TP5.2.3
Quality improvement project to reduce turn-around times to improve vascular theatre efficiency

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Aim: One of the factors influencing theatre efficiency is turn-around time (TAT). The aim of this QIP was to reduce turnaround times by 25% thereby reducing financial implications of theatre idle time.

Methods: Baseline data was obtained from electronic theatre record system 'Galaxy' for the period October 2019 to February 2020. TAT (Time from the last patient going to recovery and the next one coming into the theatre) was measured and a period average was established. This QIP mapped processes and conducted interviews, to identify issues contributing to longer turnaround times. Interventions were then constructed and implemented over 6 weeks.

Results: One of preventable causes of delay identified from staff interviews and personal observations was inadequate patient preparation by the ward. Preintervention percentage theatre utilisation was 86% and turnaround times was 51.7 minutes. A PDSA cycle was initiated focusing on advanced warning (30 minutes prior to the end of the previous surgery) from theatres to wards and advanced preparation from wards, using a newly designed ward-based checklist. After the first PDSA cycle there has been an improvement in TAT to 42.8 minutes, a decrease of 18.2%. Whilst this did not meet our goal of a 25% reduction, this remains significant. Unfortunately due to COVID -19 the second cycle has been delayed.

Conclusions: Affordable and sustainable improvements will be needed in post COVID-19 recovery phase to tackle the backlog of surgeries. This project has demonstrated that advanced warning system can decrease turnaround times.