

Prince in Wales: evaluating implementation case study

Rationalisation and transition are becoming ever more common terms found in the pathology lexicon. Here, Simon Kimber reports on the approach to change adopted by workers in South Wales.

Pathology services are under increasing pressure currently from various challenges and uncontrollable drivers. These include the need to save money, the necessity to continue delivering a safe and effective service to clinicians with diminishing resources, and the ongoing need to comply with Clinical Pathology Accreditation (CPA) guidelines. Additionally, many laboratories are now undergoing the move towards a rationalised pathology service and find themselves in a significant period of transition as they seek to implement a 'hub and spoke' solution across multiple sites.

And so it was that the Abertawe Bro Morgannwg University Health Board (ABM UHB), an amalgamation of the former local

NHS trusts at Swansea and Bridgend, undertook a consolidation of four pathology services at Morryston Hospital, Singleton Hospital, Neath Port Talbot Hospital and The Princess of Wales Hospital at Bridgend. To add to the challenges faced by the pathology services, there was a procurement project undertaken by the haematology department that was reaching its conclusion after a long and difficult process.

The tendering process and subsequent purchasing decision is a significant undertaking in itself but the implementation following the tender is another journey entirely and, with this in mind, Dr Roger Munro, who had retired from his 'day job' in the haematology department, was asked to

take on the role of project manager to lead the procurement and implementation across the newly formed (consolidated) pathology service.

SUPPORT REQUIRED

The overall objective for the project was simple as far as Roger was concerned, to ensure that, at the conclusion of the procurement and rationalisation, the pathology service was able to deliver to the trust board what it had promised in terms of a modernised pathology service that was fit for purpose. As Roger explains: "We realised very early in the process that the successful bidder should be able to help us meet our challenges, not just in the provision of an analytical solution, because we weren't simply dealing with a change of technology but were looking at a change of working practice as well."

With this in mind, Roger made sure that the response documents from bidders during the procurement process included a detailed implementation plan. This had to include timelines and target dates for completion, as well the fine detail of delivery, installation, training and support. As far as the laboratory was concerned, the more support the successful vendor could provide then the less pressure there was on the laboratory.

PRINCE2

The reconfiguration of the pathology service saw the laboratory at Morryston become the designated hub laboratory, with the remaining sites processing urgent samples only. This meant some potential building work locally to transform the Morryston laboratory and a change of practice in Singleton, Neath and



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Bridgend, so a broad and detailed approach to the project management was required. It was at this point that the successful vendor (Sysmex) delivered a project plan for the implementation based on PRINCE2, which, according to Roger Munro, was a very positive step: "PRINCE2 was the perfect approach to the project management and implementation and took account of every element that would be needed to make the implementation run smoothly and on time."

As a project management tool, PRINCE2 is not new but is often disregarded, originating as it does from software projects, and is often deemed inappropriate for a largely technical project; however, the opposite was true for the Swansea challenge. The purpose of PRINCE2 is to provide a project management method that can be applied regardless of project scale, type, organisation, geography or culture. This is possible because PRINCE2 is based on principles that are universal, self-validating and empowering. These principles originate from lessons learned from other projects (both good and bad); they provide a framework of good practice for those involved.

Within this framework there are six variables (ie costs, timescales, quality, scope, risks and benefits) that need to be addressed, and the Swansea project was no exception: These had to be addressed continually and in parallel throughout the project, which is broken down into stages, and the stage-by-stage approach makes the project more manageable by providing control points at appropriate intervals. At the end of each stage, the project's status is assessed and the plans reviewed to ensure that the project (in its current form) is still viable.

APPROACH IMPACT

So much for the theory. How did this actually translate in the project that Roger Munro was leading? He explains: "I really liked the approach offered by PRINCE2. We established a working party very early on and all tasks were assigned to a member of this team, which included representation from each laboratory as well as from finance, legal and estates. There was also one research and development (R&D) individual whose sole responsibility was to ensure compliance against latest guidelines, legislation, due process and ethics."

Roger is also keen to point out the importance of communication: "Communications were always prompt and frequent but with the right information at the right time. There was a weekly review with the company every Monday morning, so we were always completely up to date with progress. PRINCE2 also meant that issues were identified before they arose and mitigated against with appropriate contingency."

So what then was the impact of the PRINCE2 approach? Roger puts it very succinctly: "The installation and implementation of the new equipment went like clockwork. On the day itself the engineers, product specialists and IT specialists were all on the respective hospital sites at the right time and all did their jobs very well." Once the new equipment was installed, there was a degree of validation to undertake



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where dissimilar technology had been used previously, and this was facilitated with a 'turnkey' validation programme provided by the supplier, which included the required full statistical analysis.

Roger was also keen to highlight the supplier's accommodating approach to training and support: "The installation and implementation took place in the middle of summer, which is a difficult time for laboratories due to staff shortages that are incurred during the holiday period. This meant that we were often changing the training plans at short notice, but the supplier was very flexible and supportive, which meant that the staff training programme was completed on schedule."

The project management continues post-installation with quarterly review meetings to assess key performance indicators such as technical breakdowns, maintenance records, reagent usage, wastage and costs. This is all part of the end-to-end approach to project management that PRINCE2 offers.

SEAMLESS DELIVERY

So, did the pathology directorate deliver on its promise to the health board? Roger is in no doubt that it did and, just as importantly, the modernised pathology service was delivered seamlessly due to the approach to procurement and implementation. As he puts it: "The seamless continuity of the service says more about the successful implementation than anything else. None of the pathology service users realised that anything had happened, and that says more about the success of the project than anything." ■