Maximizing Efficiency: Improving Inpatient to OR Readiness

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Introduction: At Seattle Children's Hospital, the Perioperative Microsystem team is a multidisciplinary, frontline quality improvement team that strives to improve patient outcomes and operational efficiency. Anecdotally, lack of inpatient readiness is a contributing factor to OR delays and decreased throughput efficiency. Our team sought to identify, understand, and improve the drivers of OR efficiency.

Identification of the Problem: Inpatient flow to the Operating Room (OR) has been a long-standing area of opportunity for improvement. Inconsistencies in communication, handoff, timing, ownership and process initiation contributes to inefficiencies that negatively impact patient flow, team and patient experience within Perioperative Services.

QI Question/Purpose of the Study: The purpose of our QI project was to improve efficiency by 10% for the perioperative process for inpatients having non-emergent surgery. The outcome measure was defined as the time from when the OR RN signaled, in the electronic health record, the preop RN to "call for patient" to when the inpatient arrived to preop and was ready for the OR team by signaling "preop tasks complete".

Methods: The team utilized Institute for Healthcare Improvement (IHI) model for improvement to guide our work. The project started with an in-depth process mapping and current state analysis, this included voices from inpatient nurses, perioperative staff, and a family advisor. KDD-guided interventions were identified, and PDSA-cycle methodology was utilized. Multiple interventions over the course of the project were implemented. These included communication between teams, visual cues and nursing education.

Outcomes/Results: The outcome measure of "call for patient" by the OR RN to "preop tasks complete" by the preop RN has shown a 13% improvement from baseline (53 minutes to 46 minutes).

Discussion: This project showed that increased efficiency can be obtained through clear communication between teams and standard work.

Conclusion: Use of a multidisciplinary team, who are familiar with the work, is key to identifying areas for improvement.

Implications for perianesthesia nurses and future research: Utilizing preop nurses in projects related to OR efficiencies and preventing OR delays is critical to success.