

## Audit of leave policy adherence in a large Leeds Teaching Hospital Anaesthetic Department

### Introduction

Elective theatre list cancellations can be as high as 14%.<sup>1</sup> Departmental leave policy may have a significant effect on cancellation of theatre lists. If excess numbers of the department are away, there may be inadequate capacity to cover demand, leading to list cancellations. We sought to determine whether non-adherence to the leave policy had an impact on list cancellations. We compared the number of list cancellations per week with the number of members of the department on leave. Our current leave policy allows a maximum of 14 Consultants to be away at any one time. There is no restriction on trainee leave except to ensure that the on-call rota is covered.

### Methods

The hospital electronic Theatre Management System (TMS) was used to determine the number of lists cancelled in 2008 at St. James University Hospital (SJUH), Leeds. The TMS detailed those lists, which were cancelled for reasons of 'anaesthetist being unavailable/on leave'. The anaesthetic department leave diary was then reviewed to record the number of leave days taken (annual, professional/study) by consultants and trainees.

### Results

The chart below shows the relationship between leave and list cancellations.



SJUH employed 41 consultant and 27 trainee anaesthetists in 2008. There appeared to be a correlation between Consultant leave and theatre lists cancelled for each given week. There didn't appear to be any meaningful correlation between trainee leave and list cancellation.

### Conclusion

The data showed that the leave policy for Consultants was breached during school holiday periods. These breaches were associated with a significant increase in elective list cancellations. Irrespective of the leave policy, this relationship between excess Consultant leave and list cancellations indicates a lack of spare capacity within the department, or a failure to utilise flexibly available Consultant sessions. Future options for the leave policy include:

- Abandon the leave policy on the basis that there is limited flexibility in the department, so no-one can cross cover anyway. This may increase the number of Consultants away during peak holiday periods and worsen the manpower problems during holiday periods.
- Increase the number that can be away outside of school holidays in the hope that this will reduce the peaks of leave demand during school holidays.
- Reduce the number of Consultants that can be away during holidays. However, this will make life very difficult for those with school age children.
- Adhere to the current leave policy limiting the policy breaches during holiday periods.

### Reference

1. Sanjay P, Dodds, A, Miller E *et al.* Cancelled elective operations: an observational study from a district general hospital. *J Health Organ Manag* 2007;**21**(1):54-8