

CASE STUDY

Ophthalmology Improvement Programme

Background

This organisation was the second largest eye centre in Europe, receiving referrals from GPs and hospitals around Birmingham and the West Midlands.

The centre treated the full spectrum of eye conditions from relatively common, minor complaints through to Glaucoma, Cataracts and diabetic related eye conditions. The teams also provided treatments for rare conditions not available elsewhere in the UK.

The service was under enormous pressure due to excessive demand, with steadily increasing waiting lists and consistent breaching against internal targets.

Study Findings

A brief analysis was carried out into the utilisation of the resources in place to identify and quantify opportunity for improvement.

The analysis findings were as follows:

- Clinics were performing at a low level of utilisation.
- While DNAs and cancellations were contributing factors, there were very high levels of unbooked slots (up to 19% of all available slots) – slots which had remained empty prior to the day of clinic.
- The reasons for the unbooked slots were unclear, with responsibility for booking being held by another department elsewhere in the hospital.
- There was a lack of simple management information, meaning that variances were often left unnoticed until crisis point.
- The referral pathway was complex and contained duplication in process.

What Meridian proposed:

- a) To define the necessary management information, key performance indicators and reports. In addition, to install performance review processes that routinely dealt with variances to plan.
- b) To implement a mind-set and behavioural change within the booking teams so as to capitalise on lost opportunity through unbooked slots.
- c) To initiate a process of comparison between consultant contracted programmed

activities and the outpatient templates configured within the PAS system.

- d) To install management control over the annual fulfilment of the planned number of OPD sessions by consultant.

Project

The Ophthalmology Improvement Project was scheduled for 7 calendar weeks and covered all of the proposed deliverables.

The initial action was to create a specification of a Weekly Management Report for development by the Trust's Information Team. A comprehensive set of Key Performance Indicators (approximately 60) were proposed by Meridian and incorporated into the report. A review process was then defined and documented. This process placed focus on variances to performance targets.

The referral pathway from receipt of referral to booking of appointment was mapped and subsequently critiqued by the departmental Management Team. Key control points were identified and the process re-engineered to mitigate duplication in the system. Primarily, the step of 'first-phase triage' was removed from a non-clinical team and re-assigned to the clinical team. This drastically reduced the amount of referrals being sent on erroneous pathways and significantly limited the number of referrals that had to be reprocessed.

Observations were carried out on the booking teams to establish the cause of unbooked slots. A phenomenon was identified whereby the overall behaviours of the team meant a focus was consistently placed 6 weeks out, to the detriment of imminent slots left open by patient cancellations. No process was in place to rebook these 'lost' slots. A simple control was developed and installed and the booking teams coached through a new way of working.

All consultant job plan information for the service was compiled into a single database, allowing the department for the first time to assess its capacity across the board. All clinic template information was incorporated into the presentation, allowing comparison to be drawn between the timings of the consultant PAs and the planned templates. A series of review sessions were then facilitated between the departmental Management Team and the individual clinicians to set actions to close the variances.



Finally, simple management controls were installed to allow tracking of fulfilment of consultant sessions over the course of the year. This information then allowed management decisions to be made based upon delivery of contract – for example, a restriction on approval of additional premium rate sessions if the expected number of core sessions had not been delivered.

Results

1. An entirely new concept in the way that patients were booked into slots, breaking the paradigms in place within the booking teams.
2. A very swift capitalisation on the previously unbooked capacity.
3. A drop in unbooked slots of approximately 200 per week, annualising to over 10,000 slots per year.
4. An increase in the revenue generated by the department for no additional increase in cost of delivery.
5. A revised referral pathway with a clear impact on the length of time referrals spent travelling around the hospital. These process changes also limited the amount of risk of loss of referrals.
6. Improvements of the quality of service delivery, both in terms of safety (additional process steps were added to ensure that consultant comments were scanned and logged in the Trust systems), but also in increased levels of patient access to the service.
7. A dialogue opened between the Management Team and the individual clinicians regarding the details of how the clinics operated. This also led to key actions being carried out to ease the flow of the clinics and maximise the time of the clinician.
8. The installation of a single management report which incorporated all of the key performance indicators of the department. This report replaced many disparate reports already in existence.
9. A sense of achievement within the department that issues had been solved and a self-sustained motivational surge in increasing efficiency and productivity within the department.

Contact Us

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Meridian Productivity was established 1996, and has been extensively involved in the Healthcare industry across the United Kingdom, Republic of Ireland, Holland, Belgium, Spain and the Czech Republic. Meridian assists clients across the Healthcare environment (private and public) in achieving improved operating efficiencies and performance, through the development of bespoke management and behavioural processes. These processes are all designed and implemented to ensure that our client organisation can be assured of returning the best performance on the resources applied.

We work with about 20 to 25 organisations a year, both in the public and private sectors, helping them to reduce their operating costs, improve their productivity and provide value for money.

Find out how Meridian can benefit your organisation.

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