FIRST CASE ON TIME STARTS: A MODEL FOR PERIANESTHESIA IMPACT

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<u>Introduction</u>

Delays in first case on time starts (FCOTS) has a known domino effect on efficiency in an OR schedule by:

- · Impacting timing of following cases in OR room.
- Affecting resources including processing and utilization of equipment.
- Increasing premium pay in the form of overtime and call back pay.
- Amplifying preoperative anxiety in patients and visitors.

There are numerous variables that impact this metric and it is both an interdepartmental and interdisciplinary responsibility to impact.

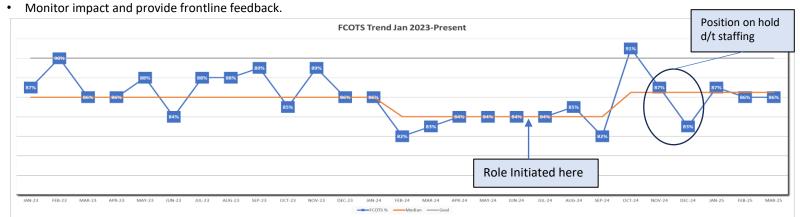
Background

Barnes Jewish West County Hospital (BJWCH) has a FCOTS goal of **90%.** In 2023 this was only met one month out of twelve and. In February 2024 Periop leadership at BJWCH recognized a dip in their FCOTS metric to **82%.**

A new position was proposed to act as liaison between the OR and perianesthesia departments. The perioperative charge nurse was implemented June 2024.

Primary goals upon initiation were to:

- Collect data, identify barriers, and validate key drivers to develop action plans.
- Implement operational changes.



Methodology

Implementation:

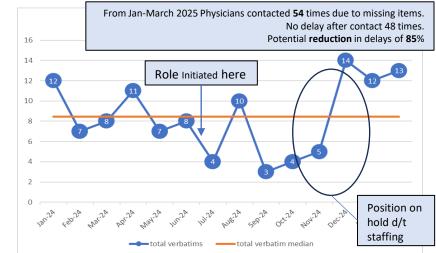
- 1.0 FTE
- 5 days/week

Roles and Responsibilities:

- · Reviews charts day before surgery looking for required documentation and Preop orders.
- Notifies surgeon of missing items.
- Morning of surgery verify missing items are completed.
- Audits performed for reason of delay and entered in a spreadsheet.
- Spreadsheet also developed to enter whenever a surgeon needs to notified of missing items and if it resulted in a delay.

Reporting Structure:

- Quarterly Review of Roles
- Report out to Perioperative Services Committee
- Individual Surgeon Meetings



<u>Implications</u>

This new role has had a positive impact

- There is an increase in verbatims for cause of delays which aids in finding root cause. **An example is patients wanting to use the bathroom right before going into surgery**. A new process was implemented: staff, including PACU staff, making rounds to offer the bathroom 15-20 minutes prior to scheduled start.
- Physician schedules have been changed from obtained data.
- The perioperative charge nurse role is always evolving to meet the needs of the department.
- Additional responsibilities introduced: include initiating a text thread to communicate when to start spinals/nerve blocks and any timed antibiotics to keep cases moving throughout day, hand off audits to ensure patient safety, appropriate hair clipping audits which lead to an updated hair clipping resource book. Appropriate hair clipping in preop is important to decrease risk of SSI's. Colorectal audits performed to support ERAS (Enhanced Recover After Surgery). The coordinator meets with leadership quarterly or as needed, to review current work to make changes if necessary.