

Physicians Lead! Class of 2022
Action Learning Project Presentation

REDUCING DELAYS IN 1ST CASE ON-TIME START

REDUCING DELAYS: PROJECT TEAM

Khurram Ahmad	IM Cardiology	THDN
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Nikil Patel	Neurosurgery	THAMH
Natalia Pawlowicz	Anesthesiology	THF,THP
Zeeshan Ramzan	IM GI	THFW
Mohammad Toliyat	Radiology	THD
Ahmad Zankar	IM Cardiology	THA,THP,THF R

Sponsors

Joshua Floren
Emily Delgado

Coach

Melanie Gibson

Efficiency Champion

Rachel White

Overview of project, objectives, goals – the WHAT and the WHY

PROJECT OVERVIEW

REDUCING DELAYS: PROJECT CHARTER

Reduce Delays in Start Time (and/or delays between cases)	
(1) What are we going to improve? And by how much? "AIM"	
1st case on time start in FW-IR. Target 75% from 40% pre-intervention	
(2) How will we know this change is an improvement? "MEASURES"	
Directly measured in EPIC	
Who are the PEOPLE involved?	
IR physicians, manager of the vascular and interventional radiology center, IR staff (nurses and techs), transport, anesthesia	ns, risks,
What are the PROCESSES involved?	
Pre-op lab draw, transport from floor, physician arrival, consent, H+P, bathroom), barriers
	Subsequent cases, turnover, incision time
(3) What changes can we make that will lead to improvement? "PDSA"	
Automate data collection with appropriate level of detail, EPIC dashboard for interdepartment communication, identification of "efficiency champion," physician and staff engagement	

REDUCING DELAYS: PROJECT CHARTER

Reduce Delays in Start Time (and/or delays between cases)	
(1) What are we going to improve? And by how much? "AIM"	
1st ca	What TECHNOLOGY is involved?
(2) How	EPIC and associated EPIC generated reports
	What are the known opportunities (best practices), assumptions, risks, concerns, barriers?
IR physici	Risks (physician-staff friction), concerns (publishing data/transparency), barriers (modifying EPIC data capture and process)
	What is OUT OF SCOPE for this improvement?
Pre-op lab	Subsequent cases, turnover, incision time
	(3) What changes can we make that will lead to improvement? "PDSA"
	Automate data collection with appropriate level of detail, EPIC dashboard for interdepartment communication, identification of "efficiency champion," physician and staff engagement

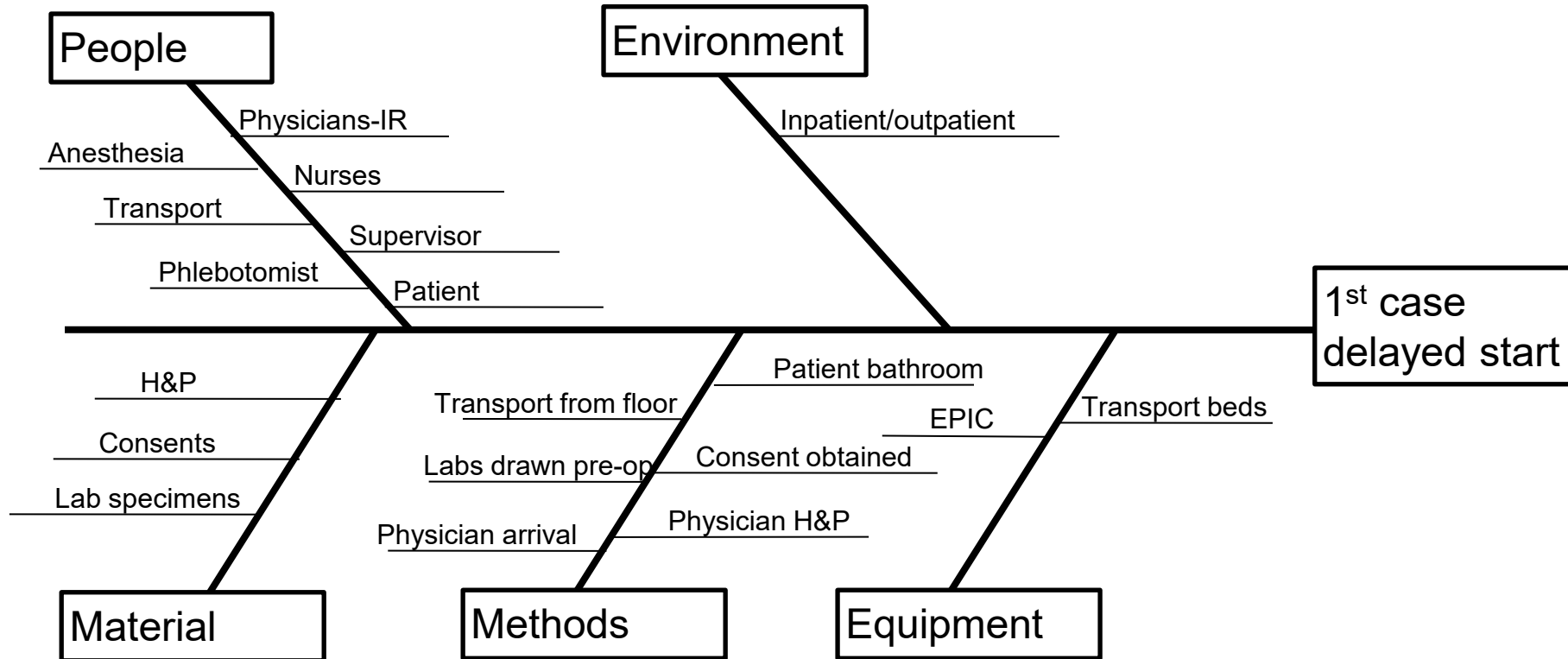
Define the problem, people and processes that involve the problem

DEFINING THE PROBLEM

REDUCING DELAYS: PROJECT BACKGROUND

- **KPI Target** = 1st case on-time 75%
- **Pilot Site** = Harris FW Interventional Radiology
 - Low 1st case on-time start (40% December 2021)
 - High rates of overtime and after-hours work
 - Poor patient and employee satisfaction
- **First-case on time** = patient "wheels in" by posted case time

REDUCING DELAYS: FISHBONE DIAGRAM



Measuring current state as a baseline for improvement

MEASURING CURRENT STATE

REDUCING DELAYS: PRE-INTERVENTION

- **40% 1st case on-time start (Dec 2021)**
- **Limited documentation of delay causes**
- **Lack of**
 - Oversight
 - Ownership
 - Incentive
- **High overtime cost despite stable procedure volume**

Identifying and piloting solutions

IMPLEMENT CHANGE & PILOT

REDUCING DELAYS: PILOT PROJECT

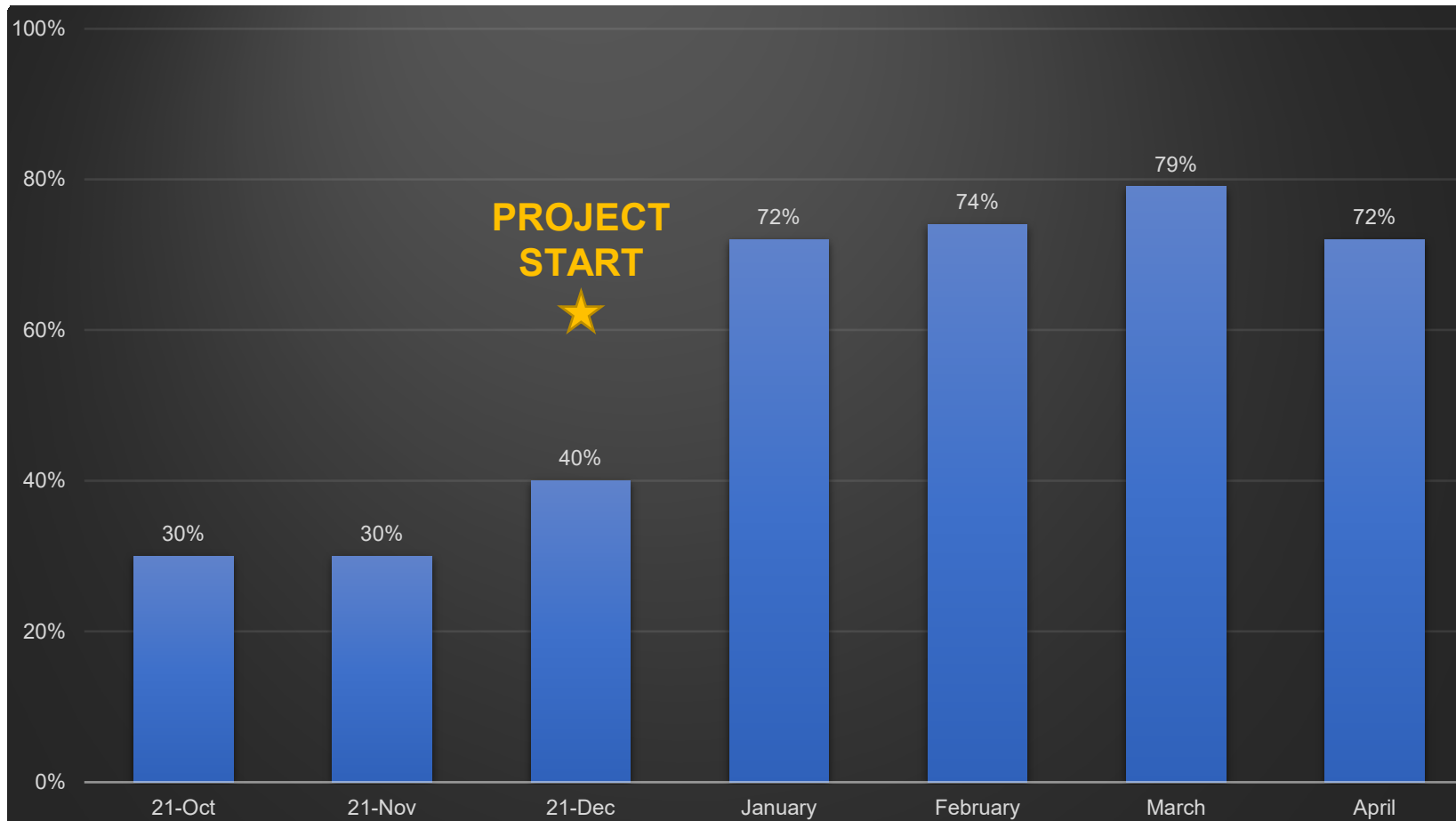
- **Identify the “Efficiency Champion”**
 - Active role by supervisor
- **Clear reports and efficient data tools**
 - Collection and analysis of specific delay causes
 - Education of staff regarding delay reason
 - Frequent data analysis
- **Accountability and ownership**
 - Transparency with staff & Physicians
 - Weekly feedback touchpoint
 - Healthy competition

REDUCING DELAYS: TOOLS

- **Education**
 - Late start categories
 - Efficient Data gathering
- **Reporting & Data processing**
 - By staff, provider
 - By delay reason
- **Feedback**
 - Weekly touch-base
 - Department huddle
 - Direct feedback initially, then email reports

MONTHLY 1ST CASE ON TIME

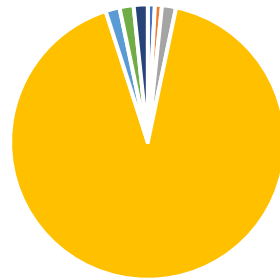
“EFFICIENCY CHAMPION” SUCCESS



STAFF EDUCATION

CLEAR DOCUMENTATION OF DELAY

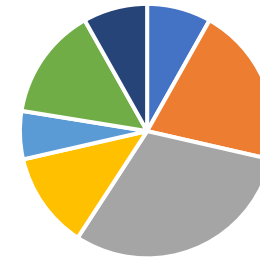
2021 Q4 Delay Reasons



- Anesthesia
- Transport
- Provider
- None
- Preop
- Patient
- Prior Case

Total Delays **121**

2022 Q1 Delay Reasons

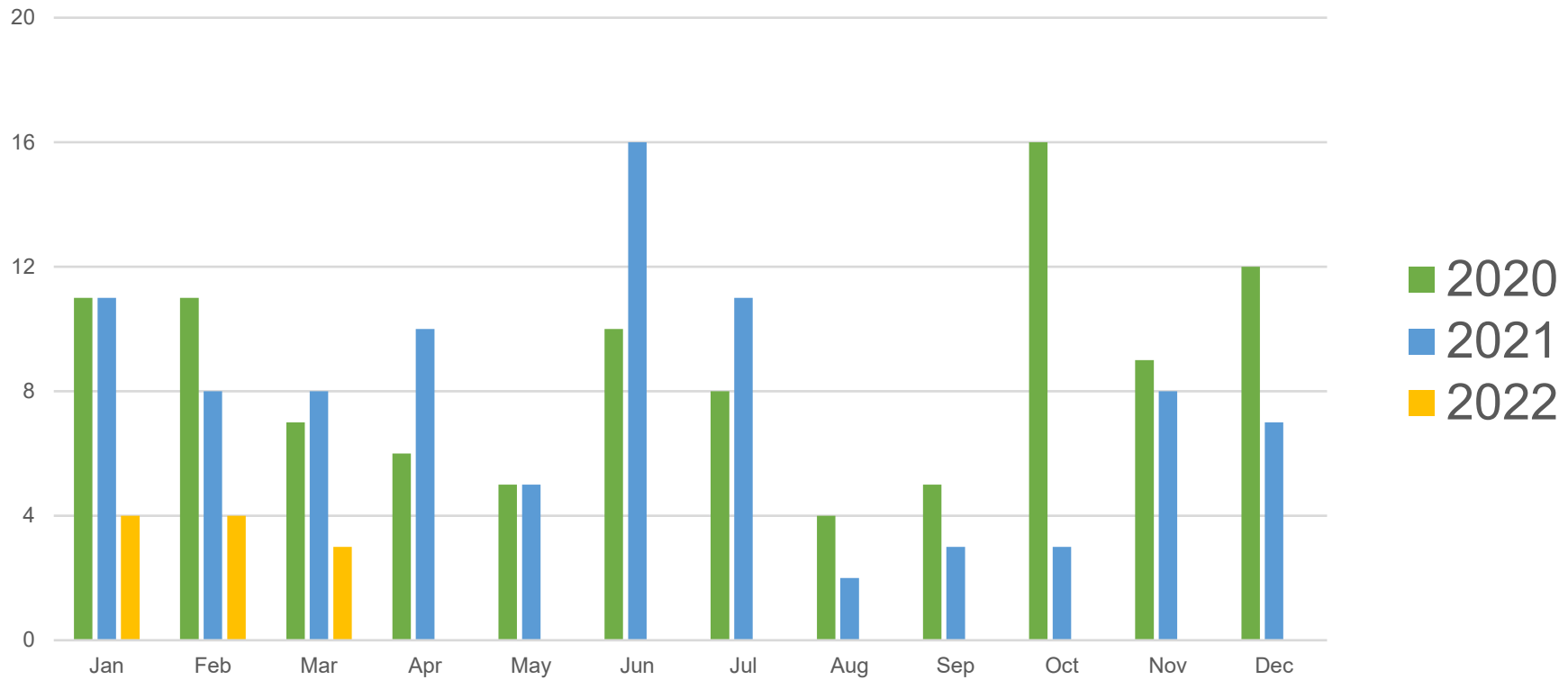


- Anesthesia
- Transport
- Provider
- None
- Preop
- Patient
- Prior Case

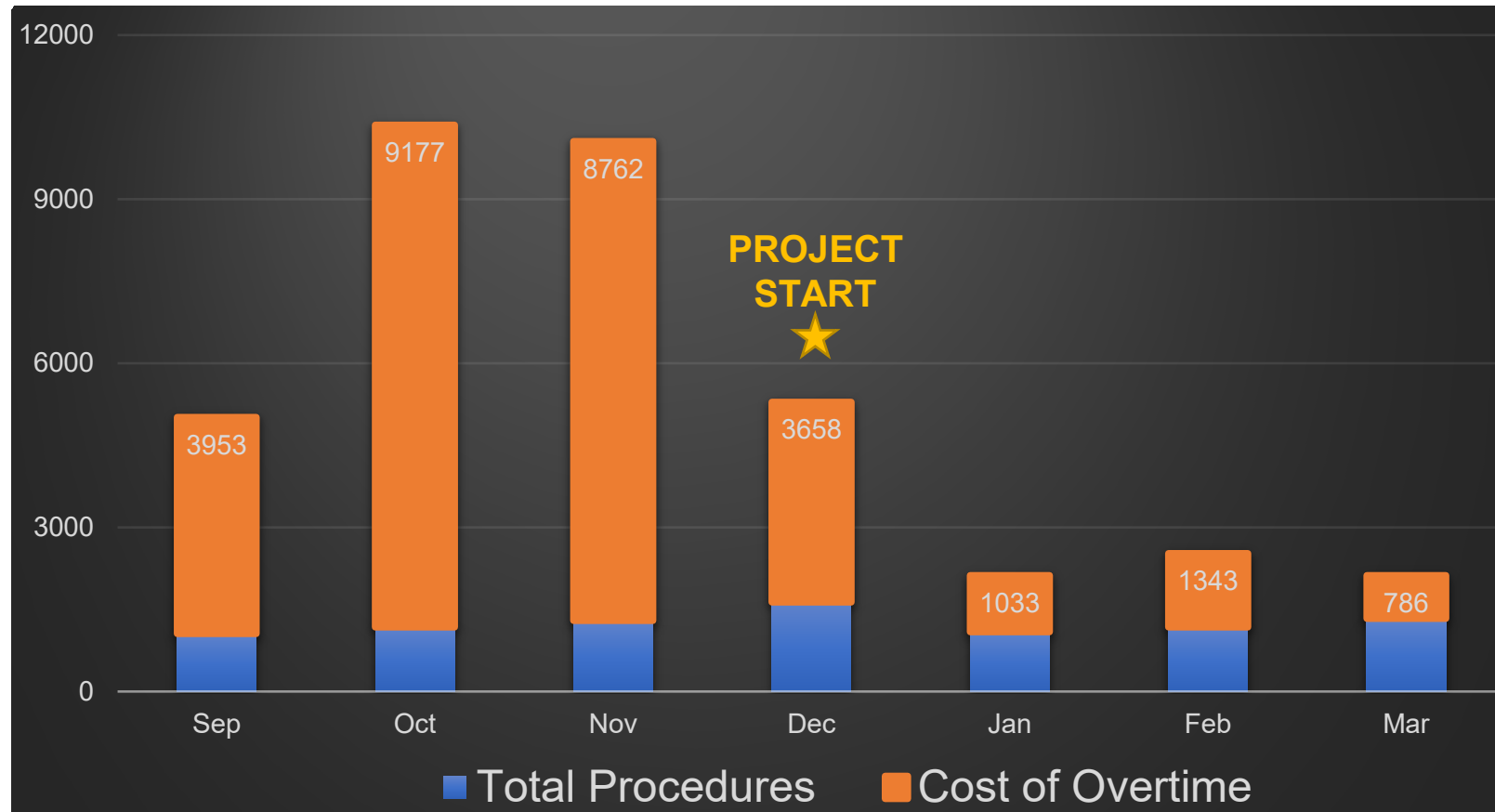
Total Delays **49**

IMPROVED FIRST CASE STARTS **LESS CAS**

Monday-Friday after 6pm



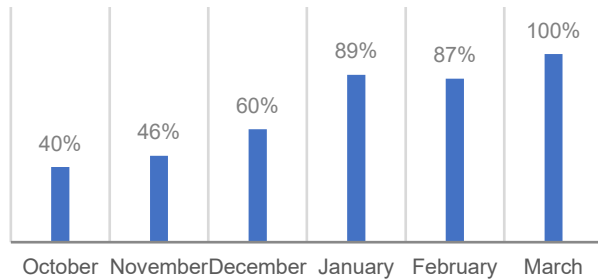
MAINTAINING PROCEDURAL VOLUME DECREASING OVERTIME COST



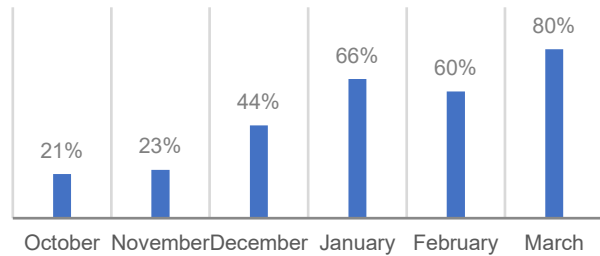
MONTHLY PHYSICIAN COMPLIANCE

HEALTHY COMPETITION

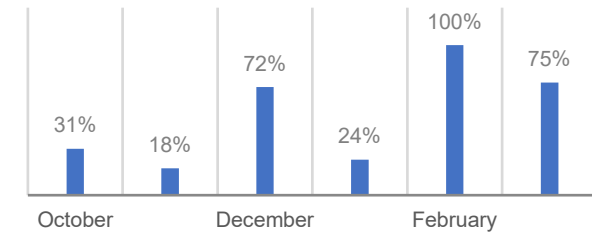
Dr. Reeb



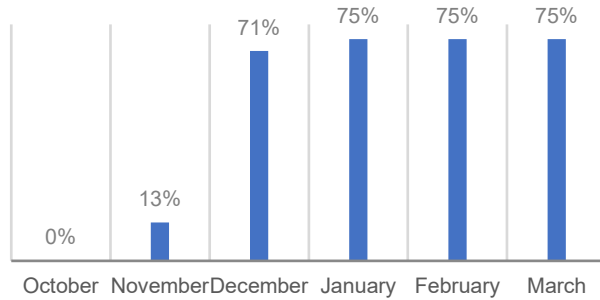
Dr. Mitchell



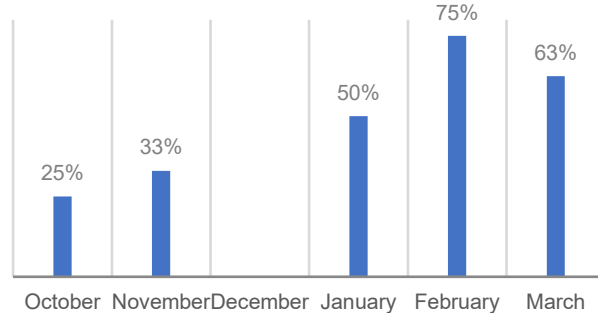
Other MD



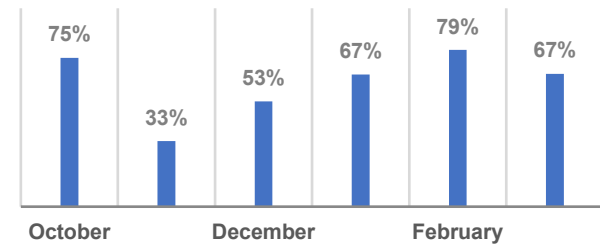
Dr. Fiesta



DR. Gerstle



Dr. Ooi



EMPLOYEE SATISFACTION STAFF AND PHYSICIAN



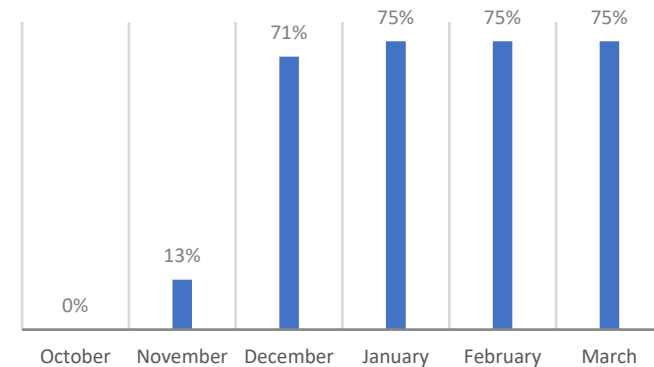
It has been going great! We take care the same number of patients as before, but we go home on time!

-Molly Martin, RT

Starting the first case on time has helped improve my commitments outside of the hospital. My daughter has graduation next week at 12:30 and I know I'll be able to get 2 cases done in time to make it! That would have never happened before!

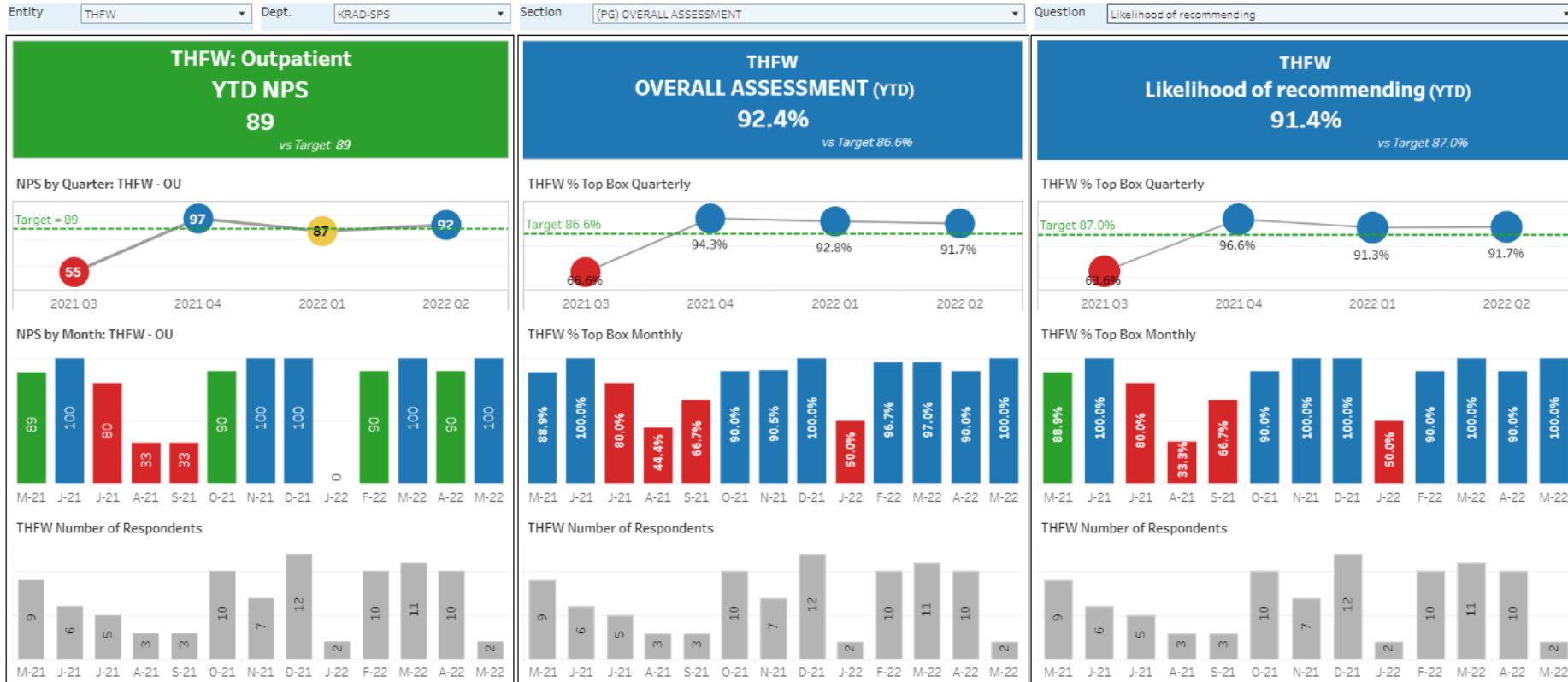
-Dr. Matthew Fiesta

Dr. Fiesta



PATIENT SATISFACTION

IMPROVEMENT IN PATIENT EXPERIENCE

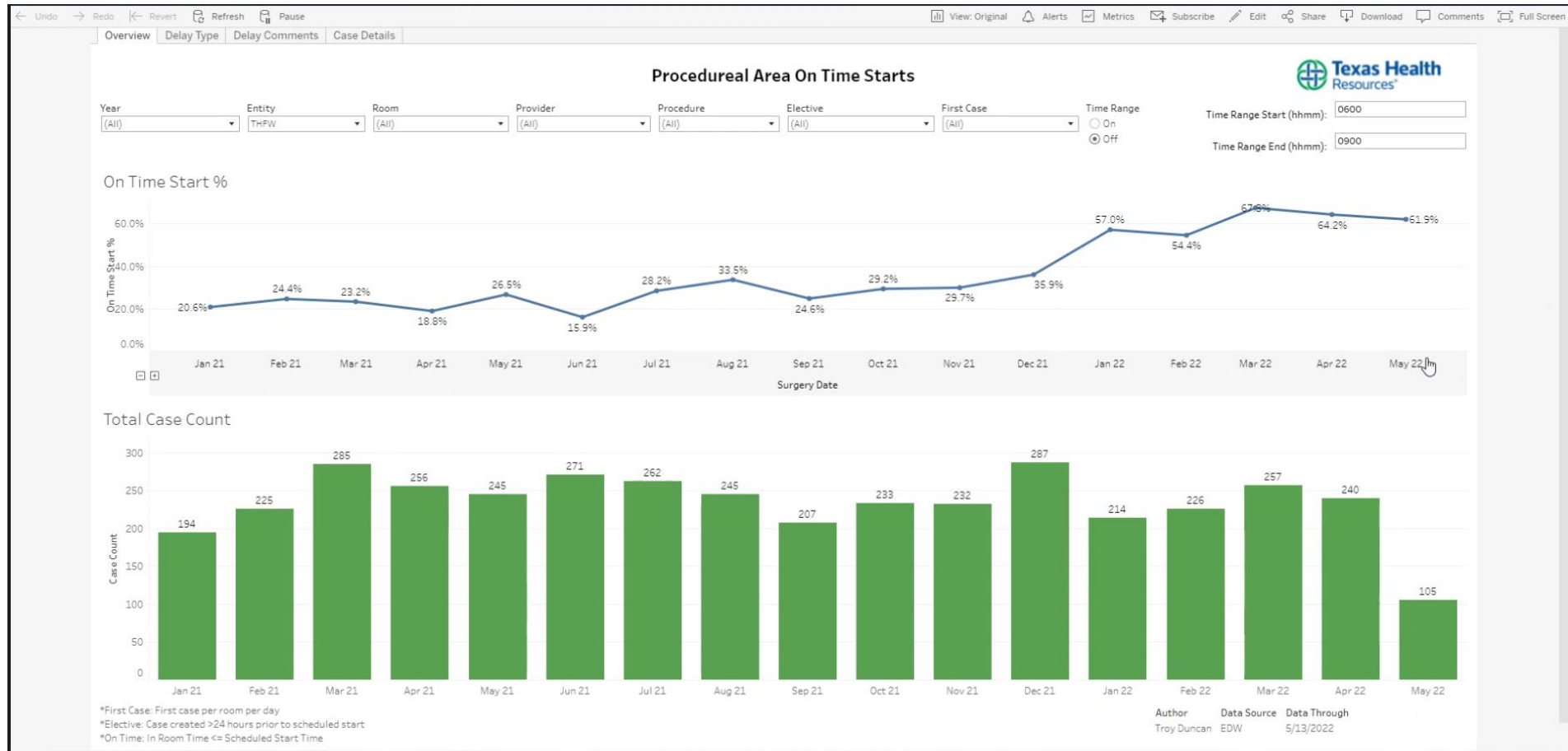


REDUCING DELAYS: REPORTING TOOL

- **Tableau Reporting Dashboard**
 - Automated data collection
 - Mined directly from Epic
 - Daily updates, ongoing analysis
 - Graphs and charts for easy understanding
 - Ability to extract details within the tool

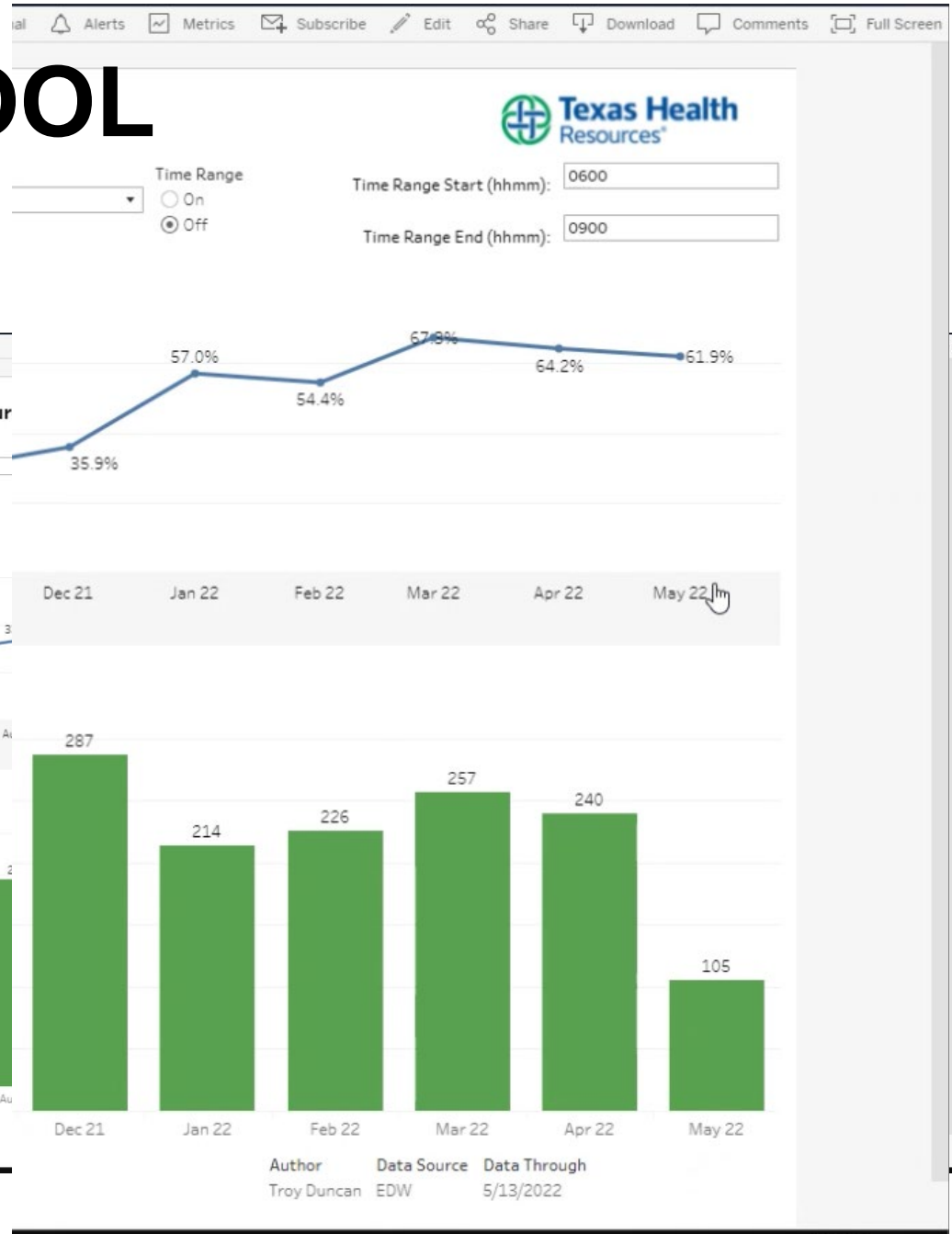
REPORTING TOOL

ON-TIME STARTS




REPORTING TOOL

ON-TIME STARTS



REPORTING TOOL

DELAY TYPE

Overview | **Delay Type** | Delay Comments | Case Details


Procedural Area Delay Types

Year: (All)

Entity: THFW

Room: (All)

Provider: (All)

Elective: (All)

First Case: (All)

Time Range: On Off

Time Range Start (hhmm): 0600

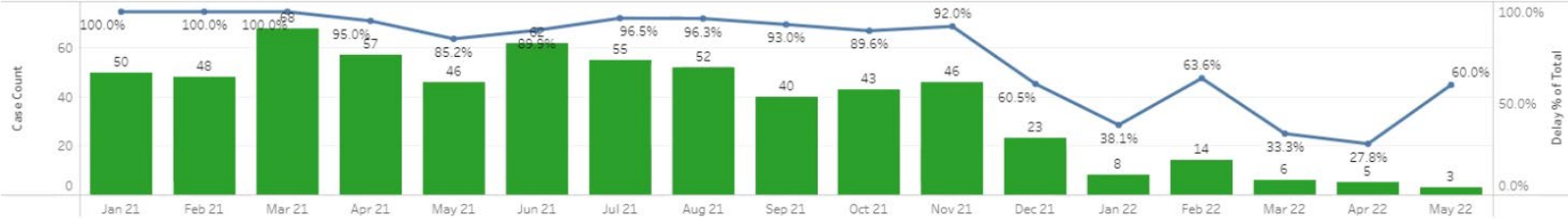
Time Range End (hhmm): 0900

Delay Type		Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21	Jan 22	Feb 22	Mar 22	Apr 22	May 22	Grand Total
Grand Total	Late Cases	50	48	68	60	54	69	57	54	43	48	50	38	22	22	18	23	7	731
	Average Delay	24.8	25.0	23.4	34.0	24.2	33.0	33.1	24.0	32.5	27.8	29.6	28.6	21.0	21.0	10.4	20.3	13.4	27.1
Null	Late Cases	50	48	68	57	46	62	55	52	40	43	46	23	8	14	6	5	3	626
	Average Delay	24.8	25.0	23.4	33.0	22.9	32.7	33.3	24.2	32.7	27.5	29.4	26.4	12.0	19.3	4.0	11.6	5.7	27.2
ANESTHESIA	Late Cases				1	3	1	1		1	3	1	2		1		3		17
	Average Delay				76.0	30.0	43.0	23.0		38.0	24.3	30.0	30.0		8.0		17.7		29.1
PATIENT	Late Cases					1	2		2				1	3	2	3	4	1	19
	Average Delay					22.0	38.0		20.0				15.0	8.7	20.0	11.7	50.0	13.0	24.6
PHYSICIAN	Late Cases			2	1	2		1	1	2	2		6	4	2	7	11	3	46
	Average Delay			40.0	50.0	39.5	31.0	38.0	26.0	35.5	23.5	31.0	35.3	14.0	16.7	29.5	21.3	28.4	
PREOP	Late Cases											1	3	4	1	1	2	2	14
	Average Delay											41.0	39.3	32.3	80.0	9.0	9.5	21.0	31.3
RADIOLOGY	Late Cases						2						1				1		4
	Average Delay						42.5						8.0				7.0		25.0
SCHEDULER	Late Cases											1							1
	Average Delay											39.0							39.0
STAFF	Late Cases					3	1						4	3	3				14
	Average Delay					31.0	9.0						21.5	17.0	38.7				25.4
SURGERY	Late Cases															1			1
	Average Delay															33.0			33.0
TRANSPORTATION	Late Cases												2	4	2	1	2		11
	Average Delay												9.0	23.8	18.5	8.0	9.5		16.1
UNIT	Late Cases						1				1	2							4
	Average Delay						45.0				37.0		41.0						41.0
VENDOR	Late Cases												1			1			2
	Average Delay												88.0			3.0			45.5

Delay Type:

- (All)
- Null
- ANESTHESIA
- PATIENT
- PHYSICIAN
- PREOP
- RADIOLOGY
- SCHEDULER
- STAFF
- SURGERY
- TRANSPORTATION
- UNIT
- VENDOR

Delay Type % of Total Delayed Cases



Month	Case Count	Delay % of Total
Jan 21	50	100.0%
Feb 21	48	100.0%
Mar 21	68	100.0%
Apr 21	57	95.0%
May 21	46	85.2%
Jun 21	62	89.5%
Jul 21	55	96.5%
Aug 21	52	96.3%
Sep 21	40	93.0%
Oct 21	43	89.6%
Nov 21	46	92.0%
Dec 21	23	60.5%
Jan 22	8	38.1%
Feb 22	14	63.6%
Mar 22	6	33.3%
Apr 22	5	27.8%
May 22	3	60.0%


*First Case: First case per room per day

Author: Data Source: Data Through:

REPORTING TOOL

DELAY TYPE

Overview | **Delay Type** | Delay Comments | Case Details



Procedural Area Delay Comments


Surgery Date: (All) | Entity: THFW | Room: (All) | Provider: (All) | Delay Type: (All) | Delay Reason: (All) | Elective: (All) | First Case: (All)

Time Range: On Off

Time Range Start (hhmm):

Time Range End (hhmm):

Word Cloud



Word Frequency

Comment Word	Case Count
DOCTOR	43
PT	42
CASE	37
NEEDED	23
AWAITING	22
CONSENT	21
PATIENT	21

Delay Comments

Log Id	Scheduled Start	Actual Start	Delay Length	Provider	Delay Type	Delay Reason	Delay Comments
3403605	4/23/2021 8:00:00 AM	4/23/2021 8:24:00 AM	24	MITCHELL, CURTIS MATTHEW	Null	Null	Dr. Eaton here at 0815
3425870	4/28/2021 3:00:00 PM	4/28/2021 4:23:00 PM	83	ELBEHARY, SALMA OSMAN	ANESTHESIA	ANES-NO CONSENT	waiting on MD to talk to patient
3571980	6/4/2021 8:00:00 AM	6/4/2021 8:12:00 AM	12	MITCHELL, CURTIS MATTHEW	PHYSICIAN	PHYSICIAN-LATE	awaiting Dr Mitchell
3706820	7/7/2021 1:30:00 PM	7/7/2021 2:19:00 PM	49	DIXON, TANYA STOYANOVA	PHYSICIAN	Null	waiting on md to consent
3774340	7/23/2021 1:30:00 PM	7/23/2021 3:07:00 PM	97	GORREPATI, NAVAKANTH	ANESTHESIA	NONE	Anesthesia waiting to speak with Dr. Reeb
3820998	8/4/2021 9:00:00 AM	8/4/2021 9:38:00 AM	38	MAHDAVI, ZAKRAUS KUNAL	PHYSICIAN	Null	md agreed to 0900 start , showed up to consent patient at 0930
3958253	9/7/2021 1:00:00 PM	9/7/2021 2:49:00 PM	109	MITCHELL, CURTIS MATTHEW	RADIOLOGY	Null	prior case ran over, md not available
3990166	9/15/2021 8:00:00 AM	9/15/2021 8:31:00 AM	31	KOGANTI, ASA DEEP	PHYSICIAN	Null	waited on MD to consent the patient
4347125	12/6/2021 8:00:00 AM	12/6/2021 8:24:00 AM	24	OOL, YINN CHER	PHYSICIAN	PHYSICIAN-NEEDS TO MARK OPERATIVE ..	clarifying site with MD
4379419	12/13/2021 8:00:00 AM	12/13/2021 8:38:00 AM	38	MITCHELL, CURTIS MATTHEW	PHYSICIAN	Null	MD came to talk to pt at 8:15 then followed by long bathroom use
4390019	12/15/2021 8:00:00 AM	12/15/2021 8:05:00 AM	5	FIESTA, MATTHEW PAUL	PHYSICIAN	Null	MD wanted to wait until ASA and Plavix assays had resulted
4395428	12/16/2021 8:30:00 AM	12/16/2021 10:13:00 AM	103	OOL, YINN CHER	PHYSICIAN	PHYSICIAN-PREV CASE RAN OVER SAME ..	Dr. Ool in Stroke case.
4396446	12/16/2021 10:00:00 ..	12/16/2021 10:21:00 AM	21	REDFERN, TIFFANY MASTERS	TRANSPOR..	Null	floor Dr. seeing patient holding up transport
4422814	12/22/2021 12:00:00 ..	12/22/2021 12:04:00 PM	4	GORREPATI, NAVAKANTH	PHYSICIAN	Null	waiting on dr. gorripati to put in consult note or talk to dr. reeb
4470001	1/3/2022 10:00:00 AM	1/3/2022 10:30:00 AM	30	GERSTLE, RONALD JAMES	PREOP	Null	1000: MD decided pt needed PIV. No H&P in chart.
4486061	1/6/2022 1:00:00 PM	1/6/2022 1:21:00 PM	21	PURI, ISHA	ANESTHESIA	ANES-NO ANESTHESIA STAFF AVAILABLE	waiting on correct MD
4501451	1/10/2022 1:00:00 PM	1/10/2022 2:21:00 PM	81	MITCHELL, CURTIS MATTHEW	PHYSICIAN	Null	prior case ran long, could not block arm for procedure until MD evaluated with us
4505101	1/11/2022 8:00:00 AM	1/11/2022 8:17:00 AM	17	MITCHELL, CURTIS MATTHEW	PHYSICIAN	Null	Complex case and Md needed to look up previous scans
4520160	1/14/2022 8:00:00 AM	1/14/2022 8:17:00 AM	17	MITCHELL, CURTIS MATTHEW	PHYSICIAN	Null	0755: consult with MD about complex case for procedure. MD will need to look up previous scans.

*First Case: First case per room per day

*Elective Cases are not scheduled on scheduled start

Author: Data Source: Data Through:

REDUCING DELAYS:

RECOMMENDATIONS

- **"Efficiency Champion"**
 - Nursing Career Advancement Program (NCAP)
 - Collect, review, analyze and report data
- **Reporting Tool**
 - Tableau Dashboard based on Epic data
 - Standardized, graphical data analysis
- **Physician and staff engagement**
 - Improved efficiency and work/life balance
 - Healthy competition
- **Long-term goal**
 - Epic Dashboard
 - Improve inter-department communication

THANK YOU

- **The Physicians Lead Team**
 - Dr. Hardesty, Mandalynn, Charisse, Joseph
- **Our wonderful Sponsors and Coach**
 - Melanie, Emily, Josh
- **The first “Efficiency Champion”**
 - Rachel White

- **Any Questions?**



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