

Embarking on the productivity journey

Understand the strategic context: Why do we need to be productive?



"A Framework for Action" highlighted clinical workforce productivity in London as significantly lower than the national average



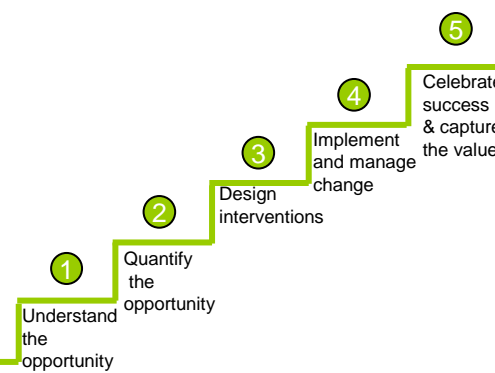
NHS London needs to "support employers to deliver quality care through productivity and innovation"

Kings Fund report: How cold will it be? Prospects for NHS funding 2011-2017

Gaps in funding cannot be filled by tax increases or cuts in benefits – productivity is the only realistic option

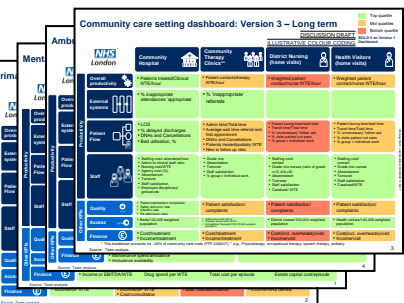
NHS productivity gain required between 2011-2016 is 3.5-7% ~ £22-44 million to compensate for gaps in funding

Five steps to improving productivity



Introducing the productivity dashboard

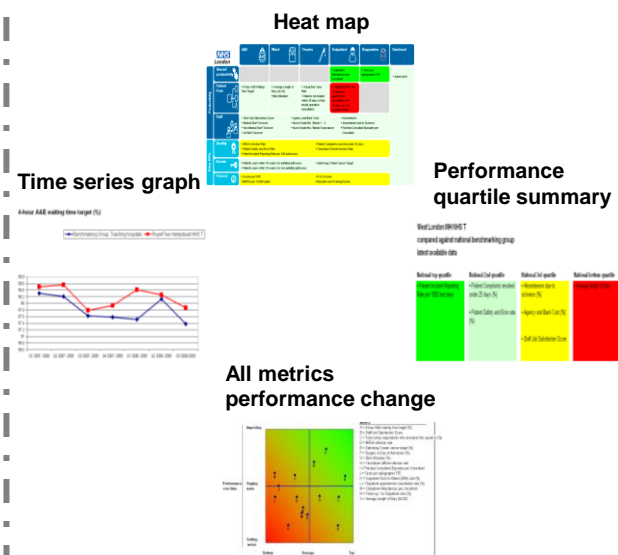
One concept – four different care settings



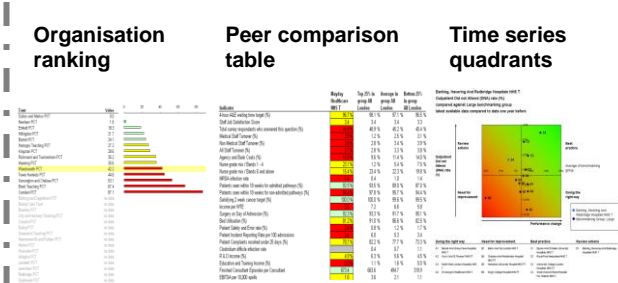
Key contacts:
Jennie Lau
Jennie.Lau@london.nhs.uk
Peter Gimber

Steps 1 and 2: Identify an opportunity and sources of best practice

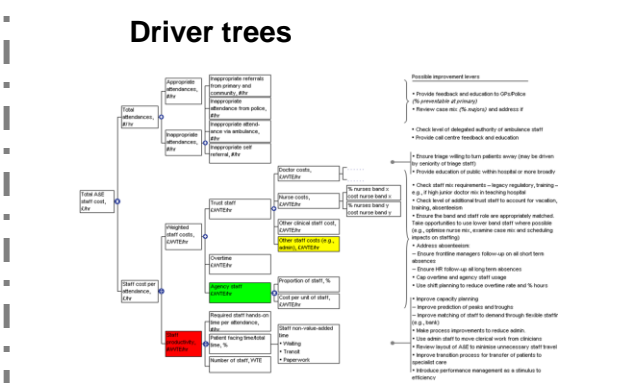
Use the productivity dashboard to identify where strengths and weaknesses are



Benchmark against peers and identify sources of best practice



Use driver trees to identify levers for improving productivity



Step 3, 4 and 5: Design and implement change; Share successes and lessons learnt – best done in a forum

Conduct root cause analysis to identify underlying issues

Root cause analysis

Metric reviewed: Average length of stay is high

Possible root causes of problem	Drill-down on root causes	Potential actions to address underlying root causes	Selection criteria 5=easy/high 1=difficult/low		Score	How will we know if it's worked?
			Ease	Input		
1. Discharge is not on time	a. Late doctors' rounds b. Mis-assessment c. No space in community	a. Bring doctors' rounds forward	4	4	1	
		b. Revise assessment approach	3	3	6	
		c. Improve community capacity – DN & HV	1	5	9	
2. Limited physio services	a. Low number of physios b. Lack of specialist equipment c. Travel issues - physios late back from community	a. Recruit physios	2	5	1	
		b. Invest in additional equipment	3	4	0	
		c. Arrange for patients to attend hospital	3	3	1	

Devise project plan, assign resources, commit to action and change

Change implementation project plan: Delayed discharge

Name of organisation: X Y Z		Opportunity area: ALOS	
1. Underlying root cause relevant to my organisation: Late doctors' rounds			
Selected improvement action: Bring doctors' rounds forward			
Steps I intend to take to implement this action	Owner/lead	Start date	End date
a. Speak with Medical Director b. Check doctors' rota c. Hold meeting with doctors to agree on rounds	Alec Morton	22/05/2009	23/05/2009

Share best practice with peers through productivity clubs, forums, case studies etc



What next?

- 1 Roll out tool to all trusts in London
- 2 NHS London to work with individual trusts on focused areas around productivity. Best practice outcomes to be shared more widely
- 3 Potential further development of the productivity tool