

ELIMINATE DUPLICATE LETTERS SENT TO GP SURGERIES – ENDOSCOPY TEAM, 2019



Team members: Emma Rothwell (far right) with Head of Endoscopy Nurses, Wendy Kentish (centre) and Clinical Director, Louise Langmead (far left).

Goal: To stop sending paper copies of endoscopy reports to GP surgeries in Tower Hamlets, in addition to electronic copies.

Background:

At the start of the competition **all** endoscopy reports were being printed and mailed to GPs, despite reports for patients with a GP in Tower Hamlets also being sent electronically. This duplication was identified as an area of waste in the department.

Approach:

As a baseline, the reception team logged the amount of time spent posting out all the paper reports that were printed each day over a 9-day period. Data was collected on the number of local reports for Tower Hamlets GPs and the number for GPs located outside the Tower Hamlets area (that still needed to be sent by post). Once this data had been collected, the nursing team were asked to stop printing all local reports. Data collection was then repeated.

Results:

Of a total of 340 reports generated, **153 local** reports were printed and posted unnecessarily **over 9 days**, an **average of 17/day**. **After** the change was introduced **zero** local reports were printed unnecessarily; this demonstrated that the introduction of the new system was successful.

Environmental benefit	Saved 1477 kgCO₂e per year , mostly due to the reduction in delivering reports to GP surgeries.
Social sustainability; benefit to patients, staff and community	Reduction in low value work (printing, enveloping reports) for team and reduction in the frustration of purposeless duplication of work. The manager reported that it built the team's confidence in ability to and benefit of making changes in working practices.
Financial benefit	Saving £ 3,357 per year in resources, mostly due to savings in postal costs. Financial savings due to more efficient use of staff time are not included in this figure so savings are potentially greater.
Clinical outcomes	Not applicable.