

# Redesigning the surgical patient journey at Northern Health

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# Smooth operations

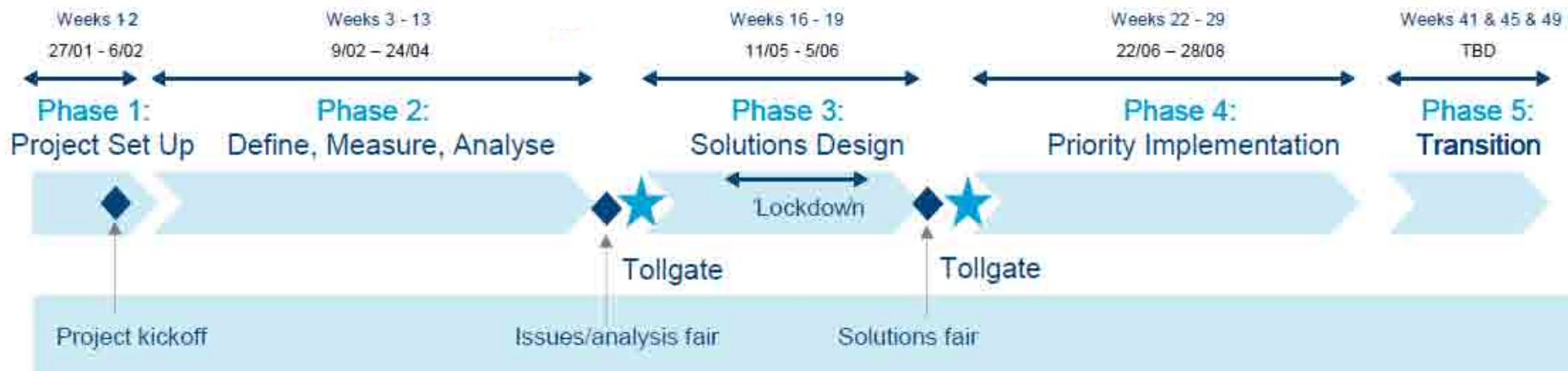
# Aim

- Improve efficiency and surgical performance
- Increase redesign capabilities



# Approach

- 5 phase Lean Six Sigma methodology



# SURGICAL PATIENT JOURNEY

1

Waitlist & Scheduling

2

Preadmission & preparation

3

Admission

4

Operating Theatres

5

Wards

6

Discharge

## Primary Solutions

Improving Preadmission Screening / Triage

Improving Unplanned Surgery at Northern Health

## Secondary Solution

Improving elective surgery admission access



# Improving Unplanned Surgery

# Background

- Overbooking of lists
- Paper based system located in theatre
- No documentation or review of cancellations
- Unnecessary fasting
- Surgeons arriving late to evening list
- No system to identify number of cases awaiting surgery



# What changed?

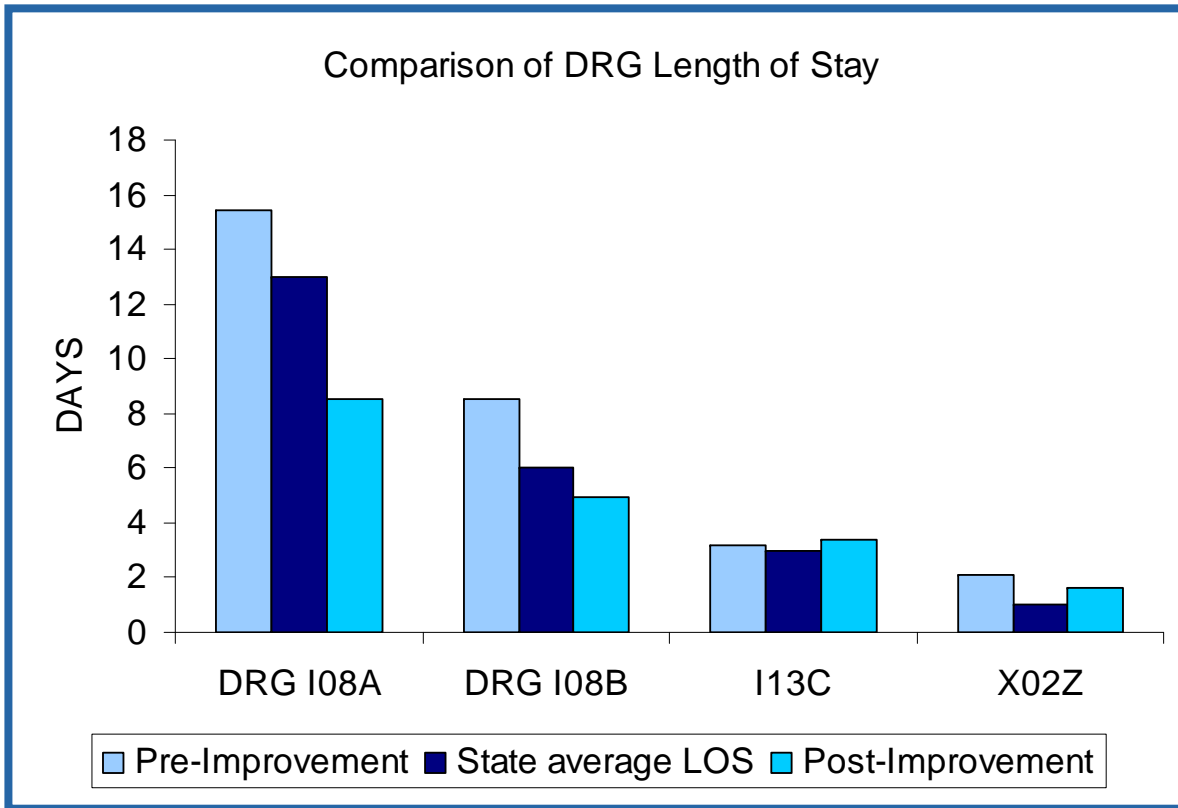
- A new process using a structured approach to patient scheduling.
  - Updated non-elective booking form
  - Established a 1230 multidisciplinary theatre meeting
  - Recording and monitoring of all patients awaiting non elective surgery





# Outcomes

- 56% improvement in the number of 'out of hours' operating session cancellations
- 14% improvement in the 'on time' starts for orthopaedic twilight lists
- Estimated cost benefit (3mths):
  - \$288,000 saved in length of stay reductions for 2 DRGs





Indicator	Baseline	Target	Status
<b>I08A</b> Other hip and femur procedures w CC	15.45	13	8.5 
<b>I08B</b> Other hip and femur procedures wo cc	8.51	6	4.95 
<b>I13C</b> Humerus, tibia, fibula + ankle procedures <60 wo cc	3.15	3	3.3
<b>X02Z</b> Microvascular tissue transfer or skin grafts for injuries to hands	2.09	1	1.6

# Improving Preadmission Screening

# Background

- Nurse led preadmission clinic
- 58% of patients seen in preadmission clinic (PAC)
- Theatre bookings, PAC and OPD not linked
- Poorly completed paperwork
- No formal triage guidelines

# What changed?

- Redesigned Notice Of Admission (NOA)
- Bookings Clerk now situated in the OPD
- Category one patients given surgery date at initial appointment
- Preadmission Screening Clinic implemented
- Triage guidelines

# Outcome

- 94.3% elective surgery patients had contact with a preadmission nurse prior to surgery
- 83% of Category one patients received their operation date at the time of appointment
- No inappropriate referrals received by BHS
- 6% improvement in the number of theatre sessions that commenced on time



Single point of access

# Background

- Patients admitted to 17 separate locations
- All elective patient admissions clustered at 0700 and 1130
- Considerable distance between surgical units and operating theatres



# What changed?

- All elective admissions through DPU
- Relocation of ward clerk for admission
- Endoscopy step down introduced
- Anaesthetic nurse transporting the 1<sup>st</sup> case to theatre
- Patient journey board established

# Outcome

- 96.9% of elective patients admitted through DPU
- 8% improvement in theatre on time starts
- 9.5% improvement in ED LOS < 8hr performance (surgical ward admissions)

Operational Definition	Baseline	Target	Status
Number of patients admitted within 8 hours from the emergency department at The Northern Hospital to the inpatient surgical units	66.67% of patients admitted within 8 hours	10% improvement	76.13% of patients admitted within 8 hours

For more information:

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*Northern Health  
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