

## But Our Culture is one of “Fire Fighting”



And even worse...

## Learned Helplessness and Risk Aversion

- “Circumstances are outside of my control”
- “The number of admissions were beyond what we expected”
- “We staff to the “just in case” scenario”
- “There is a lack of trust in the current process, if we give up staff now, we won’t get staff when we need them”
- “I didn’t have enough staff because of annual leave”
- “The work is increasing therefore I need more resources”
- “Management need to approve more.....”
- “Patients will die”

## Key Message

***We are failing our frontline managers!***

## The Health Manager!

### **Those we expect to become managers –**

- were often good Clinicians/Technicians but -
- may have been around for a long time
- have increasing demands as is the accountability required
- often do not have easy access to the management skills necessary to meet the needs

### **And we -**

- need to increase the value from the health dollar
- need to understand that to meet the increasing demands we must do things differently
- need them to no longer work as a hospital based service

## How to Change This Culture?

*Its is all about process improvement*

- A Three Point Strategy:



Focus on patient based business processes



Planning our resources & making the process visible



Empowering our leaders with service skills (and the major focus of this presentation)

## Improving the Patient Journey

*The patient is first - value the patient's time*

### Three key ingredients

1. Good clinical practice

2. Good process design

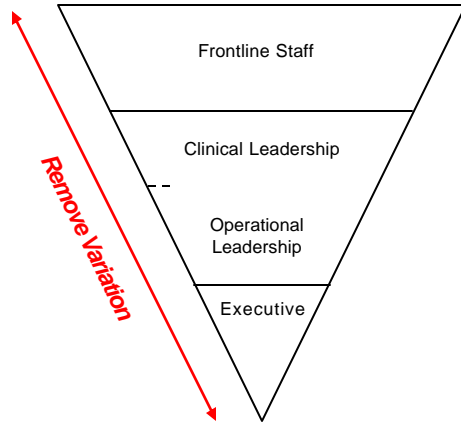
3. Good process management



*Putting the patient first*

# Improving the Patient Journey

The strategy – understanding the needs



**Lean Thinking/TOC Tools**

**Change Ownership**

**Clinical Standardisation**

**Strategic Patient Flow Changes**

**Removing Organisational Constraints**

## Improving the Patient Journey

### Emergency Department Workstream

Brain Dolan – Project Manager  
Dr Angela Pitchford, Dr Michael Ardagh, Anne Esson – Clinical Leaders

### Medical Workstream

Sue Teague – Project Manager  
Dr Alan Pithie – Clinical Leader

### Surgical Workstream

Angela Mills – Project Manager  
Mr Martin MacFarlane – Clinical Leader

### Radiology Workstream

Angela Mills – Project Manager  
Dr Andrew Long – Clinical Leader

### After-Hours Workstream

Yvonne Williams – Project Manager  
Assoc.Prof. John Morton – Clinical Leader

### Capacity Planning

Richard Hamilton – Project Manager



FINALIST 2007

Process Improvement Category



## Improving the Patient Journey

### *The tools*

- Key methodologies applied:
  - Lean Thinking (eliminating waste)
    - Toyota Production System
  - Theory of constraints
    - Goldratt
  - Six Sigma (Lean Sigma approach)
    - Motorola



Strategy One



Strategy Two

## The Starting Hypothesis...

- If we could predict daily and even hourly demand; days, weeks and even months in advance...
  - How would this change the current operational paradigm?
  - What would our frontline managers now do better?
  - Could we be **pro-active** rather than **reactive**?
- By using specialist internal and external skills to develop the forecasting and scheduling information – support change management

## Capacity Planning at the Canterbury District Health Board

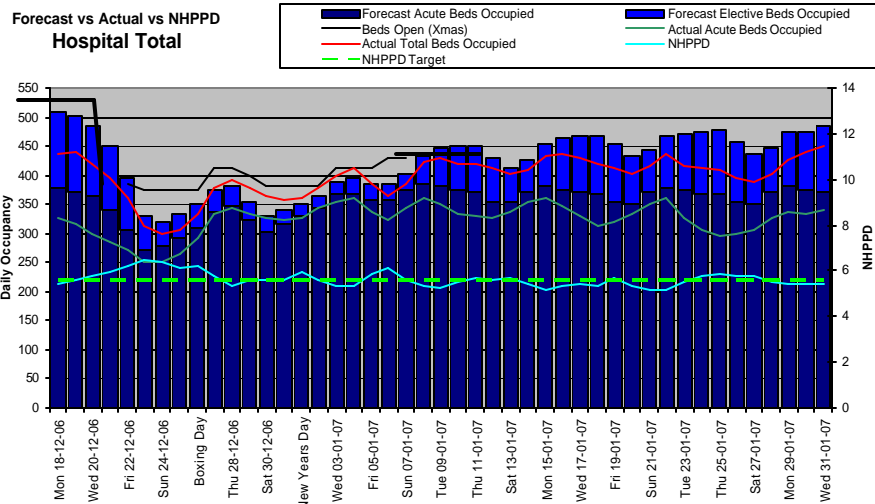
- **The Goal**
  - To match resources to patient demand for acute services; AND
  - Provide elective capacity to meet community need over a twelve month period; WHILST
  - Remaining within budget
- **The Method**
  - Matching resources to volume by:
    - **Forecasting** hourly acute inpatient bed demand
    - **Schedule** resourcing needs to meet demand
    - Assessing impact on elective beds

# Can we Really Predict the Future?

Acute patient demand



# Christmas 06/07



## Capacity Planning - What the CDHB has learnt?

- Predicting demand does work in health
- Having patient information systems is not enough to run a hospital by
- Operational systems which monitor the processes are required
- CapPlan® by Emendo is providing the management tools for better operational decision making
- BUT...this is more than just systems....  
this is about culture change in process management

***We need to change the hearts and minds of the people***

## Improvement Psychology Process

