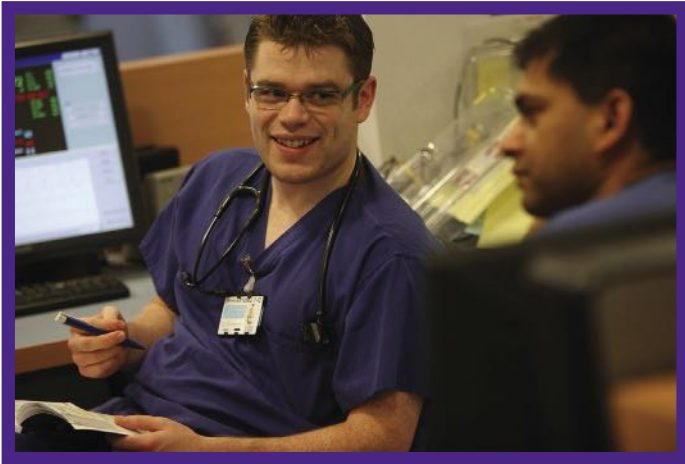


Case Study

How a consultant level dashboard will play a part in helping the Royal Surrey County NHS Foundation Trust create a culture of openness and transparency



"The idea was to try to be more open and transparent about consultant performance and to develop a tool that we could use to encourage consultants to own the data and facilitate learning through discussion."

Taffy Gatawa, Head of Patient Safety and Quality, Royal Surrey County NHS Foundation Trust.

Background

The Royal Surrey County, winner of the CHKS patient safety award 2014, is a leading general hospital serving a population of 320,000 for emergency and general hospital services. With 527 beds and 14 operating theatres it employs around 3,000 staff and sees around 280,000 outpatients a year.

The challenge

As part of its drive for greater transparency, the trust wanted to present consultant level indicators against a range of quality metrics. These metrics included length of stay (LOS), complications, misadventure rate, mortality and complaints. At the same time it wanted to develop an intelligence platform that could be used in dialogue with clinicians.

The solution

Working with a dedicated CHKS consultant, the trust developed a prototype dashboard with information available at individual consultant level. All the indicators, except complaints and incidents, were drawn from existing

CHKS information and benchmarking programmes. Taffy Gatawa, Head of Patient Safety and Quality, says: *"The idea was to try to be more open and transparent about consultant performance and to develop a tool that we could use to encourage consultants to own the data and facilitate learning through discussion. By measuring everyone's performance we felt we could begin to have conversations about variance in performance for the same procedure and where appropriate challenge in a more constructive way. We expect to have the dashboard implemented across specialties as from March 2015."*

The prototype dashboard has been shared in the trust's Quality Accounts workshops with external stakeholders and internally with the medical director and the consultant body. Getting buy in from clinicians is particularly important for the success of this initiative. *"We wanted to get past the all too familiar debates about the accuracy of the data and move to clinicians taking ownership of their own data to ensure good data quality and accuracy," says Taffy. "Once everyone agreed, we knew that peer challenge was a good way to steer improvement."*

The benefits of working with CHKS

The trust's dedicated consultant helped Taffy and the Medical Director decide which basket of indicators should be used in the dashboard and following approval helped construct the dashboard itself.

Other instances where working with CHKS has been beneficial include a query from the local Clinical Commissioning Group (CCG) on readmissions for tonsillectomy. Through use of CHKS data the trust was able to provide an explanation which was acceptable by the CCG. *"We were able to give assurance in terms of the data we had used which was national data, but it also prompted further discussion with consultants about particular procedures,"* says Taffy.

Taffy believes support from CHKS and joint working has been instrumental in helping the trust make significant steps in improving patient safety.



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