



# An introduction to LEAN

By David Hamer

The words that bring dismay to any Lean practitioner - “we’ve done Lean” or “we’ve been Leaned”. Aarrgghh, no you haven’t! You’ve used a couple of tools in the corner of a work area, but failed to understand that Lean is a philosophy, a way of thinking and a way of acting. It is continuous improvement. The clue is in the title. It’s a continuous journey not a destination.

## The 9 wastes of modern day Lean.

To help gain more understanding, I’d like to introduce you to your new best friend ... Tim A. Woods.

Tim works as an acronym, his job is to help you remember the 9 wastes of modern day Lean.

- **T** is for **Transport** – moving stuff;
- **I** is for **Inventory** – too much stuff;
- **M** is for **Motion** – of people, unnecessary walking, moving, bending or stretching;
- **A** is for **Automating** a poor process – like buying new automation or IT in the hope it will make you more efficient, when in fact the problem is your poor processes;
- **W** is for **Waiting** – for stuff, for people, for decisions;
- **O** is for **Overproduction** – repeating tests before next test is due, batching samples, tests and information; ‘just in case’ blood tubes drawn from patients, but not used;
- **O** is also for **Overprocessing** – duplicate and /or inappropriate testing, duplicate data entry, duplicate checks;
- **D** is for **Defects** – stuff that’s not right and needs fixing;
- **S** is for **Skills** of your staff not being recognised or used correctly, staff ideas not listened to, skilled staff doing unskilled work.

If you remember from my previous blog the 2 main pillars of Lean are removal of waste & respect for people & society. So that's 2 pillars & 9 wastes. Here are some other numbers...

### **The 3 fundamentals for improvement**

These are required to apply the right improvements in the right places:

- Look at the end-to-end processes in your service (from decision to test to provision of interpreted result);
- Collect data to inform exactly what is happening as a baseline and understand what needs to improve;
- Engage with the customer (patients and their clinical teams) to understand their needs and what value you can add.

### **The 4 Ps of the Lean philosophy** (from Dr. Jeffrey Liker in The Toyota Way):

- PHILOSOPHY - it's about long-term thinking & focus on Continuous Improvement;
- PROCESS - eliminate waste, introduce standard work, visual management, belief that the right process will deliver the right result;
- PEOPLE & PARTNERS - respect, engage, challenge and grow them;
- PROBLEM-SOLVING - solve problems daily by root cause analysis.

### **The 5 principles of Lean:**

- Specify VALUE from the customer viewpoint;
- Identify the VALUE STREAM (how the value is delivered) and remove the waste;
- Make the value FLOW and eliminate batches;
- Initiate PULL in line with customer demand;
- Pursue PERFECTION in quality by Continuous Improvement.

We can't really talk about waste without first understanding what is meant by value. From a Lean perspective, this is all about the customer, and if you're in the health sector like myself - the patient and the clinical teams that care for them.

What is it that they require from your service. Not what do you think they need or have decided they are going to get. Yes, they may be misusing your service, but is that because you have never made the effort to communicate with them what is the best way to use your service. You need to get out of your silo and go and talk to the 'customer'.

I'll talk more about this very important principle of Lean in a future blog.

## Some final thoughts

For now, I'll leave you with a few pieces of advice I've learned over the years:

- Don't ASSUME you know how all your processes work - you need to walk the pathways (value streams) of your processes and talk to the experts – the staff who work in the value streams.
- Don't ASSUME you know what's wrong with them - you need to collect data on what is going right and what is going wrong. Analyse the data, what is it telling you?
- Don't ASSUME you know how to fix them - Ask the staff to help you map the value streams and using their expert knowledge and the data, work through the issues and identify potential solutions. Implement the changes, monitor the effect and adjust as necessary.

Congratulations! You have just completed a PDCA cycle. Plan, Do, Check, Adjust - the underlying driver for Continuous Quality Improvement.

- To ASSUME will make an ASS out of U and ME - pretty self-explanatory.

And when you do walk the value stream (otherwise known as going to the Gemba), I'd advise listening to the words of Toyota Chairman Fujio Cho: "Go see, ask why, show respect".

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