Staff Perceptions of Operating Room Delays

Laura D. Leonard, Katie Cunniff, Maxwell Shaw, Victoria Huynh, Jenniann Yi, Ethan Cumbler and Sarah E Tevis

Background:

Operating room (OR) time is expensive and OR delays occur frequently. Delays in the OR are not only costly to the system, but are a source of frustration for providers and patients. As a result, reducing preventable OR delays is essential to improving efficiency and quality. In this prospective study, we examined provider perspectives of OR delays.

Methods:

Per convenience sampling, we conducted semi-structured interviews with 10 providers which included 3 surgeons, 5 operating room registered nurses (OR RNs), and 2 anesthesia providers. Providers were asked to identify factors that contribute to a delay in the surgical incision time from the time the patient enters the OR or factors that prolong the "In room to cut" time. The perceived impact of each barrier was subsequently investigated using a survey which was administered to 43 operating room registered nurses (OR RNs) and 8 Clinical Scrub Technicians (CSTs).

Results:

Interviews revealed 16 factors that contribute to a prolonged "in room to cut" time. The survey then revealed that "case complexity" and "incorrectly scheduled procedure" were perceived as having the highest impact. Of the remaining factors, 8 were identified as having moderate impact and 6 barriers were identified as having minimal impact on in-room surgical delays (Figure 1). Additionally, 57.69% of respondents offered "anesthesia placing additional lines" as a notably absent barrier on the survey. Respondents perceived "patient positioning", "placing additional lines" and "lack of communication between interdisciplinary team players" as taking the longest amount of time.

Conclusions:

This study highlighted case scheduling and interdisciplinary communication as possible areas of improvement. While this work represents the perception of an important stake-holder group, the OR staff function as an interdisciplinary team and additional investigation of surgeon and anesthesia provider perceptions of delays is warranted prior to developing solutions to improve OR efficiency.

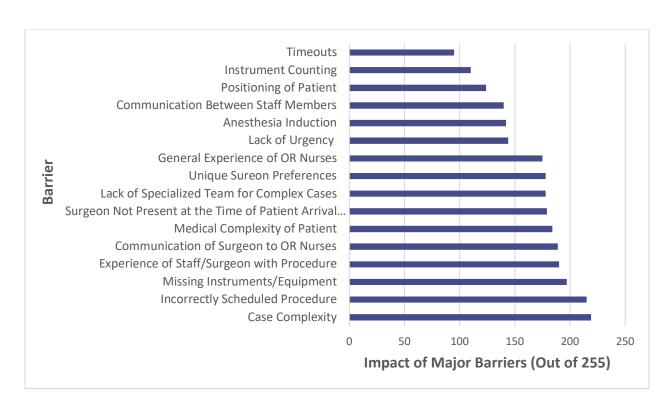


Figure 1. Perceived Impact of Major Barriers Causing In Room OR Delays