

# Sharing improvements across SASH

“A lot of my journey  
has been little things,  
which have make a  
big difference.”

**Rachel Cooke**  
Head of Library and  
Knowledge Services

- Increasing orthopaedic capacity through a virtual fracture clinic
- The effective management of diarrhoea
- Endoscopy efficiencies at SASH

## Working with Virginia Mason Institute

Surrey and Sussex Healthcare NHS Trust (SASH) are part of a five-year partnership with NHS Improvement, Virginia Mason Institute and four other NHS trusts to develop a ‘lean’ culture of continuous improvement that puts patients first.

Over the course of the programme, leaders and clinicians from across SASH have received a wide range of tools, hands on support and coaching, as well as education and certification in lean techniques. This document outlines some of the successful outcomes that have been possible as a result.

**Find out more  
about the  
partnership**

Watch the video





# Creating a culture for improvement at SASH



## Seeing real change in the way we do things

Patient care at SASH has been rated Outstanding by the Care Quality Commission and awarded the highest rating given by the independent health regulator. I know that this is due to the combination of all the hard work and commitment of everyone at SASH to making patient care the best it can and our innovative SASH+ transformation work.

Our SASH+ transformation work, in partnership with NHS Improvement and the Virginia Mason Institute, continues to be embedded. With more and more of our people completing the Lean for Leaders programme and other tailored learning sessions, which provide colleagues from across SASH with the lean tools for change, we are seeing real change in the way we do things at SASH.

I am proud of the commitment and focus that I see and the very real and tangible engagement from our people in being a part of our SASH+ improvements and making a difference to the people we care for and those we work with. Many of the improvements are seemingly simple and the difference they make can be measured and, most importantly, shared across SASH for the benefit of our patients.

SASH+ is an open and inclusive way of working and means ideas for improvement and making change is something everyone can be a part of.

**Michael Wilson CBE**  
Chief Executive  
Surrey and Sussex Healthcare NHS Trust



## ENHANCING LEADERSHIP AT EVERY LEVEL

Through their work with the Virginia Mason Institute, SASH are now able to coach and train their own staff in improvement through the SASH+ improvement methodology.

**206**

have taken part in Lean for Leaders

**16**

have taken part in advanced lean training

**1,893**

have had at least one element of training in the methodology

**Band 4+**

Leaders have ranged from band 4 to the executive roles

## SUCCESS THROUGH ENHANCED LEADERSHIP

### Small changes for big improvements

Rachel Cooke, Head of Library Services and Knowledge Management, explains how in many cases it is the small improvements that can have the most significant impact.



### Measuring for improvement

Nicola Shopland, Divisional Chief Nurse, outlines how measurement can be an invaluable tool to identify areas for key improvements.



# Increasing safety at SASH

## The effective management of diarrhoea

Hospital-acquired diarrhoea is problematic, costly and associated with notable morbidity and mortality. According to a study by Kyne et al, incidences of diarrhoea in a general medical and surgical setting are around 2 for every 100 admissions, highlighting an important issue for hospital staff.

As well as impacting on outcomes negatively, episodes of diarrhoea in hospital can understandably have a significant bearing on the experience and satisfaction of patients, particularly if symptoms are not recognised early. In addition, the risk of infectious patients passing it on to others is a major concern and naturally poses a threat to both the safety and experience of wider patients, especially if they are not isolated as soon as possible.

The early identification of diarrhoea and creation of a timely and appropriate management and treatment plan is therefore essential, and SASH have taken a number of steps to make that possible.

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## THREE KEY WAYS TO DELIVER BETTER CARE FOR PATIENTS



### Recognition

Ensuring all those who are suffering with diarrhoea are identified and managed quickly



### Treatment

Making sure every patient has the most appropriate and timely treatment plan



### Protection

Ensuring all patients with infectious diarrhoea are isolated to prevent the spread of infection to other patients



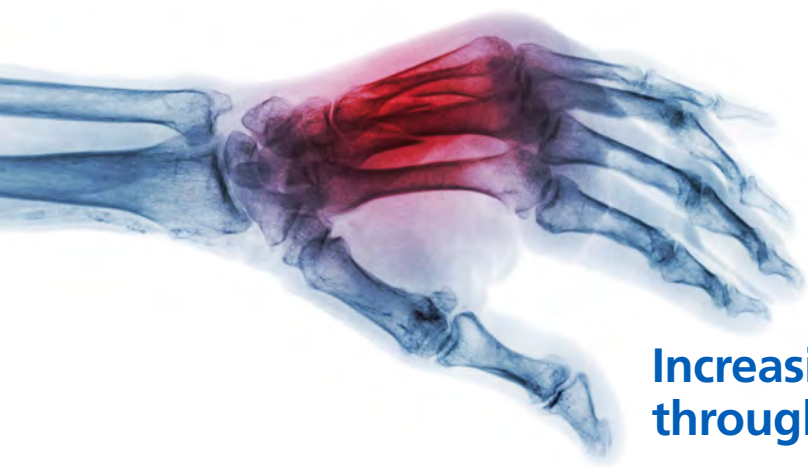
Read the full case study

Click here





# Improving access and flow at SASH



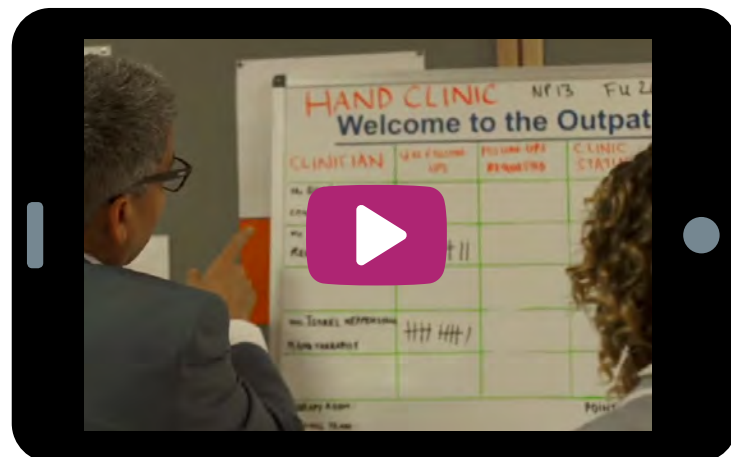
## Increasing orthopaedic capacity through virtual fracture clinic

Through the use of lean tools, Mr Murali Bhat, consultant orthopaedic surgeon, has successfully introduced a new virtual fracture clinic for patients. Now patients are reviewed by Murali virtually. He is able to assess their fracture electronically a week before their appointment and then contact the patient with details of the assessment, advice and the actions they can take to self-manage their healing, which includes links to videos available online, this information is also sent to their GP.

As a direct result of this improvement, more patients are assessed virtually and treatment advice given – to see 25 patients in clinic takes four hours compared to just one hour is assessed virtually. Patients have the expert advice needed to continue their recovery more promptly with less interruption to their personal commitments and daily life.

### Watch the video

Mr Murali Bhat, Orthopaedic Consultant, explains how he has also used the 'rooming in' technique to increase the number of patients seen in his clinic from 12 to 25.



# Increasing value for money at SASH

## Endoscopy efficiencies at SASH

By applying lean tools on their genba, the place where the work is done, our endoscopy service manager and her team have successfully reduced the time between a patient being referred and them receiving an appointment from four to seven weeks to ten days initially and then reduced this even further to the current timescale of within 24 hours.

This improvement has had a really positive impact on both patients and staff. Our team are now able to see more endoscopy patients, which has increased our revenue by over £120,000 so far this year and there has also been a reduction in the level of sickness absence in the team too.

Other savings in additional wastes have also been made; for example, duplicate letters which were being thrown away and now no longer need to be sent has created a saving of 27 reams of paper per year.

**27**  
reams of  
paper saved  
per year

Time  
between patient  
being referred to  
receiving an appointment  
**reduced from 4-7 weeks  
to within  
24 hours**

**£120,000+**  
increase in revenue due to  
more time to see patients



## MAKING IMPROVEMENTS

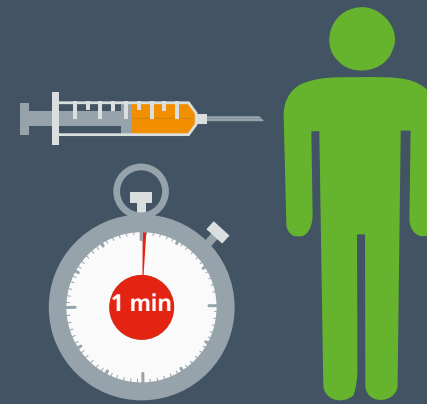
Over 100 improvement projects have been undertaken across the Trust. These have a wide range of aims, such as:



Increasing the number of people who can be seen in the Hand Clinic



Providing therapy to stroke patients more quickly



Increasing the number of people who can receive shoulder injections

To find out more about anything you have read here, please contact the KPO Team via email at:

[sash.kpo.team@nhs.net](mailto:sash.kpo.team@nhs.net)

## BENEFITTING PATIENTS

These projects have generated a large number of positive outcomes, including:

**12 to 25**



The number of patients seen by a consultant in each Hand Clinic has increased from 12 to 25, **meaning patients are waiting significantly less time to be seen**

**79%**



The amount of time taken by physios and OTs to handover on the Stroke Ward has reduced by 79%, **meaning patients can be seen faster**

**7 minutes to 1 minute**



By reducing the preparation time for shoulder injections from 7 minutes to 1 minute, **an additional 1,000 patients can be seen every year**