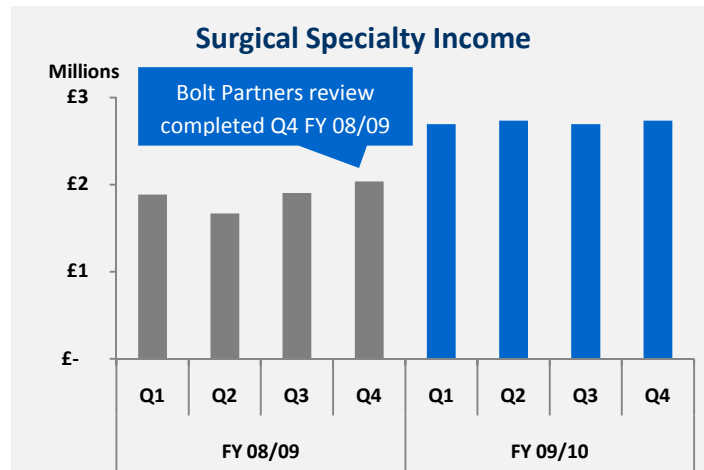


Case Study 3 – Acute Healthcare Surgical Specialty (2008 - 2009)



Background

In 2008 Bolt Partners was engaged to carry out a detailed **specialty business review** of the performance of an underperforming surgical specialty of an NHS Acute Trust. The objective of the review was to work with the clinicians to develop and implement a series of actions to **improve financial performance**.

Key Issues

- **Poor financial and operational data**
- **Poor clinical engagement** and lack of strategic direction for the service
- **Weak management processes** and financial control
- **A disconnect between finance and operational teams**
- **Unnecessary complexity** across multiple sites

Our Approach

Bolt Partners LLP approached the assignment with the target of linking all elements of the service back to their financial impact. In sharing this analysis with the consultants we **worked together to isolate the problem areas** and to **develop action plans** to tackle the issues.



Stage 1 – Detailed analysis

The analysis phase involved:

- **Linking income, activity and direct / indirect costs** to present a more accurate view of the service profitability
- **Observation and data gathering** where it had not been previously available
- **Understanding the causes** of wasted capacity and its direct impact on profitability
- **Pulling together disparate sources of information**
- **Focus on facts**; moving away from anecdotal views
- **Productivity analysis**; producing individual consultant profiles

Stage 2 – Sharing findings

We believe that change in hospitals requires the full **engagement of the clinical team** for it to have a lasting impact.

We therefore invested time to **share and develop the findings with clinicians** which included:

- Spending time verifying the findings with a selection of the clinicians
- Hosting a workshop with clinicians to bring the performance discussions out in the open
- Working further with the clinicians to develop a list of key actions

Clinical engagement grew stronger as the process empowered them to take ownership for the performance and strategic direction of the service.

Stage 3 – Action plan

Using the actions that were derived from the clinical workshops, we **developed the ideas into detailed, workable action plans**. This involved:

- Ensuring that the proposed timing and objectives aligned with broader Trust strategy
- Stress-testing the plans with the people who would be responsible for implementing them
- Involving the whole team

- Phasing the plans to help deliver quick 'wins' through to longer-term strategic direction

Stage 4 – Implementation

Following strategic reviews, it is critical to **provide momentum to implement** the required changes.

We did this through assisting with the implementation of the 'quick win' actions, starting the action plans for the longer-term changes and establishing clear reporting and programme management for the implementation.

The Results

Key achievements included:

- **Significant improvement to service contribution** - driven through a combination of true income and activity improvement, efficiency savings and cost reduction
- **Greatly improved clinical engagement**
- **A clear understanding of service finances** – discussions are now centred on opportunities rather than trying to understand the poor financials
- **Foundation for service development** - clinical leaders are equipped with the financial basis from which to further develop the service with the support of Trust management.