



Service Priorities and Programmes Electronic Presentations

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Initiating small steps to make a difference to team performance

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Introduction

Operating Theatre is a resource-intensive area in a hospital so the monitoring of its efficiency and productivity is a paramount importance. Focuses are always on OT activity such as first case starting time, overrun of the session and cancellation rate. However, it is rarely to monitor the efficiency from the preparation of instrument to get ready to be used in the procedure. High volume, fast turnover procedures like the Gynecological Hysteroscopy and Curettage procedure was the best suited workflow reengineering and hence productivity gain. Obviously, it is a big challenge to develop and implement a quality improvement project which demands thorough planning and careful budgeting. Ultimately, a small change in the existing clinical practice can enhance communication and cooperation among nursing colleagues with the sole aim of adopting the most acceptable and reliable method to deliver a high quality of care to the patients.

Objectives

1. The project focused on a safe and effective lean principle to support clinical practice and improve instrument flow.
2. Enable the operating procedure to run more smoothly by reducing the time spent on repetitive action as well as cost saving
3. To evaluate the acceptance of the new practice by the nursing staff
4. To collect feedback and explore any alternatives for further improvement

Methodology

A workgroup was formed to enhance efficiency, reducing repetitive actions and exploring new method of handling short procedures. We developed a "ALAP plan" (As-Lean-As-Possible) to redesign the workflow from modifying picking list to preparation of necessary instrument and draping materials. A thorough discussion between APNs of Gynecology team and IDSS together with frontline staff, a new instrument set content was drafted and a modified Gyn bundle was developed. An instrument tray was employed to place all necessary instruments in one tray with telescope, light cable and examination sheath to replace individual peel pack opening. Gyn bundle was modified from nil large OT towel to include three large OT towels. Furthermore, a feedback loop between frontline staff and IDSS as well as the group

members was set up to ensure seamless communication.

Result

Result A six-month trial period was launched and the workgroup had tested out this standard work to all H&C operations. The modification in both instrument set and bundle content reduced the number of steps in process from seventeen to six which not only time but also cost saving. Staff are more satisfied that work is not duplicated and they feel that workload is now more manageable and less stressful. As a result, all parties welcomed this new working pattern and agreed with this new standard for all H&C cases. Over 96% of staff suggest to extent this standardized work practice to other high-volume short duration procedures in other specialties. **Conclusion**

In a nutshell, the success of this enhancement project was the result of frontline clinical staff's acceptance of the concept of the workgroup and the mission "Lean without scarifying quality". With the support from the leaders and trust among team members, the process change is deemed sustainable. We believe that efficiency improvement in OT, even in small steps, can improve productivity and yield considerable saving of resources. In this project, both procedural time and cost were saved to achieve a win-win situation.