NHS

Online library of Quality, Service Improvement and Redesign tools

Reducing cancelled operations

NHS England and NHS Improvement

Reducing cancelled operations

What is it?

Cancelled operations are distressing and inconvenient for patients as well as being a waste of time and resources. Using this tool will help you to identify the different types of cancellation and understand the reasons for them. This will enable you to tackle cancellations appropriately and improve the throughput of patients along the pathway.

Eliminating cancellations reduces rework and increases the flow of patients through the referral to treatment pathway.

When to use it

If you notice that you have a high number of cancelled operations, you should use this tool to help you pinpoint problems in the patient pathway well before the point of operation.

Lean thinking describes eight types of waste (**Lean – Ohno's eight wastes**). A cancelled operation causes several types of waste.

How to use it

There are three types of cancellation:

1. **Hospital (non-clinical)** – ward beds unavailable, consultant unavailable, emergencies/trauma, list overrun, equipment failure/unavailable, theatre staff unavailable, ICU/HDU beds unavailable, administrative errors, etc.
2. **Hospital (clinical)** – operation unnecessary, pre-operative guidance not followed, patient arrived with illness, pre-existing medical condition, etc.
3. **Patient** – DNA, operation not required, unfit for surgery, appointment inconvenient, etc.

Consider the following actions and possible ways forward:

- Tackling operating list overruns.
- Reviewing consultant and theatre staff availability.
- Scheduling emergencies and trauma.
- Dealing with equipment failure and availability.
- Understanding and reducing patient cancellations.

A useful four-stage approach to understand and tackle cancellations is:

1. **Planning and management**
   Set up management structures: agree information requirements, management policies and procedures
2. **Diagnosis and analysis**
   Monitor performance using key performance indicators (KPIs) and diagnose and analyse problems using diagnostic tools ie **process mapping** and **statistical process control (SPC)**
3. **Improving operating theatre performance**
   Redesign services to improve the patient experience, optimising human resources and improving elective and emergency surgery
4. **Scheduling**
   Schedule operations to make optimum use of resources and reduce the risk of cancelled operations.

What next?

Preoperative assessment and planning will help you reduce cancellations as many are due to preoperative systems that need improving. **Root cause analysis using five whys** will help you find the root cause of cancellations.