Name:

**Enrolment No:** 



#### UNIVERSITY OF PETROLEUM AND ENERGY STUDIES

#### **End Semester Examination, December 2018**

Course: Lean Supply Chain Management Semester: III

**Programme: MBA(LSCM)** 

Time: 03 hrs. Max. Marks: 100

**Instructions: All sections are compulsory** 

### SECTION A (20 Marks) Attempt all question in this section

1.(A) Fill in the blank (11 marks) (i) What is the other name of VSM..... 1 CO<sub>3</sub> (ii) Personality development theory was given by..... 1 CO<sub>4</sub> (iii) In order to implement lean system in any organization what are the two basic 2 CO<sub>2</sub> changes needed to bring......& ....... (iv) If takt time is 34.3 sec. & OEE is 88% what would be the cycle time? ..... 1 CO<sub>3</sub> (v) Time study is also known as..... 1 **C04** 

(vi) Name the waste reduced using the strategy "Establish Pull Demand System"....... 1 **C05** (vii) What is the other name of OTS..... 1 **C02** (viii) The flow concept has.....&..... 2 **C04** (ix) DOE stands for..... 1 **C04** 

(B) Explain the following (3\*3=9 marks)
(i) Kanban 3 C01

 (ii)
 Jidoka
 3
 C01

 (iii)
 JIT
 3
 C01

 SECTION B (20 Marks)

Attempt any 4 question, each question carries 5 marks only (5\*4=20 marks)

2 (a)	Calculate the takt time when a plant runs for two ten hours shifts & each shift includes a 30-minute meal & two ten minutes' break. The normal work schedule if 5 days per week & have nine holidays in a year. The customer has a contractual agreement to purchase 500,000 units per year.	5	C04
(b)	Compare lean principles with TPS principles?	5	C02
(c)	Compare DMAIC vs DMADV?	5	C01
(d)	Define (i) little's law (ii) model mix leveling?	5	C02

(e)	Compare l	ean enterprise	vs traditio	onal mass pro	oduction?		5	C01
		Attemp		SECTION- lestion, eacl	•	ks) carries 10 marks	(10*3=30	) marks)
3(a)	each every each. The downtime piece & the	Calculate the OEE for 31st March 2018, where a plant runs for two shift of 12 hours each everyday & each shift has a break of 30 min. for meal & two tea break of 15 min. each. The scheduled preventive maintenance is half hour each day. The unscheduled downtime was 1.5 hour on 31st March 2018. The design cycle time is 30 seconds per piece & the total production was 2020 pieces with 50 rejected pieces on that particular day. Also calculate the various losses.					10 10	C05
(b)	A projector safety stock takt time a delivery time they have also the avareage de For a 99%	A projector manufacturing company exports projector, calculate the cycle, buffer & safety stock for the company when their daily shipment is 1400 units per day, assume takt time as 1 minute. The time the Kanban cards are in planning is 24 hours, and the delivery time(due to material handler's frequency) is 3 hours. In any typical queue they have 14 hours of demand in front of the order. Assuming safety factor as 0.03, also the average production is 1400 units for a month & standard deviation is 59.0 & average demand for a month is 1400 units & standard deviation for demand is 208.0. For a 99% on time delivery the acceptable value for one sided test(Z score= 2.33). Also calculate the number of kanban required when the kanban container size is 50					10	C04
(c)	The ABC Masala company has to process four items A, B, C & D on five machines:- I, II, III, IV & V. Processing times are given in the following table. Find the sequence that minimizes the total elapsed time & also the idle time for each machine							
	Α	7	5	2	3	9	10	C03
	В	6	6	4	5	10		
	С	5	4	5	6	8		
	D	8	3	3	2	6		
(d)	Discuss the	e various diag	nostics too	ols used for I	Lean strateg	y implementation?	10	C01
				SECTION-	•			
4	St Jan	nes's Hospital				<b>ollowing question</b> my's', is Europe's larges	t l	
	teachin treatme to redu Depart the co	teaching hospital. It employs around 4500 people to support the 90 000 in-patient treatments per year and over 450 000 total admissions. Under increasing pressure to reduce costs, to contain inventory and to improve service, the Supplies Department has recently undertaken a major analysis of its activities, helped by the consultancy division of Lucas Industries, the UK-based manufacturing company.					t e s	

The initial review highlighted that Jimmy's had approximately 1500 suppliers of 15 000 different products at a total cost of £15 million. Traditionally, the Supplies Department ordered what the doctors asked for, with many cases of similar items supplied by six or more firms. Under a cross-functional task force, comprising both medical and supply staff, a major programme of supplier and product rationalization was undertaken, which also revealed many sources of waste. For example, the team found that wards used as many as 20 different types of gloves, some of which were expensive surgeons' gloves costing around £1 per pair, yet in almost all cases these could be replaced by fewer and cheaper (20 pence) alternatives. Similarly, anaesthetic items which were previously bought from six suppliers, were single-sourced. The savings in purchasing costs, inventory costs and general administration were enormous in themselves, but the higher-order volumes also helped the hospital negotiate for lower prices. Suppliers are also much more willing to deliver frequently in smaller quantities when they know that they are the sole supplier. Peter Beeston, the Supplies Manager, said:

'We've been driven by suppliers for years ... they would insist that we could only purchase in thousands, that we would have to wait weeks, or that they would only deliver on Wednesdays! Now, our selected suppliers know that if they perform well, we will assure them of a long-term commitment. I prefer to buy 80 per cent of our requirements from 20 or 30 suppliers, whereas previously, it involved over a hundred.'

The streamlining of the admissions process also proved fertile ground for improvement along JIT principles. For example, in the Urology Department, one-third of patients for non-urgent surgery found their appointments were being cancelled. One reason for this was that in the time between the consultant saying that an operation was required and the patient arriving at the operating theatre, there were 59 changes in responsibility for the process. The hospital reorganized the process to form a 'cell' of four people who were given complete responsibility for admissions to Urology. The cell was located next to the ward and made responsible for all record keeping, planning all operations, ensuring that beds were available as needed, and telling the patient when to arrive. As a result, the 59 handovers are now down to 13 and the process is faster, cheaper and more reliable.

Jimmy's also introduced a simple kanban system for some of its local inventory. In Ward 9's storeroom, for example, there are just two boxes of 10 mm syringes on the shelf. When the first is empty, the other is moved forward and the Ward Sister then orders another. The next stage will be to simplify the reordering: empty boxes will be posted outside the store, where codes will be periodically read by the Supplies Department, using a mobile data recorder.

The hospital's management is convinced of the benefits of their changes.

'Value for money, not cost cutting, is what this is all about. We are standardizing on buying quality products and now also have more influence on the buying

	decision from being previously functionally oriented with a number of buyers, we now concentrate on materials management for complete product ranges. The project has been an unmitigated success and although we are only just starting to see the benefits, I would expect savings in cost and in excess inventory to spiral! The report on Sterile Wound Care Packs shows the potential that our team has identified. The 'old' pack consisted of four pairs of plastic forceps, cotton wool balls and a plastic pot, which were used with or without additional gloves. This pack cost approximately 60 pence excluding the gloves. The "new" pack consists of a plastic pot, swabs, etc., and one pair of latex gloves only. This pack costs approximately 33 pence including gloves. Total target saving is approximately £20 000.'  Questions		
(a)	List the elements in St James's new approach which could be seen as deriving from JIT principles of manufacturing.	(10)	CO2
(b)	What further ideas from JIT manufacturing do you think could be applied in a hospital setting such as St James's?	(15)	CO4
(c)	Suggest a suitable title and theme for the case?	(5)	C02

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# SECTION A (20 Marks) Attempt all question in this section

Fill in the blank	(8) marks)	
TPM stands for	1	C02
Poka yoke is also known as	1	C03
5 whys is also known as	1	C04
The other name of OTS is	1	C04
Standard work has three elements	3	C03
KT methodology was published in the book	1	C04
Explain the following	(3*4=12 marks)	
Poka yoke	3	C02
Six sigma	3	C01
MSA	3	C01
Kaizen vs CIP	3	C03
	Poka yoke is also known as	Poka yoke is also known as

## SECTION B (20 Marks)

Attempt any 4 question, each question carries 5 marks only

(5\*4=20 marks)

2 (a)	Discuss the theory of personality?	5	C04
(b)	What is the difference between TPS & Lean?	5	C01
(c)	What do you understand by 5s & how it can be used in a University/educational institution?	5	C01
(d)	What do you understand by littles law & what are the areas where it can be used?	5	C03
(e)	What are the core principles of TPS?	5	C02

**SECTION-C (30 marks)** 

Attempt any 3 question, each question carries 10 marks

(10\*3=30 marks)

3(a)	What are the various techniques to reduce lead times?	10	C04			
(b)	Discuss OEE and what are the various losses calculated through OEE	10	C03			
(c)	Discuss the seven deadly wastes which can be identified through TPS?	10	C01			
(d)	Explain the following (i)value stream mapping (ii)spaghetti diagram (iii) Zeta cell time study?	10	C05			
	SECTION-D(30 marks)					
	Attempt both the question					
4(a)	With reference to the article "World class manufacturing", discuss the WCM model & what are the process which integrates wcm with business planning?	(15)	C05			
4(b)	The article "How to read a plant fast" explains the various tools used to study the leanness of a plant?	(15)	C02			