Driving efficiencies in the practice

A practical guide





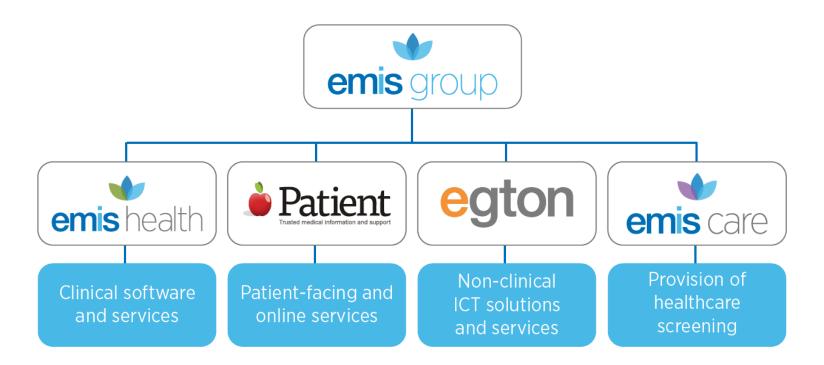
What we'll cover

- Who we are (Egton and myself)
- What is efficiency and why is it important
- How do we make efficiency improvements
- A practice level view
- Continuous improvement
- Summary and questions





Who we are





Who we are

egton focus on non-clinical solutions that support the clinical environment and work with all practices whether Emis, Vision, TPP or Microtest



Edward Bellamy BA (Hons), LL.M., MBCS

Edward is Director of Digital for Egton and has worked across the UK Healthcare sector in IT for 13 years. He has a Masters in Law specialising in Information Technology and has worked for Emis Group for just over a year.

Edward was the instrumental force behind the market leading compliance and operational software, Intradoc247, and is involved with bringing structured GRC to Healthcare.



Overarching message

The overarching message for this talk is to provide a framework for long term decision making given limited resources and increasing demand







What is efficiency?

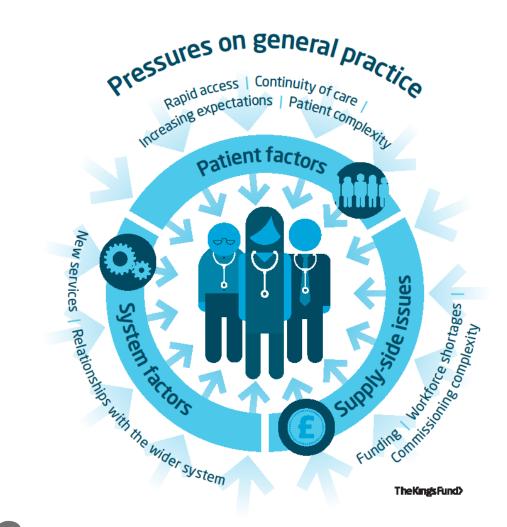
Technical definition

The ratio of the useful work performed in a process to the total energy expended.



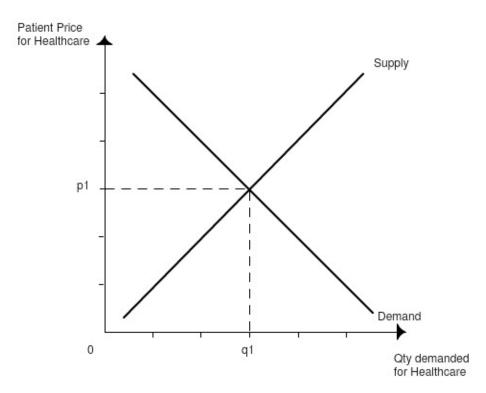








Why does it affect my practice?



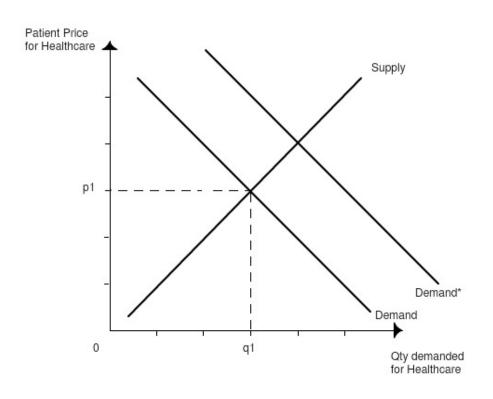


Why does it affect my practice?

Demand side shift:

- Ageing population
- Patient complexity
- Increased expectations
- Traditionally acute setting is tending toward primary care

Good for a time, but finite resources cannot sustain



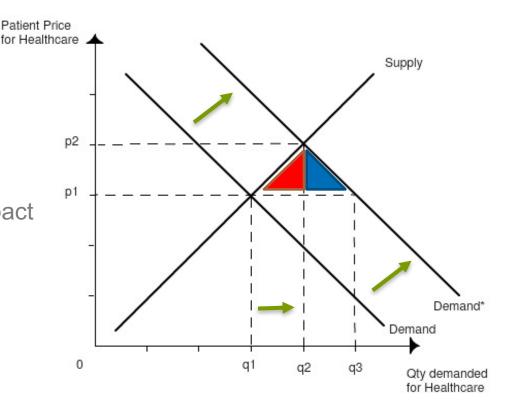


Why does it affect my practice?

The red triangle highlights additional cost into the practice.

Objectives are:

- 1. Reduce cost so that the impact of the red triangle is not felt
- 2. Step changes in service provision









Short term vs Long term change





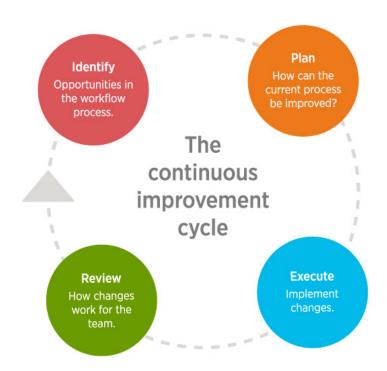
What can I do about it?

General It's important to understand the 'aggregation of marginal gains'. Put simply...how small improvements in a number of different aspects of what we do can have a huge impact to the overall performance of the team.

Sir Dave Brailsford



Continuous improvement





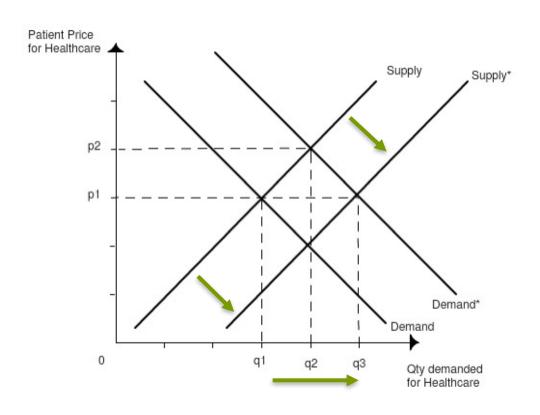
What can I do about it?

Supply side shift:

Step changes in service provision, led by:

- Technology change
- Consumer preference

Effective price point shifts back to p1 at quantity demanded, q3









We can only affect our costs and the supply side curve





Understanding the components

Take a typical patient interaction with your practice...





Jenny's Journey - pre-Consultation

- Jenny woke up not feeling well
- She goes to the practice website and finds the telephone number and calls the practice. After a long wait, she books an Emergency appointment for tomorrow.
- At the practice, Jenny queues at reception to say that she has arrived.
- Jenny is sat in reception for half an hour whilst the clinician finds an available room with a PC





Jenny's Journey - Consultation

- Dr Adamson appears at the door and calls Jenny through to Room 4
- Dr Adamson takes a series of readings from Jenny and puts them to one side
- Jenny is given a prescription and asked to book another appointment which she does at reception
- Jenny goes to the Pharmacy
- Dr Adamson transcribes the notes in to the clinical system







Samantha's Journey - pre-Consultation

- Samantha woke up not feeling well
- She goes to the practice website and finds the telephone number and calls the practice and books a same day appointment
- At the practice, Sam uses the Arrivals unit to say that she has arrived. She is also prompted to fill out a smoking questionnaire





Samantha's Journey - Consultation

- Samantha's name comes up on the arrivals board and she is prompted to go to Room 4 to see Dr Adamson
- Dr Adamson takes a series of readings from Jenny and these automatically are added to the clinical system
- Sam is given a prescription and asked to book another appointment which she does at reception
- Sam goes to the Pharmacy





Both are 'normal' - which is clinically safer?

Samantha's Experience

- Relaxed
- Running on time
- Paperwork on time
- Calm, pleasant manner

Jenny's Experience

- Stressed out
- Running late
- Delays in paperwork
- Frustrated tone





An exercise for you to undertake

We are looking for pinch points, process gaps and superfluous steps.

You will need:

- Post it notes
- Roll of brown roll
- A few hours of key people's time
- Fairy liquid bottle and some sticky backed plastic





Map your processes

INPUT WHO? WRITE YOUR PROCESS HERE **DEPENDENCIES OUTPUT**





egton





Technology is not the answer – its people and process, but...





Technology is a key enabler

How do we respond to pinch points?

In the consulting room – e.g. ABPM

Flexibility in the practice – e.g. Professional Wi-Fi, Portable devices

Paper free working – intranet / systems

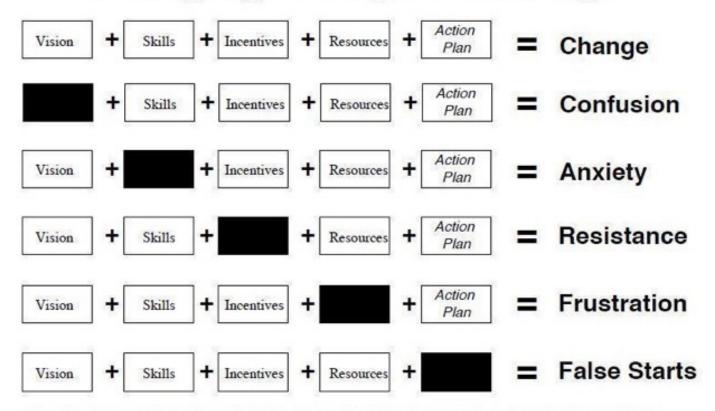
- Document management
- Reduce print requirements

Improved patient flow





Managing Complex Change



Adapted from Knoster, T., Villa R., & Thousand, J. (2000). A framework for thinking about systems change. In R. villa & J. Thousand (Eds.), Restructuring for caring and effective education: Piecing the puzzle together (pp. 93-128). Baltimore: Paul H. Brookes Publishing Co.







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Contact details

Edward Bellamy, Director – Egton Digital edward.Bellamy@egton.net

