



The Tricord

March 2007

Healthy Work for Whole People

Declaring that 'People are our Most Important Asset' invites cynicism. It is over-used as a phrase but under-used to drive specific action. We know what the phrase is getting at; we know in our heart it has basic truth in it. When the technology and products are becoming old hat and the customers are wavering it is the accumulated knowledge, the web of relationships, the creativity, spirit and passion of our people that will enable us to survive in the long-term and what ultimately makes us successful. Why then the wry smiles?

Most companies wish to put their people first and develop their staff to meet their full potential and publish this in their mission statements. However, doing business requires us to balance the needs of staff with those of the customers, shareholders, general public and the environment. We have to do all this through the internal complexity of our organisation's systems, politics and culture. It's never simple and we often end up repeating the slogan, trying certain initiatives, and carrying on as best we can.

When there's a crisis the reality of what matters for an organisation can be seen; the true bottom line is survival. It matters more than this year's profit, more than the environment, more than the good of customers, and more than its people and their development. It's as if the organisation has a life of its own. Like each of us, organisations have a deep, urgent will to survive and to be successful.



It is true that people are the most important asset but what can we actively do about it? What is the way forward if we want to treat people as we would want to be treated ourselves? How do we hold the line and avoid the frustration?

Tricordant believes there is a way in which to treat people as a company's most important asset that is neither naive nor simplistic. It does not treat the symptoms, but rather treats the causes, and is a way in which to make a real, lasting difference to both the company's performance and the life of its people.

For the full paper contact Simon Thane on 01558 823927 or download it from www.tricordant.com/insp05.htm

Tricordant Events Programme 2007

You are warmly invited to our discussion workshops open to all our clients, associates and friends. They will be held in Reading from 10.00 to 16.00.

Rapid Improvement 6th July

How to make significant changes to whole sections of an organisation in a few weeks rather than many months? A day exploring rapid improvement events.

Identity at Work? Why do 58% of people say they change their personality to fit in at work and 64% don't believe in what their company stands for? A day looking at company identity and health. 28th Sept

28th Sept

Major conference: Patient Harm; strategies for solving a wicked problem 8th or 9th May

8th or 9th May
Central London

We are collaborating on this interesting day with Marc Gerstein, Robin Youngson, Alistair Mant, and Phil Hadridge. Brochure on our web site from mid-March.

Recent Tricordant Assignments

South East London Sustainability and Redesign Project:

We have been providing project managers for the Urgent Care and Pathology work streams of this large review. This has included developing a whole systems model of their urgent care system and identifying main system-level opportunities for improvement.

ScottishPower Energy Retail: Tricordant completed a 'whole systems health check' of their proposals to redesign the process and organisation to collect debt for a major product business unit.

PCT Commissioning Strategy: We have helped a PCT develop its commissioning strategy including facilitating a series of engagement events with stakeholders.

University and College Library Projects: We are continuing to support two higher/ further education libraries develop their organ-

isational effectiveness. This includes facilitating away days and supporting leaders in refining their structures and processes.

ISIP: Tom Robson continues to work as part of the national team supporting the NHS.

Cranfield University: We have recently delivered a well-received 1-day workshop for their Fellowship in Manufacturing Management (FMM) course students on 'Wholeness - Going beyond Lean'.

Countywide Acute Services Review: A Tricordant team carried out a gateway-style review of preparedness for a major NHS reconfiguration consultation and provided subsequent support.

Acute Hospitals Strategic Programme Board: We facilitated an options appraisal process.

Tricordant's Team

UK Directors:

Alastair Mitchell-Baker
Simon Thane

Australia & NZ Directors:

Tim Pidsley
Les Rudd

Consultants and Associates:

Nick Richmond
John Hespe
Tom Robson
Phil Burgess
Francis Christie
Stuart Welling
June Dales
Martin Pearson
Lynne Clemence

Personal profiles: www.tricordant.com

Tribute to Irwin Bidgood 1951 - 2006



It is with great sadness that we have to inform you that Irwin Bidgood, our colleague and co-founder of Tricordant, died suddenly on Monday 4th December 2006 of a massive heart attack. It came as a great shock to all as he was only 55 and apparently fit, happy and in great form.

Irwin was a very insightful and wise organisational consultant with many years' of experience working with organisations within the government, health, non-profit and commercial sectors. He had an amazing capacity to get to the core of complex organisational issues and understand them at a deep level. We will sorely miss his enthusiasm, wisdom, faith, companionship and impish sense of humour.

Our thoughts and prayers are with his wife Rosalie and their three grown-up children.

“He will always be part of our Identity”

Rapid Performance Improvement in Complex Healthcare Services

There has recently been considerable interest in and growing practical application of, lean thinking in the NHS. The NHS Institute for Innovation and Improvement has been supporting this work and is seeking to promote the widespread take up of Lean across the NHS to support the productivity challenge. The NHS Confederation has recently published an excellent introduction called *Lean Thinking for the NHS* by Dan Jones and Alan Mitchell of the Lean Enterprise Academy UK.

It is clear from early work in the NHS and overseas hospitals that considerable scope exists to improve patient care, staff satisfaction, systems performance and cost-effectiveness by the widespread adoption of lean. This parallels the experience in other industry sectors – initially seen in the Japanese-led revolution within manufacturing. Rapid Improvement Events (RIEs) are a particular style of application of lean which pulls together representative stakeholders from across a service into a short series of workshops to apply improvement tools and to agree 'quick hit' system improvements. RIEs have been shown to provide a powerful momentum for rapid performance improvement to health services. For example refer to the NHS Institute Service Transformation Team's work at Hereford Hospitals helping the pathology and pharmacy departments to improve turnaround times and eliminate waste, through four-day rapid improvement events.

However, most hospital processes currently being "leaned" through the application of these principles and tools are more

linear and relatively less complex than community healthcare services such as those provided by GP practices and mental health services. This paper argues that in such complex, non-linear settings the lean tools apply less powerfully and need to be used within a wider 'whole systems' perspective.

Tricordant are offering an approach to 'whole systems' RIEs which delivers significant, rapid, sustainable performance improvement in these situations. Over a few days or weeks organisations can:

- Understand the true purpose and full aims of the patient service being reviewed
- Understand its intrinsic nature, different mental and physical aspects, rhythms and dilemmas
- Map the key patient transformation pathways within this
- Understand the units of work that deliver these key transformations
- Build empowered teams to plan, deliver and improve each of these units of whole work
- Ensure the teams are on a human scale and have appropriate leadership
- Ensure supporting work is done at the right organisational level, pushed as close to the patient interface as possible
- Design appropriate performance measures and control processes
- Apply Lean tools to those parts of the system that are linear, factory-like processes where they occur.

For the full paper contact Alastair Mitchell-Baker on 01 189 426826 or download it from www.tricordant.com/insp05.htm



Benefits of Whole System RIEs:

All stakeholders who own parts of the system are identified and invited to meet and to work with each other. **Teams are built!**

The team is supported by experienced external facilitators who can bring a deep experience within both the health sector and outside. **Teams are well equipped and supported!**

The team are taught the principles to unpick and solve inherently complex, multi-faceted, non-linear, systems problems. **Novel, holistic solutions are found!**

Rapid Improvement Events have a high profile and senior stakeholders are encouraged to back the RIE process and empower the nominated team to act. **Things get done!**

The deliberately tight timescales of the RIE create focus and a sense of urgency. **Things get done quickly!**