its benefits to be maintained.



Introducing Mikael



Mikael's Question

We have set up a value stream management system which sits parallel to our line management structure. We have also put in place supporting structures including an operations management team, improvement teams consisting of staff members, written work standards, procedures for handling deviations, visual management as well as comprehensive data support.

BUT our senior management team is not yet fully committed and has not invested enough time in learning of lean principles and the design of a lean transformation. They also do not invest enough time at the "Gemba" to learn, or in their managements team meetings to follow up. As a result, some of their direct and indirect report areas are also less than fully committed.

The situation is starting to change, but **we would like your advice how we can inspire and engage the senior management to get more involved and committed to make the lean transformation a core part of their agenda?**





Exercise

Answer Mikael's Question





Introducing Teresa



Teresa's Question





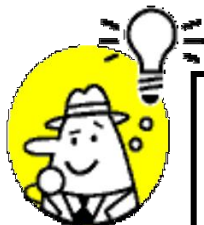
Exercise

Answer Teresa's Question



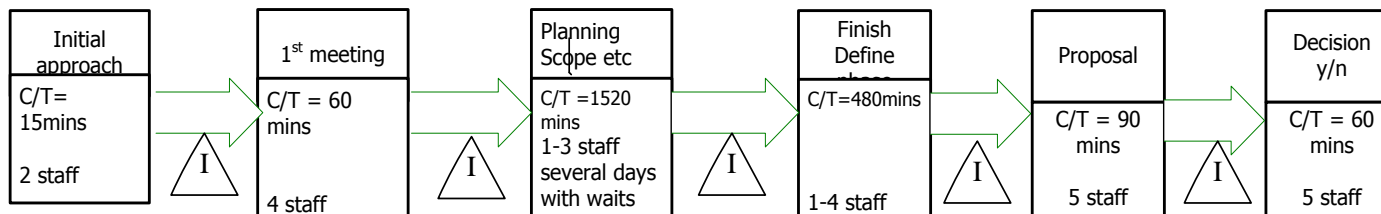
Decision Making.....Its' a Process

Current State Map - Management Decision Making Process



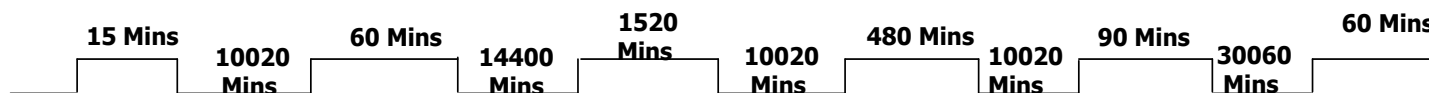
**53 Days Lead time.....
1.5 Days Process time**

Way Forward



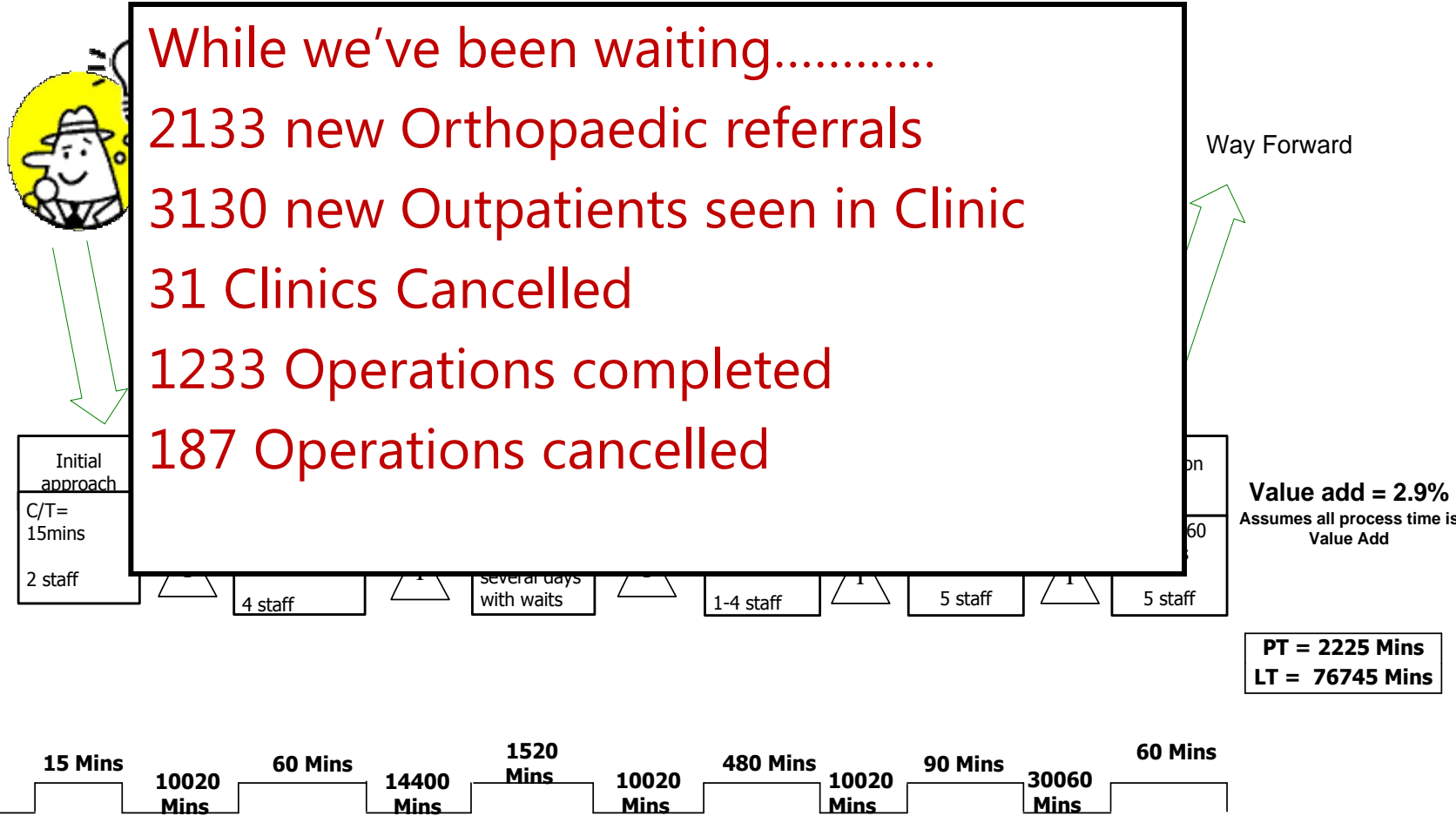
Value add = 2.9%
Assumes all process time is Value Add

PT = 2225 Mins
LT = 76745 Mins



Decision Making.....Its' a Process

Current State Map - Management Decision Making Process



Activity	Daily
Bed Meetings (x3 daily)	2.25
Morning Handover	0.5
08:15 - 08:30 (x2 weekly)	0.2
ECIP	0.3
Facilitators 1:1 (x1 fortnight)	0.35
DHM 1:1	0.35
Emergency Pathway	0.2
Facilitators Meeting	0.3
Corridor Meeting	0.25
Hants Conf Call	0.5
PAU 1:1	0.25
MAU meet	0.2
Op Commissioning Meeting	0.4
1:1 with Ed	0.05
DGM DSN Meet (x1 fortnight)	0.15
HMC	0.15
COO Meet	0.15
St Mary's transitional grop	0.075
Nursing Workforce Committee	0.075
Duty Managers Update	0.5
DMOP Meeting	0.2
Seeing Facilitators	1
Duty Manager	1.6
LEA	0.4
Contract Review	0.05
Bleep Holder	2
30 day review meetings	0.5
Actions from Bed Meetings	1
Ad Hoc Meetings	1
Appraisals	1.1
1:1 with Mary	1
Hospital Walkabout	1
Discharge Lounge	0.25
Update for DMTs	0.375
E-Mails 100/Day	2
Report Writing	0.6
Budget Management	0.1
Performance Managing	0.2
DHM Induction	3

24.575

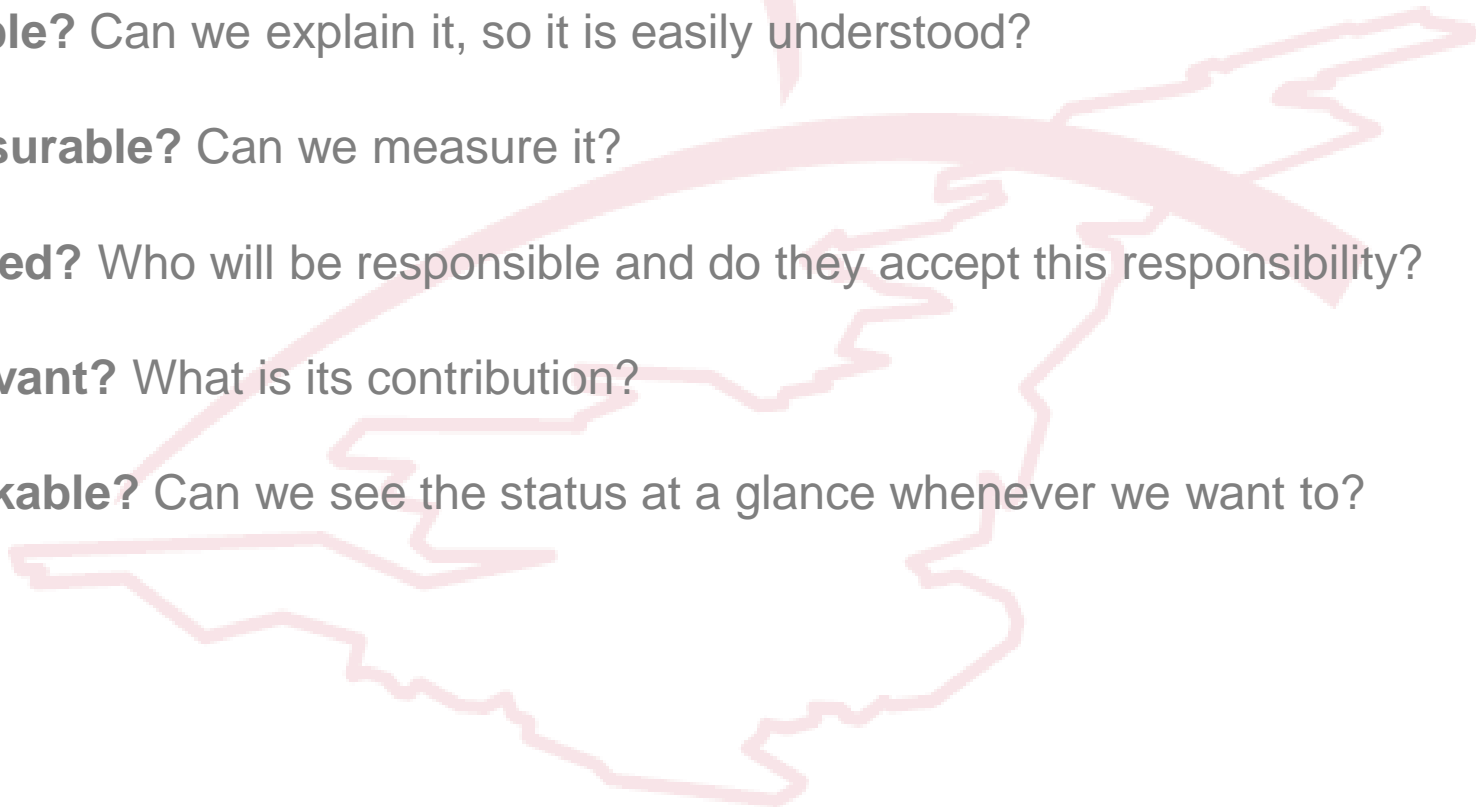


The Diary Exercise – Daily Personal Capacity V's Daily Organisational Demand..... This is real data and absolutely typical. But What's causing this?

The Five Point Checklist



- **Simple?** Can we explain it, so it is easily understood?
- **Measurable?** Can we measure it?
- **Agreed?** Who will be responsible and do they accept this responsibility?
- **Relevant?** What is its contribution?
- **Trackable?** Can we see the status at a glance whenever we want to?

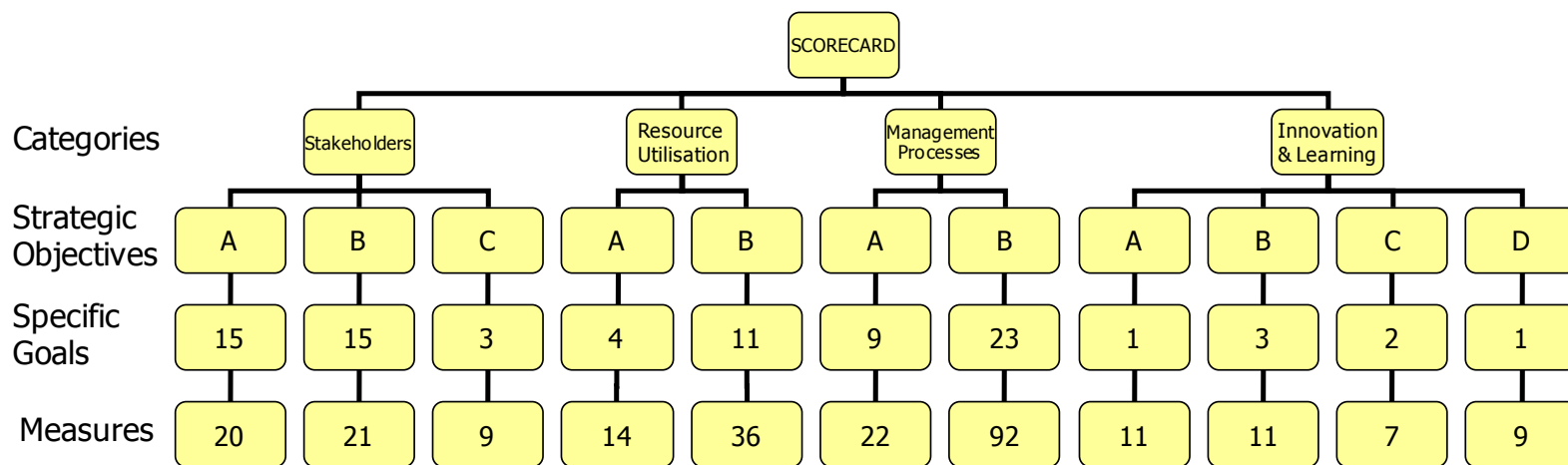




Target Focus	No. Projects
Cost Improvement	300
4hr Performance Improvement	132
Safety & Quality	44
18 Week Access	39
TOTAL	515

- Simple?
- Measurable?
- Agreed?
- Relevant?
- Trackable

Scorecard – Descriptive Stats



Categories = 4

Strategic Objectives = 11

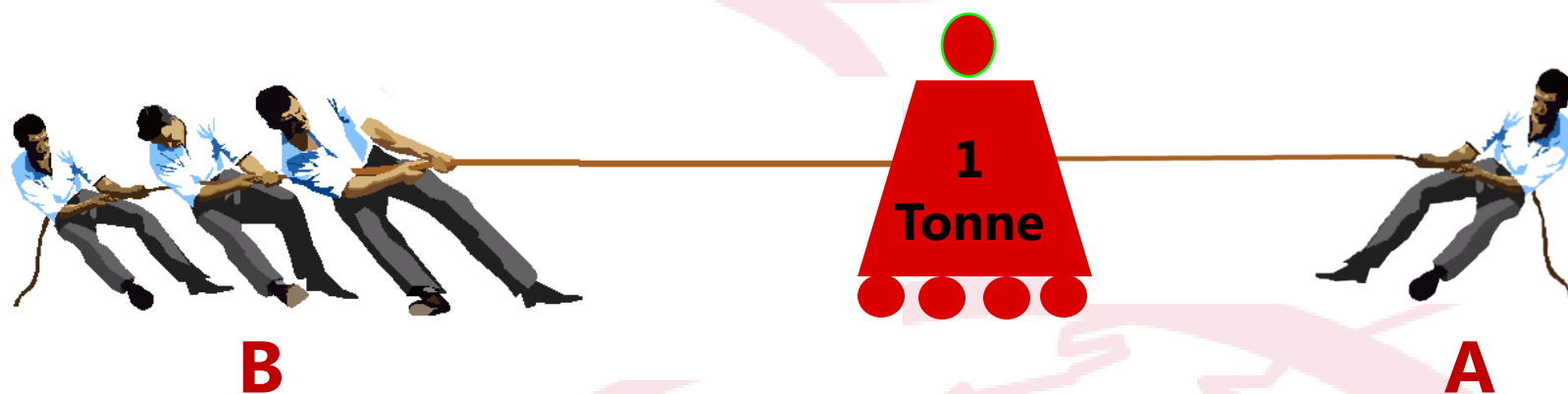
Specific Goals = 87

Measures = 252

- Simple?
- Measurable?
- Agreed?
- Relevant?
- Trackable



Little Alignment of Goals, Roles & Responsibilities



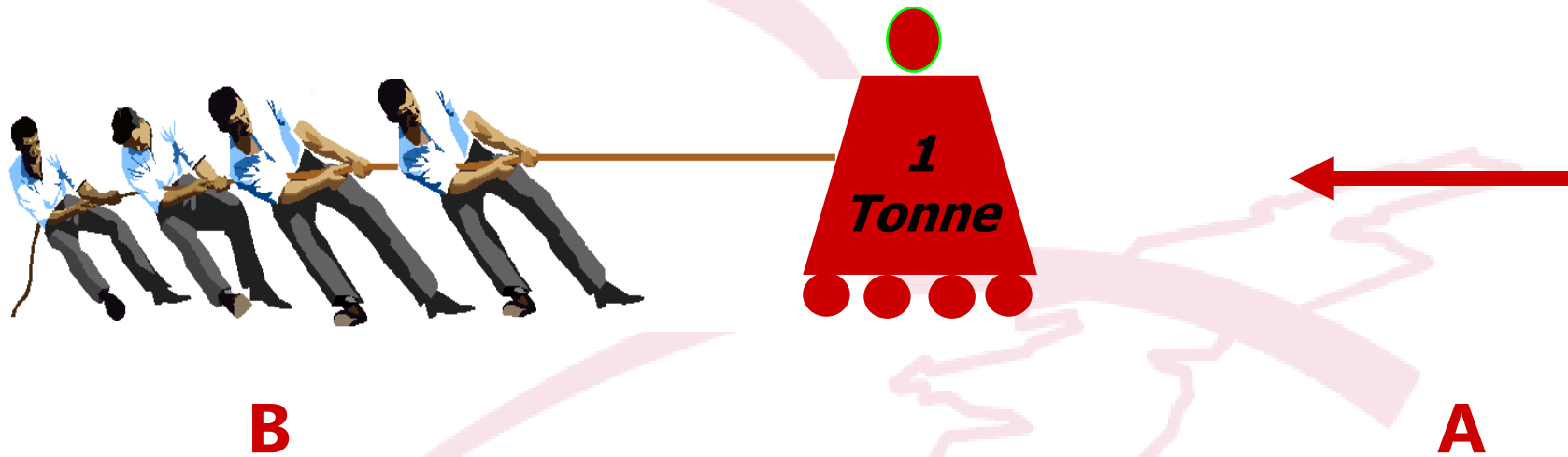
THE SUM OF FORCE APPLIED:

$$1+1+1-1 = 2$$

50% LABOUR EFFICIENCY



Alignment of Goals, Roles & Responsibilities



The sum of the force applied

$$1+1+1+1 = 4$$

100% LABOUR EFFICIENCY



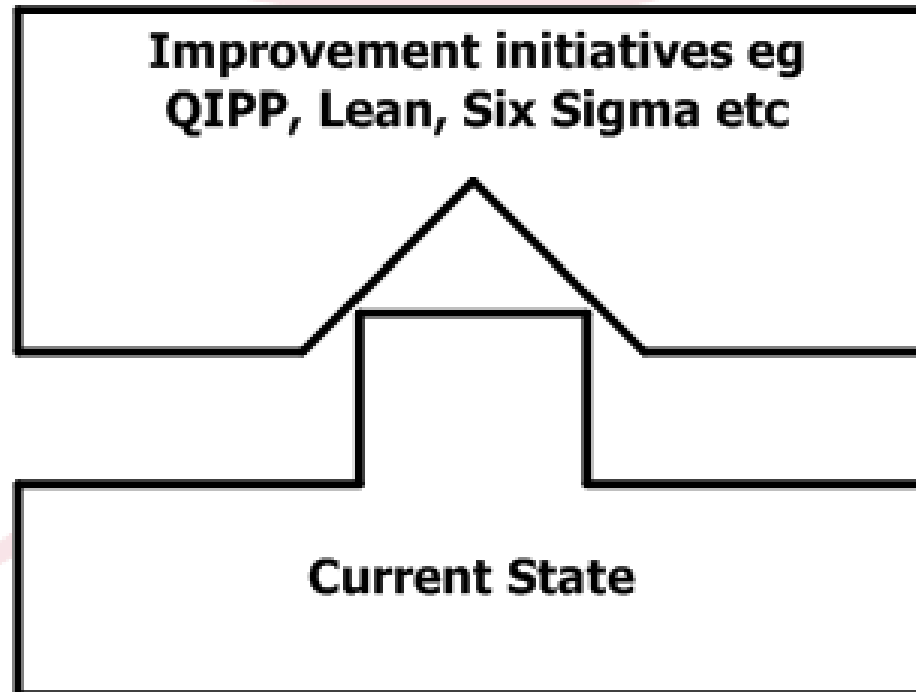
Activity	Daily
Bed Meetings (x3 daily)	2.25
Morning Handover	0.5
08:15 - 08:30 (x2 weekly)	0.2
ECIP	0.3
Facilitators 1:1 (x1 fortnight)	0.35
DHM 1:1	0.35
Emergency Pathway	0.2
Facilitators Meeting	0.3
Corridor Meeting	0.25
Hants Conf Call	0.5
PAU 1:1	0.25
MAU meet	0.2
Op Commissioning Meeting	0.4
1:1 with Ed	0.05
DGM DSN Meet (x1 fortnight)	0.15
HMC	0.15
COO Meet	0.15
St Mary's transitional grop	0.075
Nursing Workforce Committee	0.075
Duty Managers Update	0.5
DMOP Meeting	0.2
Seeing Facilitators	1
Duty Manager	1.6
LEA	0.4
Contract Review	0.05
Bleep Holder	2
30 day review meetings	0.5
Actions from Bed Meetings	1
Ad Hoc Meetings	1
Appraisals	1.1
1:1 with Mary	1
Hospital Walkabout	1
Discharge Lounge	0.25
Update for DMTs	0.375
E-Mails 100/Day	2
Report Writing	0.6
Budget Management	0.1
Performance Managing	0.2
DHM Induction	3

24.575

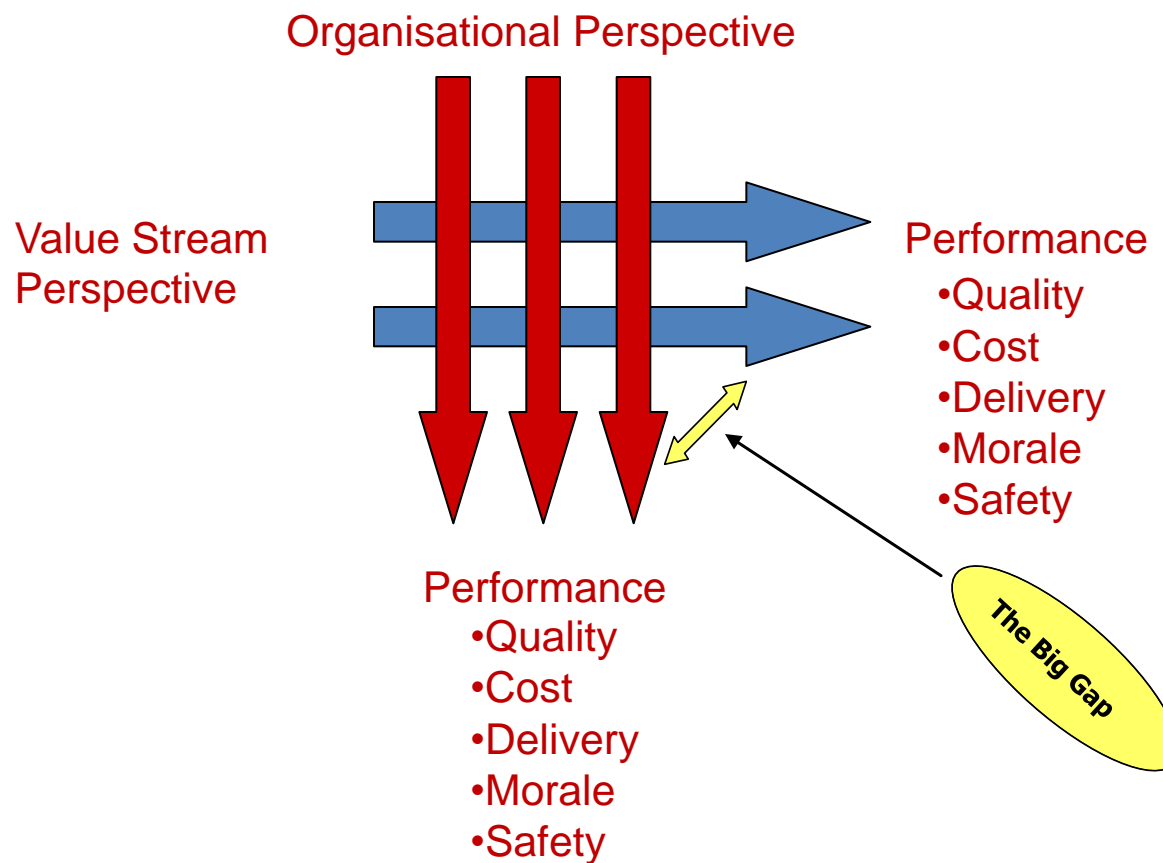


The Diary Exercise – Daily Personal Capacity V's Daily Organisational Demand..... This is real data and absolutely typical

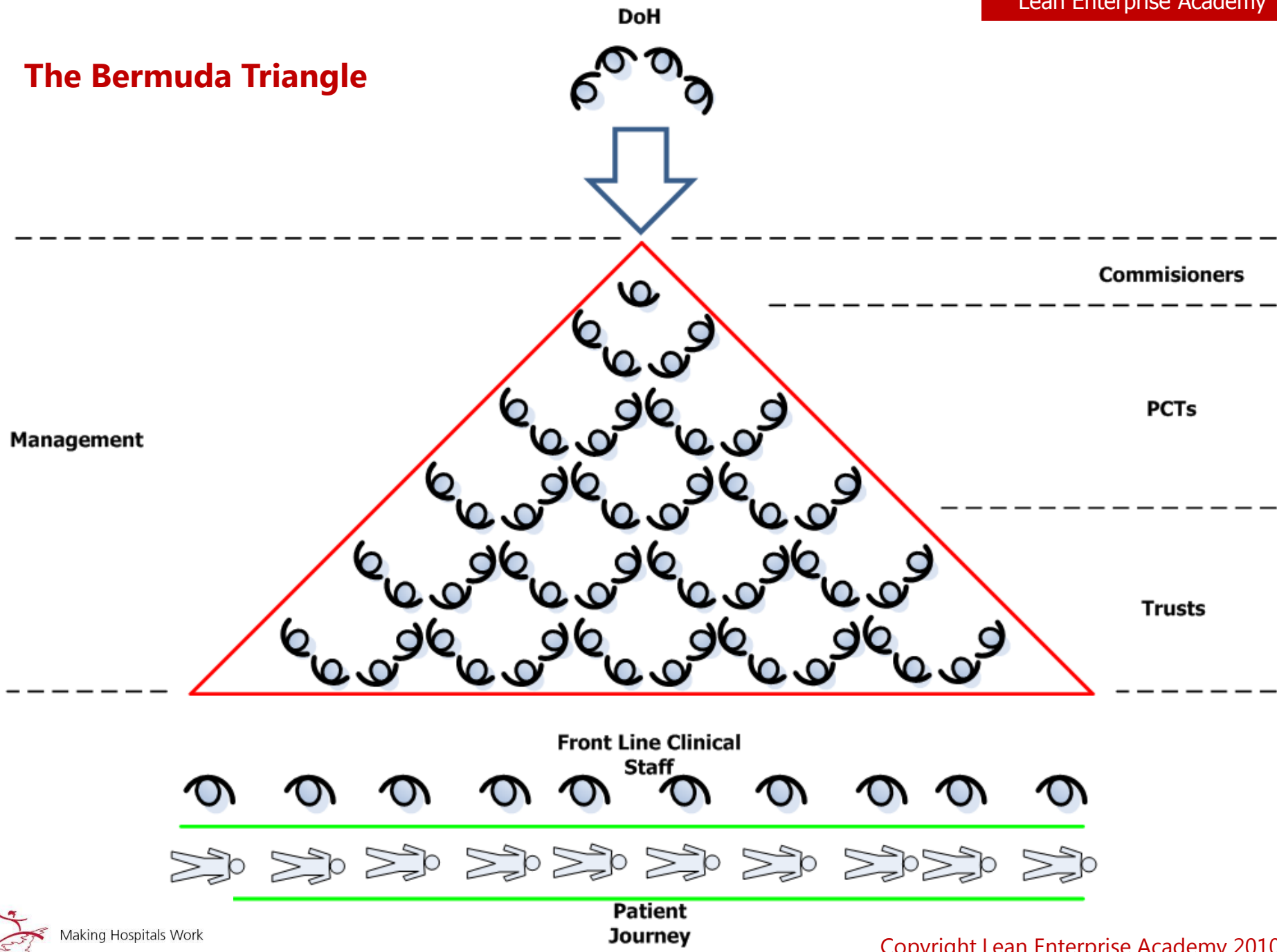
It's not just lean!!!!



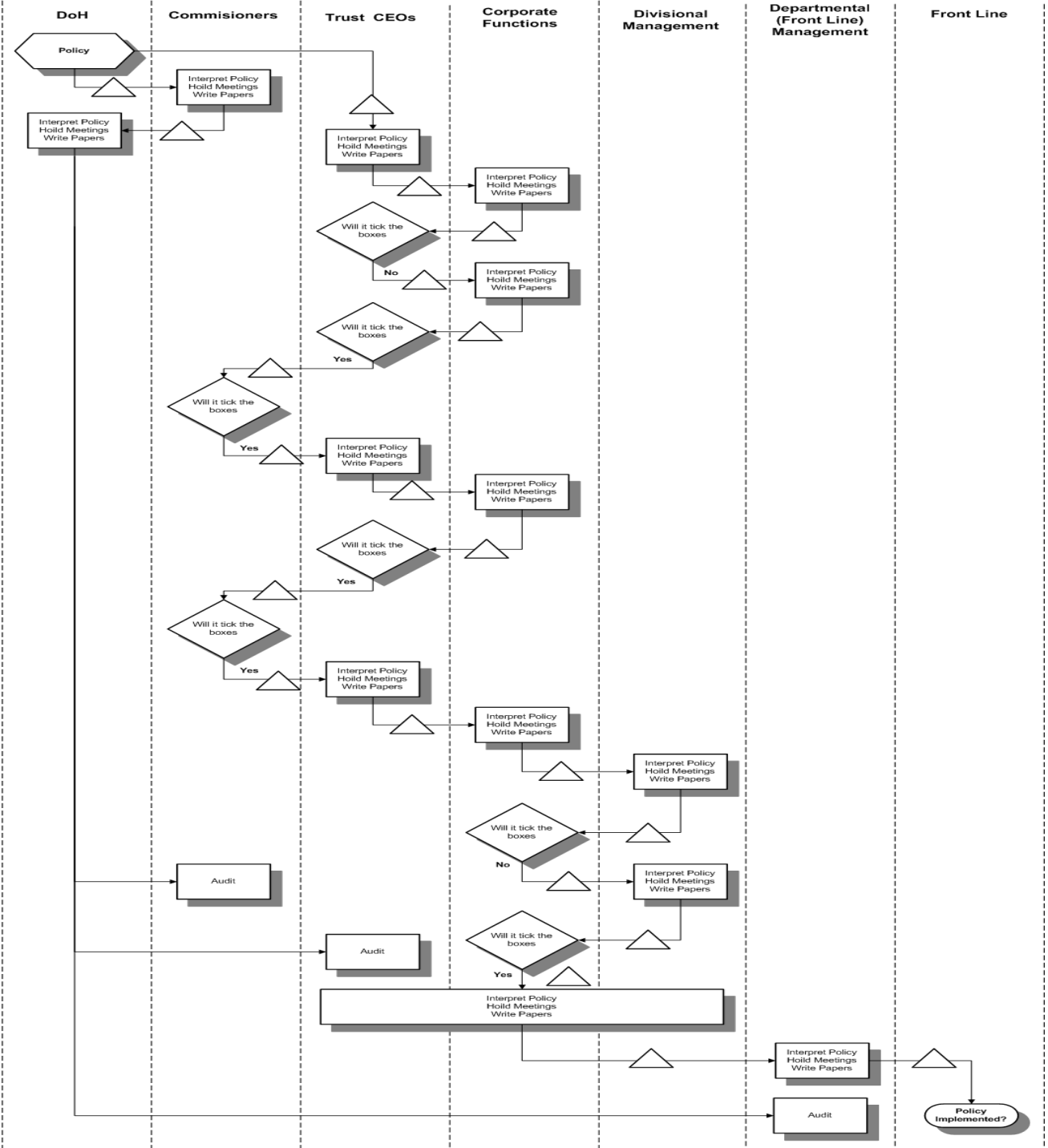
The Big Gap



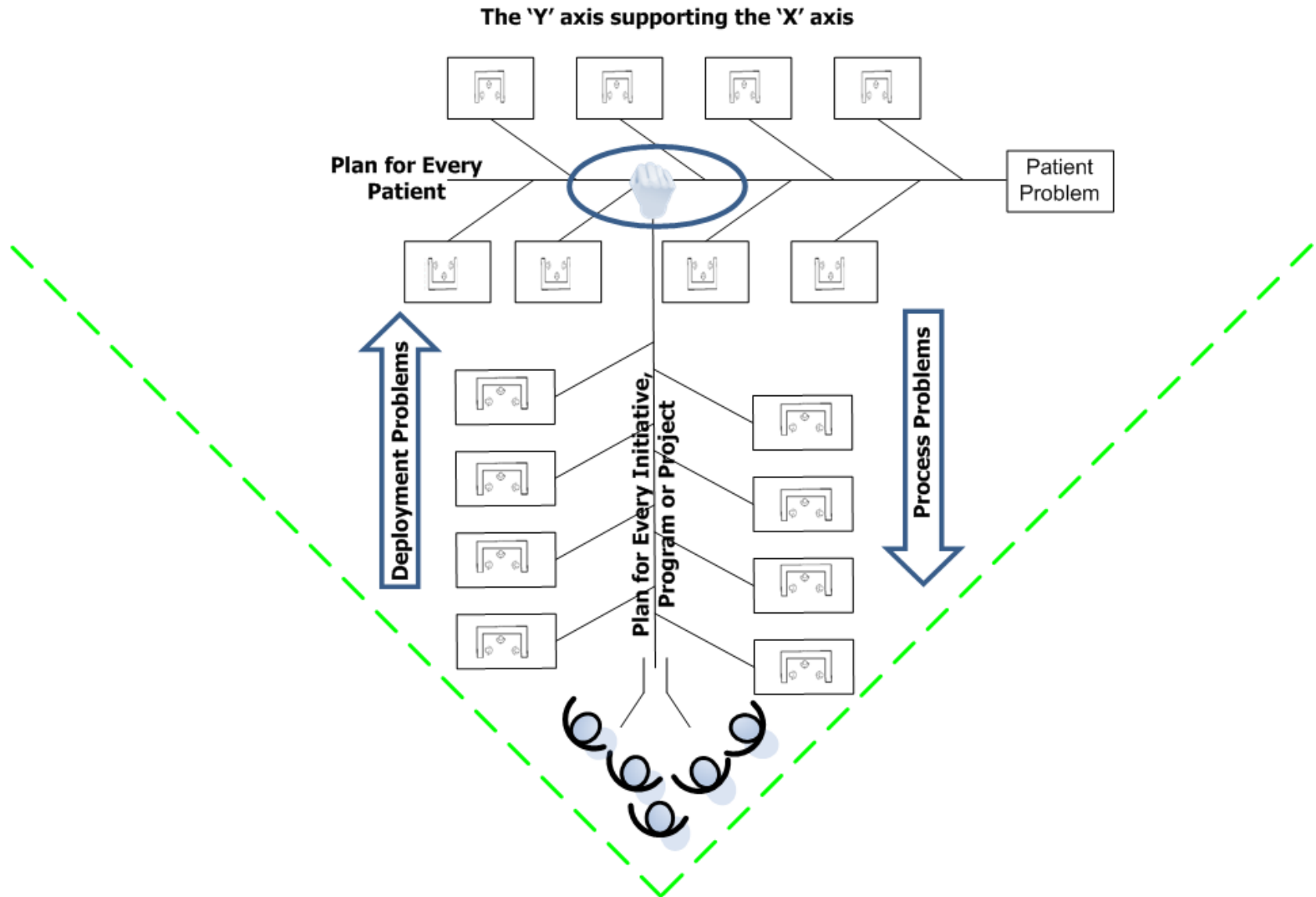
The Bermuda Triangle



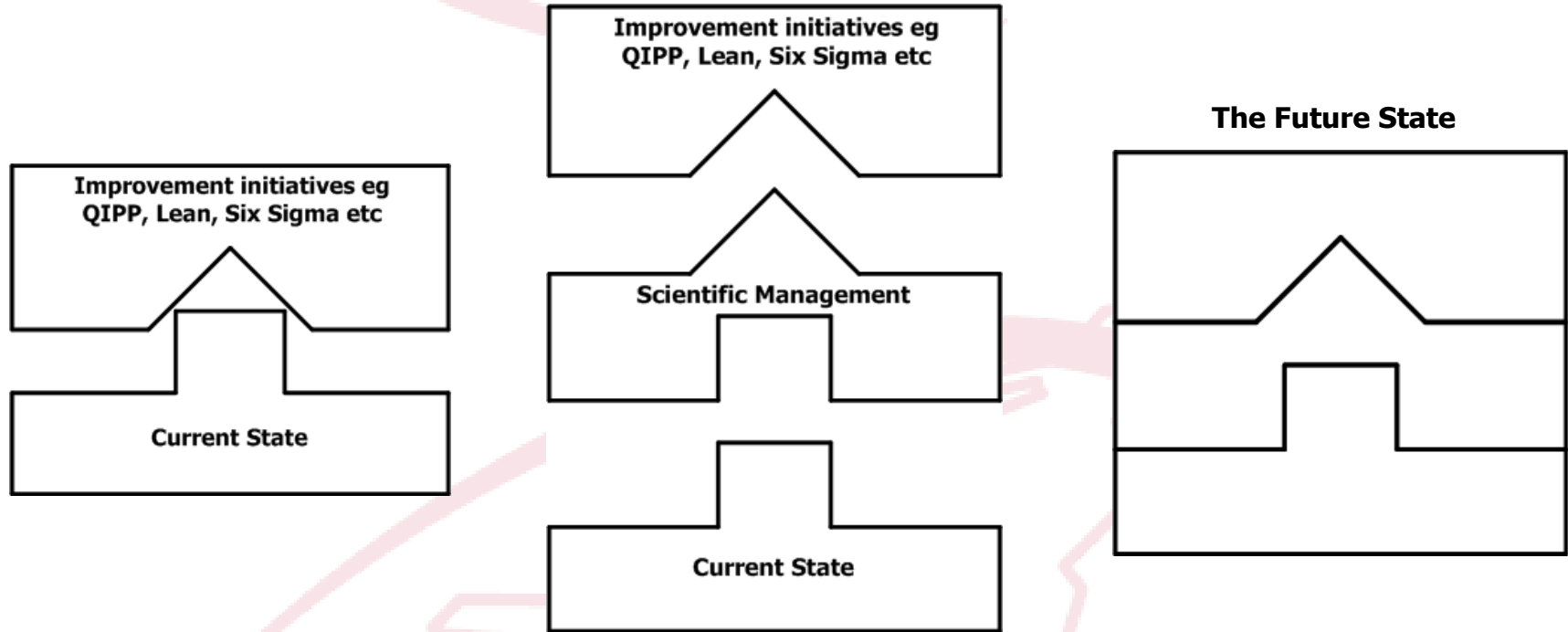
What happens within The Bermuda Triangle: Initiative 'Pinball'



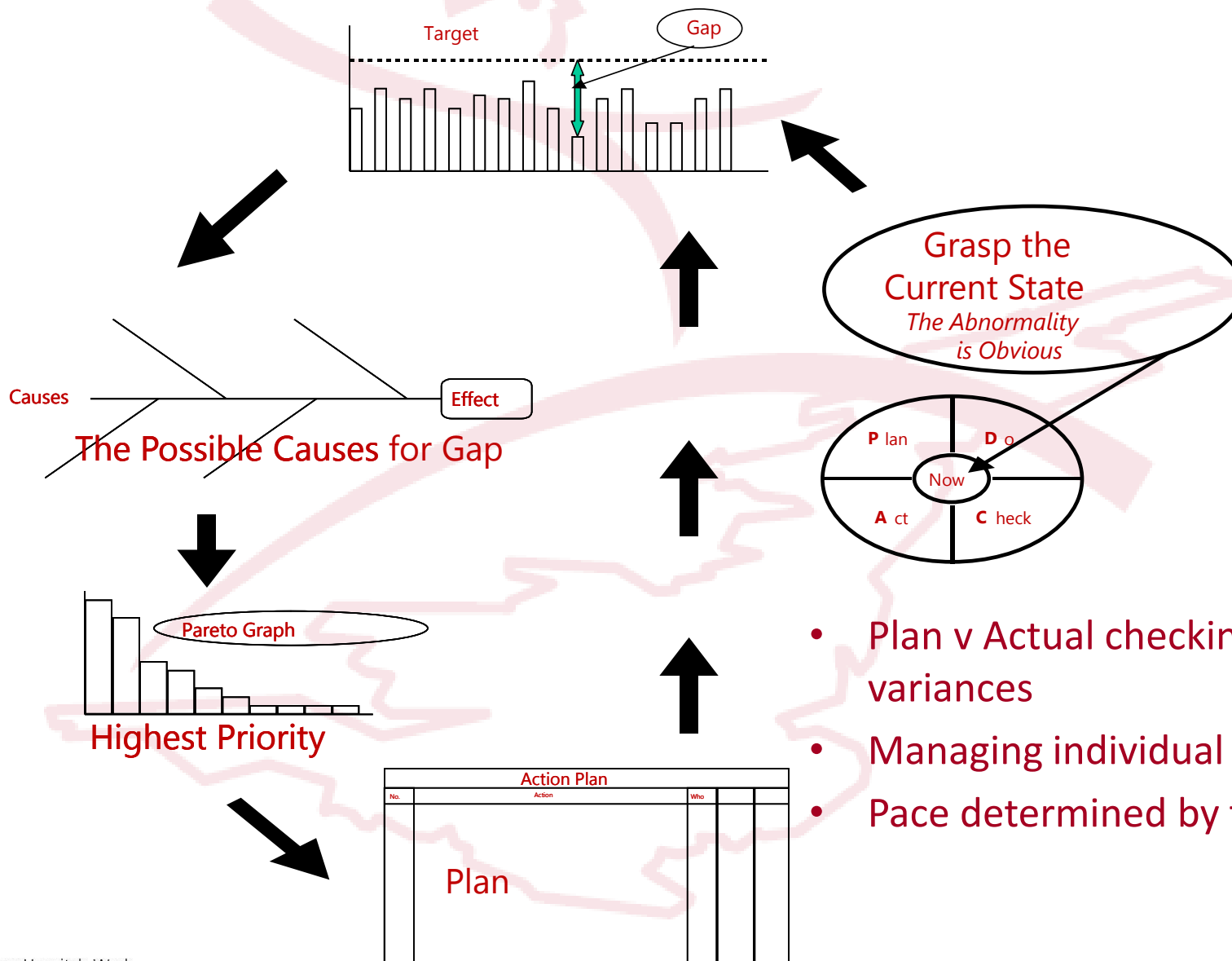
So what's the answer



The Missing Ingredient



Scientific Management



- Plan v Actual checking surfaces variances
- Managing individual patients
- Pace determined by takt

Scientific Management

It IS a Science..... BUT it's NOT Rocket Science

Our Definition:

*Scientific management is a **closed loop system** that provides the Measures & Stability required to enable Safe Experimentation (Re-design) : It is Lean within the Day job!!! Very important but omitted by many!*

Closed Loop employs strict PDCA whereby the Check frequency is at the appropriate pitch to enable the required adjustment to minimise variation in the process

The scientific setting of warning and action limits and the standardisation of the actions required to return to the desired condition – “I will not fail”

Scientific Management – Contrast/Compare

Part Time	Day Job
Heroic	Humble
High Level	Detailed
Remote	At the Workplace
Smoke & Mirrors	Absolute Transparency
After the Event	Just as the event occurs
Chaotic	Scientific
Opinion based	Factual
Dip in (& out) whenever possible	Frequent Routine Mgmt Timeframes
In-formal	Formal
Vague	SMART
Random	Well Planned
Take on more	De-select
Multi-Task	One Piece
Interested	Obsessive
Craves Chaos	Craves Stability
Abnormalities normal	Abnormalities made obvious
Open Ended	Closed Loop
Anarchy	Rules
Ill disciplined	Disciplined
Tolerate what you deserve	Deserve what you tolerate
High variation	Low variation

Scientific Management – Contrast/Compare.... Cont'd

Jump to solutions	Get to root cause
Knowledge	Skills
Knows it all	Always learning
Literate	Numeric
Lose	Win
Manage	Coach
Multi-Task	One Piece
Open Ended	Closed Loop
Opinion based	Factual
Part Time	Day Job
Popular?	Respected
Preoccupied	Listens
Random	Well Planned
Remote	At the Workplace
Sexy	Wise
Smoke & Mirrors	Absolute Transparency
Take on more	De-select
Tell	Ask
Tolerant of abnormalities	Intolerant of abnormalities
Tolerate what you deserve	Deserve what you tolerate
Undisciplined	Disciplined
Vague	SMART
Write lengthy reports (in isolation)	Construct A3s (in collaboration)