AMBULATORY PERIOPERATIVE SERVICES
WHEELS TO WHEELS

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ABSTRACT
Operating Room turnover time or patient Wheels to Wheels (W2W) is the total amount of time necessary to turn over the room from one patient to the next. Wheels Out to Wheels In is defined as the duration between the previous case Out of Room time and the following case In Room time. W2W involves every member of perioperative services including registration, pre-operative nurses, surgeons, anesthesiologists, intraoperative nurses, surgical scrub technicians, recovery room nurses, and environmental staff. A delay in one or more areas causes a chain reaction of delays in the whole system. As such, it is necessary to define, measure, analyze, improve, and control the various outliers in the present system for its optimization. The HackensackUMC Ambulatory Perioperative Services’ 2019-2020 turnover time rate was 27.45 minutes.

METHODS
1. Identification of problem areas
2. Daily, weekly, monthly audits and meetings
3. Proposed improvement dissemination
Daily, weekly, monthly audits were conducted to identify compliance issues and improvement opportunities, which were shared to all the stakeholders for guidance, implementation, and control. Poster boards and emails were used to make everyone aware of these changes. EPIC Workbench Reports were utilized in data collection and processing.

STATEMENT
Prior to the regular audits and information sharing, there was no coherent visualization for the causes of delay in the W2W process. With the identification of problem areas and accountabilities, delays were minimized and the process completion rate was shortened to 23 minutes.

OUTCOME
Using EPIC Workbench Reports and Clarity Reports for audit data processing are significant tools for outlier identification and correction. Professional communication and close collaboration among the stakeholders are keys for the continued quality and rate improvement of the Ambulatory Perioperative Services W2W. Consistent 24/7 implementation of control parameters will lead to improved patient outcomes, increased case volume, and maximum productivity.

REFERENCES