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First Case Start Times for Vascular Surgery

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Authors
85% of first cases at Maine Medical Center for Vascular Surgery start late. According to one study done by Aurora Health Care, of 5,500 first case surgeries, 88% of them started late. The impact of this is far reaching. It is not in alignment with MMC value of Patient Centered care because the patient becomes dissatisfied waiting for surgery, they are fasting for longer than anticipated, and being away from their family while they wait causing anxiety. The financial impact is $1995 for each ½ hr. of O.R. time. Furthermore, this may result in elective cases being canceled, late cases create a backlog of cases to be done, the hospital loses potential revenue, and staff stays later causing overtime accrual.

**Problem/Impact Statement:**

All first case Vascular surgeries will be on time Mon.-Fri.

**Start Point:** When patient enters the room.  
**End Point:** 10 min. after scheduled time of surgery.

**Goal/Objective:**

1. Decrease the number of first case Vascular surgeries that are late from a baseline of 85% to 60% by year end 2018. Stretch goal of 25% by mid year 2019.
2. Decrease the number of lost O.R. time from 5.8 hrs. per month to 2 hrs. per month by year end 2018.
3. Decrease wait time for elective cases from 30 to 20 days by 2018 year end.
4. Improve job satisfaction for staff while decreasing overtime costs.

**Baseline Metrics/Current State:**

**Root Cause Analysis:**

**Countermeasures**

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<th>Key Milestones</th>
<th>Status</th>
<th>Target Completion Date</th>
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<tbody>
<tr>
<td>Agreement on Lead Milestone</td>
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<tr>
<td>Solutions Roll Out</td>
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<td>Eval of Current Process</td>
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<td>Project Go Live</td>
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**Quick Wins**

- Weekly case review conference on Mondays (0%)
- Monthly meeting with Anesthesiologists (0%)

**Outcomes**

1. 29 hrs. of lost O.R. time to late starts from Dec. 2017- May 2018=$116,000.00 lost in just room charges. **Hard Savings**
2. If we use above time to book 10 EVAR cases (3 hrs. ea.) the revenue would be approx. $210,000. **Soft Savings**

**Next Steps**

1. Implementation of a KPI with the Vascular staff and surgeons to improve communication utilizing a debriefing sheet.
2. As a result of not having overtime costs and staff dissatisfaction data we would like to do a retrospective analysis. The analysis will gauge if overtime costs and job satisfaction improve with on time first case starts. Our plan is to use a survey monkey or similar data collection.