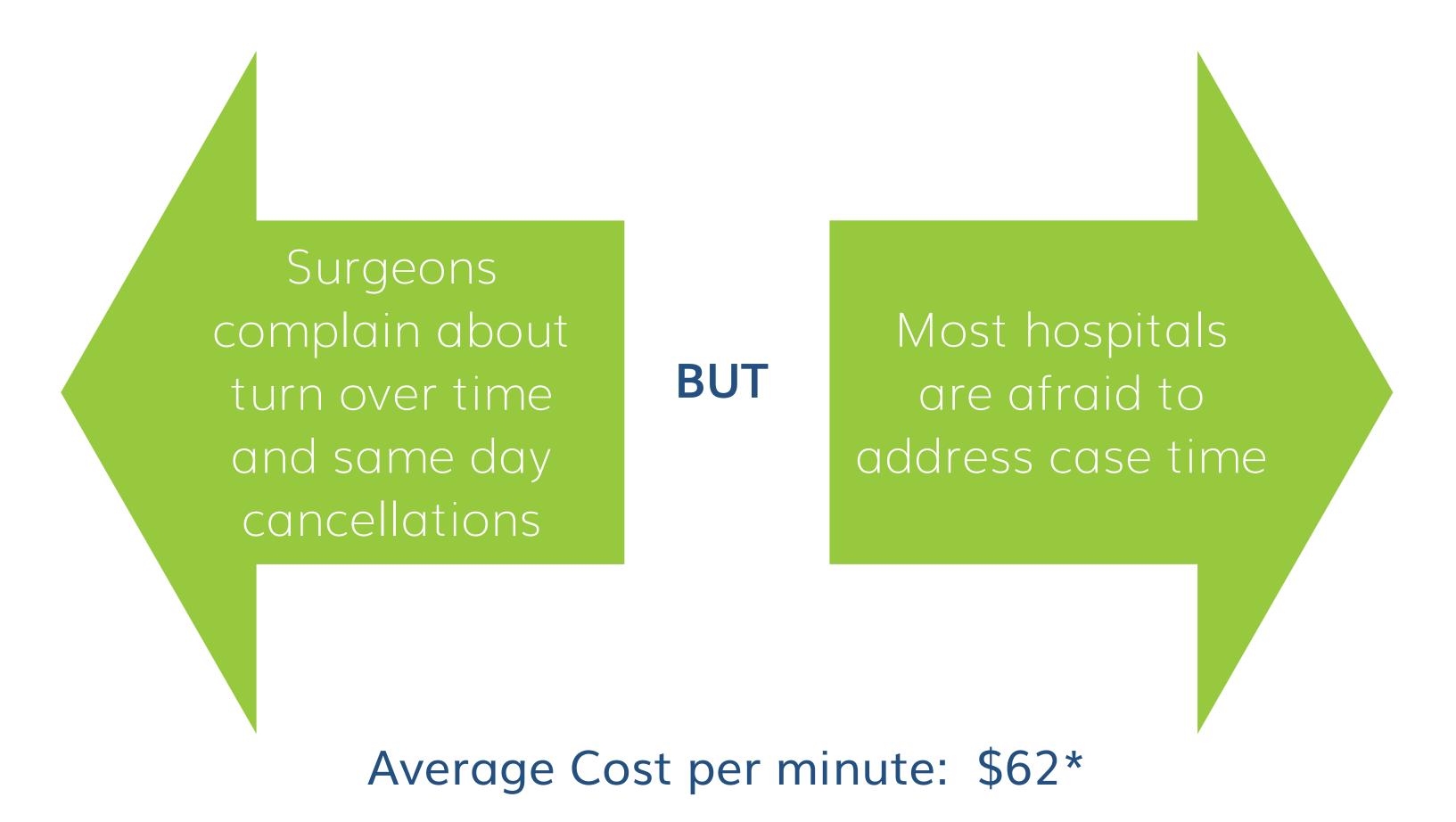
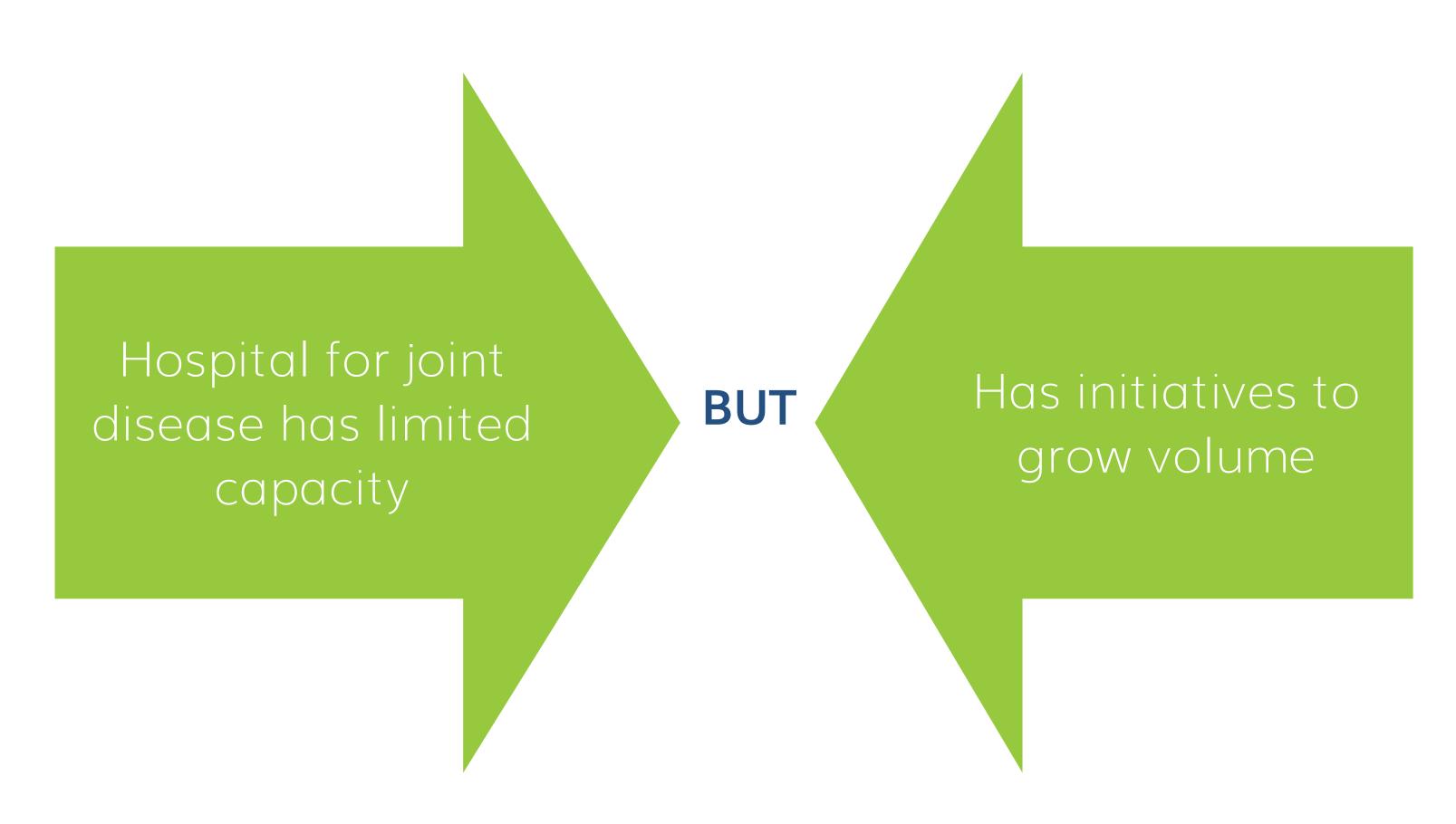


Issue





Issue



Reducing case time is KEY to delivering strategic objectives



Objections

• No one should tell a surgeon how to perform a case.

This is interfering with the practice of medicine.

Our patients are more complex and sicker.

This will never work.



Getting Started

Physician Champion

Information

Monthly Dashboard



Process Improvement

Leadership needs to both demonstrate change and address outliers!



Physician Champion

Physician Champion essential to reduce case time

Orthopedic	Action					
Chairman of Orthopedic Surgery - 12 joints per day - National reputation	Commitment demonstrated by being in room for turn over					

Cardiac	Action
Chairman of CV Surgery	Commitment demonstrated by review of case time by surgeon daily



Process Improvement Team

Members:

- Orthopedic Leadership
- Anesthesia Leadership
- Nursing
- Business Development / Analytics

Goal:

- Identify opportunities to reduce case time
- Provide transparent information
- Identify and remove barriers
- Monitor progress

SURGICAL

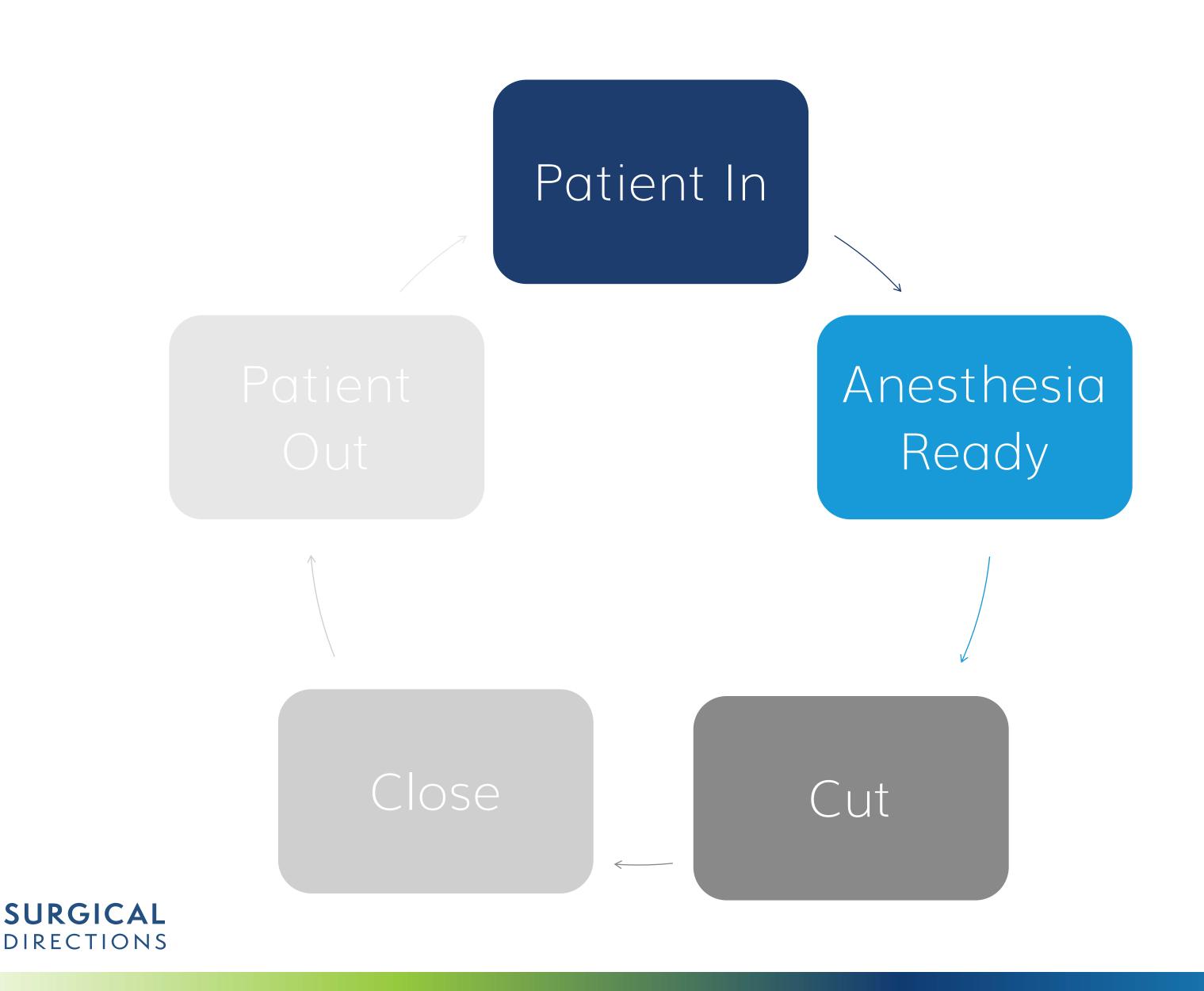
DIRECTIONS

Celebrate successes

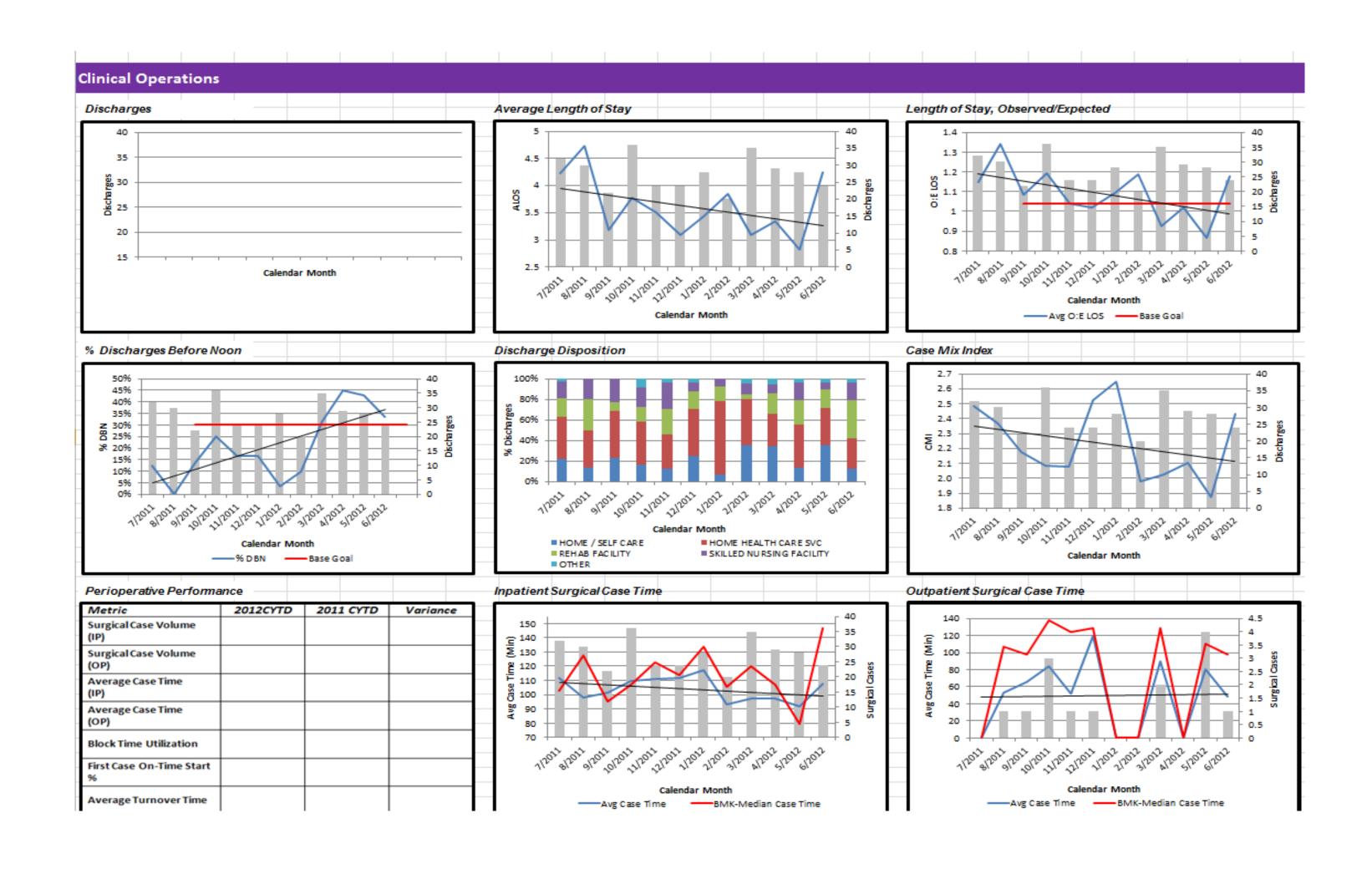




Case Time Data Driving Organizational Change

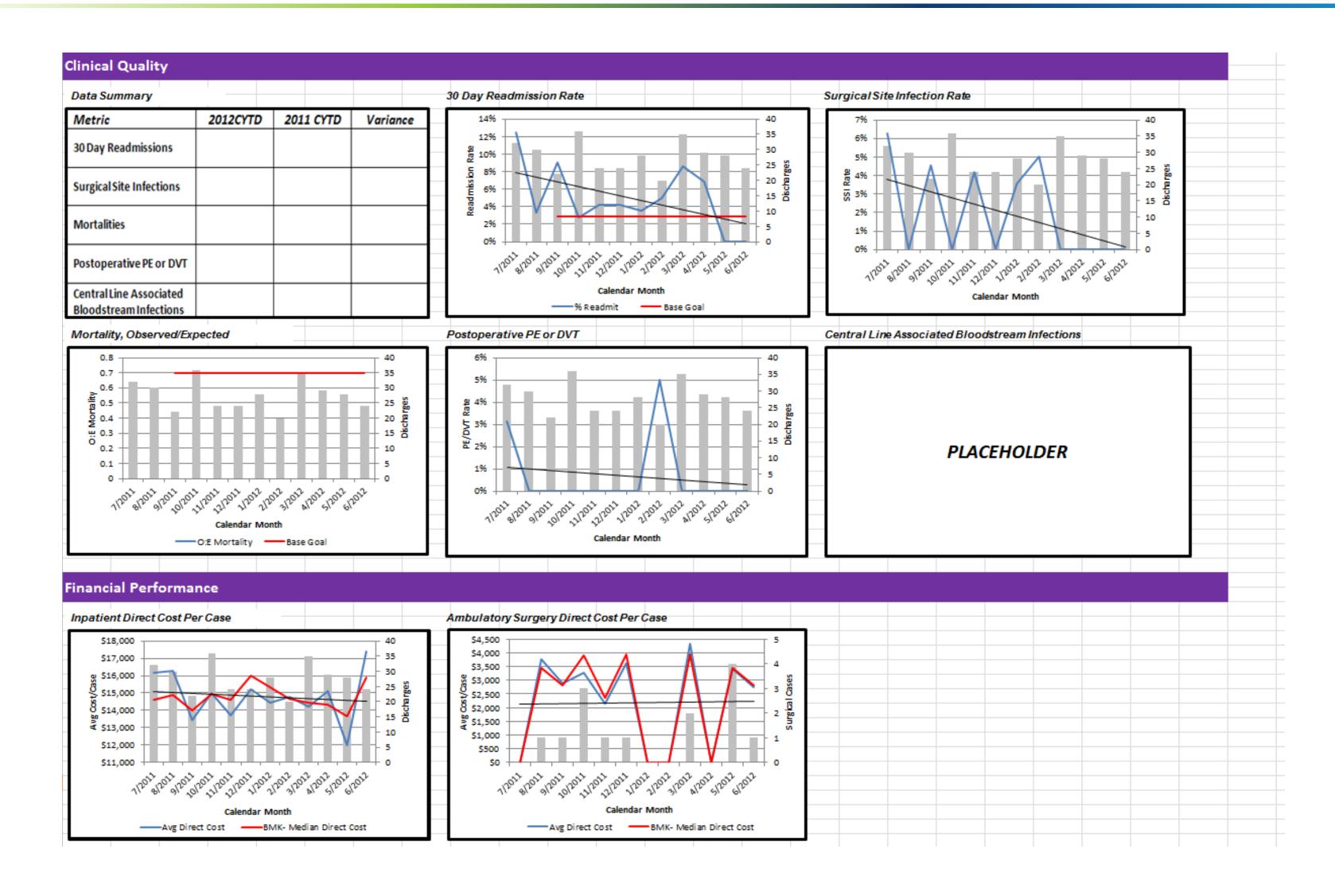


Physician Scorecard





Physician Scorecard (cont'd)





OR Case Time Variance by Procedure

OR Case Time Variance by Procedure Orthopaedic Surgery Department HJD Cases Fiscal Year Period Comparison

MEDIAN CASE TIME BY PROCEDURE

Focus Procedure	Year of Procedure Date	Number of Records	Total Case Time									
REPLACEMENT HIP TOTAL	FY 2012	655	175	24		14	10	86			31	2
	FY 2013	1,070	164	19	19	9	8	77		34		
	FY 2014	1,030	155	17	2	1	5	69		37		
REPLACEMENT KNEE TOTAL	FY 2012	591	177	30		12	10	84			31	
	FY 2013	960	163	26		15	7	74		30	2	
	FY 2014	813	153	23		17	5	68		31		
ACL RECONSTRUCTION	FY 2012	111	139	19	9	6		92		10		
	FY 2013	151	148	18	12	6	91			18		
	FY 2014	121	154	17	12	5		83		22		
ACL RECONSTRUCTION W/MENISCAL REP	FY 2012	27	154	18	9	6		1	11		12	
	FY 2013	36	142	19	10	5		87		15		
	FY 2014	15	131	15	12	6		78	- 1	20 2		
DISCECTOMY LUMBAR POSTERIOR	FY 2012	124	121	17	16	7		57	20			
	FY 2013	159	121	16	17	4		52	24			
	FY 2014	148	123	15	20			54	27			
REPAIR ROTATOR CUFF	FY 2012	177	110	20	8	7		62	10			
	FY 2013	273	122	19	12	5		64	13			
	FY 2014	265	116	18	12	5		65	13			
				0				60	12	20		
				Median Time (In Minutes)								



Interval

OR Discharge Ready: Patient Out

Incision Start: Incision Close

Prep End : Incision Start

Prep Start : Prep End

Patient In: Prep Start

Incision Close: OR Discharge Ready

Successful Techniques to Reduce Case Time

- Turnover teams
- Anesthesia Preference cards
- Reduction of items on Preference cards/Standardization
- Flip room based on case volume and case time
- PA for complex procedures with technology
- PAT Protocols
- Daily Huddle
- Anesthesia rounds on inpatients the night prior to surgery
- Anesthesia agreeing on metrics
- Leadership addressing outliers



Outcome

Impact:

- Reduction in case time
- 9% increase in case volume over prior year in HJD

National recognition:

• Increase in **US News and World Report** ranking for HJD of 4 from 8 in two years



Surgical Directions Information

For questions or comments, please contact:

Surgical Directions
541 N. Fairbanks Court
Suite 2740
Chicago, IL 60611
T 312.870.5628

www.surgicaldirections.com



Appendix: Notes for Slide 12

NOTES:

Cases include procedures performed during comparison periods.

FOCUS PROCEDURE sorted in descending order by MEDIAN TOTAL CASE TIME.

Color shows details about INTERVAL and labeled by median MINUTES.

Median MINUTES for each FOCUS PROCEDURE broken down by PERIOD.

Count of Cases disaggregated by FOCUS PROCEDURE and excludes cases that were cancelled, terminated, multi-panel, or have timestamp errors (please see attached).

The data are filtered on Department and Facility.

"Department" filter includes Orthopaedic Surgery. "Facility" filter includes HJD.

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