Using Lean to steer a department

When a perioperative nurse was recently promoted to be the OR’s clinical coordinator, she inherited a department badly in need of coordination. The OR manager was frequently out of the department at meetings, leaving no one to coach the team.

Not an experienced manager, the coordinator needed a way to get traction. Lean methods offered a framework to use as she assumed her new responsibilities.

“This was a perfect opportunity for what we in Lean call ‘leadership standard work,’” says Lewis Lefteroff, a Lean consultant.

The Lean methods he suggested are described in the book *Lean Hospitals* by his colleague, Mark Graban (Productivity Press, 2008, www.leanhospitalsbook.com). Graban and Lefteroff are consultants with ValuMetrix Services, a unit of Ortho-Clinical Diagnostics, a Johnson & Johnson company.

Pioneered by Toyota, Lean teaches a way of thinking, operating, and managing focused on customer value, rooting out waste, and fostering continuous improvement. Adopting Lean is easier if the hospital already has embraced a Lean culture. But any manager could use Lean principles as a framework to help set a department on a steadier course, Lefteroff suggests.

“One of my favorite questions to ask a manager is, ‘How do you know if you are having a bad day? And how do you know if you are having a good day?’” he says. The most frequent answer: “If I don’t get yelled at or get a nasty phone call, it’s a good day.”

To start building a framework, he advises asking what it would take to prevent nasty phone calls. What are the key things to look for? Then start to focus on those.

Here are 4 Lean management methods outlined in *Lean Hospitals*.

**Standup meeting**

The first Lean method the new coordinator adopted was to hold a standup meeting at 7:30 am right before the surgical schedule begins at 8 am. This quick meeting involved the daily management team and covered critical issues such as any major schedule changes, facility issues, or changes in personnel. From this meeting, the OR coordinator developed an audit list.

**Daily audit**

The audit list provided a guide of issues the coordinator needed to monitor that day for the OR to be successful. Some examples:

- Make sure supplies and equipment are in the right place. Each day, she selected 1 or 2 ORs and checked supplies in those rooms. She also checked the central core to make sure mobile equipment was stored where it
Lean management advocates establishing a “visual workplace.” A “visual workplace” has visual cues that allows anyone to see immediately if a supply is out of stock or a piece of equipment is missing. Examples are labels on shelves and taped “footprints” for equipment on the floor.

- Are OR staff following consistent processes? For instance, is there a standardized process for room turnover? Is everyone playing the assigned role?

The coordinator monitored these processes to see how well they were working. Were personnel following the right steps in the right sequence? Did each player know his or her role? Were they meeting the right time frames?

If the coordinator spotted a problem, she didn’t reprimand the team member. Instead, she said: “I noticed you weren’t able to follow the standard process. Why is that? Did you not have things you needed? Did you not have the information or training you needed? How can I help you do better next time?”

Though the word “audit” can have a negative connotation, “the audit is really a coaching guide,” Lefteroff says. “An audit includes specific things you look for. Then you coach people if they are not meeting expectations. “It’s not about being a police officer—it’s about being a coach and mentor. The idea is that leadership is there to support the staff, help them be successful, and hold them accountable.”

**Key performance measures**

Key performance measures are guideposts for monitoring the department’s performance. Examples are late starts, turnover time, case delays, and how long cases run over at the end of the day.

Monitoring is more than collecting data and generating reports, Lefteroff says. It also means monitoring teams’ performance—and letting them know you are monitoring it. The data needs to be visible. By sharing information with the staff regularly, leaders help the staff feel they are trusted and respected.

“If the manager is in an office down the hall, and staff and physicians never see the manager, they may think no one cares. They may think the measures are just numbers in the computer.”

For example, as the coordinator conducted her rounds, she might see that it was 8:30 am, and one OR hadn’t started yet. She would ask the team, “Why is there a delay? Has this been recorded as a late case? Let’s make sure we are capturing why the case is delayed so we can address it later.”

As the day went on, the coordinator would continue to do audits, make sure teams had resources they needed, monitor work, and check on whether performance measures were being met.

**Capturing the staff’s ideas**

The staff is one of the best sources for improvement ideas. By harnessing their ideas, leaders help create a culture of continuous improvement. It also helps employees feel involved and valued (sidebar).

The secret to eliciting good, actionable suggestions from the staff “is convincing people their ideas and suggestions will be used,” says Lefteroff.

Toyota has a 99% implementation rate for suggestions.

“That doesn’t mean 99% of the suggestions were perfect to start with,” he notes. “It means someone went back to the people who made the suggestions and said, ‘Can you explain this to me a little more? What is the problem you are trying to solve?’”
Leaders help employees convert their ideas to sound suggestions. “That’s where leadership comes in—mentoring employees to bring their ideas to the point where they can actually solve problems for the organization.”

The focus is on improving the department’s performance. While it might be nice for a staff member to suggest a new reading light for the lounge, and the department might do it eventually, that is not going to drive performance, Lefteroff notes.

**Encourage suggestions**

He gave an example of how to encourage suggestions. Say the OR’s cancellation rate for the previous day was 17% of cases, and the day before it was 18%. The cancellation rate has been 14% to 19% for the past 2 months.

At the standup meeting the next day, the OR coordinator could say, “By next Friday, I’d like each of you to come back with 2 suggestions you think can help improve our cancellation rate.” Then she and other leaders would help develop those suggestions and work with the staff to implement them to reduce the cancellation rate.

The coordinator could ask for suggestions on other processes, such as: How can we improve communication among colleagues? How can we improve handoffs between the preoperative area and the OR?

**Give regular feedback**

Regular feedback is crucial to successful suggestion management. Coaching and feedback “are one of the big differences between management and leadership,” Lefteroff says. “Management is a title—leadership is a behavior. This is about leadership, which is getting people to have trust and be constructive.”

**Bad-day calls drop**

Using these Lean methods, the new OR coordinator was able to meet one of her objectives: Bad-day phone calls dropped off dramatically, Lefteroff notes.

For these strategies to be effective in the long term, a coordinator needs backing from senior management. Achieving sustainable improvements in measures like OR delays and turnover time requires resources and leadership support. Otherwise, some staff and physicians will think they just need to wait out the current coordinator, and steady monitoring of their performance will stop.

—Pat Patterson
Turning suggestions into improvements

The staff is one of the best sources of ideas for continuous improvement. The secret to eliciting good suggestions is convincing employees their suggestions matter. Having a way to manage employee suggestions captures good ideas and helps the staff feel respected and involved.

Suggestion management involves 3 steps:
1. Help the staff to feel it is worthwhile to make suggestions.
2. Help them channel suggestions to aid the department in improving performance.
3. Provide the staff with regular feedback on their suggestions.

An effective suggestion program

Here’s how one sterile processing department developed an effective employee suggestion program.

The manager put up a bulletin board with 4 sections labeled:
- new suggestions
- working on
- not ready to go forward
- completed.

A staff member with a suggestion writes it on a card and pins it to the board. The manager checks the board every day, reads each new suggestion, and talks to the person about it.

Then he signs the card, dates it, and moves it to another section of the board. If the card is moved to the “not ready to go forward” section, he explains why to the employee, saying “Tell me more about it, and we’ll see if we can take it further in the near future.”

Happily, the most crowded part of the board is the “completed suggestions” part, Lefteroff says.

“This way, suggestions don’t go into a box or a computer where no one sees them. They are on the board for everyone to see. It says to employees, ‘Maybe this manager is serious about implementing our suggestions.’”