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FRANCIS + HUTT VALLEY DHB
HEALTH

Theatre Improvement and Future Capacity Planning

Wave 1 Progress Update and Resourcing Considerations

15 February 2017



+ For Discussion

- How do we re-establish the programme?
- How we get traction and pace on the initiatives?
- What internal resources have been identified/secured to support the progress of the Wave 1 initiatives?
- What level of support does HVDHB require from Francis Health?

+ Theatre Improvement Programme Planning Considerations

Internal Resources & Skillset

- Building internal capability to support programme delivery
 - Business Improvement & Process Design: Dawn Livesey, Rebecca Kay
 - Improvement Programme Planning & Sustainability: Tania Grieve, Janine Gunn, Lis Browne
 - Additional resources to consider: Business Analyst, Project Manager

External Support

- Requirement for external resourcing to support the delivery of current initiatives and planning for future improvement activities

+ Wave 1 Progress (as at February 2017)

STATUS SUMMARY

Red = Off Track **Amber** = Generally on track, minor issues **Green** = On track

Wave 1 Priority	RAG Status	Key Achievements to 14 December 2016	Challenges and Opportunities
1. Acute and Elective Capacity	Amber	<ul style="list-style-type: none"> - FY17/18 schedule modelling based on demand - APR airflow assessment completed - Additional plastics acute lists trialled - Approval to proceed with appropriate air and gas detection requirements in APR 	<ul style="list-style-type: none"> - Moving appropriate procedures out of theatre to other location may require capital and operational investment
2. Flexible Roster Model	Green	<ul style="list-style-type: none"> - Reached agreement on even session times to trial within a 9 hour roster model - Detailed cost analysis undertaken to determine additional FTE requirements to implement 9 hour roster - High level of HR consultation to inform decisions - Approval for additional FTEs to support service delivery under current 8 hour model and which will enable delivery under a 9 hour shift for at least 2 theatres 	<ul style="list-style-type: none"> - Provision of clinical leadership and direction to OT staff to support the trial of the 9 hour roster model

+ Workstream Progress (as at February 2017)

STATUS SUMMARY

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Wave 1 Priority	RAG Status	Key Achievements to 14 December 2016	Challenges and Opportunities
3. Elective booking, scheduling and list construction	Green	<ul style="list-style-type: none"> - Implemented new elective booking process across three specialties – Gynae, Ortho, Gen Surg - Established and implemented booking and scheduling principles - Electronic elective booking form developed and undergoing user acceptance testing - Streamlined communication among CNC Liaison, CNC Theatre, SAU and Booking Office to support list management 	<ul style="list-style-type: none"> - Challenges with construction of Ortho lists (CNC Liaison for Ortho will start 9 Jan 2017 to support improvements)
4. Professional Standards	Green	<ul style="list-style-type: none"> - Theatre Charter completed and launched (available on HVDHB intranet) and will be framed in theatre 	<ul style="list-style-type: none"> - Identify interventions and KPIs to support implementation - Establish governance structure to oversee review and audit process

+ For Discussion: Programme Resourcing

Wave 1 Initiatives	What do we want to achieve	Internal capacity	External support
Acute and Elective Capacity			
Flexible Roster Model			
Elective booking, scheduling and list construction			
Professional Standards			

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+ Progressing Wave 1 Initiatives

Workstream	Key Activities to Progress	Suggested External Input	Indicative Resourcing
1. Acute and Elective Capacity	– Progress with FY17/18 capacity modelling	– Analytics support to progress modelling of FY17/18 schedule	0.3 FTE Project Manager (for 2 months)
	– Review of options to move appropriate activity from theatre to alternate location	– Facilitate stakeholder engagement in review process	0.1 FTE Project Manager (after 2 months)
	– Develop mini business case/s	– Develop and refine mini business cases	
2. Flexible Roster	– Continue planning for trial of the nine hour roster model	– Project management support to progress implementation of trial	0.3 FTE Project Manager (pre-trial)
	– Approval of additional FTEs to support current eight hour model	– Tracking project timelines, support recruitment of trial participants, development of project documentation and communications materials	0.1 FTE Project Manager (during trial)
	– Recruitment of additional FTEs into current model		0.2 FTE Project Manager (post-trial)
	– Confirmation of number of participants for trial		Analyst resource (see Data workstream) HR support
3. Elective Booking, Scheduling and List Construction	– Review and refine new booking and scheduling process based on outcome of Phase 1 implementation (General Surgery, Orthopaedics and Gynaecology)	– Support project lead to embed revised process across Phase 1 specialties	0.2 FTE Project Manager (for 2 months)
	– Implement new electronic elective surgery booking form	– Provide analytics support	
	– Progress implementation of revised booking and list construction process across remaining specialties	– Refine and develop implementation materials to support roll-out	0.1 FTE Project Manager (after 2 months)
	– Identify opportunities to enhance existing process (i.e. pre-assessment process)	– Support identification of potential future enhancements to new process	

+ Progressing Wave 1 Initiatives

Workstream	Key Activities to Progress	Suggested External Input	Indicative Resourcing
4. Professional Standards	<ul style="list-style-type: none"> Determine interventions to support implementation of charter Define key performance indicators and audit approach Establish governance structure to oversee review and audit processes 	<ul style="list-style-type: none"> Provide input into audit process, potential performance indicators and governance structure Coaching for project leads and other key stakeholders to support them in embedding the charter across the department 	2 days/month Project Manager
5. Data	<ul style="list-style-type: none"> Embed standardised measurement and reporting (i.e. theatre dashboard, data definitions, specialty level reports) Develop models, support business case development Adhoc analyses of initiatives 	<ul style="list-style-type: none"> Coaching and review support to analytics resource to ensure standardised reports and other data analysis is embedded 	0.4 FTE Analyst Note: analyst resource inclusive of support required for all workstreams
Quality Assurance	<ul style="list-style-type: none"> Monitoring all workstreams to ensure expectations and deliverables are met Engagement with senior staff to address challenges/issues 		0.1 FTE SME
Theatre Leadership Group	<ul style="list-style-type: none"> Agenda, content development and meeting facilitation 		2 days/month Project Manager