

# Improving starting time for first cases in the main operating room

Mr Emann-Jure Ascano

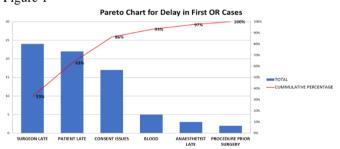
Prince Mohammed Bin Abdul Aziz Hospital, Saudi Arabia

### Abstract

#### 1) Background

Prince Mohammed Bin Abdul Aziz Hospital - NGHA utilizes an electronic system in reporting safety and patient issues. It has been noted that there is 54% compliance for first OR cases that started on time from August- December 2018. In line with this, Balzar et.al (2017) emphasized that adherence to scheduled times are crucial for efficient time utilization within large OR units. Additionally, OR Benchmarks Collaborative (ORBC) indicates that the median for on-time start for first cases is 64.3%. 2) Methods

A multidisciplinary team was formed between Nursing Services and Surgery Department. The scope of the study included patients admitted in the surgical unit for an elective case. A fivemonth retrospective study was conducted by analysing the generated safety reports for the delayed cases and six reasons were identified (Figure 1). The data collected was then transcribed into a Pareto chart to prioritize the problems that needed to be resolved. The team utilized the Ishikawa diagram to brainstorm the possible causes of delay. Measures such as outcome, process and balancing measures were also identified. A PLAN-DO-STUDY-ACT cycle was formulated which focused on the preparation of pre-operative team (includes surgeons, anaesthesiologists and ward nurses), patient, pertinent consents and relevant supplies a day prior to procedure. The PDSA was tested and implemented for a pilot study of two weeks to evaluate the effectiveness of the initial cycle. Figure 1



#### 3) Results

The aim was to increase the compliance from 54% to 80% by July 2019. The compliance rate was then calculated based on the number of on time first cases divided by the total number of first cases from the surgical unit for the month, then multiplying it by 100. With the PDSA cycle in placed, the two week-pilot study achieved a compliance rate of 89%. After which, the same cycle was applied in the succeeding months. The month of February achieved a compliance rate of 97%. The months of March, April, May and June achieved a compliance rate of 97%, 85%, 95% and 76% respectively.

4) Conclusion/Lessons learned

The project is largely successful due to continuous and effective monitoring. We seek to establish a perioperative committee that will evaluate patient flow from ward to O.R. Furthermore, we aim to spread the project to other units such as Day Surgery and

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Endoscopy Unit. The overall goals of improving patient satisfaction, preventing delays of other scheduled cases and improving the utilization of O.R. time have been achieved.

## **Biography:**

Mr Emann-Jure Ascano is a registered nurse at Prince Mohammed Bin Abdul Aziz Hospital in Saudi Arabia.

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