Welcome from the Clinical Leads

“Enabling access to high-quality surgical care through optimum resource utilisation (value)”

We are delighted to welcome you to the first edition of the quarterly newsletter of the National Clinical Programme in Surgery (NCPS).

The National Clinical Programmes represent a strategic initiative between Clinical Strategy and Programmes Directorate of the Health Service Executive (HSE), led by Dr Áine Carroll, and the various post-graduate training bodies. The role of the National Clinical Programmes is to define how service will be delivered, measured and resourced and to provide clinical leadership. The Objectives are to:

• Improve Quality
• Improve Patient/Service User Access
• Improve Value

The NCPS, a joint initiative between the HSEs Clinical Strategy and Programmes Directorate and the Royal College of Surgeons in Ireland, specifically aims to provide a framework for the delivery of safer, more timely, more cost-effective and efficient care, as well as greater accessibility for all surgical patients.

It commenced in 2010 with an initial focus on the delivery of the Model of Care for Elective Surgery. This Model of Care, published in 2011, has already had significant positive impact on the efficient delivery of surgical care in Ireland. The Productive Operating Theatre Programme (TPOT), the National Office of Clinical Audit (NOCA) are also some of the programmes that were initiated by NCPS prior to the commencement of the development of the Model of Care for Acute Surgery, which was successfully launched by the Minister for Health in July 2013.

The NCPS works closely with other National Clinical Programmes, notably the Programme in Anaesthesia, as well as Special Delivery Unit (SDU), patient advocacy groups and all relevant stakeholders across the health system.

We sincerely thank you for your continued support to the NCPS and do hope you will enjoy this newsletter.

Professor Frank Keane Mr Ken Mealy
Joint Lead, NCPS Joint Lead, NCPS

National Clinical Programme in Surgery at a glance

Each box shown in the ‘house’ above describes the important elements of the programme. As with any house, the foundations start on the ground and the elements are built in an orderly and sequential manner. The same has to be done in the Surgery Programme for it to be a success.

ABBREVIATIONS:

AHP - Allied Health Professional;
AvLOS – Average Length of Stay;
DOSA – Day of Surgery Admission
IASM – Irish Audit of Surgical Mortality
ICT – Information and Communication Technology;
ICU – Intensive Care Unit;
INOR – Irish National Orthopaedic Register;
NCHD – Non-consultant Hospital Doctor;
NOCA – National Office of Clinical Audit;
NQAIS – National Quality Assurance Intelligence System.
THE MODEL OF CARE FOR ELECTIVE SURGERY
The development of a Model of Care for Elective Surgery was the initial focus of the National Clinical Programme in Surgery and the document was published in 2011. Since then, it has been adopted by most surgical departments across the country, with measurable positive outcomes. The Elective Model of Care advocates Pre-Admission Assessment clinics, Day surgery, Day-of-Surgery admissions and Discharge planning. It also sets hospital and speciality targets for Average length of stay, as well as Day surgery.

Between 2010 and 2011, surgical volumes increased by 2.5% and bed day usage decreased by 5%. This amounts to true bed savings of 91,662 (net 60,007). There has also been an increase of 7.4% in day cases. This achievement is a direct reflection of the commitment and hard work of staff and management of acute hospitals across the country.

With the realisation that up to 60% of hospital’s surgical workload require acute surgical care, the Model of Care for Acute Surgery was launched this July. This Model of Care sets out best practice principles and strategies necessary to ensure the provision of high-quality acute care for patients in Ireland. It recognises that, timely access to a senior decision maker, to diagnostics, and to theatres are important factors. Traditionally, emergency medicine has been second place to elective surgery, so the Model of Care for Acute Surgery also recognises the need to separate the acute from the elective patient journeys and that, by better defining a clear pathway, this will lead to improved quality of care that is both safer and more cost effective. The success of the Model of Care hinges on the establishment of strong surgical and peri-operative governance structures and operational teams, as well as the provision of access to designated, protected beds.

THE LAUNCH OF THE MODEL OF CARE FOR ACUTE SURGERY
In the development of the Model of Care for Elective Surgery, published in 2011, it became clear that acute surgery constituted 60% of the workload of many surgical departments, and so the Model of Care for Acute Surgery was born.

On July 17th 2013, The Minister for Health, Dr James Reilly TD, officially launched the Model of Care for Acute Surgery and the National Policy and Procedure for Safe Surgery at the Royal College of Surgeons in Ireland (RCSI). There were many esteemed speakers on the day, including Professor Patrick Broe, President of the RCSI, Mr Tony O’ Brien, CEO/Director General Designate of the Health Service Executive (HSE) and Dr Ellen O’ Sullivan, President of the College of Anaesthetists of Ireland (CAI). Professor Broe stated the Model of Care for Acute Surgery was a testament to the determination of RCSI and HSE to the improvement of safety and quality of care for surgical patients presenting in the emergency or acute setting. Mr O’ Brien ‘hopes the principles contained in the document will guide all hospitals and groups of hospitals in their efforts to provide the best care possible for their patients’. During her speech, Dr O Sullivan congratulated the National Clinical Programme in Surgery for their achievements so far and highlighted the need for continued team working and broad stakeholder engagement.

The Models of Care for Acute Surgery and the National Policy and Procedure for Safe Surgery is available for download from the HSE and RCSI websites.
TRAUMA AND ORTHOPAEDICS PROGRAMME

The Trauma and Orthopaedic Clinical Programme (TOP) is lead by Mr David Moore and Mr Paddy Kenny as Clinical Leads and Catherine Farrell, appointed in May 2013, as Programme Manager. The Irish Institute of Trauma and Orthopaedic Surgery are the Advisory Body for the Programme. The Programme also has 5 Regional Leads, Mr Bill Curtin, Mr Brian Lenihan, Mr Hannan Mullett, Mr Eoin Sheehan and Mr Mark Dolan. The programme is currently very busy working on a number of projects, including the development of a Trauma and Orthopaedic Model of Care document, setting up a National Spine Service Plan group, encouraging Hospitals to contribute data to the Irish Hip Fracture Database, co-ordinating the contribution of Trauma and Orthopaedic consultants to the HIQA Health Technology Assessment Process and co-ordinating the publication of agreed DVT prophylaxis guidelines. The Trauma and Orthopaedics Programme has also formed a working group with the NCPS office and HSE procurement to launch National Tenders for Trauma and Orthopaedic Implants, the first Tender will be for Hip and Knee Implants and will be published in November.

The programme has also been involved in forming a Cross programme Group to advance the publishing of guideline Integrated Care Pathway (ICP) for fractured Neck of Femur patients. A group with representatives from Anaesthesia, Geriatrics, ED and TOP met on 20th August 2013 and Dr Emer Ahern, was elected as chair of the group. The group agreed that a template ICP would be issued as a guideline and that the document will be sent for consultation prior to publication. Ms Louise Brent CNS in Waterford Regional Hospital has kindly agreed to act as Nurse Lead for this Guideline.

For more information about the Trauma and Orthopaedics Programme, please contact Catherine Farrell, Programme Manager, catherinefarrell@rcsi.ie.

THE PRODUCTIVE OPERATING THEATRE PROGRAMME

‘Enabling and empowering theatre teams to transform the way they work’

The Productive Operating Theatre (TPOT) programme is a continuous improvement programme to improve patient outcomes and operating theatre performance. It provides a systematic proven methodology, Lean, to enable theatre teams transform the way they work to deliver significant improvements to quality of patient care, clinical outcomes and theatre utilisation. The Productive Operating Theatre Programme commenced in Ireland in 2010, with the initial training of 5 pilot sites. The pilot theatres alone delivered annual productivity savings of €3million and inventory savings of €300,000. Today there are 13 sites active within the Programme, whose 4 main objectives are to continuously improve across 4 quality domains:

1. Patient experience and outcomes
2. Safety and reliability of care
3. Team performance and staff well being
4. Value and efficiency.

BENEFITS TO YOU AND YOUR PATIENTS

- Improve quality of patient care and clinical outcomes
- Improved multi-disciplinary team communication
- Increased awareness of potential issues that may impact patient safety
- Improved scheduling and patient flow
- Increased adherence to care bundles
- Improve staff morale and multi-disciplinary teamwork
- Empower staff to identify and resolve day to day issues
- Achieve substantial gains in productivity and efficiency
  - Extra theatre sessions
  - Increased patient throughput
  - Reduction in cancellations
  - Improved turn-around time
- Reduced errors, cancellations, avoid costs of harm through error
- Improved scheduling and utilisation, stock control.

Lean is a structured way of continuously exposing and solving problems to eliminate waste that delivers value to customers, our patients.
Winner of the TPOT Poster Competition at the Model of Care for Acute Surgery Launch was Alison Smith, TPOT Lead, Sligo Regional Hospital Team. Through the TPOT Programme, their start times significantly improved with the introduction of a Theatre Admission Area.

Runner up of the TPOT Poster Competition at the Model of Care for Acute Surgery Launch was Marie Sinclair Portiuncula Hospital for their creative poster on the benefits of TPOT.

SHOULD YOU HAVE ANY QUESTIONS IN RELATION TO TPOT, PLEASE CONTACT

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For further information, click here and here

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