Results

Process measures have been established to monitor the progress of all solutions towards meeting the project objectives.

Objectives

- Patient identified as a high risk case, which may preclude their surgery.
- Patient satisfaction is measured using the results of Patient and Carer Experience interviews. This will be remeasured in January 2017.
- Process measure 3 - Percentage of patients with evidence of interpreter use.
- As the triage guidelines will be revised at the end of 2016, the number of low-risk patients who are triaged to a full PAC is expected to reduce, as these patients can be assessed via a nurse or phone clinic.
- Patient satisfaction is measured using the results of Patient and Carer Experience interviews. This will be remeasured in January 2017.
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- Process measure 4 - Percentage of patients with evidence of interpreter use.
- As the triage guidelines will be revised at the end of 2016, the number of low-risk patients who are triaged to a full PAC is expected to reduce, as these patients can be assessed via a nurse or phone clinic.

Vision for the patient journey

- Evidence based patient information and communication, with interpreter use as required – particularly important for a culturally diverse community.
- Sustained change

- Project team leadership, strong sponsorship and support from clinical leads will ensure implementation of all solutions.
- Solutions have identified owners and sponsors as well as monitoring processes. Solution owners are accountable for reporting monthly to the Steering Committee and updates are provided to stakeholders.
- Solutions will be implemented over three phases to reduce workload and change fatigue.

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Conclusion

- Support and involvement of key clinicians and stakeholders has been crucial to the progress of the My Check in for Surgery project. The availability of relevant data as well as patient and clinician feedback has been a vital element in validating issues and improvements.

Contact

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Acknowledgements

Canterbury Hospital staff, patients and carers, Anaesthetists, Surgeons, local GPs, SLHD HealthPathways Representatives, Steering Committee Members, Hospital Executive, Clinical Redesign Support Managers, Project Team and Sponsors.