Quality Improvement Conference

Starting on Time: General Anaesthetic (GA) Surgical Cases Reaching the Induction Room

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Problem Statement

- Operating theatre delays decrease healthcare efficiency and increase costs.
- Efficiency within the operating room includes ensuring first case on-time starts to maximise resource utilisation, reduce subsequent delays and reduce adverse events.
- Low percentage of patients receiving General Anaesthesia reaching the induction room in a timely manner results in the inability to start cases on time, with accumulating delays.
- Between Feb and Apr 2022, only 32% of GA surgical cases listed for 0830hrs in Operating Theatre reached the induction room by 0815hrs.

Project Aim

To increase the percentage of all General Anaesthetic (GA) surgical cases* listed at 0830hrs reaching the induction room by 0815hrs, from 24% to 100% within 6 months.

*Surgical cases: All day surgery (DS), ambulatory (AS23/47), same day admission (SDA) patients admitted via TTSH Day Surgery Centre (DSC), with the exclusion of local anaesthetic (LA) cases, and cases that are not eventually performed in the Operating Theatre (OT).

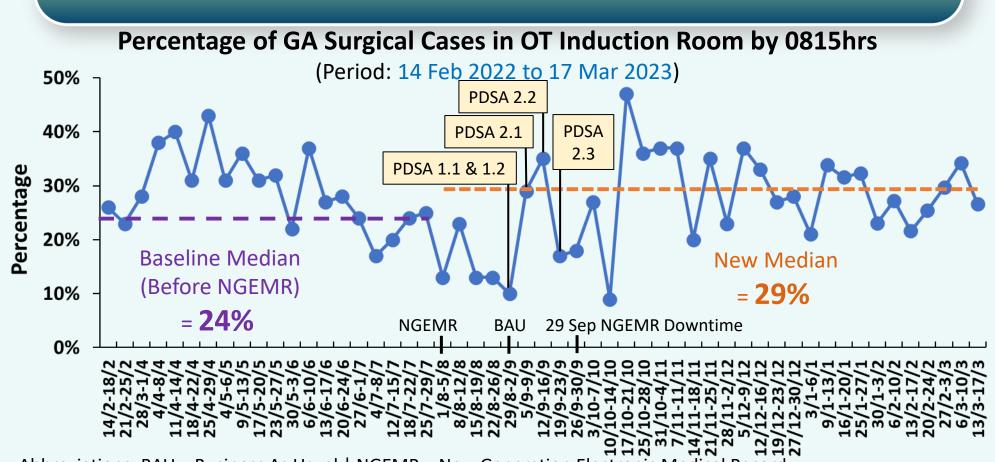
Lessons Learnt

- 1. Difficult but worthwhile project to fight for
- 2. CPIP enables us to uncover root causes objectively, find focus, and assess impact.
- 3. Will continue to monitor data
 - Conduct other PDSAs, feedback, frequent training.
 - Track staff morale and welfare
- 4. Surface issues to higher management
 - Further organizational change in processes
- 5. Extend beyond CPIP to better timeliness of entire operating lists (e.g. end times)

Potential Solutions

Root Cause	Intervention	Implementation Date
Staff unclear about role Lack of	PDSA 1.1: Have dedicated staff to fetch patient when patient has completed Day Surgery admission process	29 to 30 Aug 2022
'Patient Ready to Induction Room' Indicator	PDSA 1.2: Have dedicated staff to be in Day Surgery Ward to fetch patient into OT by 0810hrs	31 Aug 2022 to 2 Sep 2022
Adhoc Leave e.g. MC/EL	 PDSA 2.1: Staff fetching patient to assist with admission process if not completed Increase available Computer on Wheels (COWs) 	5 to 9 Sep 2022
	PDSA 2.2: Prioritisation of bed assignment / Start of admission process	12 to 23 Sep 2022
	PDSA 2.3: Dedicated augmented help at DSC from OT	26 Sep 2022

Outcomes & Impacts



<u>Abbreviations</u>: BAU = Business As Usual | NGEMR = New Generation Electronic Medical Record 23Aug Reduced DSC documentation (process review)

GOOD OUTCOME:

- 1) A reduction by 1 mins in the DSC admission time
- 2) An increase from 24% to 29% of patients reaching induction room on time
- 3) Reduction in patient wait times by 3 mins after admission to being fetched into OT, except for outliers.
- 4) A better understanding and streamlining of the pre-operative processes by OT staff and stronger collaboration between DSC and OT staff

VALUE: Projected savings of \$111,672 per 15 minutes, for 20 days from increased efficiency, without the need to hire extra staff or extension of working hours.