



Miss Sarah Richards MBChB MD FRCS  
Consultant Surgeon

What does good look  
like?

# Key Elements Required for Improvement to Happen

## *Will*

to do what it takes to change to a new system

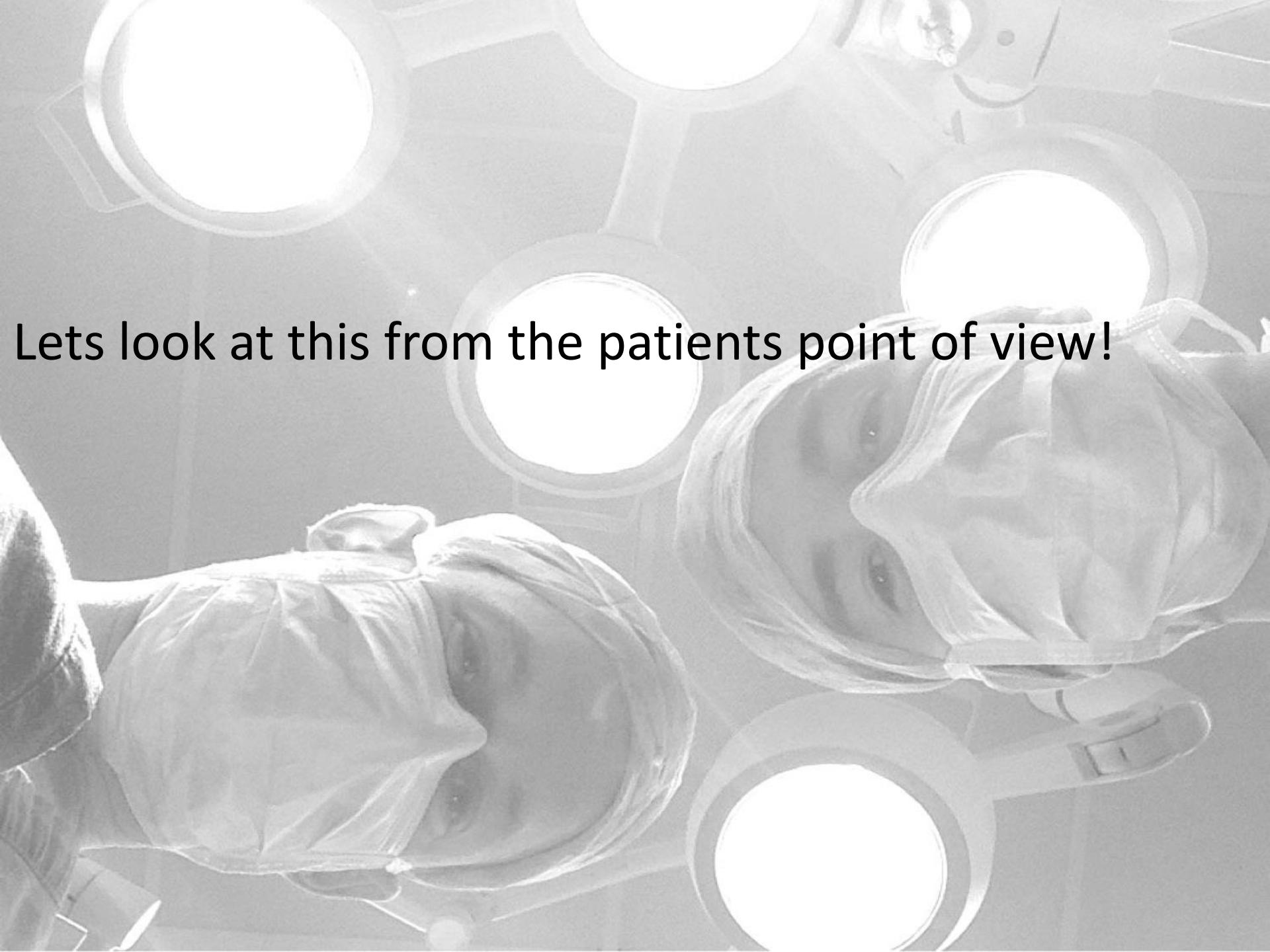
## *Ideas*

on which to base the design of the new system

## *Execution*

of the ideas

Lets look at this from the patients point of view!





## Scenarios

- What would currently happen for these patients in your hospital?
- What would be the ideal way of managing these patients?
- What would be needed to achieve this safely? (people, process, infrastructure)





Darren

- 32years old
- Infected sebaceous cyst on back
- Obese, smoker
- Otherwise fit and well





Ruth



- 41 years old, full time mum
- Referred at 8pm
- 1/7 Right iliac fossa pain
- Afebrile
- Otherwise fit and well



Paul

- 55years old
- Self employed plumber
- Unable to work due to painful inguinal hernia
- Has attended ED twice for episodes of incarceration





Dorothy



- 65 years old
- 2/7 abdominal pain
- CT proven contained diverticular abscess
- CRP 110
- Clinically well





## How Can You Improve?

- Top 5 things on your list?
- Are they realistic?
- Can you use existing personnel and infrastructure just slightly differently?





## Flow

Flow is not about the *what* of clinical care decisions, but about the *how, where, when and who* of care provision.