

Clinical Operations Team

THE CHALLENGE

A 500+ bed level 1 trauma center in the southern United States asked Phase 2 for assistance in the clinical area of Surgical Services. The department was one of the largest contributors to overall revenue in the hospital, yet for the past three years had failed to meet budget expectations. In addition, the overall cost per case had been increasing at a steady rate over the past six months.

Upon initial assessment, Phase 2 found a number of operational issues that were impeding effective operations and contributing to increases in the cost per case.

- Ineffective leadership – leaders lacked necessary financial and budgetary skills.
- Turnaround times were high averaging 45 minutes.
- Productive labor hours were high at 18.0 hours per case.
- # of patients receiving pre-admission testing was low causing day-of-surgery delays.
- Lacked depth of knowledge of surgical IT system.
- Ineffective system of supply management.

THE SOLUTION

Phase 2 recommended the following departmental improvements to assist the department in meeting management expectations.

- Add a Vice-President with financial savvy and leadership vision to direct the service line; until such time, provide the necessary leadership to start the process.
- Implement a *Team Model* to assist with turnaround times and productivity issues.
- Increase pre-admission capacity and market the service directly to physicians.
- Upgrade the current MIS system and hire an analyst with extensive knowledge in the current system.
- Automate supply management in the OR.

THE RESULTS

Phase 2 Consultant, Debbie Scudder, RN, CNOR, was asked to assist the department with implementation in an interim VP management role. After 6 months of successful implementation, a new Vice President was hired and the department showed substantial progress in meeting recommended goals. The *Team Model* contributed to an 18-minute decrease in turnaround times, now averaging 27 minutes. This concept has also helped reduce surgical productivity to 15.5 hours per case, contributing to a 14% or \$61 decrease in labor costs per case. Additionally, the hospital created space for a new pre-admission testing center increasing testing to 60% from 45% of all cases and reducing costly delays.

One of the greatest accomplishments of the efforts of Phase 2 and department management is the building of trust between administration, the surgeons and the surgical staff. That mutual trust, along with the framework improvements listed above, has this OR poised for growth and change.