

DML Excellence Awards 2016 Report

Project No: 74 – Identify first patient the evening before surgery so that the patient can be prepared and ready in a timely manner to allow theatre commence on time

Address: NMH, Holles Street.

Location: IEHG

Brief Description (up to 200 words)

As part of a quality improvement initiative an area requiring reform was identified in the theatre . Prior to commencement of this study the first theatre case for surgery was not identified on four of the five days of the working week. The hospital has both an elective gynaecological surgery and an elective caesarean section list booked in each weekday. By identifying a named patient the evening before, that patient can be prepared and ready prior to 8:15 on the morning list. Any delays in theatre negatively impact on the running order, the elective cases may be delayed due to emergencies resulting in potential surgery cancellations by end of a day. This additionally impacts on staff as they have to extend their working day, and is also frustrating to patients and staff.

Following critical discussion with the Master and Director of Midwifery, and the Clinical Risk Dept., it was clear this initiative would have a positive benefit for all stakeholders. All expressed a wish to see this initiative achieved. The Theatre User Forum, Consultants, Anaesthetists, staff of Antenatal Day Ward and Gynaecological Ward were all consulted and invited to be involved in the project – a critical success factor.

The aim of the project was to additionally see an improvement in waiting times, timely treatment and a reduction in the cancellations and overrun of cases.

Main goal(s) and aims of the Project

Aim:

It is important that the theatre is running efficiently and the staff are utilised in the appropriate manner. Audit of theatre lists indicated an over run of five (5) cases per month – often traced back to delay in the commencement of the elective list. The aim of this project is to ensure that the first patient on the theatre list is identified the evening before surgery 100% of the time by the end of May 2015, so that patients can be prepared and ready in a timely manner and the theatre list commences by 08:30.

The Objectives were as follows:

- The first patient on the theatre list is identified the evening before surgery 100% of the time by the end of May 2015 (3 months from project start).
- All consultants shall inform the theatre staff by 19.00 the evening before which patient is first on list.
- Theatre staff shall inform all relevant ward staff to ensure the patient is ready.

- The initiative would be audited at the start time each day over the months of April and May to evaluate compliance of “first patient ready” requirements. Additionally in this audit the readiness of the first patient will also be checked.
- Audit outcomes collected during April and May 2015 shall be evaluated to assess the impact of the initiative on the NMH

Outline of Approach – main steps taken to implement the Project

The following steps were followed:

1. Project preparation and planning was discussed, including stakeholder discussions, risk management and evaluation strategies.
2. A working (project) team was formed and all stakeholders were consulted, and a decision taken to implement the project through PDSA cycle(s).
3. All tasks were identified that were required to achieve this change, and a pilot study was initiated.
4. All consultants were asked to identify their first patient for the list the evening before surgery.
5. Process mapping and audit of the process was undertaken.
6. Checklist of “record of time called”, “time arrived” and “time of surgery” were completed daily.
7. Audits took place to check if first patient called was the identified patient.
8. The number of cancellations was also audited to ensure the improvement had not impacted negatively on this.
9. Outcome measures including “start time” and “after hour list” were also examined.
10. Lessons learned and results were relayed to all stakeholders and further improvements were embraced.