

MEETING THE SURGICAL PLAN WITHOUT INVESTMENT

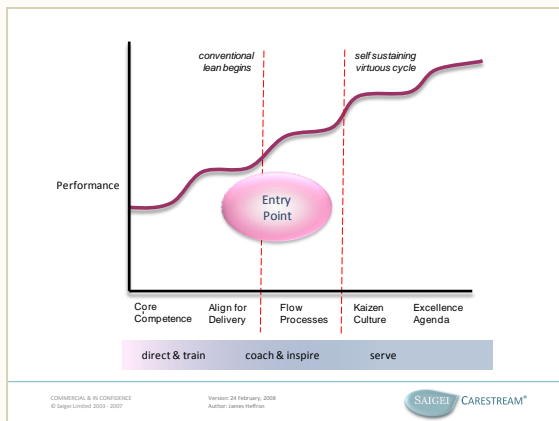
TWO SIX WEEK ASSIGNMENTS

THE TASK

The client was a two site hospital Trust. It was operating within targets but planned increases in workload and rising emergency demand presented it with a capacity challenge.

The objective was to help the surgery and anaesthetics division optimise its productivity and avoid the need for investment in capacity.

On arrival the Saigei team examined the nature of the task. The surgical service had a clear and disciplined operating model. The team just needed help identifying opportunities for improvement ie the conventional “lean” space.



understanding the nature of the task

ORGANISING WITH PURPOSE

The starting point was to establish Saigei as an integral part of the surgery and anaesthetic division’s strategic implementation team.

This began with a series of meetings between the General Manager for Surgery, the Saigei Principal and the various surgical teams to hear their ambitions for the service and their expectations from an external agency.

On the strength of these meetings, Saigei and the General Manager formulated a joint approach for discussion with the clinical directors. The agreed approach was then taken forward for agreement with the Operations Director and the General Management team.

SERVING NEEDS PART 1

The General Manager, Clinical Directors for surgery, and the Saigei principal then identified five experienced individuals to spend four days a week examining demand for surgery, and the performance of the current operating model.

In the first 6 weeks the team looked at the emergency service. The changes included:

- Creation of a dedicated trolley based surgical diagnostic area.
- Agreement of early referral from A&E without extensive work-up.
- Changes to SpR job plans to staff the unit eight hours each day, seven days a week.
- Changes to the General Surgeon rota to improve continuity of care.
- Agreement of fast track diagnostic test services to support early decisions.
- Formalising the listing of emergency surgery reducing deferred operations.
- Daily review of theatre sessions to recover predicted early finishes for emergency ops.
- Closer working with the site-management teams to identify and repatriate outliers.

MEASURING OUTCOMES PART 1

These changes had the following effect:

- Creation of six additional emergency lists per-week, plus two more every other week.
- Recovery of an average 1.5 days stay incurred at the start of the emergency pathway.
- 70% reduction in surgical and medical outliers as a result of better bed utilisation.

	May	%	Jun	%	Jul	%	Aug	%
Medical	397	69.9	309	64.4	86	80.4	157	71.0
Surgical	62	10.9	30	6.3	6	5.6	42	19.0
Trauma & Ortho	106	18.7	136	28.3	15	14.0	11	5.0
Spec Surgery	2	0.4	3	0.6	0	0.0	11	5.0
Gynae	1	0.2	2	0.4	0	0.0	1	0.5
Total	568	100	480	100	107	100	221	100.0

Before After

COMMERCIAL & IN CONFIDENCE Version: 24 February 2008 Author: James Heffron
 © Saigei Limited 2003 - 2008 SAIGE CARESTREAM®

reduction in outliers across trust

SERVING NEEDS PART 2

A short while later, the surgical team invited Saigei to support them in examining the elective pathway.

This time the changes included:

- Creation of a theatre admissions area and reducing previous-day admissions.
- Optimising pre-operative assessment to reduce list changes and plan discharge.
- Engagement of surgical wards in identifying and preparing the first patient on each list.
- Identifying high volume procedures, listing them together and optimising flow.
- Introduction of stay management disciplines and nurse-led discharge.
- Standardised take-home drug packs available 24 hours before discharge.
- A dedicated porter in theatre with nurse accompaniment to the theatre door.
- Changes to anaesthetist working practices so can be where needed.

MEASURING OUTCOMES PART 2

By the end of the intervention, late starts and list changes on the day were almost nil.

Day of surgery admissions were climbing.

Patients reported that theatres were calm and organised (though they wanted more entertainment in the admissions area).

Crucially, the Trust has been able to hit its production plans without investment.

It estimates its productivity has nearly doubled as the changes have achieved full effect.

WHY IT WORKED

The General Manager says:

...My team and myself were propelled into a five-week programme of enthusiasm and fun led by Saigei.

By the end of week one, we had engaged our whole clinical team with one Consultant Anaesthetist actually announcing 'this is great to be working with a project that looks at quality of care not targets'.

At the end of week five, we had completely changed the way we deliver emergency care throughout the whole pathway and more importantly one year on the changes have been sustained and improved upon.

With quality and targets improved for emergency patients, we asked to work with Saigei once more and within two weeks had changed our elective flows and improved theatre utilisation.

The great part is they have equipped us with the skills to keep on moving and changing so that quality care is evolving all of the time.

Ends...

For further information contact:

James Heffron
 +44 (0)7779 702159
james.heffron@saigei.com

Saigei Limited
 41 Ormond Avenue
 Hampton
 Middlesex TW12 2RY

www.saigei.com