Anesthesia Excellence Unit Practice Council
Main Operating Room Turn Over Time (TOT) Improvement Initiative

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Problem
• TOT data for each case in the Main Operating Room is tracked and analyzed weekly
• 36% of the cases were on time Aug 2008
• The target is for 70% of all cases to have a TOT of 45 minutes or better
• TOT is determined from the time first patient exits to the time the next patient enters OR
• Costing the hospital $1.3 million/month in lost revenue
• OR time is expensive $46.42 per min (excludes salaries)

Non-operative time consumes profits

Objectives
• Identify & analyze data for TOT delay reasons
• Make recommendations to facilitate and optimize an efficient TOT (goal of < 45 Minutes every OR, every time, every case)
• Present the recommendations to the OR Executive Committee

Methodology
• Focus group established to include the Operating Room RN, Pre-op Unit RN and Anesthesia Excellence UPC Members
• Parallel processes outlining OR RN responsibilities, Pre-op RN responsibilities, and Anesthesia staff responsibilities identified
• Approved by the OR Executive Committee
• Campaign blitz created & staff in-services held
• “45 or Better” Door Cards placed in each operating room door
• Implementation date Sept 2008

Goal - To have a turn over time of 45 minutes or better in Every OR, Every Time, Every Case

Results
• Data tracked from Aug 2008 - March 2009
• TOT increased to 54% since implementation
• This is a 56% overall improvement thus far
• Cost savings of $600,000 per two month comparison
• We are on our way to the target 70%

Recommendations
• Continue to improve and implement audit collection method
• Revise parallel processes as needed
• Ongoing education of all staff, including physician staff
• TOT monitoring & efforts will continue until we reach and maintain the target goal

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