

Using Checklist for the Annual Planning Round

1. After installing Checklist, you use Checklist's automatic data loading facility to load all of the data for each service. The services can be defined by specialty, sub-specialty, consultant or HRG, and will normally include new and follow-up outpatients and the different kinds of admitted patients. A project file for a whole hospital or PCT at specialty level will normally have about 200 separate services. If you are modelling at consultant or HRG level there could be many more.
2. The loaded data will cover a recent historical period, usually a year but when it is less or more the models automatically uses seasonal weightings if they are needed. The data will include activity, removals, additions, and the waiting list position at the beginning and end of the period. As it loads the data Checklist automatically calculates clinical priorities and lengths of stay from the activity data.
3. You now have a complete Checklist file. You should now check the data quality for all of the elective services. This will show you from different angles whether your data is internally consistent. If it isn't, we provide support and training to help you overcome any problems. You can now have a quick look at the Results page and you can use these results if you want something rough and ready.
4. You will find you can have ten different built-in activity plans; you can make the model find the activity that will 'meet your waiting times', or 'keep up with demand', or 'use the historic rate', or 'fill the beds', or 'fill the theatres', or 'within available funding' and so on.
5. Now you will want to set up different scenarios covering all the different parameters. You will want scenarios that anticipate how demand may increase or diminish in the future; you will also want to look at a range of different performance scenarios, such as waiting list and capacity management. Then you may want to have a number of different waiting time targets and later on you may want to consider alternative care pathway scenarios. You can also let the model calculate the knock-on effect of extra out-patient work on your admitted patient lists and capacity.
6. When you look at the Results again, you can now use the drop-down menus on this page to select different combinations of scenarios. If you right-click on the top of any column, you can model up to four different scenario combinations side by side. Although Checklist is not a financial modelling tool, you can also enter – again, automatically – the average specialty costs, or, if you're modelling at HRG level, the individual tariffs.
7. You will now be ready to have discussions and negotiations with colleagues where the focus of attention will be on which scenarios are most realistic for the purposes of the annual plan. You will be able to modify your scenarios and create new ones and at each step you can keep notes within the software so that you have a complete audit trail of these discussions. At any time you can print out all of your results straight from the model or copy and paste to a spreadsheet.
8. All of the above is just a rough description of what it is like to use Checklist. When you see the model and start to use it, you will discover that it is full of 'surprise and delight' features which make the model a pleasure to use.

The Checklist Partnership provides all the help you need to get started, and full back-up – including on-site visits – throughout the process.