

kinetik solutions



Lean Executives

executive search & selection for the lean enterprise

Lean Midlands Forum

13December 2011

Birmingham

For more information, please email help@leanlondon.org.uk or telephone 0207 824 8448



We have some broad aims in the forum

- **To create the environment where Lean Solutions in the NHS are shared, discussed and acted upon by practitioners in the Health service**
- **To engage in a debate about strengths and weakness of lean in the current NHS climate**
 - The QIPP agenda in reducing costs across the health system
 - Clinical Commissioning Groups that will redefine 'end to end' health systems processes
- **To network with colleagues and friends**



Agenda

- **1730 - 1800** **Reception and Refreshments**
- **1800 - 1810** **Welcome and Introductions**
- **1810 - 1830** **Network Improved Services in Tower Hamlets, Florence Cante, Network Manager**
- **1830 - 1850** **Using improvement science in Ambulatory Care, Simon Dodds, Heart of England Trust**
- **1850 - 1920** **'Hot Seat' questions and answers**
- **1920 - 2000** **Networking and drinks**



Introductions



- **Your Name**
- **Your Role**
- **The one thing relating to lean you are curious about?**



Recap – What is Lean?

- Focus on Value from a **Customer (Patient) point of view** on every step of process
- **Obsession on removing waste** within the ‘whole system’
- Bottom up approach in identifying value and waste – assumption that **much of waste and value is hidden**
- A true lean system would “flow” and need **little command and control**

Network Improved Services in Tower Hamlets

Florence Cantle
Network Manager
The One Network

Lean Midlands Forum
13th December 2011



NHS ELC – Our Vision

- ▶ **We aim to create a healthier future for the people of east London and the City.**
- ▶ ***Our goals are:***
 - ▶ improving health and well-being; reducing health inequalities
 - ▶ working collaboratively
 - ▶ delivering sustainable improvement in quality, responsiveness and access to health services, reducing the inappropriate use of secondary care
 - ▶ improving the patient experience
 - ▶ improving productivity
- ▶ **We will deliver on improvement opportunities we have identified in our commissioning *strategic plan 2011-14***
 - ▶ urgent and unscheduled care
 - ▶ quality and choice in maternity services
 - ▶ performance of mental health services
 - ▶ quality and performance of primary care
 - ▶ screening and diagnosis of cancer



Tower Hamlets - Borough Context

Population

- Population ~ 245,000
- Population growth by 13% to 2013
- 35% under 25 years-old

Diversity

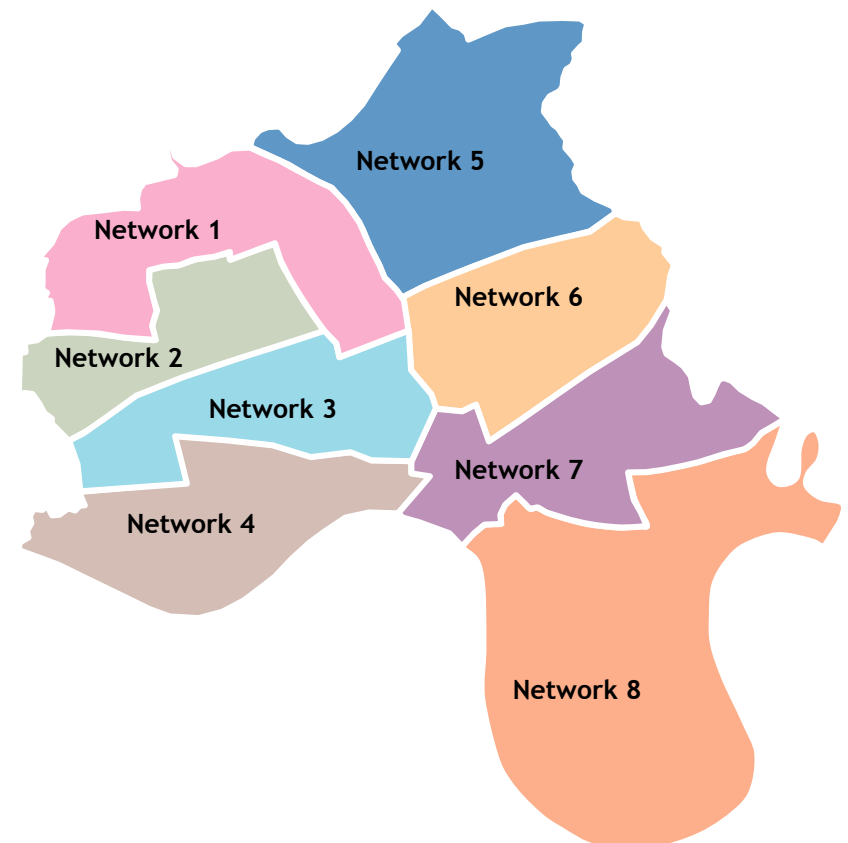
- Highly diverse population in terms of ethnicity and socio-economic status
- 50% BME of which 33% is Bangladeshi

Deprivation

- 18% of families living on less than £15,000 with unemployment rates of 14%
- 8 year life expectancy gap within the borough and 2.1 years lower than national average

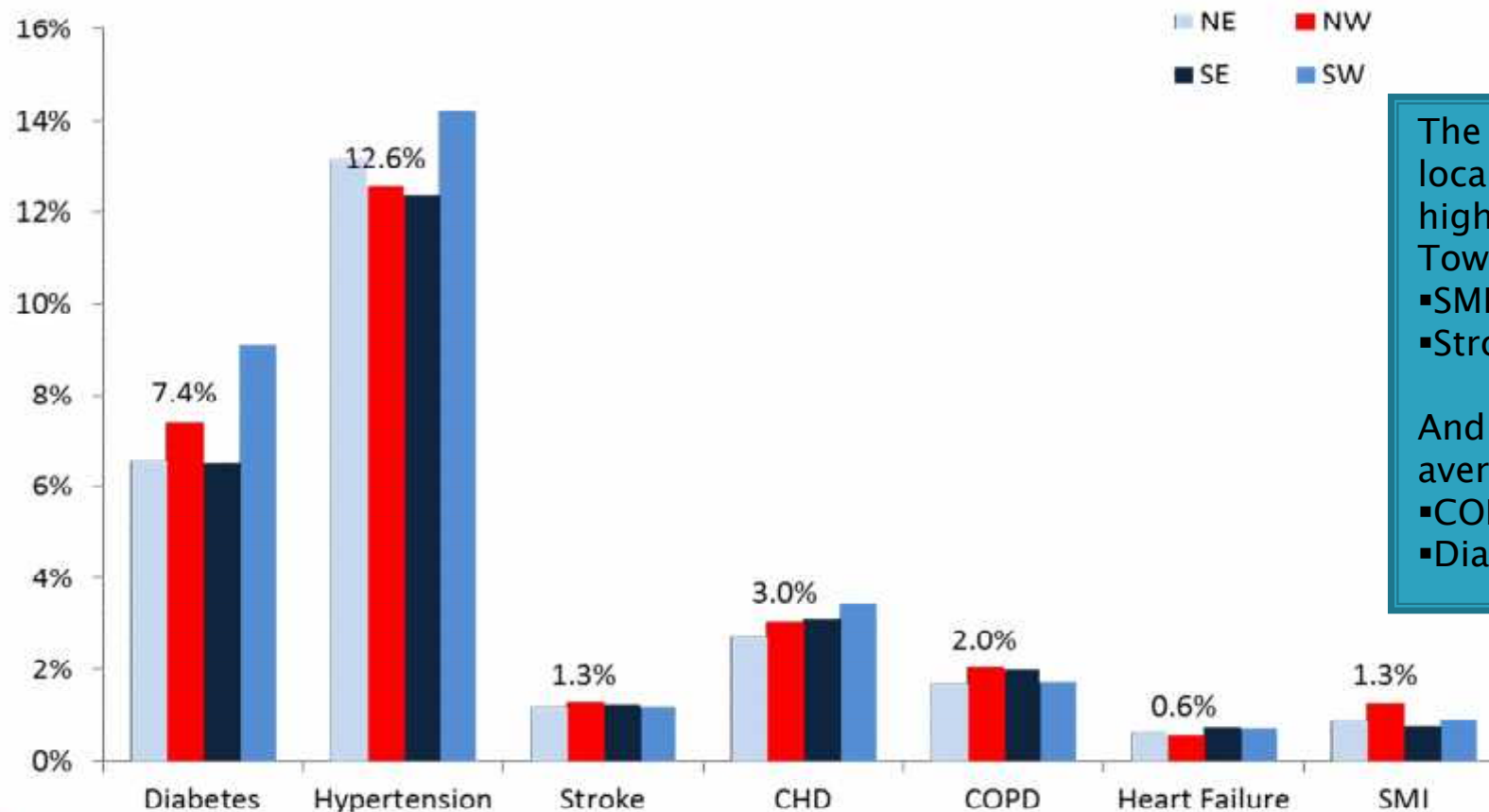
Provider landscape:

- Primary care: 36 GP practices (8 provider networks)
- Secondary care: Barts and the London NHS Trust
- CHS: merger with BLT since July 2011
- Social care: Adult Health and Wellbeing Services (LBTH)
- Dental: 29 general dental practices
- Optometry: 20 practices



The North West of Tower Hamlets has the highest prevalence for stroke and serious mental illnesses

Age Adjusted LTC prevalence by Locality
2009/10



The North West locality has the highest prevalence in Tower Hamlets:

- SMI
- Stroke

And is above Borough average for:

- COPD
- Diabetes

Local Solutions to Local Problems

- ▶ Existing enhanced services commissioned as **Network Improved Services (NISs)** on a local level
- ▶ Local arrangement offers increased protection from national contract negotiations
- ▶ Legal advice has indicated the proposals stand the contestability challenge
- ▶ Network commissioning provides a framework for delivering on anticipated future performance management requirements from CQC and NHS commissioning Boards



Financial Context

- Enhanced Services accounts for 16% of current TH GP budget
- NHS Tower Hamlets investment is in the top 5 highest in the country
- There is increasing nationwide uncertainty regarding the future of enhanced services budgets



Network Improved Services (NISs)

NISs are primary care services delivered at Network (Local) level.

Patient-specific programme covering 19 different service areas, including:

- Diabetes
- Childhood immunisation
- Other chronic diseases
- Minor surgery
- Phlebotomy
- Access
- Others e.g. substance misuse

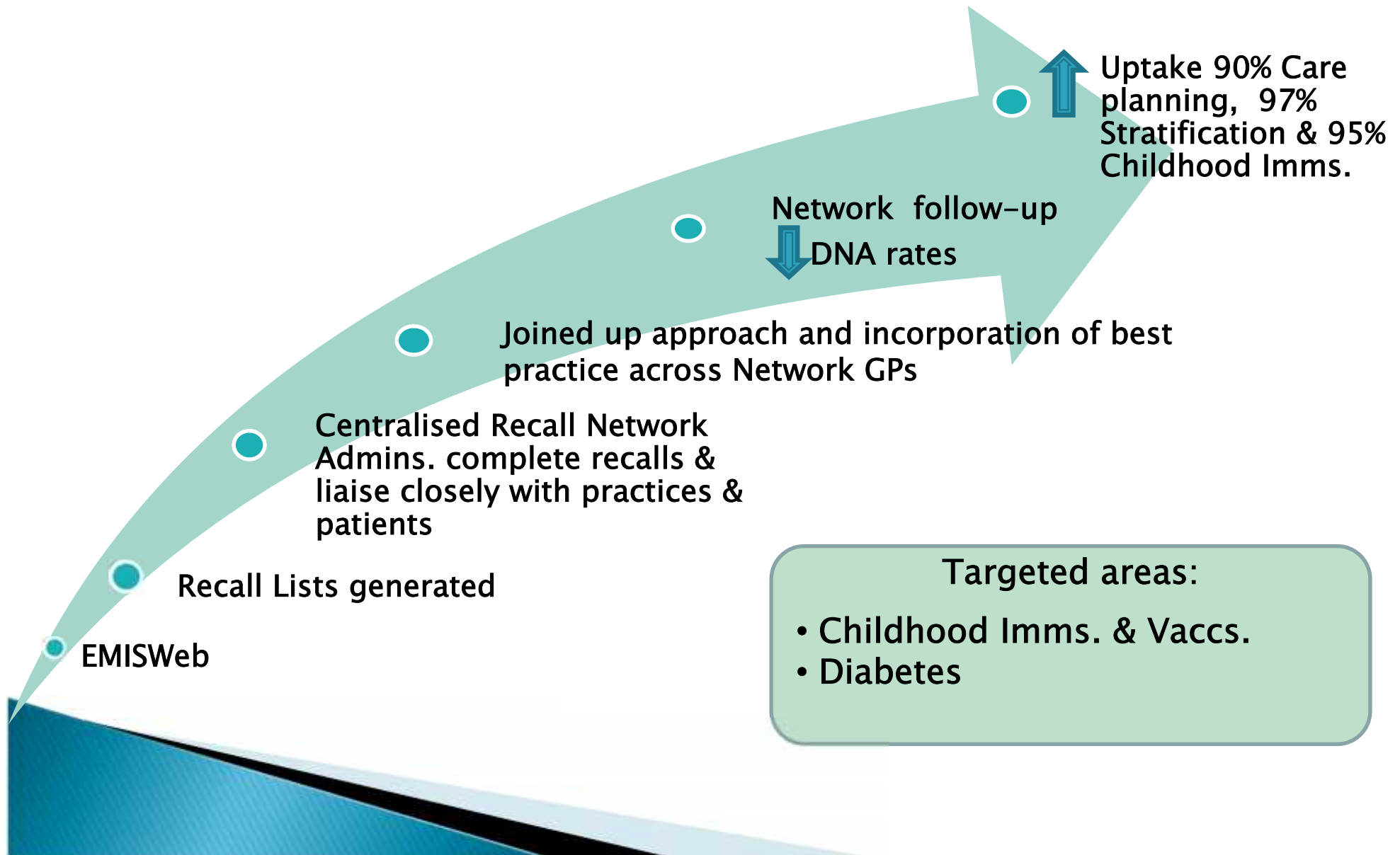
Why are Network Improved Services (NISs) effective?

5 year contract to serve local community

NISs are consistent with the following guiding principles:

1. **Value for money** through streamlined systems, reduced transactional costs, funding linked to outcomes, reduced duplication
2. **Reduced variability** in delivery through effective peer performance management
3. **Quality care** that is outcome focussed, safe, effective and patient centred
4. **Effective resource utilisation** for both providers and commissioners
5. **Equity of access** to services

Targeted Intervention



Childhood Immunisations NIS

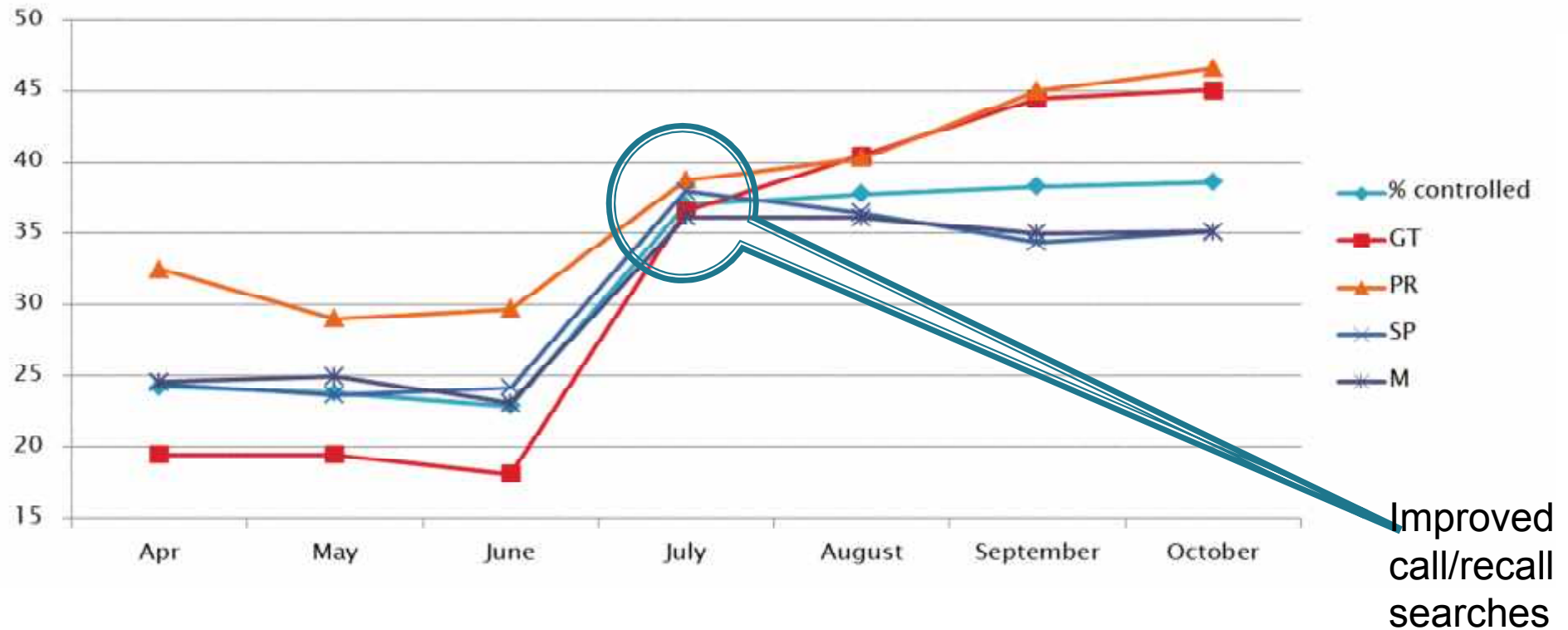
Comparison analysis (Network 4 data)

	12m DtaP/IP V/ Hib	12m Men C	12m PCV	12m BCG	24m MMR	24m PCV	24m Hib/ Men C	5 Yr MMR 1 st Dose	5 Yr DtaP/ IPV	5 Yr MMR 2 nd Dose
Target	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%
2008/09	94.6%	94.0%	94.2%	89.3%	82.6%	82.4%	82.8%	91.5%	79.2%	80.4%
2009/10	93.5%	93.5%	93.5%	93.5%	85.5%	85.5%	83.6%	93.5%	74.2%	75.3%
2010/11	98.0%	96.1%	96.1%	98.0%	93.4%	94.3%	95.9%	N/A	99.2%	99.2%



Diabetes NIS

Controlled diabetes target for 2011/12 (NW1 data)



KPI: minimum of 38% of patients on register with BP and cholesterol controlled

Any questions?

Contact details
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Lean Midlands Event
Tuesday 13th December 2011.

Improvement Science applied to Ambulatory Care



Simon Dodds

Consultant Surgeon and Clinical Director for Outpatients
Heart of England NHS Foundation Trust
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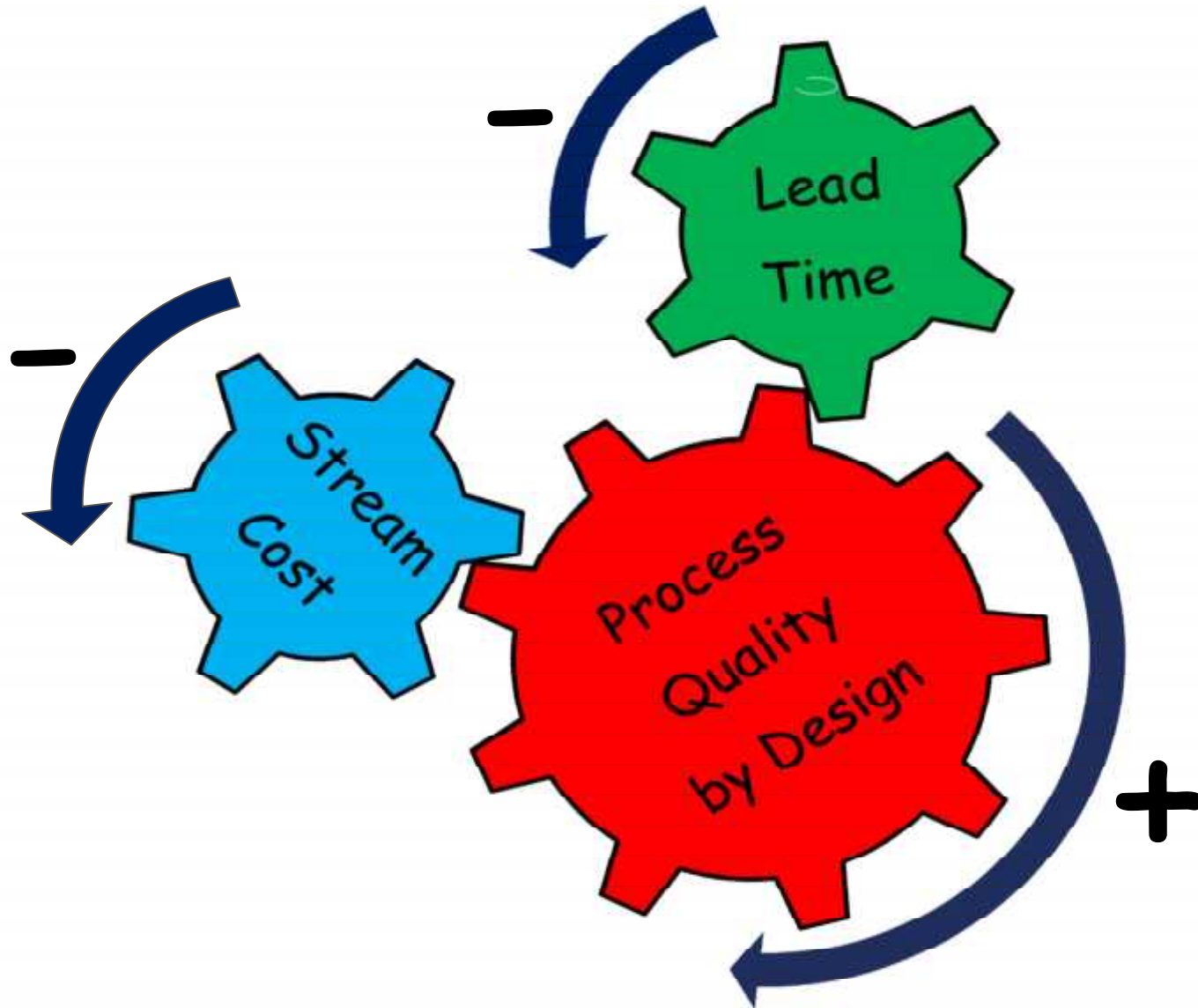
Improvement Science Forum (www.saasoft.com/blog)
e: simon.dodds@saasoft.com



The Three Wins®

- Safety and Quality
- On Time Delivery
- Financial Viability

Win-Win-Win

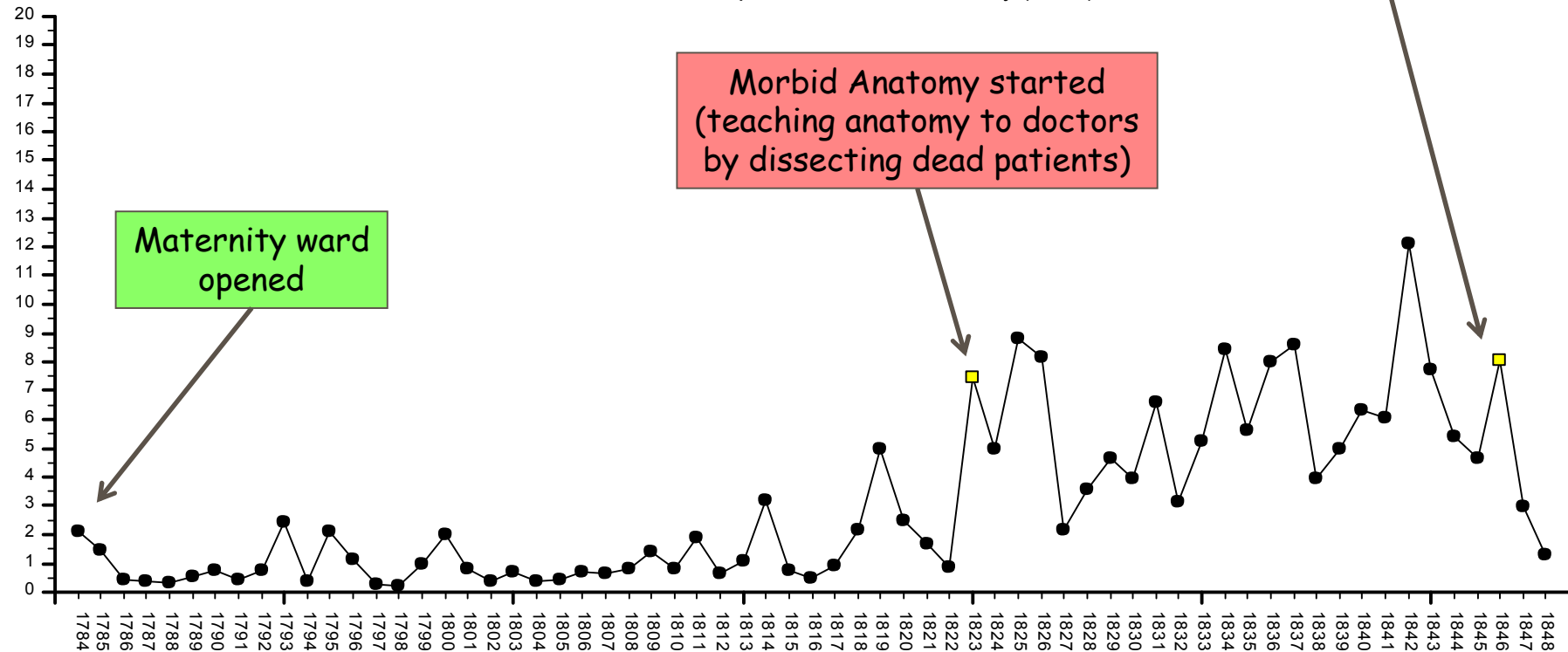


IS not new

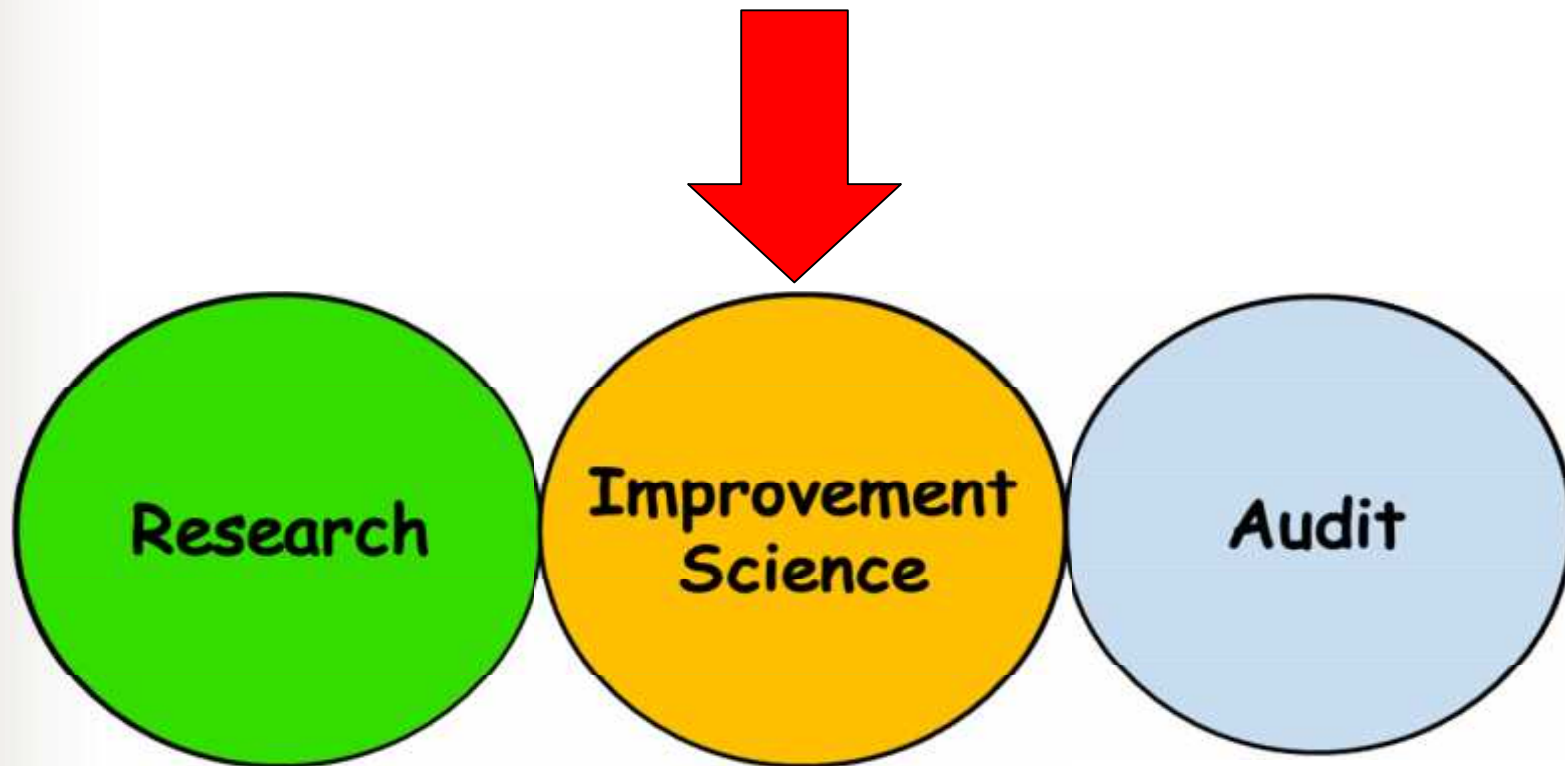
Ignaz Semmelweis makes the doctors wash their hands after leaving the dissecting room

Mortality Rate %

Vienna General Hospital - Maternal Mortality (Data)

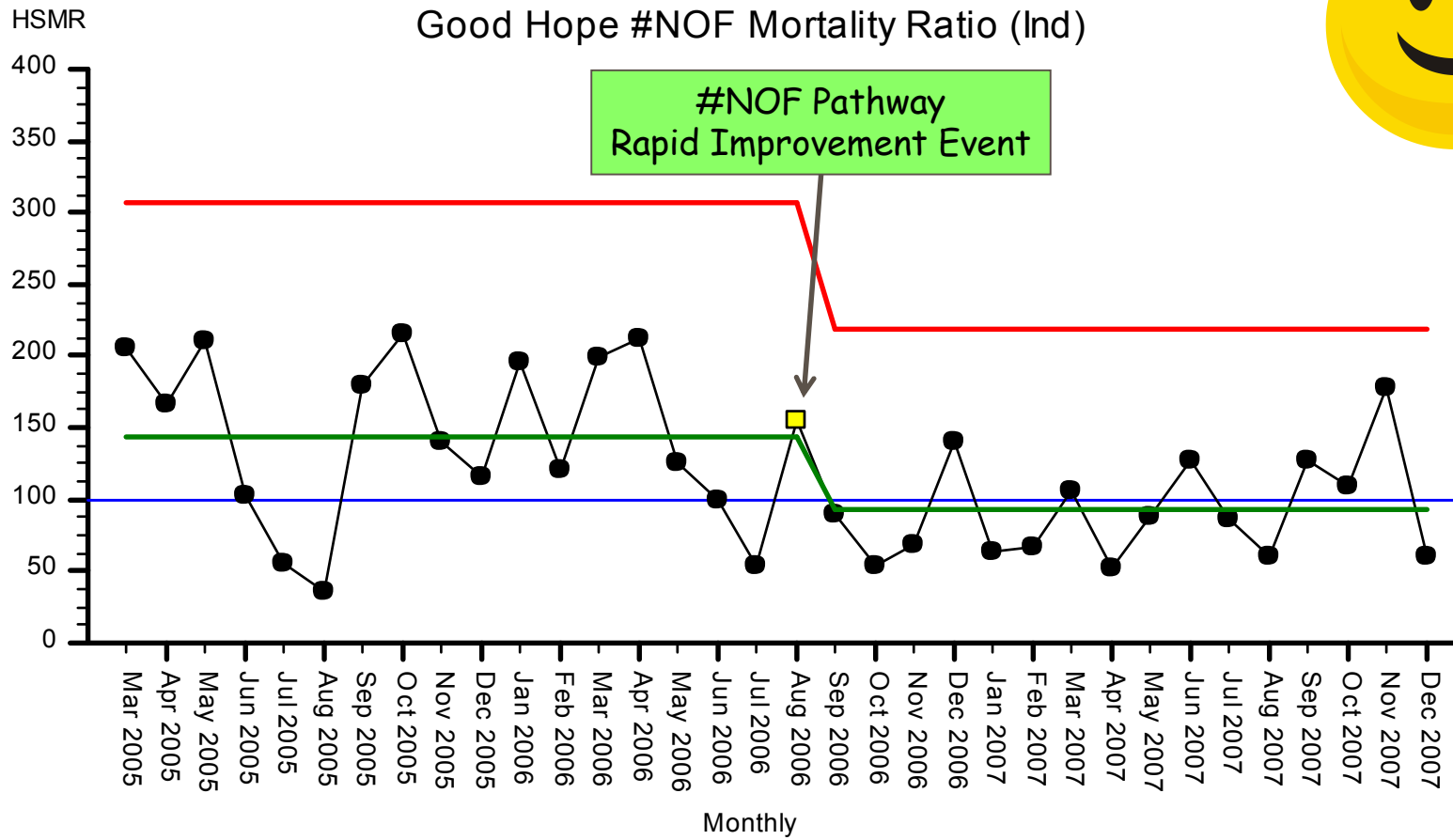


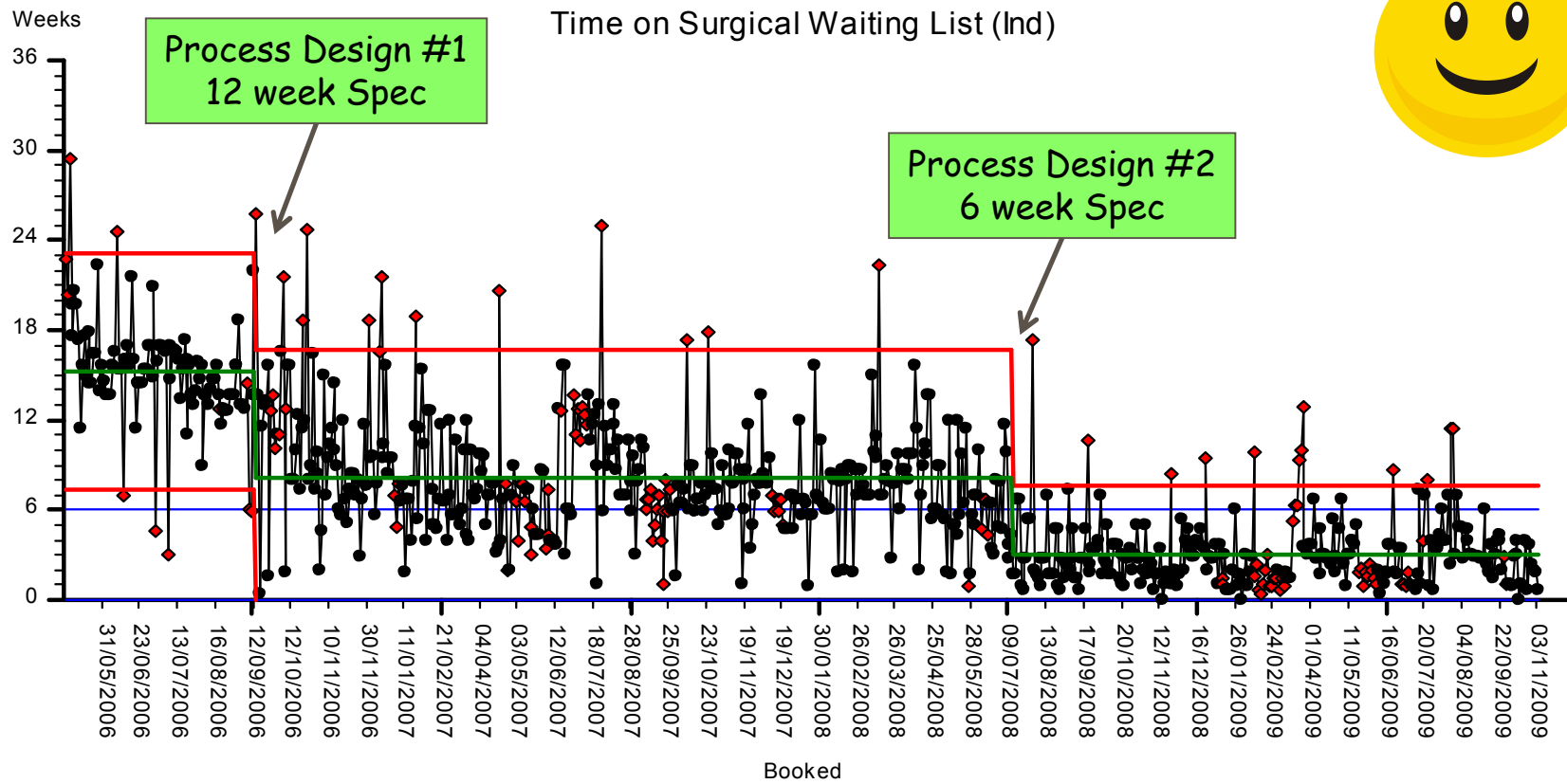
The Missing Link



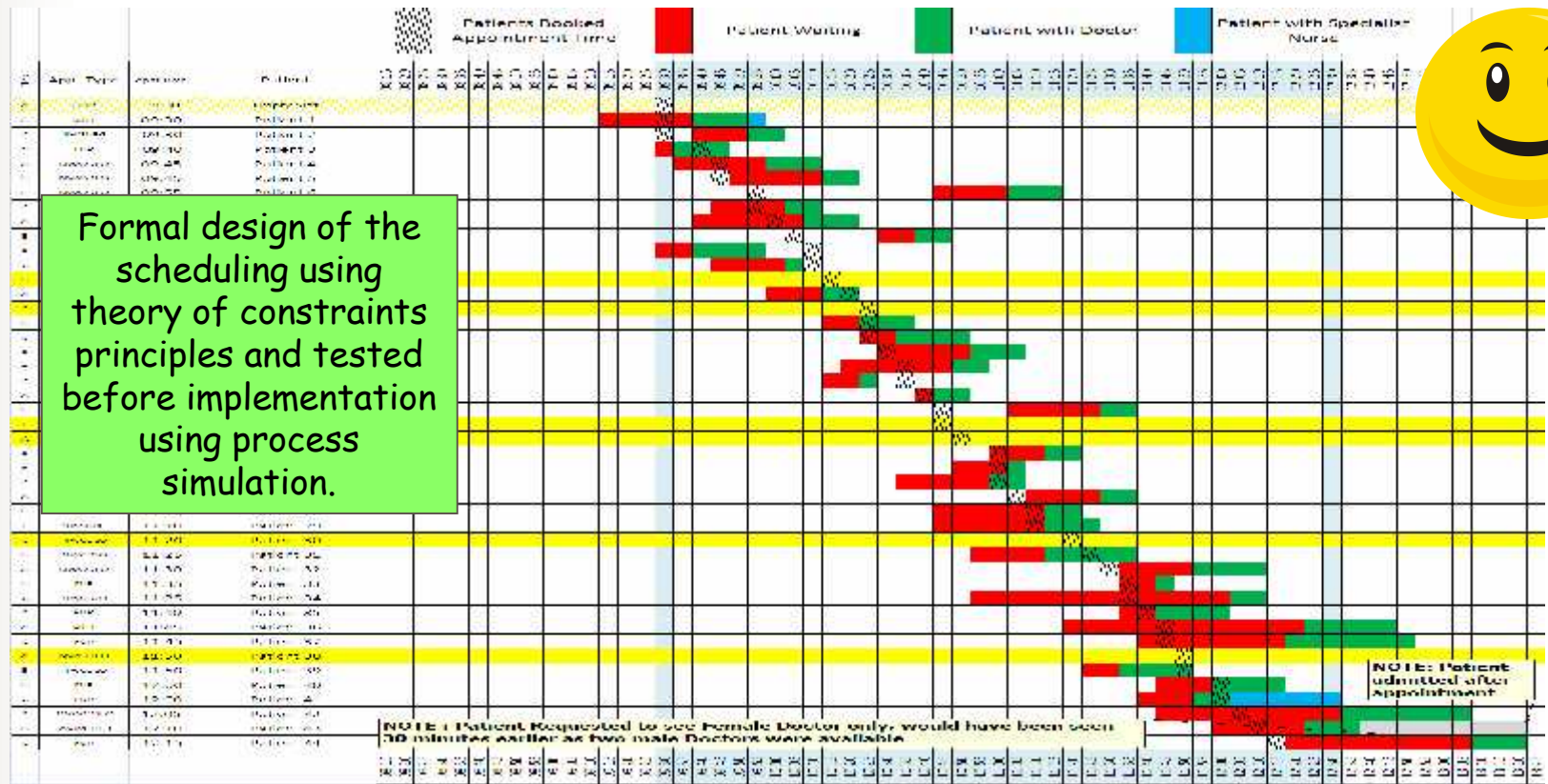


Good Hope #NOF Mortality Ratio (Ind)





Outpatient Clinic - after



What the Docs said ...

Mr H: "You've performed a miracle. With this number of patients we'd normally be seeing patients until 2pm"



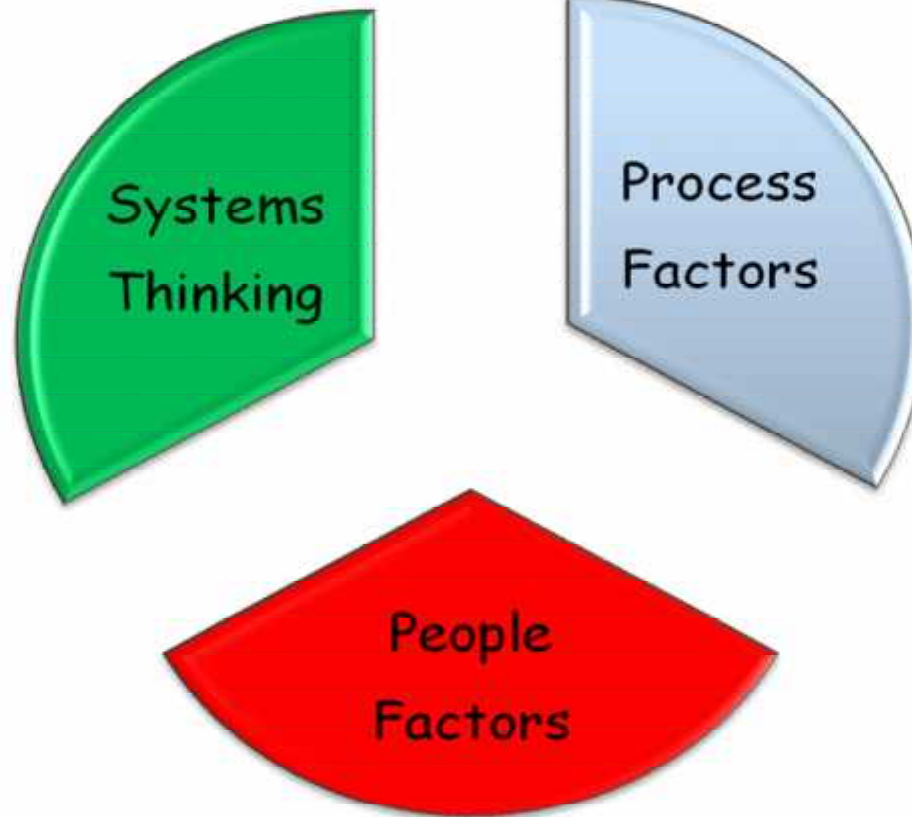
Ms S: "Today has been so much more bearable, I've had time dictate letters and do the admin work which I would normally have to do after clinic."



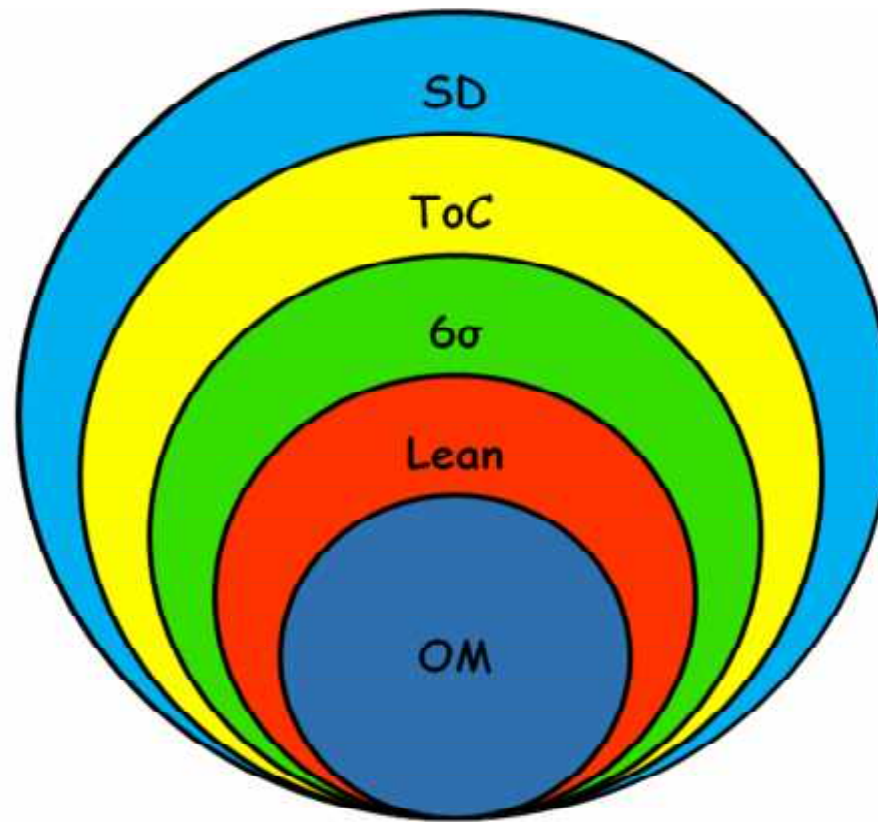
Registrar: "I've actually enjoyed clinic today. I haven't felt as if I need to rush"



Improvement Science



Process Factor Synthesis





IS = Lean ++

- Includes Foundation of Process Physics
- Includes Foundation of People Politics
- Includes Six Sigma and Theory of Constraints
- Includes Quality by Design
- Includes Delivery by Design
- Includes Productivity by Design
- Includes Systems Thinking
- Includes System Design
- Includes System Diagnostics and Prognostics

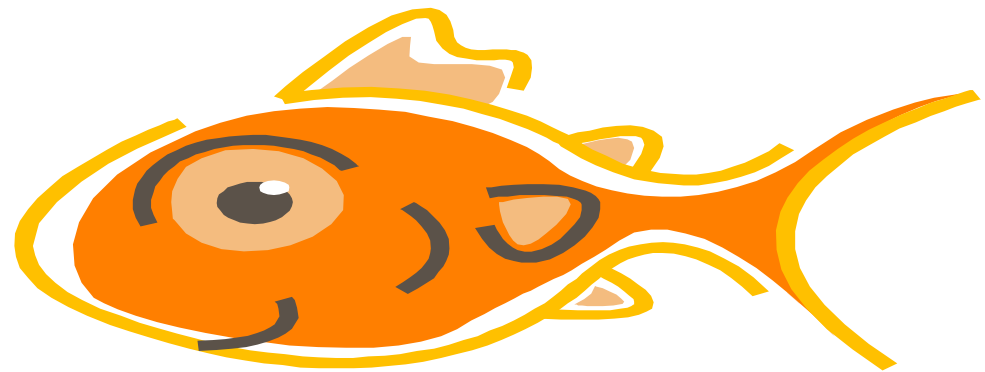


Top Tips

- Master the basics.
- Go shallow and wide.
- See - Do - Teach.
- Easy streams first.
- Tame the wicked problem bit-by-bit.
- Start now ... Stop never.

Fast Immersion Training

Foundations of
Improvement
Science in
Healthcare



e: fish@SAASoft.com



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What's Next?

- **Today's presentation and feedback survey sent out by email within 48 hours**
- **The Next Lean Midland Forum will be held on 12 June 2012**
 - Register at www.leanmidland.org.uk
 - We have a Lean London Forum on 21 March 2012 taking place in London. Register at www.leanlondon.org.uk
 - We will send out reminders to all participants from today
 - We have a release a paper on Operational excellence for Clinical Commissioning groups
 - If you'd like to take up one our presentation slots, please do let us know. We are keen to hear from Community Trust and Clinical Commissioning Groups
- **Find us on Linked In and Twitter - LeanNHS**





Big Thanks To Our Presenters & Supporters

Florence Cantle

Simon Dodds

Jazz Singh

..and to you all for

attending





Thanks to Our Sponsors

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in the health sector and beyond**

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