May sustainability of patient flows at hospitals be increased by adding a work environment module to Value Stream Mapping (VSM)? - A NOVO Multicenter study in Denmark, Iceland and Sweden

Winkel, Jørgen; Birgisdóttir, Birna Dröfn; Edwards, Kasper; Gunnarsdóttir, Sigrún; Harlin, Ulrika; Jarebrant, Caroline; Johansson Hanse, Jan; Ulin, Kerstin

Published in:
Abstract book - 8th NOVO Symposium, Sustainable health care production systems

Publication date:
2014

Document Version
Publisher's PDF, also known as Version of record

Citation (APA):

General rights
Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.
May sustainability of patient flows at hospitals be increased by adding a work environment module to Value Stream Mapping (VSM)? - A NOVO Multicenter study in Denmark, Iceland and Sweden

Jørgen Winkel¹, Birna Dröfn Birgisdóttir², Kasper Edwards³, Sigrún Gunnarsdóttir⁴, Ulrika Harlin⁵, Caroline Jarebrant⁶, Jan Johansson Hanse⁷ & Kerstin Ulin⁸

¹University of Gothenburg, Dept. of Sociology and Work Science, Sweden (& Technical University of Denmark, Dept. of Management Engineering, Denmark
²Reykjavík University, School of Business, Iceland
³Technical University of Denmark, Department of Management Engineering, Work, Denmark
⁴University of Iceland and Bifröst University, School of Business, Iceland
⁵Swerea IVF & Chalmers University of Technology, Dept. of Product and Production development, Sweden
⁶Swerea IVF & University of Gothenburg, Dept. of Sociology and Work Science, Sweden
⁷University of Gothenburg, Department of Psychology, Sweden and Nordic School of Public Health NHY, Gothenburg, Sweden
⁸Sahlgrenska University Hospital & University of Gothenburg, Sahlgrenska Academy, Institute of Health and Care Science, Sweden

Email of presenting author: jorgen.winkel@gu.se

1. Introduction

Development of production systems in healthcare is at present to an increasing extent based on Lean Production ideas. VSM is a common Lean tool used to identify and minimize waste. It is a participatory tool, i.e. those affected by this type of rationalization are performing the analyses and subsequently suggesting the interventions. However, scientific evidence indicates that the resulting proposals may imply physical work intensification and impaired psychosocial work environment (WE). On this background WE factors were integrated into the VSM tool, thus offering an ErgoVSM tool.

2. Aim

To investigate if ErgoVSM facilitates the process towards more sustainable patient flows at hospitals.

3. Material and Methods

Fourteen hospital wards in Denmark, Iceland and Sweden are investigated, 7 used VSM and 7 ErgoVSM. Action Plans were analysed based on different stakeholder assessments. Chronicle workshops were used to assess important changes/events at the wards during the investigated period.

4. Results

In general, neither the VSM nor the ErgoVSM wards developed proposals that had an immediate negative impact on WE. The ErgoVSM wards showed a tendency towards more realized proposals and these more often included WE considerations; ErgoVSM seemed not to reduce the emphasis on efficiency. However, the effects seemed to be modified by the way the VSM/ErgoVSM were organized and performed. When using ErgoVSM the resulting proposals with an estimated positive impact on WE most often focused the work situation, i.e. the general business of the ward, the coordination and/or management of the work that two or more occupational groups performed. This is in contrast to the task-focusing proposals generally suggested by ergonomists. The Chronicle Workshop data showed that negative impact on WE could be derived to e.g. cutbacks decided about above ward level and poor introduction of new technologies. Neither VSM nor ErgoVSM seem to cause WE
impairments.

5. Conclusions:
The results suggest that ErgoVSM compared to VSM offers a number of effects on the change processes that may result in a higher level of organizational sustainability. But these gains may subsequently be threatened by saving demands decided about above ward level.

*Financial support:* The Nordic Council of Ministers and national grants.