

## Top tips for fleet transition with merged satellite unit utilising a "single fleet" method.

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Trust "A" and Trust "B" merged in 2019. This brought the dialysis provision based at "Satellite" into the management structure at the main site at "Main". The renal unit at "Satellite" comprises 9 dialysis stations (one isolation), operating 3 shifts 6 days a week.

The existing fleet consisted of 15 Dialysis machines with ages from 3 to 10 years, maintained by 3rd party as part of a service agreement.

### Rationale

It was decided that a single machine fleet across both sites would have the following benefits:

- 1) Efficiencies and better use of the skill mix within technical services could be achieved by having one pool of machines, maintained on one site but shared across both.
- 2) Having one model allowed a single set of operational protocols with streamlined training and opportunities for cross site staffing.
- 3) Management of the fleet as a single entity will help streamline monitoring and technical resources.

### Single fleet method

"Main" Renal Services would be used as the service "Base", with purpose made facility and adequate space, equipment and spares. This would avoid the inefficiency of duplication.

By utilising the Renal Storemen and Van to transport equipment between sites, the technicians can be more productive and their skills can be better utilised with the repair and maintenance of the fleet at base and not on traveling. Working machines can be delivered from "Main" and the malfunctioning machines brought back for repair. The repaired machines would be put back into service at "Main unit", saving transport time and costs. Consequently the "fleet" would rotate between the sites, with the benefit of evening out running hours and wear.

At "Satellite", in addition to one machine per bay only a small "float" of machines would be necessary, optimising fleet size and reducing capital outlay. The reduction of "Idle" machines will reduce the disinfection rota with further reductions in space, equipment and resources.

### Outcomes

In the first 6 months since transition the following has been achieved:

- 1) 10 Artis installed
- 2) 50% of treatments performed on the new machine
- 3) Nurse training for machine competency achieved by October with ongoing support/training for specialised procedures i.e. on line Kt/V and fistula blood flow monitoring The Technicians have been proactive in supporting training and providing technical knowledge in machine operation.
- 4) 8 issues with possible machine malfunction have required urgent on site attendance.

The Technical team and renal unit staff at “Satellite” continue to work together and support each other through the transition.

#### Staff Quotes

There are further developments required; which will be undertaken in due course,

- the development of direct delivery of consumables to the “Satellite”, rather than decanting out of the “Main” store
- control of water treatment, which will enable assurance of water quality
- dialysis machine fleet transition completed by end of January 2020

#### Tips for success

Reinforce the positives which will help overcome human factors. Keep to your word. Ensure delivery.

Back up any assumptions with hard facts. Involve the whole team.

Understand and work through concerns.