

An improved 'lean' service in Birmingham

Getting a research study off the ground is a time-consuming business. Research teams have to design the project, find funding and get statutory approvals. When Mental Health Research Network (MHRN) regional offices (hubs) first become involved, another lengthy process ensues: the hubs help research teams find mental health professionals willing to be in charge of the study on their patch (principal investigators), suggest services where research teams can find potential participants and organise necessary permissions to allow the research to take place within the NHS. When staff at the MHRN's Heart of England Hub, based in Birmingham, added up the hours they spent doing this 'set up', they discovered the total was 154 working days. Now, by introducing more streamlined ways of working, they have reduced that amount to 95 working days – a 38 per cent cut in time.

Hub team members have applied 'lean thinking' to all that they do. *Lean* is a management philosophy popular in the NHS and inspired by car manufacturer Toyota. The system aims to cut out duplication and 'waste' and encourages an analysis of each step of each task in every workstream.

By thinking *lean*, the hub has developed and introduced standard procedures now followed by all team members, wherever they are working, each time a study is being set up. Hub staff have also launched across-the-board procedures to be followed while participants are being recruited – and coming soon will be standard procedures for what to do when recruitment has closed.

Shaving almost 60 days from the set up time is only the first step, says hub manager Carly Cooper. 'We aim to take the least amount of time as possible for study set up and *lean* has helped us get rid of processes that cause delays. We now have a system that guides us from the moment we are first told about a study until R&D (research and development) approval is given by our local trusts, and this includes planning recruitment in advance.

'As a result, recruitment can start as soon as that approval is given. This means recruitment targets for each study are more likely to be met on time. We hope to reduce the set up time even further by continuous improvement,' she says.

The change to *lean*-style organisation came about by team members dismantling their existing work practices and scrutinising each element of the support they offer to researchers. They then planned a new 'ideal but realistic' system, focusing on speeding up each task. Representatives from an NHS trust R&D department and a study team were included in the process that has led to the formulation of the new procedures governing the specifics of set up and recruitment.

A step-by-step guide to the procedures has been produced for staff, and includes various 'checklists' for people to work through at every stage of set up. 'This ensures all the necessary information is collected and we can say more realistically whether we can support a study,' says Carly. It also means the clinical studies officers charged with supporting research teams have all the information they need to offer the best possible service.

Each study now has a 'local implementation plan' that focuses on the fine detail of what has been agreed and anticipates any potential problems, so they can be dealt with promptly should they occur. The thorough documentation means studies will continue to get the support they need, even if personnel within the team change. 'If someone leaves, a new member of staff can step in and continue the work so the service we offer is seamless,' says Carly, who learned about *lean*



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via training provided by Birmingham and Solihull Mental Health NHS Foundation Trust. An external consultant then brought the whole hub team up to speed with the principles of *lean* and supported the process of planning and introducing new ways of working.

The new systems are being audited to ensure they are successful and there has been a shift in work culture to ensure more effective management of resources and time, says Carly.

'We all now think more about how everyday actions impact on our work. We plan our meetings more carefully to reduce travel time; we use two computer screens when cutting and pasting in documents; we complete expenses forms on a regular basis rather than spending a substantial amount of time at the end of the month, for example.

'Implementing *lean* has had a lot of benefits in addition to reducing the time it takes for us to do our work. The new procedures keep us focused and alert us to problems early on – we now have a standard estimated time for finding a principal investigator and the system tells us if we go over that time and lets us know there might be a problem.

'Teams working on the same studies but based in different trusts or services talk to each other more frequently, share information about recruitment and help each other solve problems. Everyone is encouraged to suggest new ways of working and everyone is open to change.'

MHRN assistant director Stephanie Burns says *lean* 'is all about people and the right leadership and support to bring about a culture change.

'Many *lean* initiatives fail because everyone focuses on lean tools or methodology. The application of these is crucial, but *lean* is really about introducing a work ethic of continuous improvement, about identifying and implementing small initiatives that together deliver real savings in terms of time and effort.

'We have piloted *lean* in two of our hubs – Heart of England and South London and South East. Both of them have considerably improved the way things are done locally and we now have a plan to introduce *lean* in all our hubs. In the current economic climate, it is even more important that we should be squeezing every last improvement out of our processes, as ultimately that will help us support more studies with fewer resources.'



The Mental Health Research Network is part of the National Institute for Health Research and supports studies in England.

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Psychiatry**

Published by the NIHR Mental Health Research Network
April 2011
NIHR MHRN Coordinating Centre
Institute of Psychiatry, PO77
De Crespigny Park, London SE5 8AF
www.mhrn.info