

Releasing Time to Care

The Productive Community Hospital™

Good Stock Management (MIU)

Version 1

This document is for clinical leaders and department managers



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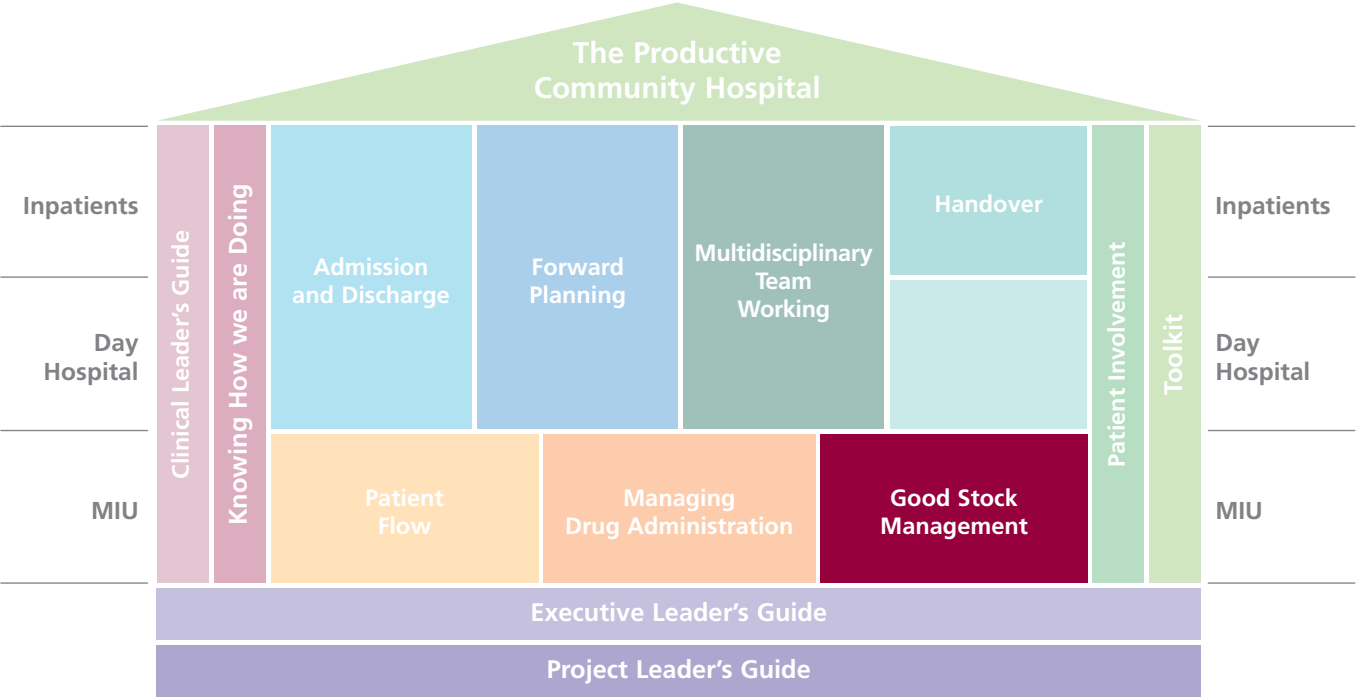
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*These modules create
The Productive Community Hospital*



Good Stock Management



What is it?

A set of principles to help you ensure your department and clinical areas are always stocked with the right equipment to treat patients as they arrive.

Why do it?

Implementing good stock management principles within your department will help reduce excess stock, staff motion, and transport. It means that your staff will always have the correct items, at the correct time, in the correct quantity and create a clean and safe environment for effective care to be delivered. This improves the patient experience and is cost effective.



What it covers

This module will improve your stock management by demonstrating:

- how you currently manage your stock requirements
- who is involved in stock management
- the tools you need to standardise and improve your stock management
- how to evaluate your improved stock management and to make continuous improvement to sustain the improvements you have made

What it does not cover

This module will not describe best clinical practice. It will help you identify areas that could benefit from improvement work, understand how they could be improved and help you to make it happen.

Learning objectives

After completing this module, you will:

- understand what good preparation for improvement work is
- understand how stock is managed currently
- develop audit as an activity
- understand what and how much stock you need to carry
- create effective storage areas
- improve the patient experience through good stock management

How will you achieve these objectives?

Undertaking audit is an important first step to help you assess the current ways of working and diagnose the problem areas to be addressed. You will perform the following pre-improvement audits:

- Room Usage Audit
- Distance Travelled Audit
- Stock Ordering Audit
- Store Area Audit

By carrying out these audits you will be able to identify what you do well and not so well in stock management.

As you work through this module you will be able to identify what changes you need to make to improve the effectiveness of your stock management.

By repeating these audits you will be able to measure the differences made to improving the stock management within your department.

The last two objectives will be met through a step-by-step approach to describe what a good process is and how you can achieve it.

The 6 phase process

All of the modules in the Productive Community Hospital series are based on the standard nursing process of: prepare, assess, diagnose, plan, treat and evaluate.

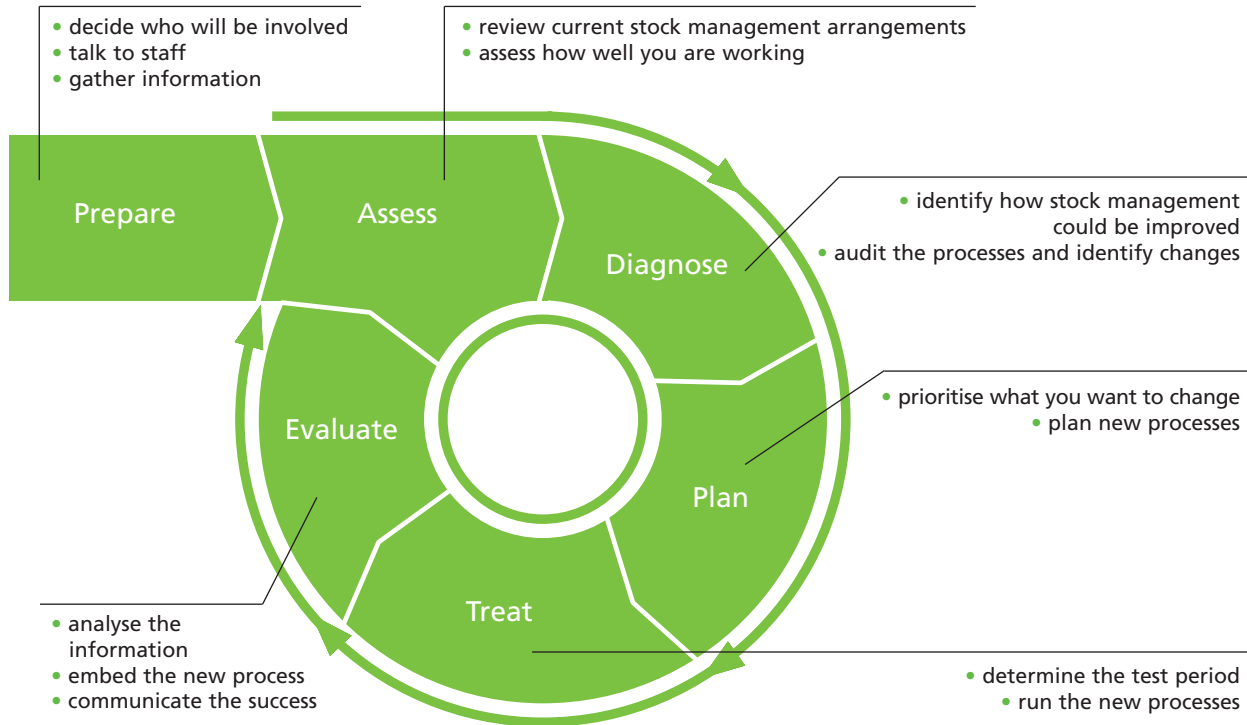
While illustrated using a patient care cycle, the six phase process is the same as the generic improvement cycle Plan, Do, Study, Act and gives clinical staff a structured approach to improving clinical area processes that is very similar to the care cycle they are familiar with.

It is a cyclical process of continuous improvement. Once you have worked your way through this module, you should return to the assess section and repeat the steps. The results that you capture each time will show how you have improved since the last time.

As you work through the module you will be reminded about the stage of the process that you are working on.






The 6 phase process



The tools

In order to know how well you are doing and help you treat any problems that you find with your current stock management you will need to use the tools listed below.

Tool		Toolkit reference number
Interviews		Toolkit General Section 2
5S Tool		Toolkit General Section 6
Room Usage Audit		Good Stock Management Tool 1
Distance Travelled Audit		Good Stock Management Tool 2
MIU Standardised Treatment Area 1 MIU Standardised Treatment Area 2 MIU Standardised Treatment Trolley		Good Stock Management Tool 3
Example 5S Sorting Labels		Good Stock Management Tool 4

Copy the module checklist on page 55. Completing this will help you monitor your progress throughout the module.



Prepare



011

Involving the right people

Decide who will be involved

To achieve effective stock management you will need to engage with all members of the team.

- establish a core team who will lead and take responsibility for the work in this module. These might include those listed in the box
- widen this group when you require more involvement from other members of the staff and patients

Core module team	
Who?	What will they do?
Clinical manager/lead nurse	<ul style="list-style-type: none">• ensure the appropriate stakeholders are represented• ensure information requirements are met to understand and solve the issues• ensure operational, financial and contractual issues are resolved appropriately
Emergency nurse practitioner Clinical team	<ul style="list-style-type: none">• take the lead for implementing this initiative• communicate the goals and objectives• encourage and support the team throughout the initiative• keep the focus on searching for opportunities for improvement
Reception staff	<ul style="list-style-type: none">• be willing participants in the discovery of issues and implementation of new approaches
Patient/carer	<ul style="list-style-type: none">• bring a fresh perspective and a unique insight• ensure that improvements are patient focused

The 4 step process



1. Talk to staff

Use Toolkit General Section 2 and ask:



- what currently happens?
- what causes problems?
- what they would need from improved stock management?



2. Talk to patients

Use Toolkit General Section 2.

To ensure that handover supports patient-centred care, the views of patients should be sought as part of your general preparation.

You should seek guidance from your nursing director/public and patient involvement lead:

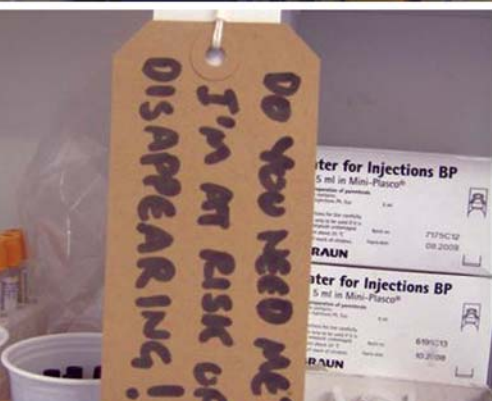
- in their experience did they receive the right equipment/dressing?
- would they like to be involved in the planned improvement process?

3. Gather information from patients complaints:

- look back over the past year and identify any complaints that relate to stock management

4. Gather information from incident reports:

- look back over the last 20 - 50 incident reports
- look for any incidents or near misses



Prepare - milestone checklist

Move on to **Assess** only if you have completed ALL of the items on these checklists.



Checklist	Tick if complete
Decide who will be involved	
Talk to staff	
Talk to patients	
Gather information from patient complaints	
Gather information from incident reports	
Obtain your trust policy or guidelines for documentation	

Effective teamwork checklist	Tick if yes
Did all the team participate?	
Was the discussion open?	
Were the challenging questions discussed and answers agreed by all?	
Did the team remain focused on the task?	
Did the team focus on the whole process, not on limited individual steps?	





Assess



Assess the current stock management

To assess what happens now, develop a description of how you currently manage stock. You can do this by taking a step-by-step view.

There is added value in getting staff involved in understanding how they work together to agree on how things currently happen and what the future state should look like. Do this by:

- identifying the key people who are involved in stock management. These will include yourself as clinical manager/lead nurse and representatives from stakeholder groups, including clinical staff, clerical staff, facilities staff
- describing the way you currently manage stock. Focus on:
 - how often your staff need to leave the clinical area to search for stock
 - how many storage areas you have
 - how often you order stock
 - who is responsible for ordering stock
 - how much stock is wasted because the wrong thing has been ordered or it has passed its use by date
- describing what ideal stock management would look like in your team's view. This is your ideal future state. The improvement tools and approach described later can help you achieve it

Assess - milestone checklist

Move on to **Diagnose** only if you have completed ALL of the items on these checklists



Checklist	Tick if complete
All members of the team are represented	
All staff have been able to view their opinions of current stock management	
Understand how stock is currently managed	
Understand how the ideal stock management system would work	

Effective teamwork checklist	Tick if yes
Did all the team participate?	
Was the discussion open?	
Were the challenging questions discussed and answers agreed by all?	
Did the team remain focused on the task?	
Did the team focus on the whole process, not on limited individual steps?	





Diagnose



The audit process

Audit is a vital tool to help you accurately diagnose the current state of your stock management processes. We recommend you undertake the following pre-improvement audits specific to this module. These are:

- Room Usage Audit
- Distance Travelled Audit
- Stock Ordering Audit
- Store Area Audit

An explanation of how to carry out these audits is provided on the next pages.

Room Usage Audit	Distance Travelled Audit	Stock Ordering Audit	Store Area Audit
Helps you to understand how well stocked your treatment areas are by recording how often clinical staff have to leave the room to get equipment	Helps you build a picture of how much time clinical staff spend walking to find stock when they could be treating patients	Helps you to identify what stock you require, in what quantity and how frequently it needs to be delivered	Helps you identify all your store areas

Room Usage Audit

This audit helps you to establish how well stocked your treatment areas are.

What you need to do:

- set up a working team with representatives from each group of staff
- communicate to all staff when and why the audit will take place and how results will be shared and used
- devise an audit template, an example is shown on this page
- communicate a start and finish date for the audit together with the audit template and guidance for completion
- identify which rooms are going to be covered by the audit
- undertake the audit for 10 days
- collate the results
- share the results
- develop an action plan

[illegible]

Distance Travelled Audit

This audit shows you how far a clinical member of staff walks per shift.

What you need to do:

- identify how many and which members of staff are going to be part of the audit - choose staff from a range of settings
- devise an audit template - an example is shown on this page
- communicate to all staff when and why the audit will take place and how results will be shared and used. Consider sampling different shifts and days - it may be that clinical areas are well stocked in the morning but less well stocked in the afternoon

- communicate a start and a finish date for the audit together with the audit template and guidance for completion
- undertake the audit for 10 days
- collate the results
- share the results
- develop an action plan

[illegible]

Stock Ordering Audit

This audit helps you to establish the stock you need at what frequency.

What you need to do is:

- review the last six months orders and record the items and quantity of stock ordered
- each item should be aligned with the frequency of ordering ie, if you order monthly, calculate a monthly usage rate, if you order weekly, calculate a weekly usage rate. You need to do this for each item of stock ordered during the last six-month period:
 - for each item of stock, divide the total volume of stock ordered
 - by 6 to give you the monthly usage rate
 - by 26 to give you the weekly usage rate

Calculate the minimum stock level for each item of stock. The minimum volume should take into consideration the usual delivery volume (eg, pack of 20) and the time lapse between ordering and delivery.

Experienced pharmacy or supplies staff will be able to validate these estimates and assist in estimating usage rates where the figures are unclear.

Store Area Audit

This audit will show you what storage facilities you currently have in your unit and how well they are utilised.

What you need to do:

- create a list of all the main storage areas in your unit
- involve staff identifying any specific issues
- record the location of each store area, its size and any positive or negative features
- create a list of all the treatment areas that carry stock, these will include:
 - shelves
 - cupboards
 - drawers
 - trolleys that move between departments

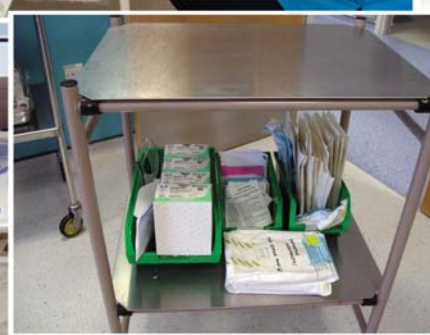
Record any issues with these storage areas, eg, trolley not big enough to carry sufficient stock for one shift, cupboard doors which make it difficult to easily see where stock is held.



Audit results - conclusion

You will now be able to **diagnose** how well you manage your stock from the audit of current performance that you have just completed. Display these results on your communication board as described in the Knowing How you are Doing module.





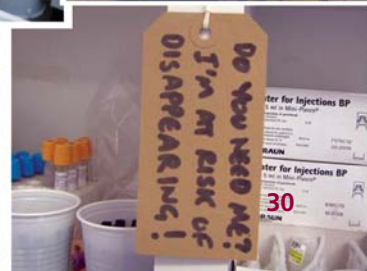
Diagnose - milestone checklist

Move on to **Plan** only if you have completed ALL of the items on these checklists.



Checklist	Tick if complete
Know what stock you need to carry and how often it needs to be ordered	
Know how much time is wasted looking for stock	
Know how many store areas you have and their location	
Given all staff the opportunity to share their concerns and ideas about stock management	

Effective teamwork checklist	Tick if yes
Did all the team participate?	
Was the discussion open?	
Were the challenging questions discussed and answers agreed by all?	
Did the team remain focused on the task?	
Did the team focus on the area/process, not on individuals?	





Plan



Planning productive stock management

Having diagnosed the current status of your stock management, this section will take you through the planning steps to help you to make your process more efficient and effective for the patients you treat. It will ensure you will have the right stock at the right level at the right time, ensuring prompt treatment and minimising delay for patients.

This will help to you to manage your stock better by:

- creating a standard stock list
- designing standard store areas

It will do this by using the following tools:

- 5S Toolkit General Section 6
- Standardised Treatment Area Tools - Good Stock Management Tool 3



Create a standardised stock list

Not having timely access to required stock and equipment causes unnecessary delay and can significantly impact on the patients' experience. It can also affect the efficiency and effectiveness of staff and the unit overall.

What will creating a standardised stock list do?

The objectives of creating a standardised stock list are to:

- reduce excess stock
- avoiding waste
- reduce the time clinical staff spend looking for items of stock
- reduce transport of stock
- ensure staff have the correct items, at the correct time, in the correct quantity



Whilst the overall responsibility for the stock budget remains with the clinical manager/lead nurse, the ordering process can be devolved to team members.

Areas to consider for improving your process using the results of your Stock Ordering Audit:

- create a standard stock list for your department. The list should include the name of the item, the rate of usage, and the minimum stock volume which should be in the department.
- test it and establish a set time to review the standardised stock list with clinical staff, in order to review usage rates and the minimum stock levels
- maintain minimum stock levels
- create a visual means for displaying when an item has already been ordered and is awaiting delivery, to prevent over-ordering. Using a single, easy-to-follow ordering book which shows both orders and deliveries will assist with this
- audit unplanned stock orders by noting the number of unplanned stock orders per stock item over a period of six weeks. This will help you to quickly identify where minimum stock levels and usage rates are not inline with current activity
- refine your standardised stock list based on the results of unplanned stock orders audit
- create a clear protocol for who will be responsible for the ordering process and when ordering will take place
- consider rotating the task so that a wider group of staff have insight into the process and responsibility is shared. The key is to give staff confidence that the system is consistent and minimum stock levels will be maintained

Redesigning and sustaining effective storage areas

Many MIUs find it challenging to identify adequate storage space for stock items.

How and where items are stored will differ between different departments, depending on the available access and physical layout. However a number of key principles can be useful when reviewing stock storage.

The objectives for creating effective storage areas are to:

- eliminate items from the store area that don't belong there or are no longer in use
- identify set areas for each item of stock and label them clearly
- develop standard procedures to sustain the improvements you have made



Redesigning and sustaining effective storage areas

Areas to consider for improving your process

Using the standardised stock list you have created and the results of your stock areas audit:

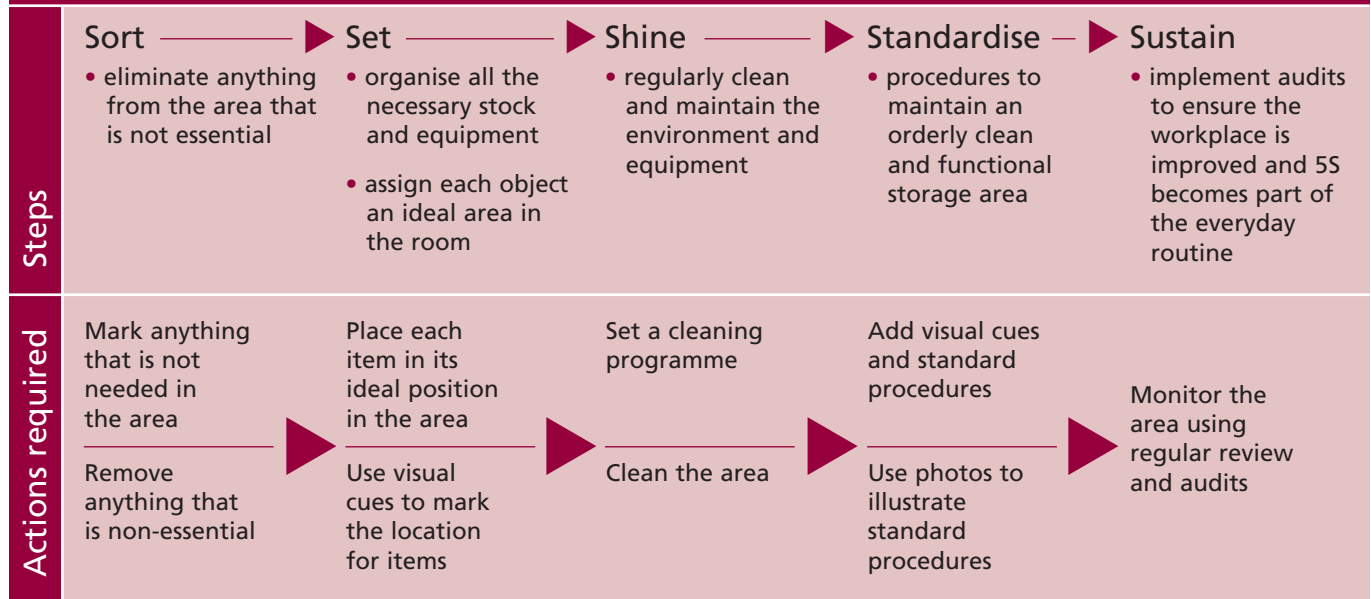
- photograph all stock areas before undertaking any improvement work to demonstrate the 'before and after' effect
- identify how much storage you are likely to need based on the standardised stock list
- based on the results of your audit of the key storage areas in the unit, identify a storage area big enough to house the stock. Ideally, aim for a single stock storage area in a space which is not used for clinical activity. If this is unavailable, aim to minimise the number of different storage areas that staff will need to access in order to care for patients

Undertake 5S exercise set out in the next few pages, Toolkit General Section 6





MIU 5S process



Sort

- select the planned storage area
- use an inventory sheet to record the location and volume of all items currently in the planned area
- define items as
 - necessary (must stay),
 - unnecessary (remove/definitely go), or,
 - can't decide
- mark each item with a coloured tags (or post-it notes) to mark each item as you assess the area. Sample labels are available in The Productive Community Hospital Toolkit, Good Stock Management Tool 4, 5S Sorting Labels
- remove the unnecessary and can't decide items to a separate area
- store the can't decide items for one month and only reintroduce them if someone requests them
- redistribute unnecessary items to other departments as appropriate
- dispose of broken equipment and expired stock safely
- record the volume and cost of unnecessary stock identified, including expired stock
- validate the standardised stock list and minimum volumes, this will help demonstrate potential cost savings through better stock management

Sample 5S Sort Labels

Must Stay

Can't Decide

Remove /
Definitely Go

- visual cues can be very useful
 - consider using taped outlines, different colours and labelling machines to highlight where items are kept
- identify a designated place for all items and consider locating:
 - items commonly used together, next to one another in the store eg, dressings and tape
 - frequently used items within easy reach
 - heavy items at waist height
- consider removing cupboard doors where appropriate to make it easier to visually scan for required items

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 - frequently used items within easy reach
 - heavy items at waist height
- consider removing cupboard doors where appropriate to make it easier to visually scan for required items

Shine

- clean the area once it has been Set. Involve as many staff as possible, both to introduce them to the 5S process and to familiarise them with the new layout
- agree a protocol combining keeping the area clean and tidy with assessing stock levels and the ordering process



Standardise

- use the standardised stock list and minimum stock values created earlier to identify exactly what should be in the store
- take photographs of the store area when it is fully stocked and cleaned to show staff what 'good' looks like
- agree the tasks which need to be done regularly to maintain the area. This should include:
 - keeping the area clean and tidy
 - re-stocking
 - re-ordering
- create a checklist which outlines the tasks required and display this in the storage area
- develop prompts to support re-ordering and re-stocking in the form of *order me* cards placed between items to indicate that the minimum volume has been reached. The order me card has two functions - firstly, it is an obvious visual cue to staff that the item needs to be reordered. Secondly it can include the item description so that it can be placed in an ordering folder to tell staff what needs ordering. An example of order me cards can be found on the next page
- identify the person(s) responsible for completing these tasks. Rotating the responsibility to ensure the change is sustained
- communicate the changes made and the benefits of the improved system



An example of good practice is demonstrated by Queen Mary's MIU. They designed the order me cards to indicate when an item had reached its minimum stock level, and to trigger the reordering of the item.

The picture shows an example of an order me card for 10cm crepe bandages. The card is placed in the stock at the minimum stock level.

The card is located inside the bag so that staff are required to open the bag and remove the card to access the stock. This helps to ensure that staff spot the order me card and take the necessary action ie. to place the card in the re-ordering book.

When the new stock arrives, the card is then replaced in a new bag of bandages and the system is reset.



Sustain

- introduce a system of regular audits to ensure that the new improved system is being sustained
- encourage staff to continue to identify other improvements which can be introduced and standardised over time to achieve continuous improvement



Standardising treatment areas

Standardising the items stocked in the treatment area is beneficial because it:

- assists the clinical practice of staff by identifying and agreeing the items which need to be stocked
- improves the ease and efficiency of ordering by reducing variation
- stops excess items being stored in these areas, which supports a more effective and safer clinical environment
- improves the patient experience by limiting the number of occasions when the nurse is required to interrupt the treatment to search for and locate an item

The 5S process should also be applied to clinical treatment rooms to standardise the stock required.

The objectives of standardising treatment areas are:

- reduce time wasted by clinical staff looking for stock
- support staff to find what they are looking for efficiently and effectively



Use the results of your store areas audit:

- identify all the treatment areas where you wish to create a standardised stock list
- examples of standardised stock lists are available in the Standardised Treatment Area Tool, Good Stock Management Tool 3
- draw up a list of items which need to be stocked in each clinical location based on typical clinical activity - do not try to cater for every eventuality
- identify the volume of each item required based on a small time unit of activity eg, two shifts or two days
- validate and refine this list with key stakeholders
- print and display the relevant stock list in each clinical area

CUPBOARD 1		
TOP SHELF	Kaltostat	5 X 5
	Mepore	9 X 15
	Mepore	9 X 10
	Mepore	6 X 7
	Jelonet	
	Mepitel	5 X 7
	Mepilex Border	7.5 X 7.5
	Mepilex Border	10 X 10
	Inadine	9.5 X 9.5
	NA Dressings	9.5 X 9.5
BOTTOM SHELF	Opsite	
	Allevyn Lite	
	Algisite	
	Hypafix	15 X 15
	Release	10 X 10
	Release	5 X 5
	Friars Balsam	
	K-Y Jelly	
	Betadine paste	
	Cryogestic spray	

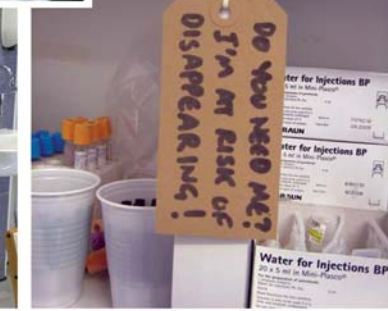
TAKE ME TO STORES
TO JOG YOUR
MEMORY!

ABOVE CUPBOARD 1

Gauze Swabs	10 X 10
Gauze Swabs	7.5 X 7.5
Gauze Swabs	5 X 5
Irriclen	spray

KEEP ME TIDY
Replenish with one box
only!





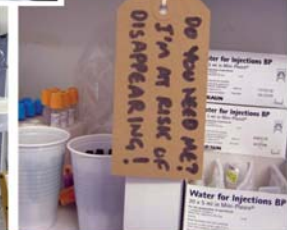
Plan - milestone checklist

Move on to *Treat* only if you have completed ALL of the items on these checklists.



Checklist	Tick if complete
Consider examples of ideas that have worked	
Consider results of the Assess section	
Redesign your storage areas	
Engage with all staff and patients (where appropriate)	

Effective teamwork checklist	Tick if yes
Did all the team participate?	
Was the discussion open?	
Were the challenging questions discussed and answers agreed by all?	
Did the team remain focused on the task?	
Did the team focus on the area/process, not on individuals?	





Treat



Treat

During the treat phase you will be testing the agreed changes.

What are you going to test?

- have we improved the experience for patients?
- have we improved the experience for staff?
- have we reduced waste?
- does everyone in the team understand the new process?
- are we sticking to the new process?

Before the test starts:

- determine what the time period will be for the test, it needs to be:
 - long enough to allow for failures
 - short enough to change and retest
- agree the time collection method and who is going to do it
- agree who will access the data and how it will be presented back to the team
- set the start and end dates and communicate them to everyone!
- update all staff personally on progress, at meetings and across all shifts
- use your communications board as a secondary way of making sure that you communicate with all the staff



During the test:

- get daily feedback from staff and patients (where appropriate) on how they feel the new process is working
- make sure that you ask all staff involved in patient care for their input
- be prepared to try new ideas and test them out
- listen to staff/patients suggestions for improvements
- learn from other areas who may have had similar issues with understanding their capacity and demand needs

Treat - milestone checklist

Move on to *Evaluate* only if you have completed ALL of the items on these checklists.



Checklist	Tick if complete
Test period defined	
All staff informed	
Try out the new processes for stock management	
Time lost seeking out missing stock	
Get staff feedback on the new storage arrangements	
Take before, during and after photos of the new storage areas	

Effective teamwork checklist	Tick if yes
Did all the team participate?	
Was the discussion open?	
Were the challenging questions discussed and answers agreed by all?	
Did the team remain focused on the task?	
Did the team focus on the whole process, not on limited individual steps?	





Evaluate



Evaluate progress

1. Collect information

At the end of the agreed test period you will need to:

- repeat Unplanned Orders Audit
- repeat Distance Travelled Audit
- repeat Room Usage Audit
- complete the sort phase by removing *non-claimed* and *can't decide* items from the department
- invite feedback from staff regarding standardised stock in treatment areas and re-stocking protocol
- highlight any incidences of further stock depletion or overstock of items since changes introduced
- review changes in non-pay costs to see if any budgetary management improvements have been achieved

2. Analyse the information

Set up a review meeting to include the original core team for The Productive Community Hospital Programme.

Use the results from the audits to help you to evaluate the changes made.

3. Further improvement

This information will help you to understand where you need to go back to. Decide where there are still opportunities for improvement and repeat the process until your future state is achieved and sustained.

4. Communicate success

Don't forget to tell people, staff and patients, what you have achieved, verbally and on your communications board.



Evaluate - milestone checklist

When you have completed the checklists below, go to the module checklist on page 55.



Checklist	Tick if complete
Talk to staff about the new standardised stock management arrangements	
Look at the before and after key indicators	
Communicate success	

Effective teamwork checklist	Tick if yes
Did all the team participate?	
Was the discussion open?	
Were the challenging questions discussed and answers agreed by all?	
Did the team remain focused on the task?	
Did the team focus on the area/process, not on individuals?	

How to sustain the change?

Monitor and audit continually	<ul style="list-style-type: none">• conduct the audits regularly to ensure that the changes that you have made are being continued and are working
Ensure leadership attention	<ul style="list-style-type: none">• ensure that senior managers are engaged and informed of what you are doing• give regular feedback about the progress that you are making at meetings which involve key people• ensure that you display and discuss the audit results with department staff regularly to keep up the pace of change
Do not stop improving	<ul style="list-style-type: none">• encourage the department staff to continue to find new and better ways of doing things – it is not about doing this once but about improving things continuously• encourage staff to suggest and implement changes themselves

Module checklist

The grid below allows you to measure your performance against the checklists for this module. You should copy this page and shade in the boxes according to your achievement of the measure (green for complete, amber for in progress and red for not started). Your progress will then be clearly visible.



Good Stock Management Module checklist	Before	After 2 weeks	After 4 weeks	After 8 weeks
There is a standardised stocklist for the department				
There is a single store room (where this is physically possible)				
There is a single order book				
There is a nominated lead responsible for ordering new stock and re-stocking all areas once it has arrived				
Stock is ordered routinely not randomly				
Time spent by clinical staff looking for stock is reduced				
Stock areas are clearly labelled				
Treatment areas and trolleys are stocked in a standardised layout				
No stock passes its use-by-date				
Excess stock is no longer carried				

Have we met the learning objectives?

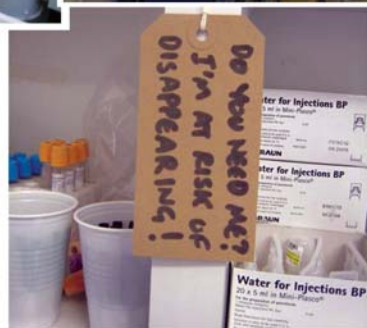
Five objectives were set at the beginning of this module.

- test how successfully these objectives have been met by asking three team members (of differing grades) the questions in the grid on the next page. Ask the questions in the second column and make an assessment against the answer in the third column
- if all three team members' responses broadly fit with the answer guidelines then the learning objectives of the module have been met
- note the objectives where the learning has only been partly met and think about the way that you can approach the module next time

Remember, the results of this assessment are for use in implementing this module and are not a reflection on individual performance in any way.



Objectives	Question (ask the team member)	Answers for outcome achieved
Understand what good preparation for the module is	Describe the things that you need to do in the prepare stage of the module	<ul style="list-style-type: none"> • establish a core team • talk to staff and patients • find information relating to complaints • obtain policies on documentation
Understand how the stock is managed currently	Explain the idea behind describing the current state of MDT working	<ul style="list-style-type: none"> • understand how the team currently works • identify the strengths and weaknesses of the current process
Develop audits as an activity	Where do the audits fit into the MDT module and how do they work?	<ul style="list-style-type: none"> • they are part of the diagnosis • they give a measure of the current situation
Understand what and how much stock you need to carry	Give an example of how to order a stock item and how frequently this would need to happen	<ul style="list-style-type: none"> • look at the standardised stocklist • look in the order book
Create effective storage areas	How is easy it to find what you're looking for	<ul style="list-style-type: none"> • easy - all the shelves are labelled • for rarer items I can consult the standardised stocklist to see if we carry the stock in the first place • easy - all the treatment areas are set up in the same way





Case studies



Queen Mary's Hospital - stock storage

The hypothesis

Storage areas were poorly laid out making it difficult for staff to identify what stock was available.

Their objectives

To improve the way storage areas are organised to reduce time spent looking for stock.

Rationale for development

To release clinical time to focus on delivering treatment and improving direct care.

Their findings

After completing the 5S process, staff concluded that:

- stores need to be re-organised so that items used together or similar items were located next to each other to achieve greater efficiency
- labels were required to identify what should be held in each section of the storeroom and a named individual identified with responsibility for ordering new stock and sustaining the new system

Qualitative results

- clear shelf labelling was introduced to indicate where items are stored and minimum stock levels required
- different coloured labels were introduced to indicate who was responsible for ordering the item
- similar items were located together for ease of access



Chippenham Hospital - stock storage

The hypothesis

Storage areas were untidy making it difficult to identify what quantity of stock was available. This resulted in unidentified excess stock being wasted because of being out-of-date.

Their objectives

To improve the way storage areas are organised to reduce time spent looking for stock and to reduce the incidence of expired stock.

Rationale for development

To reduce costs and release clinical time to focus on delivering treatment.

Their findings

The health care assistants who had ownership of the ordering process and related stock storage played a key role in the audits.

The first stage of the 5S process, sort, identified large amounts of unnecessary and out-of-date stock.

Their measures

The staff quantified the identified waste in terms of cost and space and the results were as follows:

Item	Volume	Unit Cost	Cost
Vacutainer bottles	100	£0.07	£7.00
Universal containers	150	£0.09	£13.50
Cellona plaster of paris bandage 7.5cm	48	£0.50	£24.00
Cellona plaster of paris bandage 10cm	60	£0.65	£39.00
Suction catheter	50	£0.28	£14.00
Various - including sterile packs, ECG paper, resus face masks		Varied	£100.00
Total Cost			£197.50

Examples of excess stock. This stock was redistributed to other wards in the hospital.



Examples of expired stock - three-and-a-half years out of date!



All sites - standardised treatment areas

The hypothesis

Treatment areas were poorly organised making it difficult for staff to locate stock, particularly as staff don't always use the same treatment areas from shift to shift.

Their objectives

- to reduce time spent looking for stock
- to minimise interruptions for patients by ensuring every area carries the right stock

Rationale for development

To release clinical time to focus on delivering treatment and improve the patient experience.

Their findings

- considerable discussion was required amongst staff to identify what should be stocked in each treatment area. This is an important step to ensure that the process works once it is launched - otherwise staff will resort to their own systems that work for them
- it was hard to make staff comfortable with having lower volumes of the stock in the treatment area as they were used to having 'just in case' stock and using the clinical areas to store more stock than was actually required on an average day. This was overcome by repeatedly auditing what stock

levels were carried in the treatment rooms and the instances that staff needed to leave the area to retrieve stock. It was important to share the results to build confidence

- support for the system was generated by involving staff in creating the protocol for restocking the clinical areas and thereby giving them confidence that the lower stock levels would be maintained by having clear guidelines with roles and responsibilities for restocking



Based on the experience of the test sites, a restocking protocol has been developed to support regular replenishment of the minimum stock levels for these areas.

Examples of these standardised stocklists (including trolleys and shelving) is included in the Toolkit, Good Stock Management Tool 3:

- Standardised Treatment Trolley
- Standardised Treatment Area 1
- Standardised Treatment Area 2



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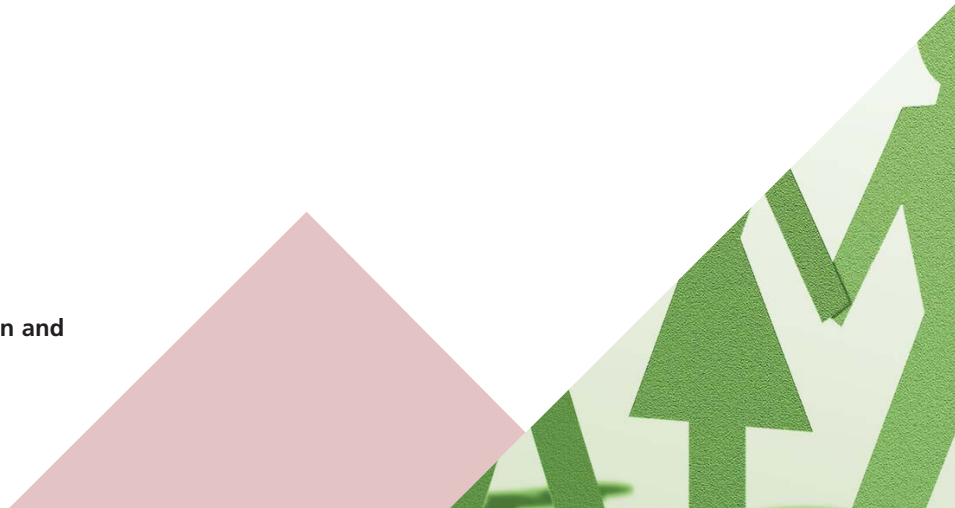
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