

Kirsty Walker and Kerrie Tisdell from Queen Elizabeth Hospital Birmingham discuss their experience of introducing Mölnlycke® procedure trays from the procurement and clinical viewpoints, respectively.

'The set-up process used to be very longwinded and could easily take 25 minutes per procedure. Today, gathering the Mölnlycke procedure trays for all procedures takes about 10 minutes.' Kerrie

Rationale for introducing Mölnlycke procedure trays

Mölnlycke surgical procedure trays are customised trays that contain all single-use items needed for a specific surgical intervention. At the Queen Elizabeth Hospital Birmingham, the move to using procedure trays was driven by the desire to decrease the number of consumables ordered as individual components; lower the time needed to select, open, and set them up for every operation, and reduce overall costs for both clinical and procurement teams. Minimising the amount of waste was another key factor.

Previously, a member of the theatre staff had to pull each individual component from the shelf for every case on the surgical list, place them all in a bag, and leave these outside the theatre with the trays. The setup for each case could take around 25 minutes, and often involved staff preparing for the first morning case the night before. If a procedure was postponed, the bag was kept in the clean room until the following day. If the procedure was cancelled, the items were returned to the store for use in a later operation.





'The results of the OREPP report showed the amount of time we could save by not having to pull each item from the shelf, in the number of individual components we needed to order, and the total number of orders.' Kirsty

Making the change: the Mölnlycke Operating Room Efficiency Partnership Programme™ (OREPP)

This programme is designed to identify potential efficiency savings from the introduction of procedure trays. As a first step at Queen Elizabeth, Mölnlycke, together with procurement and theatre staff, identified the main objectives and challenges, and potential areas where improvements could be made.

Mölnlycke collected and analysed the data on the current set-up procedure, and provided a detailed report on the potential efficiencies that could be achieved after the introduction of procedure trays. More specifically, it illustrated how the rationalisation of suppliers and the number of orders processed and stored, and not having to pull individual items, can lead to time and cost savings.

The report predicted a reduction of over 100,000 packages

which equates to a waste reduction of 400kg*

*Over the course of one year

By calculating the cost per tonne for disposal of clinical waste, procurement could see the financial impact of procedure trays through reduced wastage.



Benefits following the introduction of procedure trays for the hospital and patients

Over 700 procedures have been completed in the nine months since the trays were introduced. Overall set-up time has decreased from around 25 minutes per case to 10 minutes in total. Today the staff member collects all trays for the list and leaves them outside the operating theatre, and no-one has to prepare the trays the night before. The shorter set-up time has also led to shorter turnaround between operations, because the scrub nurse now has very few individual packs to open in theatre, meaning that the waiting time for patients prior to an operation has decreased.

'The switch to procedure trays has seen time used more efficiently, and there has been minimal disruption since using the packs.' Kerrie

The changeover to Mölnlycke trays went very smoothly. While the theatre staff were willing to try something different, the instruments and consumables have actually not changed, and surgeons still have the equipment they're familiar with for a specific surgery. The procurement experience was similar: because the individual components haven't changed, there's been no need to obtain clinical acceptance. The same products are being used, just more efficiently.

'The team has seen
efficiencies in terms of
reduced cost, time, and
waste since we started
using the procedure trays.'

Kerrie





The Mölnlycke portal

This is an online management tool that allows users to build, analyse, and change tray contents, and to estimate the cost incurred.

'My favourite feature of the portal is being able to view exactly what's in the packs; for example, if a member of staff asks what size swabs or needles the pack contains, it's easy to find the answer.' Kerrie

The portal is simple, intuitive, and easy to use and has been compared to an online shop, where you can browse the items and choose the ones you need.

Other useful features include details of how much stock is currently held and how long it will last. The portal also gives usage statistics for different items and forecasts for every type of pack used by the hospital. Everyone with access to the portal can check the status of an order and its expected delivery date.

'You can look at new products and those that other hospitals are using, to see whether any of them might be useful for your own packs.' Kerrie

Since the introduction of the trays, the clinical team has used the portal to add items or change tray content. Procurement has used the portal to help approve amendments to existing packs, and to work out how these packs can be tailored when considering the introduction of the trays into new areas of surgery, instead of starting from a blank page.

'My favourite part of the portal is the usage data, the ability to see how much stock the warehouse holds, and the ability to forecast against previous years.'

Kirsty



The decision to switch to procedure trays

During the transition, the Mölnlycke team has provided continuous support as well as knowledge and expertise during the building of the trays. It worked with the hospital team to ensure that all components of the tray were correct and the usage figures accurate. The Mölnlycke Account Manager has visited the hospital several times and has always been available to talk directly or answer e-mails to make sure that everyone is happy with the packs and their content and to check whether any changes need to be made.

Although their reasons for introducing Mölnlycke procedure trays differed slightly, both procurement and the clinical team experienced cost reduction, time savings, and reduced wastage. The switch to trays was accomplished seamlessly, with minimal disruption, and Mölnlycke has provided invaluable knowledge and expertise throughout the transition and over the longer term.

Find out more at www.molnlycke.co.uk

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