

# OR Governance

## **Accountability**

Even the most exquisite plan, unless executed correctly, will not produce desired outcomes. True and sustainable transformation of an environment, with the complexities of the operating room, starts with identifying where accountability must be placed to achieve desired outcomes.





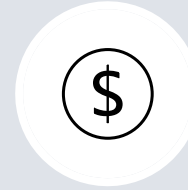
# Need for Physician Leadership

## Symptoms

- Physicians not engaged at a level that enables a highly functioning surgical environment
- Benchmarks for highly functioning operating room not utilized
- Lack of ownership for outcomes.
- Nothing ever gets done. Cycle of complaining without ability to hold anyone accountable.
- Rules not the same for everyone

# Offering

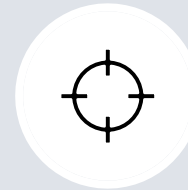
- Functioning Physician-led governance group in place within 6 to 8 months
- Performance targets established utilizing national benchmarks
- Metric driven scorecard created
  - Measured monthly for target achievement
  - Monthly variance improvement plan presented by OR leadership to governance group - until targets achieved
- Target achievement guaranteed



Unused OR capacity revealed, valued and access plan developed



Physician accountability in exchange for an active say in how the OR functions



Dedicated resource(s) to “work the problem” with a laser focus and tenacity



Targets\* established for on-time starts, room turn over, suite utilization, block utilization, cancelation rate, scheduling accuracy, close to cut and PACU LOS. Performance improvement assistance provided until targets attained - results guaranteed.

# How it works



## 1. Desktop Assessment

Interviews, two days of observations, data review, executive level report out



## 3. OREC

Chartered, core policies and standardized anesthesia guidelines adopted, eight-month action plan developed and initiated



## 2. Executive Strategy Developed

Operating Room Executive Committee (OREC) members identified, approached and confirmed



## 4. Transformation Tactics

OREC meetings facilitated, performance targets established, and necessary operational change coached into existence

# Operating Room Executive Committee Reverses 5 Years Of Declining OR Volumes – A Case Study

## The Client

A Five hospital system in the Southeastern part of the country with more than 1,000 beds and 68 operating rooms

## The Challenge

- Deteriorating condition of the physical plant due to lack of capital funds
- Lack of clinical excellence commitment among OR staff
- Physicians felt nothing would ever change
- Five years of declining surgical volume

## The Approach

- The process began with a review of departmental operations and a comparative analysis of the current state to leading practices
- Opportunities discovered to improve the Environment of Care, Governance, Leadership, Staff Education and Competency, Information Technology, CSSD functions, Supply Chain, and Core Processes
  - A four-phase strategy was developed to:
    - Address the foundational infrastructure
    - Implement improvements in CSSD and Supply Chain functionality
    - Address core processes that impact efficient perioperative operations – First Case On-Time Starts, Cancellation Rates, Turnover and Downtime, Scheduling & Suite Utilization, and Block Utilization
    - Increase surgery volume
- A multi-disciplinary team of subject matter experts partnered with the client over a 15-month period and developed strategic work plans for each initiative, identified and removed barriers, developed solutions, and achieved favorable outcomes

## The Results

- Corrected 450+ environment of care issues, resulting in regulatory compliance
- Improved core process measures to benchmark
- Established an engaged Operating Room Executive Committee with real accountability for departmental performance
- Created an Operating Room environment with engaged surgeons
- Established an education department with Masters-prepared educators

# William Denton



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Bill has thirty plus years as a clinician, healthcare executive, and consultant. He has led surgical departments in small community hospitals as well as in the largest of academic medical centers.

Bill's passion and exclusive focus is physician led governance of the surgical environment.

He has:

- 100% proven track record establishing governance structures
- 100% client satisfaction
- 100% achievement of surgeon established performance targets