Why does significant variation still exist across NHS Scotland in rates of day surgery?

Tracey Gillies,
Julie Main,
Kathryn Neil
Breakout Session
Agenda

How do we begin to understand the variation that exists in same day surgery delivery?

Introduce and demonstrate new Day Surgery Improvement Resource

What needs to change to allow Day Surgery to become the norm?
Identifying & Understanding Current Performance & Variation in Same Day Surgery
New Improvement Tools

Whole System Patient Flow Improvement Programme

Day and Short Stay Surgery Improvement Resource

Please click on the chart images below to access analysis

What is the aim of this resource?
This resource has been provided by the Whole System Patient Flow Improvement Programme with the aim to provide NHS Boards with analysis to support the increase of day and short stay surgery rates, by identifying opportunities to reliably reduce variation and spread best practice.

How should I use this resource?
This resource will help to identify where improvement efforts should be focused within NHS Boards in relation to procedures within the BADS v4 Directory where there is still opportunity to make further improvements.

CHART 1: Glenday Saive - Productive Opportunity
YEARS: 2012
DATA: SMR00/SMR01 - Health Board of Treatment

How can this chart help?
This chart helps to identify which procedures have the greatest opportunity to improve Same Day Surgery rates and reduce Bed Days used at NHS Board and Specialty level.

Step 1: Identify what procedures to focus on
Click on Chart 1 to identify which procedures have the greatest opportunity to improve at NHS Board level

Step 2: Identify variation in Same Day rates at procedure level by NHS Board
Click on Chart 2 to select procedures of interest in order to show where 'Best in Class' same day surgery performance exists at NHS Board level

Step 3: Identify variation in Same Day rates at procedure level by Hospital & Consultant
Click on Charts 3 & 4 to select procedures of interest in order to show where 'Best in Class' same day surgery performance exists at Hospital & Consultant level

Step 4: Use 'Best in Class' pathways to make local improvements
Work in Progress....
Day Surgery Improvement Resource

**What is the aim of this resource?**
This resource has been provided by the Whole System Patient Flow Improvement Programme with the aim to provide NHS Boards with analysis to support the increase of day and short stay surgery rates, by identifying opportunities to reliably reduce variation and spread best practice.

**How should I use this resource?**
This resource will help to identify where improvement efforts should be focused within NHS Boards in relation to procedures within the BADS v4 Directory where there is still opportunity to make further improvements.

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1:</td>
<td>Identify what procedures to focus on. Click on Chart 1 to identify which procedures have the greatest opportunity to improve at NHS Board level.</td>
</tr>
<tr>
<td>Step 2:</td>
<td>Identify variation in Same Day rates at procedure level by NHS Board. Click on Chart 2 to select procedures of interest in order to show where 'best in class' same day surgery performance exists at NHS Board level.</td>
</tr>
<tr>
<td>Step 3:</td>
<td>Identify variation in Same Day rates at procedure level by Hospital &amp; Consultant. Click on Charts 3 &amp; 4 to select procedures of interest in order to show where 'best in class' same day surgery performance exists at Hospital &amp; Consultant level.</td>
</tr>
<tr>
<td>Step 4:</td>
<td>Use 'Best in Class' pathways to make local improvements. Utilise Pathway Self Assessment Guides to identify improvement plans.</td>
</tr>
</tbody>
</table>
Next Steps to increase Day Surgery Rates and Reduce Variation

1. Identify local opportunities to improve variation in same day rates at Health Board, Hospital and Consultant Level
2. Understand local pathways and use Best Practice pathway guidance to identify areas of focus
3. Identify and describe the structures to support improvement
4. Identify and describe the obstacles to improvement
5. Develop Improvement Plan for your Day Surgery Pathway
Pathways for Delivering Safe and Effective Day Surgery

Self Assess your pathways against the following criteria:

1. Defaulting the booking of all appropriate procedures to day case, with the pre-assessment team able to amend this decision if required.

2. Robust nurse led pre-operative assessment with dedicated anaesthetic support.

3. Day of surgery admission to a dedicated admissions area where possible.

4. Surgery within a dedicated day surgery unit or theatre session where possible but in particular a recovery and discharge area that is designed to facilitate discharge on the same day.

5. Post operative recovery supported by clinical protocols including those relating to pain, post-operative nausea and vomiting (PONV), take home medication and criteria led discharge.

6. Follow up and audit of activity with clear Key Performance Indicators (KPIs) and Clinical Quality Indicators (CQIs).
Utilise Best Practice for Optimising Patient Flow

**Outpatients and Pre-Assess**
- Within **12** weeks of referral
- One stop shop – one nurse-led pre assessment for all elective surgery, partial booking, consent begun
- Patient Fully briefed & prepared

**Admission**
- Call patients close to appointment to remind them & confirm medication details
- Screen patients at referral
- Pool Waiting lists where possible
- Stagger lists
- Stream patients flows
- Lower patient wait time
- Introduce scheduling to get the right people & right equipment in the right place at the right time.
- Live, real-time data/systems for theatres

**Pre ~ Peri ~ Post**
- Stagger admissions
- Dedicated admissions area – changing, locker facilities, consulting rooms
- All patients admitted on day of surgery
- All DS patients should walk to theatre
- Dedicated day surgery lists where possible – if not schedule day cases first
- Mixed lists (IP, DC) can cause problems with productivity and cancellations
- LAs often before GA’s: does not accommodate recovery time for same day discharge

**Discharge**
- Post op information inc pain management
- Nurse led discharges
- Discharge Lounge
- Performance management information to be communicated to all staff
- Patient and Staff Surveys feed back ideas and suggestions into patient pathway

**Follow Up**
- Flexible opening hours supported by an operational policy
- Ensure quality and consistency of information
- Management of PostOperative Pain
- Post-op information
- Emergency contact details
- Follow up telephone call
Whole Systems Patient Flow Improvement Programme

<table>
<thead>
<tr>
<th></th>
<th>Session Title</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Reliable Implementation and Spread of Enhanced Recovery</td>
<td>Waverley</td>
</tr>
<tr>
<td>B</td>
<td>“Virtual” Clinic Review – A Patient-Centred Mechanism for Optimising Flow</td>
<td>Ramillies</td>
</tr>
<tr>
<td>C</td>
<td>Reducing Variation, Achieving Reliable Implementation of Day Surgery</td>
<td>Dalhanna</td>
</tr>
<tr>
<td>D</td>
<td>Practical Implementation of Flow Cost Quality</td>
<td>Main Auditorium</td>
</tr>
</tbody>
</table>