



# QHR Consulting Services Case Study

## Improving OR Throughput Using Block Scheduling

### THE CASE: Christus St. Michael Health System, Texarkana, Texas

#### The Challenges

Christus St. Michael Health System – a 278 bed tertiary care center with 12 OR suites – was completing nearly 10,000 surgical cases per year. In fact, it appeared to be pushing capacity. But the department leadership saw gaps in the schedule. Calling on QHR expertise, they wanted to find ways to serve more patients and improve physician satisfaction. Based on QHR's evaluation, the key issues were:

- A modified block/first-come-first-served scheduling system was inefficient and confusing
- Anesthesia scheduling was unpredictable
- Many patients arrived without pretesting or preregistering
- First cases started late and room turnover lagged; physicians and patients were frustrated

*"Our physicians listened when QHR's experts spoke. With insightful analysis and negotiation, they got us consensus and cooperation."*

*Rae Thigpen, Director Surgical Services  
Christus St. Michael Health System*

#### Q Solutions

Veteran specialists from QHR began by analyzing 18 months of data, observing operations and interviewing surgeons and ancillary staff to understand their concerns and goals.

Recommending specific steps, QHR helped in-house staff take control of the process through four process improvement teams. Each focused on one critical area:

- Pre-admission testing
- Block scheduling
- On-time case starts
- OR suite turnover

Validating QHR findings, the teams (which included surgeons, anesthesiologists and OR staff) explored options and reached agreement. With help from QHR, they designed, tested and implemented a block scheduling system that helps the busiest surgeons make better use of their days. "Now they can book cases back to back," describes Rae Thigpen, Director of Surgical Services. "That's ideal. But we keep 25 percent of room time open for emergencies and to invite surgeons just beginning their practices to bring cases here."

Encouraging physicians to send patients to preadmission testing and eliminating the holding area to expedite patient flow, the Christus process improvement teams also redesigned nurse and anesthesia staffing and mobilized turnover teams. "With volumes rising so fast, it's a constant struggle," Thigpen admits. "But with our loyal staff and some help from QHR, I'm confident we'll manage the growth."

#### The Outcome

- Surgical volume grew by 800 cases (+9%) from 2004 - 2006 as the OR increased its capacity from 89% to 93%
- Block scheduled surgeons reduced turnover time by 4 minutes/case on average, resulting in an increase of 2.5 cases/day, while aggregate turnover time for all surgeons dropped two minutes
- Average minutes/case dropped 9 minutes (145 to 136 minutes/case) from 2004 to 2006, opening up an additional 1,430 surgical hours during the year

QHR provides consulting services to independent hospitals and health systems. For more information about QHR management or consulting services, call Pat Cooper, Vice President, Patient Services at 800-233-1470, ext. 4775, or email her at [Pat\\_Cooper@qhr.com](mailto:Pat_Cooper@qhr.com).