

The Productive Operating Theatre

Building teams for safer care™

Improving quality and efficiency in the operating theatre

A lifeline for financial leaders

*'Proof that improved quality and significant productivity gains
are simultaneously deliverable.'*

Matthew Lowry – deputy chief executive and chief finance officer, The Rotherham NHS Foundation Trust



Happier, more motivated staff, improved patient care and greater efficiency... supporting your theatre teams to implement The Productive Operating Theatre successfully ensures a Win Win Win for patients, theatre staff and cost efficiency.

What is The Productive Operating Theatre?

- A modular improvement programme created by the NHS Institute for Innovation and Improvement for theatre teams in NHS acute trusts.
- An efficiency saving opportunity of more than £7 million for an average trust¹.
- A systematic way to deliver significant improvements in safety, efficiency and patient care.
- A proven method of involving frontline teams in transforming the way they work.

Compelling financial argument

Case studies developed at test sites who have implemented The Productive Operating Theatre, along with examples from exemplar sites, have found that outstanding improvements in both cost and quality have been achieved. Put together these examples provide a compelling argument for change.

Consumable stock

- Do you know your stock turnover rates?
- Do you know the cost of stock stored and used in your theatres?

Example

Through improved systems and controls, we have seen the following savings:

- Initial savings on stock reduction **£320,000**
- Annual recurrent savings **£40,000 per annum**

Session utilisation

- What percentage of your funded sessions are actually utilised?
- How many extra Saturday and Sunday sessions are used?
- Do you know the cost of an unused or closed session?

Running costs for an operating theatre average approximately £1,200 per hour. Therefore, the greatest efficiency gains in most acute trusts can be achieved through improved session utilisation.

Example

The appointment of an orthopaedic scheduler, improved session utilisation from 87% to 97%.

For an average trust¹ a 10% improvement generates the following savings:

- £79,200 per week
- £330,000 per month
- **£3,960,000 per year.**

If 100% utilisation was achieved across the organisation it would release further cost improvements:

- **£1,188,000 per year.**

'Making the finance director a quality champion is one of the best strategies for achieving quality improvement results... Why? Because when we start to think about the relationship between cost and quality in a different way, magic happens.'

Helen Bevan - director service transformation, NHS Institute for Innovation and Improvement

¹ An average trust in England has 16.5 theatres.

Operating list management

- How often do your operating lists start and finish on time?
- What is your average clinical contact time per operating list? ie total anaesthetic and surgical time.

Example

Contact time was increased as a percentage of total scheduled time by 10%. The baseline number of contact hours was 1600 hours per annum¹ for an average trust. Total contact time progressively improved over a two year period by 2,640 hours:

Year 1	2.5% increase	660 hours
Year 2	5% increase	1,320 hours
Year 3	10% increase	2,640 hours
An annual efficiency saving of		£3,168,000

Other areas for consideration

- Do you know how much common surgical procedures cost the hospital?
- What is your staff turnover and sickness absence record and the resulting agency costs?
- How much do you pay for your outsourced sterilising services?

Example

Reducing reject or glitch rate for your sterilising services contract:

Average theatre trays per month	500
Error rate is 10% at £35 per tray	£1,750
Overall cost per month ¹	£28,875
An annual efficiency saving of	£346,500

Whole system benefits

Successful implementation of the examples illustrated above provides an improvement opportunity of over £7 million¹ for an average trust. These improvements can be further enhanced through improvements in benefits that are less easy to quantify financially, in particular, reducing errors or complications (reduced length of stay, reduced drug expenditure, reduced admissions to ITU).

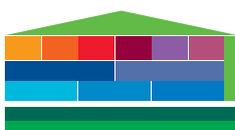
Reducing complications may have further benefits too. As well as putting the trust in a higher banding with Care Quality Commission and other benchmarking organisations, such as Dr Foster, it avoids negative press and reduces the potential for future litigation.

What should financial leaders do?

- Read the Executive Leader's Guide
- Work closely with (or become) the executive leader for the programme, as well as working closely with your programmer leader.
- Be an active member of your steering group.
- Ensure adequate resources are available to your programme team to deliver the full benefits.
- Commit sufficient skilled IT and analyst support.
- Walk-around the operating theatre to understand the issues confronting frontline staff every day.

'Theatres represent one of the single biggest productivity opportunities in any acute trust. Even if you think your theatres are working well, the productivity benefits of The Productive Operating Theatre, very quickly add up.'

Matthew Lowry – deputy chief executive and chief finance officer, The Rotherham NHS Foundation Trust



Implementation support programme

The Productive Operating Theatre box set is designed to give NHS organisations everything they need to run the programme however, this is a complex improvement programme. Learning from our previous programmes in The Productive Series indicates that organisations which use the implementation support programme are more likely to succeed, more quickly and with more dramatic results.

The implementation support programme combines structured training with on-site support delivered over six months.

The implementation support programme is provided at a one-off charge of £29,000 per trust.

'Support from the NHS Institute really helped us engage with the trust board and clinicians, whose involvement and commitment is critical to successful implementation trust wide.'

University Hospitals Leicester NHS Foundation Trust

The Productive Operating Theatre team

If you have any further queries about The Productive Operating Theatre or the implementation support programme, please contact us at:

The NHS Institute for Innovation and Improvement

Coventry House

University of Warwick Campus

Coventry CV4 7AL

Email: theatres@institute.nhs.uk

Telephone: 0800 555 550

Online: www.institute.nhs.uk/theatres