



FOUREYES INSIGHT

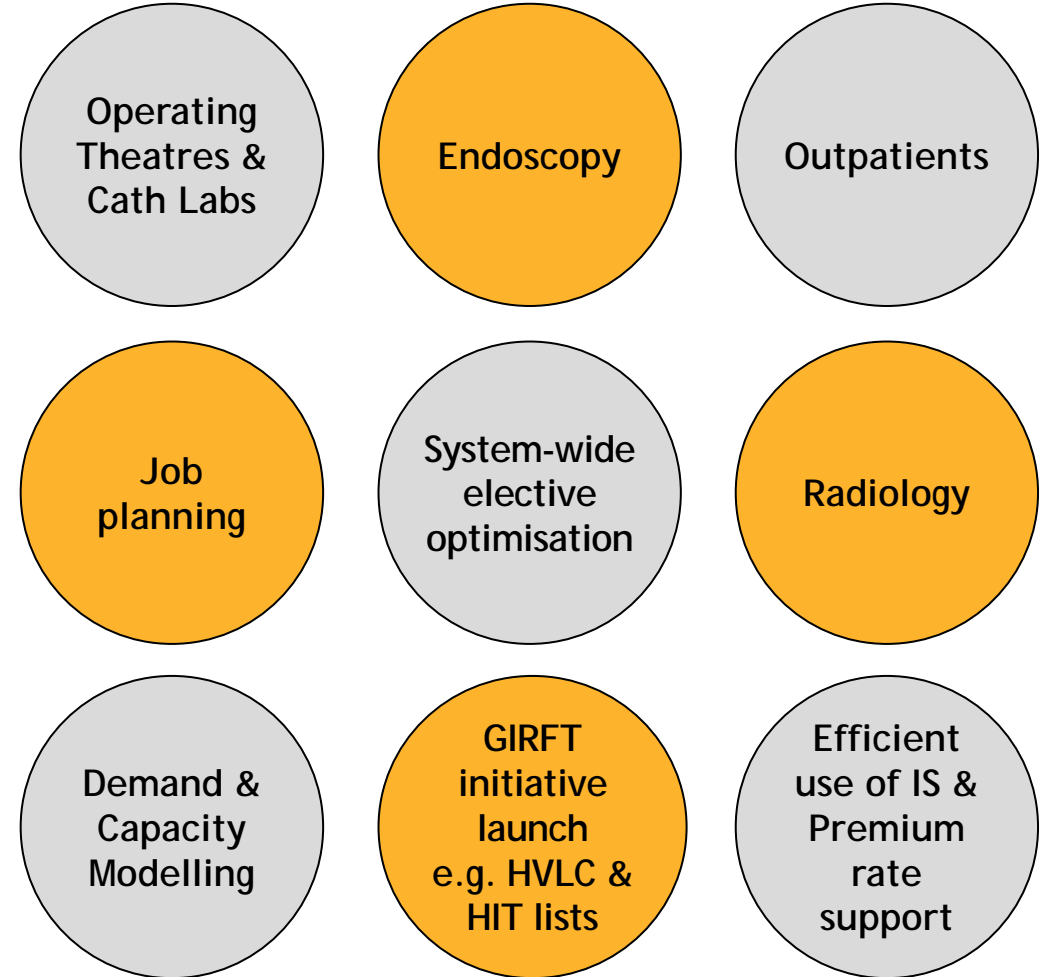
Analysis of NHS Elective Theatre Performance
during the Covid-19 pandemic

June 2021

Who we are & what we do

Founded in 2014, we are a healthcare software and services company with a range of product offerings designed to:

- ✓ improve operational efficiency
- ✓ maximise the use of available capacity
- ✓ safely & quickly reduce waiting lists



Key Elective Theatre Numbers: Nov 2019 - Feb 2020 (Baseline) vs. Nov 2020 - Feb 2021 Comparison

Nov 2019 - Feb 2020

Nov 2020 - Feb 2021

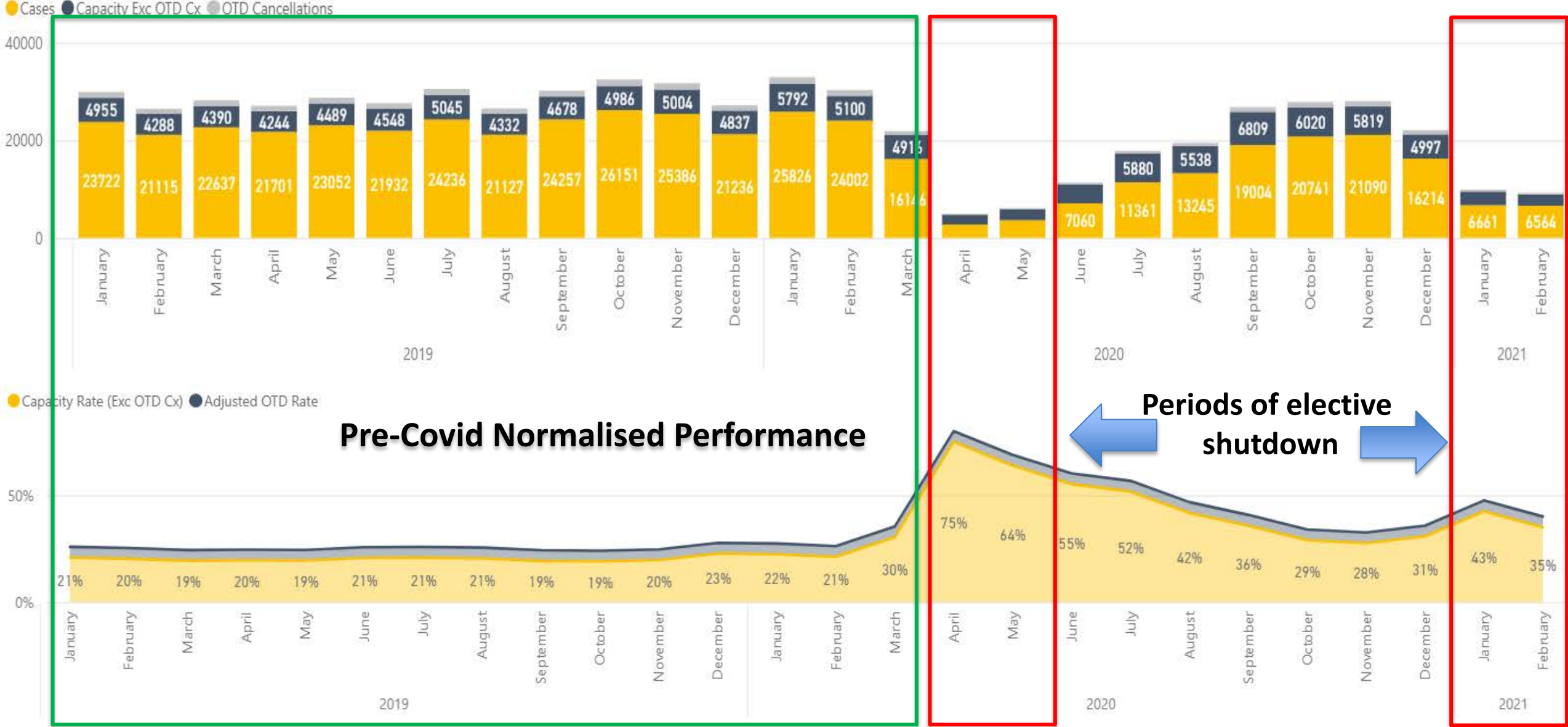
Variance

20,431	# of LISTS	11,428	Decreased by	9,003
74,739	# of CASES	37,998	Decreased by	36,741
2.7	Average Case per List (ACPL)	2.4	Decreased by	0.3
26% (19,729 cases)	Additional case capacity across all lists	36% (13,588 cases)	Increased by	38%

Elective Theatres: Comparison of the two lockdown periods - 2020 vs. lockdown 2021

April - May 2020		Jan - Feb 2021		Variance
1,616	# of LISTS	3,092	Increased by	1,476
4,406	# of CASES	10,550	Increased by	6,144
1.7	Average Case per List (ACPL)	2.5	Increased by	0.8
76% (3,375 cases)	Additional case capacity across all lists	44% (4,671 cases)	Decreased by	42%

January 2019 to Feb 2021: Regional Performance & Capacity



Pre-Covid Normalised Performance

Periods of elective shutdown

Pandemic Impact - High Level Specialty Analysis

46%

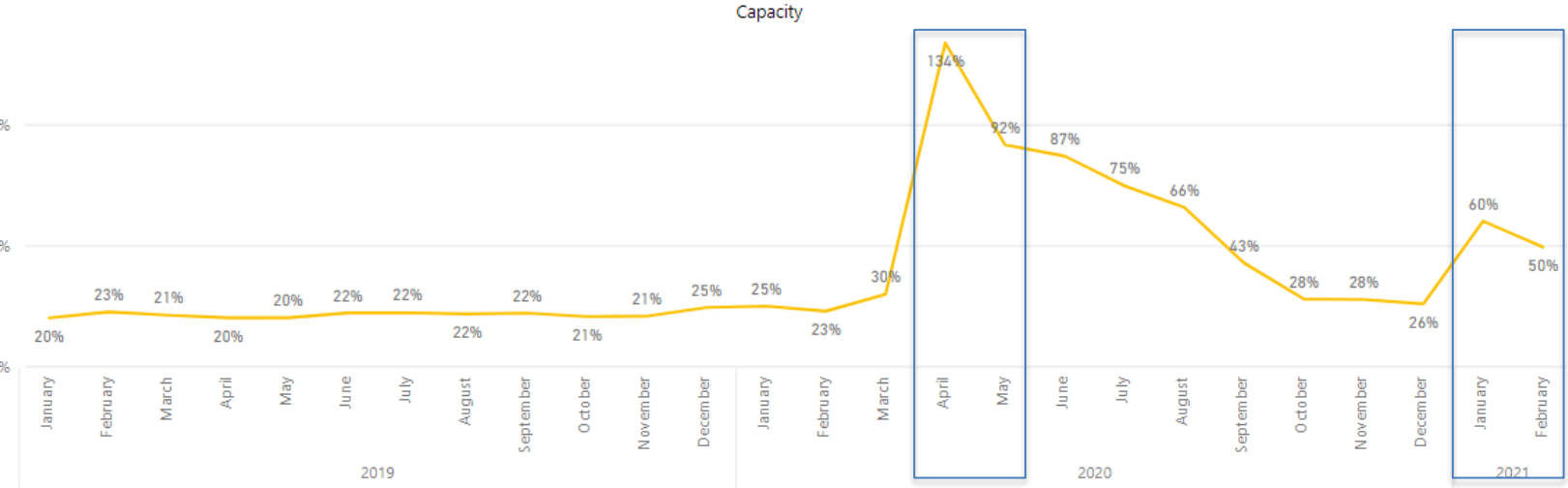
of unused capacity
on lists that ran
could be found in

3 Specialties

- Orthopaedics
- Ophthalmology
- Urology

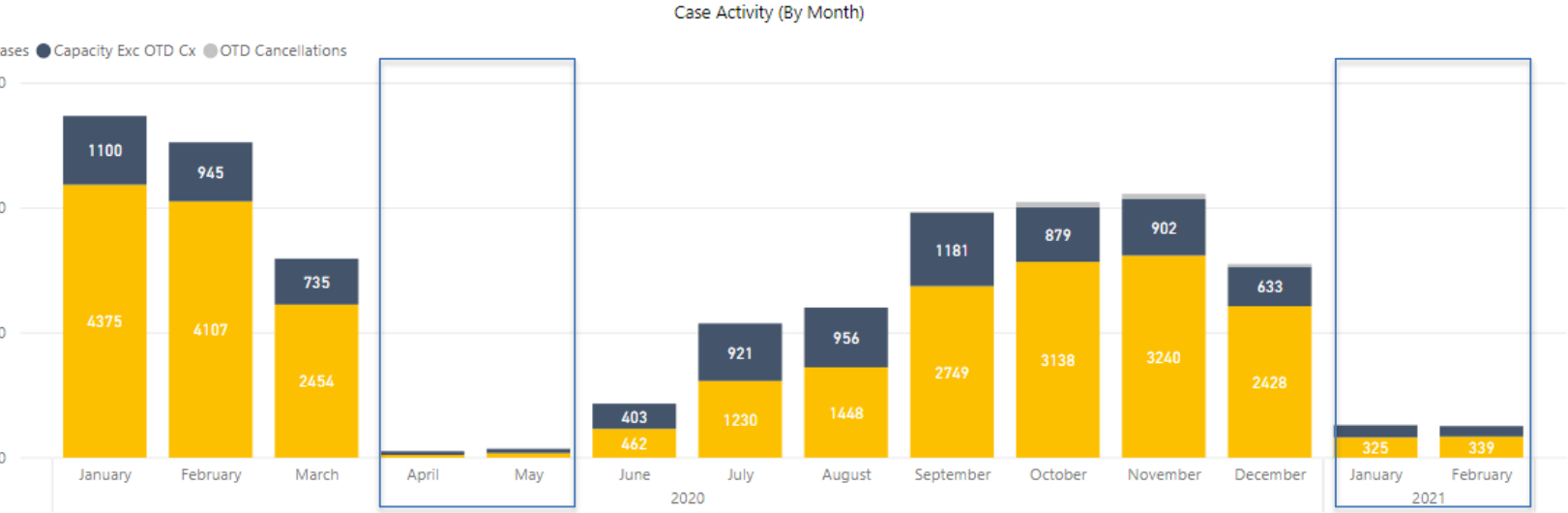
- 85% of waiting lists are made up of cases across these three specialties
- To ensure recovery is accelerated we must find a way to complete more Orthopaedic & Urology activity in a Daycase setting

Orthopaedics - Elective Theatre Performance & In-List Capacity



The graph on the left shows the average **additional capacity available as a % of the cases actually delivered each month in Orthopaedics** across the region

There was a significant increase in available in-session capacity across 2020 peaking during the first shutdown. This needs to be considered against the lower volume of activity during this time as shown in the graph bottom left.



This specialty was seriously effected by both elective shutdown periods but more activity was completed during the second period.

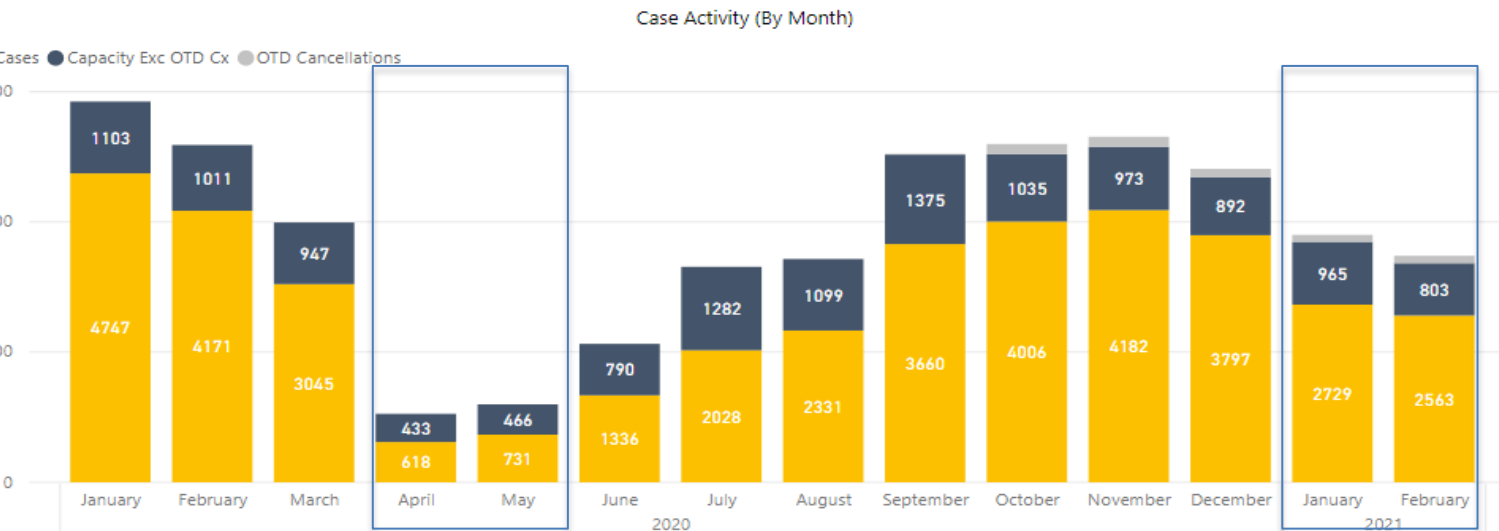
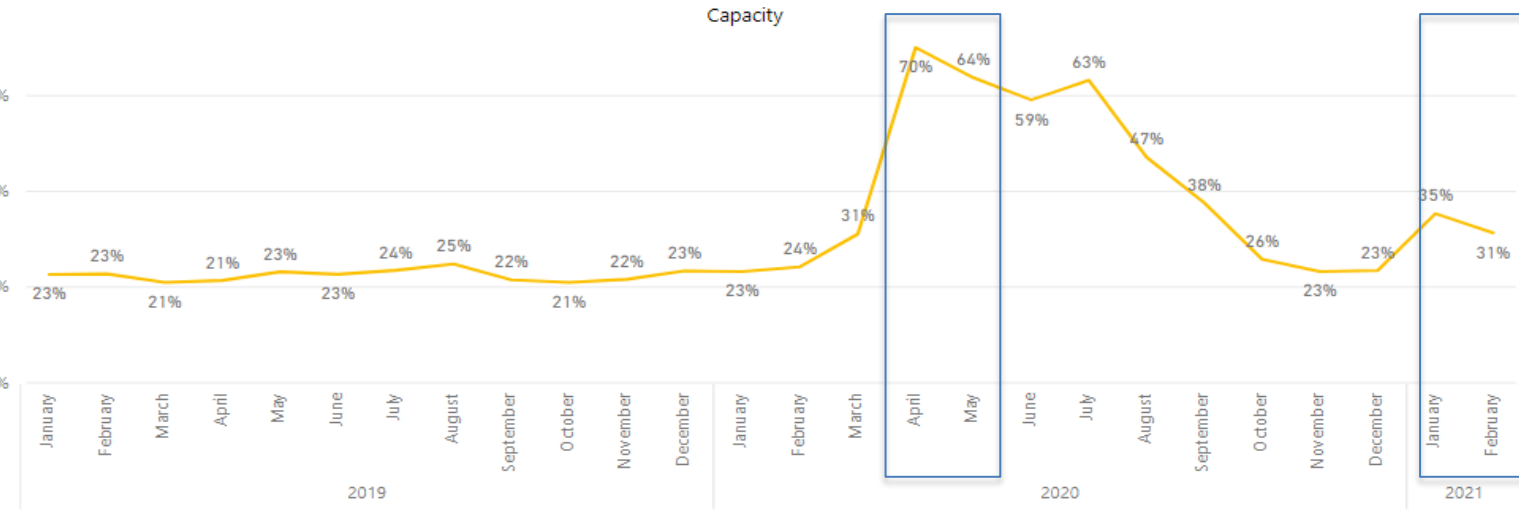
The graph on the left shows the **number of elective theatre cases completed per month** in the yellow portion of the bar. The blue portion represents the number of additional cases which could have been completed on each list.

Ophthalmology - Elective Theatre Performance & In-List Capacity

The graph on the left shows the average **additional capacity available as a % of the cases actually delivered each month in Ophthalmology** across the region

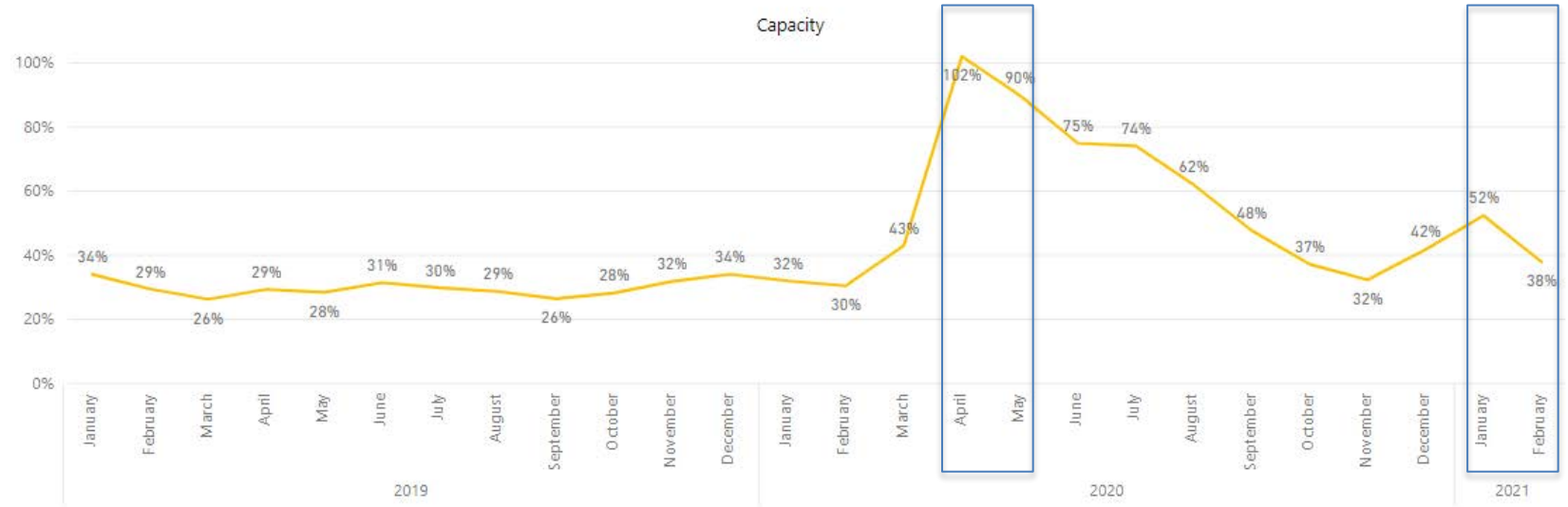
There was a significant increase in available in-session capacity across 2020 peaking during the first shutdown. This needs to be considered against the lower volume of activity during this time as shown in the graph bottom left.

Ophthalmology has been able to deliver a significantly greater volume of activity in the second shutdown compared to the first, including a much higher level of in-session utilisation.



The graph on the left shows the **number of elective theatre cases completed per month** in the yellow portion of the bar. The blue portion represents the number of additional cases which could have been completed on each list.

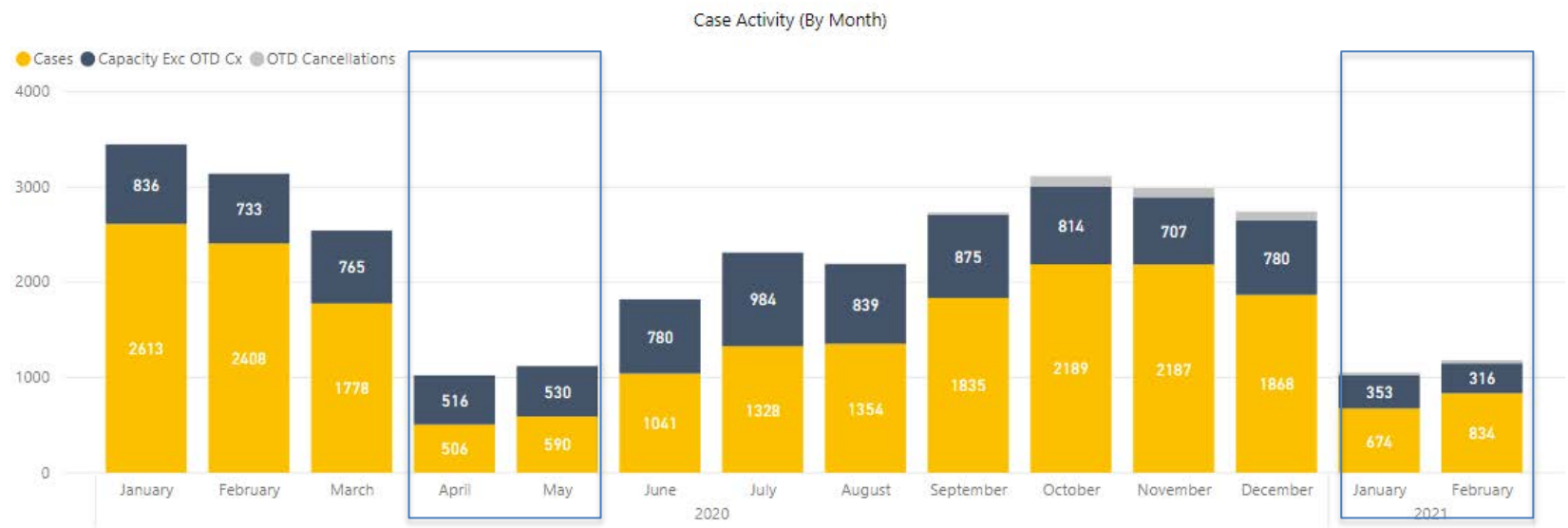
Urology - Elective Theatre Performance & In-List Capacity



The graph on the left shows the average **additional capacity available as a % of the cases actually delivered each month in Urology** across the region

There was a significant increase in available in-session capacity across 2020 peaking during the first shutdown. This needs to be considered against the lower volume of activity during this time as shown in the graph bottom left.

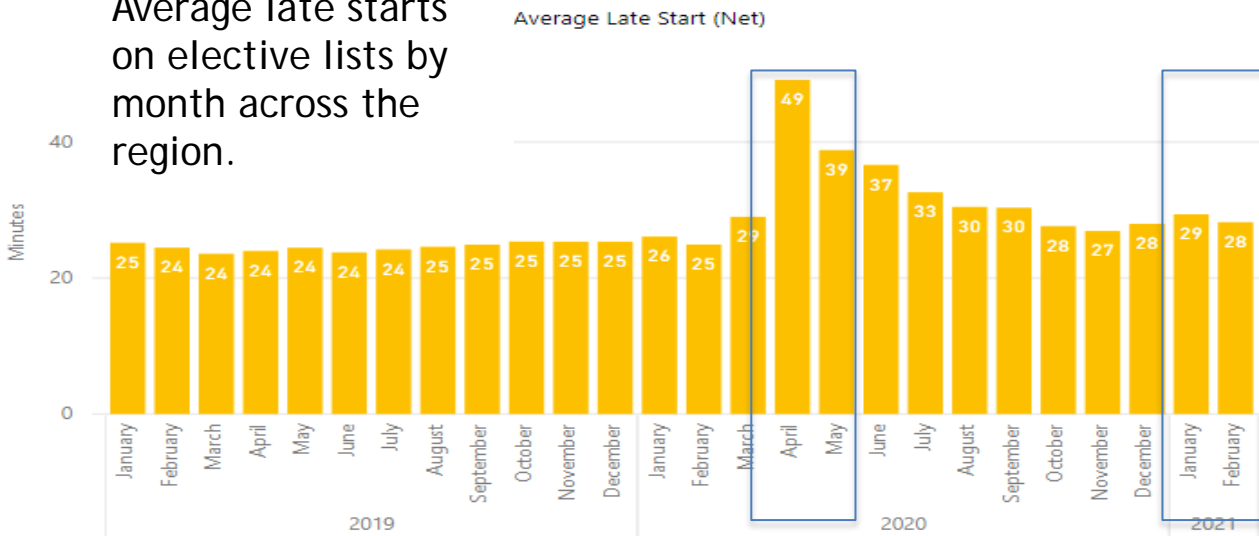
Urology has delivered similar volumes of activity across both shutdown periods but the analysis suggests improved in-session utilisation with slight improvements in touchtime utilisation and cases per list when comparing shutdowns.



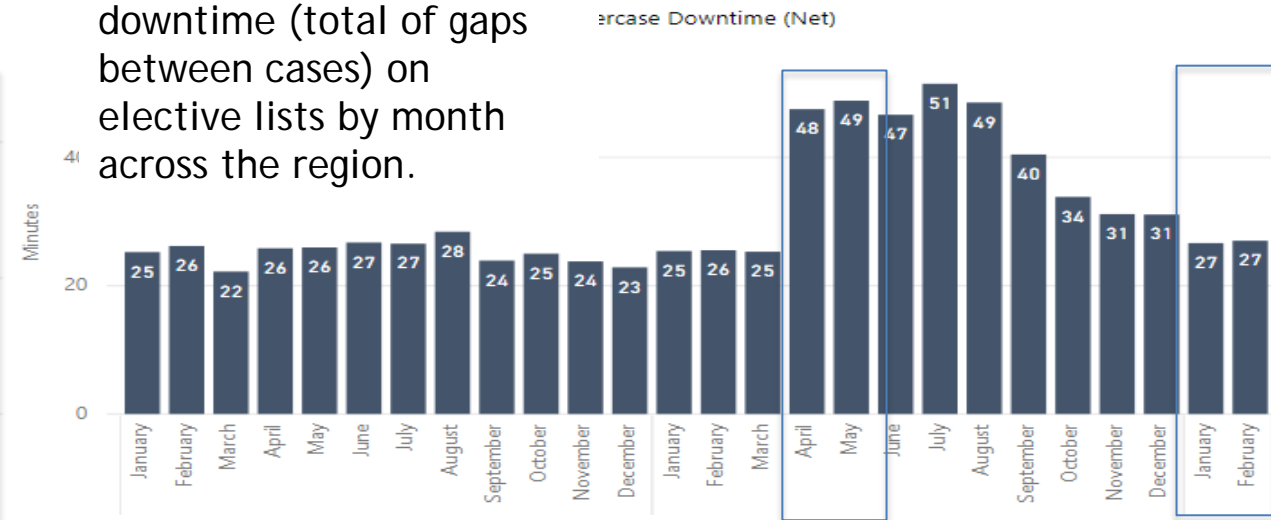
The graph on the left shows the **number of elective theatre cases completed per month** in the yellow portion of the bar. The blue portion represents the number of additional cases which could have been completed on each list.

January 2019 to February 2021: What's driving unused capacity?

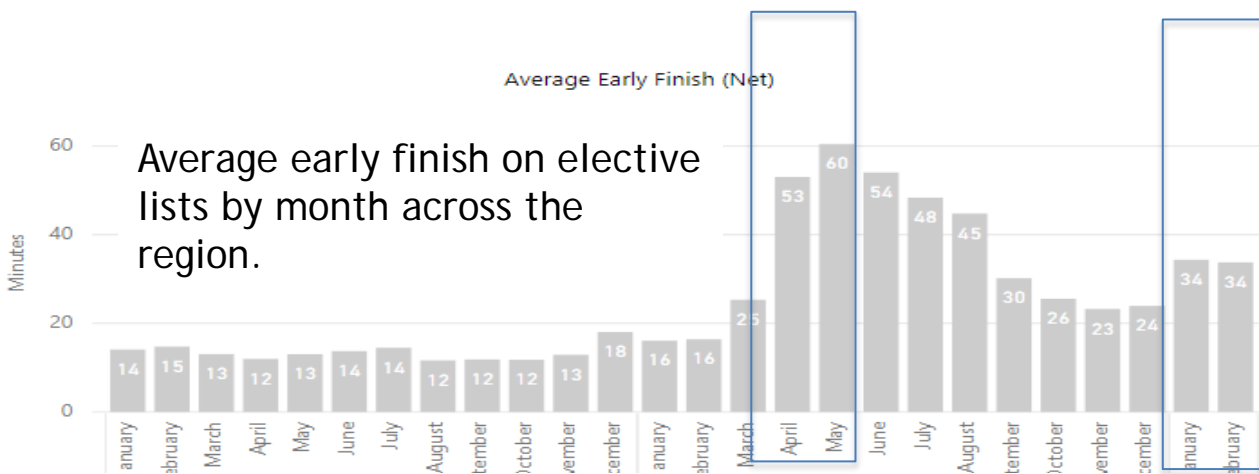
Average late starts on elective lists by month across the region.



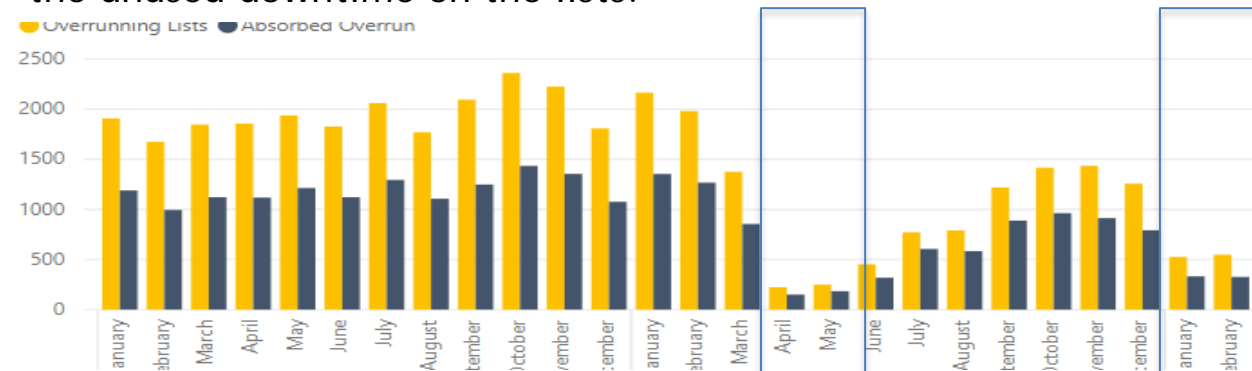
Average total intercase downtime (total of gaps between cases) on elective lists by month across the region.



Average early finish on elective lists by month across the region.



Number of lists that overran (blue) against the total number of overrunning lists (yellow) which could have been absorbed within the unused downtime on the lists.



There was a marked improvement in in-session performance during the second elective shutdown compared to the first although there is some way to go to return to pre-COVID levels of performance.

Recovery Consulting Engagements

Consistent themes adversely affecting elective recovery in the UK region

Late Starts

**Pre-operative
Assessment
Capacity**

**Inefficient List
Booking Processes**

**Inconsistent List
Duration**

**On-the-Day
Cancellations**

**Insufficient Day
Case Capacity**

**Inflexible
Theatre
Timetables**

**Incongruent
Theatre &
Consultant
Capacity**

Analysis Offer

If you would like Four Eyes to analyse your theatre data please contact Four Eyes and Gizelda Zubi via email using:

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