



Lean Healthcare Forum 2006

The Consultant's Perspective

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In the beginning.....

- Every consultant believes he/she is providing a good quality service for each individual patient
- Consultants want to get on with the job of ‘curing the sick’ - the right patient in the right place at the right time and with the appropriate tools available

..... and

- Most consultants and managers believe the only way to reduce waiting times is through waiting list initiatives, more out patient sessions, more beds, more theatre time, more equipment and more staff

Questions - DoH agenda

- How do we achieve:
 - choice?
 - financial stability in a PbR environment?
 - 13 weeks from referral to first appointment?
 - 6 months to commencement of treatment?
 - 18 weeks from referral to treatment?
 - cancer waiting times?
 - 2 weeks, 62 days, 31 days

Experiences

- Clinical Algorithms
- Writing, adopting and implementing local protocols
- Cancer Collaborative & Modernisation Agency
- Clinical Director Surgery & Urology
- Trust Board

Lessons

- Clinicians and managers need to work together
- Lots of excellent work on service redesign
- Silo approach common
- Focus on the exceptions
- Duplication & waste of time
- Organisation with a memory

Challenges

- Create flow from start-to-finish
- Standardise 'routine' work
- Team work not individual
- Need time out for reflection
- Ability to initiate redesign rapidly
- Whole organisation buy-in
- Lean is a continuous process



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