

Healthcare Operational Excellence Transformation Case Studies

How FlowPlus helped a UK based healthcare organisation transform their operations to work in a smarter, leaner way.



INTRODUCTION

Lean thinking has proved to be incredibly successful in making improvements in the healthcare sector. Improved quality of patient care, improved safety, minimised delays & reduced length of stays are just some of the benefits that healthcare organisations that have undertaken a lean transformation have seen.

Having helped many healthcare organisations with their Lean & Continuous Improvement journey, we have selected one hospital as a case study to demonstrate our process and the typical results we achieve.

The nature of our work is determined by our initial assessment phase, where your improvement potential is uncovered and an improvement roadmap created. Ultimately, every client is unique, which is why we don't use a 'one-size fits all approach', every solution is tailored to each client.



THE SOLUTION

THE FLOWPLUS TRANSFORMATION PROCESS

The 3-step FlowPlus transformation cycle is a tried & tested way to achieve sustainable, long-term results. Following the transformation cycle, FlowPlus & our client worked as one-team on the journey towards Operational Excellence.



Assess

3

Sustain

In order to improve & imbed a lean culture, a bespoke lean training package was created and trained across the organisation.

Continuous improvement infrastructure was implemented with all teams partaking in a daily 10 minute meeting to discuss KPI's and voice improvement opportunities.

Further weekly problem solving meetings allow all staff members to be involved in the design & implementation of solutions and improvements.

1

Assess

Our journey started with a thorough assessment phase where we uncovered the organisations potential and conducted a 'gap-to-potential' analysis.

2

Implement

Working as one-team with our client, we followed the roadmap and started by launching the most impactful initiatives aligned with the organisations strategic aims. Benefits included; improved patient care & experience, reduced delays, cost savings, improved safety & the development of a continuous improvement culture.



WORKING AS ONE-TEAM

The transformation process started with a thorough assessment phase to uncover areas for improvement and gain insight into current practices.

Working with a team at the hospital we first collected data on each department; waiting times, process times, delays & the size of queues, utilisation of equipment, cost and much more. The team mapped the process for “typical” patients & observed their journey through the system. Doctors, nurses and support staff were consulted on any issues they might have with the current system. Areas with large amounts of waste were highlighted and problems that hindered flow identified.

The FlowPlus Lean Maturity Audit™ reviewed operations in 25 categories across the whole organisation, identifying the areas with greatest improvement potential.

Assess

IMPROVEMENT STARTS WITH DATA.

We make data-driven decisions, using facts and insights to guide our solutions. That's why we have confidence we can make such a big impact.





Assess

PAVING THE WAY TO OPERATIONAL EXCELLENCE.

The assessment identified the colorectal department was facing several challenges. With an increase of request for services, increased complexity of operations the waiting list is often over a year, and work in progress has increased to a point where the staff cannot keep up with the organisation. An action plan was created, with the first initiative being an improvement workshop with the colorectal department as a pilot program. Three value streams to be improved were identified within the department; Short Procedures, Colonoscopy & Surgery.

The audit identified significant scope for improvement across the organisation in the following areas:

- Visual Management
- Flow
- Continuous Improvement
- Culture

INITIAL STATE PERFORMANCE (BEFORE):

SHORT PROCEDURE LEAD TIME: 98

(Average number of days a patient stays in the system)

SURGERY LEAD TIME: 263

(Average number of days a patient stays in the system)

DEPARTMENT WEEKLY CAPACITY: 42

(The number of patients that can be processed by the colonoscopy value stream in one week)

OPERATIONAL EXCELLENCE





Following the transformation roadmap produced in the assessment phase, we facilitated problem solving workshops focused on reducing waste and improving flow in the colorectal.

Changes were made to the booking & scheduling methods to better balance the work load (mixing follow up & first time patients on the same days). Double charting was eliminated & the transcription process removed. Cycle times in the short procedure and exam processes were reduced.

Within the surgery value stream, two main changes were made. Efforts were made to reduce the waste work carried out by the medical secretary to allow them to focus on value add tasks, moving the non-value add tasks to support functions.

This allowed the medical secretary to alleviate the question backlog directed to an MD. Secondly, surgery was only scheduled once a completed consent form and questionnaire.

Within the colonoscopy value stream double charting and other waste processes were either eliminated or combined into one process with a much lower cycle time.

REAL RESULTS MEASURED

We don't count our days on-site; we judge our success by our results.

FINAL STATE PERFORMANCE (AFTER):

SHORT PROCEDURE LEAD TIME: 75 -23%

(Average number of days a patient stays in the system)

SURGERY LEAD TIME: 235 -10%

(Average number of days a patient stays in the system)

DEPARTMENT WEEKLY CAPACITY: 102 +142%

(The number of patients that can be processed by the colonoscopy value stream in one week)

DEVELOPING A CONTINUOUS IMPROVEMENT CULTURE

Improvements can only occur once performance can be measured. That is why we created digital & automated KPI dashboards for all departments in the council.

A bespoke lean training package was created and trained to all staff, teaching basic lean principles and some of tools used to reduce waste and improve flow.

A 10 minute daily Continuous Improvement (CI) meeting was set up for each team, allowing teams to voice problems, share improvement ideas, track KPI's and track ongoing projects.

Each team has a weekly problem solving meeting; using a structured approach to find solutions for problems identified in the daily meetings.



Sustain



AUTONOMOUS PROBLEM SOLVING

Within the first month of introducing daily CI huddles with team KPIs, 5 initiatives have been launched and results are already improving.

WE BELIEVE EVERY ORGANISATION CAN BE IMPROVED

Right now, within your organisation, there are complex and apparently insurmountable challenges to solve.

Equally, there's hidden opportunity to tap into. If you're going to overcome those obstacles, unearth that potential and keep on improving as an organisation – change is essential. But where to start? How do you make the right changes? And how do you make them stick?

That's where we come in...

Contact us;

enquiries@flowplus.co.uk

