

Can, and should, the *lean* approaches from manufacturing be applied to working with people in the therapeutic context?

In the world of motor manufacturing, Japanese companies such as Toyota, have pioneered a set of management principles now commonly referred to as *lean*. These ideas have transformed their approach and underpin their success. This micro article will look at the underlying principles and see if they have any place working with people in the therapeutic context.

Long-term investment philosophy

The first foundation of adopting a *lean* approach is that a long-term perspective is adopted rather than short-term profiteering. In manufacturing this has meant showing employees loyalty, maintaining employment during economic downturns. It's also led to giving employees the opportunity to be creative in adopting new approaches rather than always seeking external consultancy.

In the therapeutic context this could parallels an approach which trusts people to discover long-term solutions for themselves rather than 'fixing' them with a quick answer.

The as-needed process

At the heart of the *lean* process is the idea that there should be *flow* and *pull* in product

creation. For the therapist this can translate to being present and attentive to the recipient's direction of sessions, so they only address what they want, when they need to.

Toyota identify three 'enemies' of flow which will be considered in the therapeutic context:

- **Muda** overproduction does the therapist overcomplicate?
- Muri overburden how is the recipient impacted by the work?
- Mura unevenness can incremental change be implemented consistently?

A culture focused on people

At the heart of the *lean* approach, executives are encouraged to *genchi genbutsu*, to go and see. This leads to decisions not being top-down but collaboratively based on shared learning and discovering solutions together.

This is reflective of empathy in the therapeutic relationship. It also challenges therapists that continued learning isn't just theoretical, but also situational, collaboratively explored in practice itself.

So, perhaps the *lean* approach to manufacturing is something the world of therapeutic work has known all along?