



Retooling the Operating Room



Problem

A Level One trauma hospital was losing market share to a neighboring hospital system

Solution

Alacer recommended changes in operating room procedures to improve patient satisfaction

Results

\$1.6 million saved through risk aversion inventory management; average cost per case cut to 30% below national average; room turnovers reduced to less than 15 minutes

Overview

A Level One trauma hospital with 18 operating room suites was losing market share to a neighboring hospital system. Low morale among its physicians and hospital staff was widespread due to late hours and chaotic schedules. Overall costs per case exceeded national averages. Alacer’s team of health care experts recommended that OR practices be completely retooled to deliver a better patient experience, from admission to discharge. By improving patient care, the hospital could improve its standing within the community – and regain market share.

Challenges

There were so many areas of concern that needed to be addressed, Alacer established four interdisciplinary physician/ staff improvement teams and tasked them with identifying and prioritizing problems with patient safety, quality of care, cycle time and costs. The Alacer-led teams recommended new OR practices such as scheduling by case type, conducting anesthesia reviews 24-48 hours prior to surgery for high risk cases, and the creation of “open” rooms shared by emergency staff and surgeons.

Results

The hospital immediately saw improvements in patient care, rate of room use and the cost of delivery of services. More than 14,800 surgical minutes a year were opened, enabling the hospital to add revenue from additional patients. The average cost per case fell 30% below the national average. Room turnovers were reduced to less than 15 minutes. Through the addition of a risk aversion inventory management process, \$1.6 million was saved.

