

5th ERAS UK Conference 2015

Chairs: M Scott, R Barlow, N Francis

Speaker: David McDonald



Delegate: Thank you very much for your talk. We are in Golden Jubilee, working in the Thoracic surgery department. Is this database ready for us to go? Our ERAS nurse is telling us that you are trialling it for colorectal first.

David McDonald: Yes, so when we looked at the national data toolkit and trying to do it across all of these specialties, that was the issue. We lost a lot of the clinical buy in, so I took the decision nationally that we should concentrate on one specialty and try to ensure that we gain success. Then following that model, to take that implementation to other areas of surgery. So the idea is that we test it in colorectal, then make it available to all. The national dataset – we can let you look into it and have a play around with it and you can suggest what you collect going forward. We can start building that already for you.

Delegate: So for the moment, so as not to lose any time, should we continue to collect our data in our Excel spreadsheets until you have time for us

David McDonald: That is the aim, that we will try to test it in other areas in Scotland – we have to start somewhere and ensure that it works. The driver at the moment is to try and prove that it works.

Mike Scott: I have a question for you David, you have had the chance to start with a really blank canvas, what I see as the challenge is not just collecting the data, but collecting it real time, from a patient perspective and from a medical and nursing team perspective. How are you taking that forward?

David McDonald: We have some funding available from the Scottish Government to enable teams to look at collecting the data, so if – it's not just about collecting the data, it is about that education package to ensure that we have got the whole team on board. It's very similar to the pilot work we did in the Caesarean sections, where it's that senior management sign up – we are going to test and implement and they agree to support that. The idea again is that, if we provide funding, and prove that this method works, the ... will pay for that person going forward. So it's very much tying everybody in to this... so there is some limited funding available, if people feel they need support to take it forward in their hospitals, we need to look at that and make sure that we can ensure sustainability going forward.