

REDUCING OR HOLDS: HOW FRONTLINE INNOVATION, INTERDISCIPLINARY COLLABORATION, AND LEAN THINKING IMPROVED PERIOPERATIVE THROUGHPUT

Team Leader: Rebecca T. Gilbert DNP RN CCRN

University of Virginia Health System, Charlottesville, Virginia

Team Members: Kristin Brooks, Keith Morris, Nancy Pierce MSN RN CNL CNOR,
Kathie Hullfish MD FACOG FACS

Background Information: Operating Room (OR) holds contribute to inefficiencies in the operating room as well as decreased patient and staff satisfaction. In 2015, the Main OR was placed on hold 992 times for a total of 39,152 minutes. Using Lean methodology and root cause determination, we discovered one root cause for OR holds as PACU nurses and spaces being “reserved” for patients who had already been called out, at times for as long as two hours. During that time, the PACU nurse and spot were unavailable for other patients. There was no defined process for callout from the OR to the PACU.

Objectives of Project: The objective of this project was to create an efficient, standardized callout process from the OR to PACU that would decrease wasted PACU RN time and space unavailability.

Process of Implementation: An interdisciplinary team collaborated to design standard work for calling patients out from the OR to the PACU. A simple and doable solution was to make the call from the OR to the PACU as close to 15 minutes from the projected time that the patient would be ready to leave the OR as possible. The OR staff designed the 3 C’s: Count, Close, and Call as their trigger to call report from the OR to the PACU. OR hold times were compared pre and post project implementation.

Statement of Successful Practice: In the first three months of project implementation, the mean number of daily OR holds was 2.7 (SD 3.9) and the mean amount of daily OR hold minutes was 119.8 (SD 192.7). During the same timeframe in 2015, the mean number of daily OR holds was 4.6 (SD 5.0) and the mean daily amount of OR hold minutes was 188.8 (SD 234.4). Total OR holds have decreased by 23% and overall hold minutes have decreased by 19% ($\alpha=0.05$; volume $p=0.013$, minutes $p=0.0446$). Data continues to be collected to determine long-term outcomes. Implications for Advancing the Practice of Perianesthesia Nursing: This project was driven by frontline staff as a means to improve perianesthesia throughput. It demonstrates that through interdisciplinary collaboration and Lean thinking, perianesthesia nurses are able to positively lead change and improve outcomes for surgical patients.