

Improving First Case On Time Starts (FCOTS) : Success with a Team Approach

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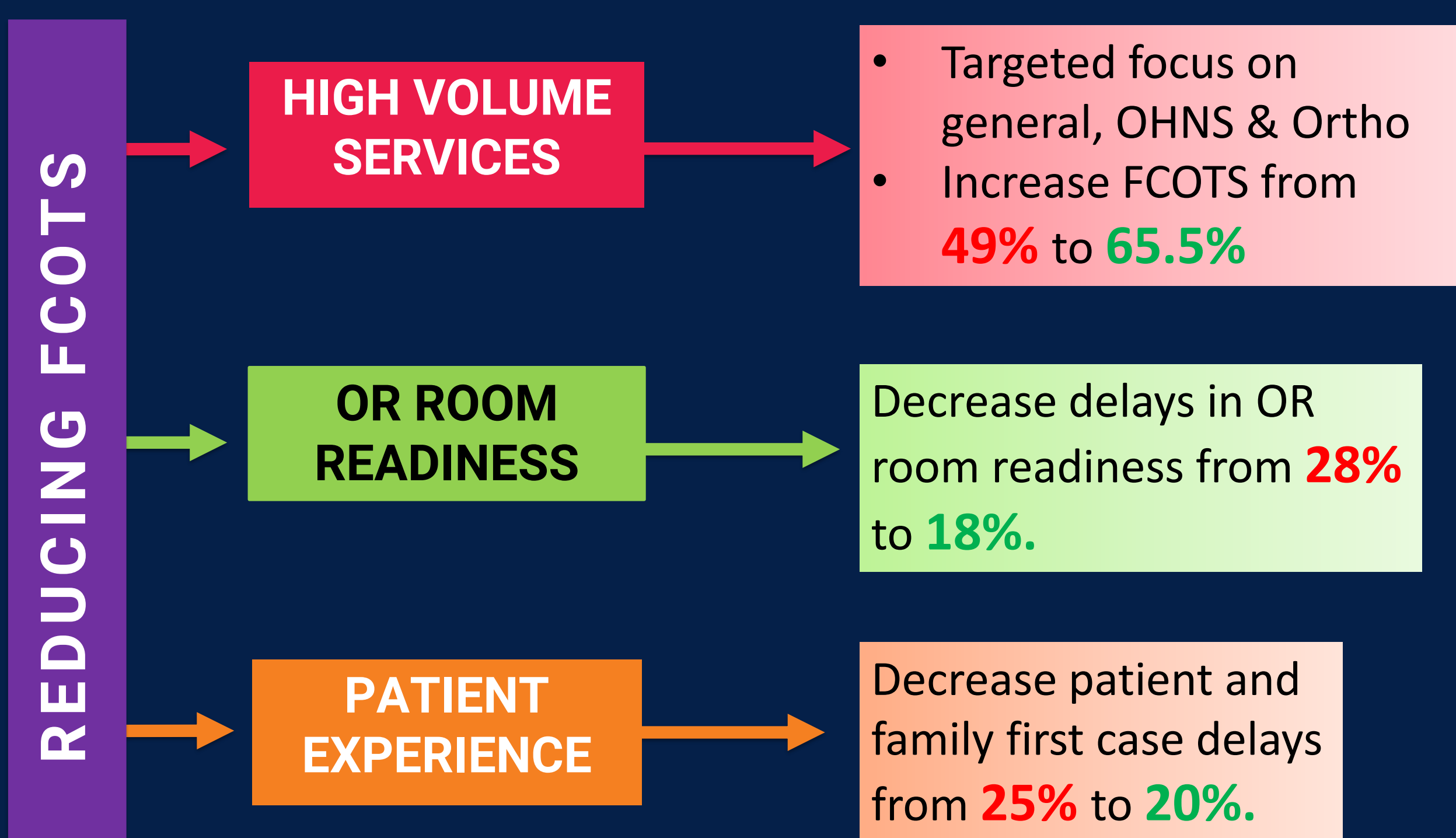
BACKGROUND

- FCOTS are a key performance indicator for perioperative areas across the nation
- National benchmarks from Children's Hospital Association is 65.6%
- Benioff Children's Hospital in San Francisco (BCHSF) is a quaternary care Academic Medical Center providing complex care with a range of interprofessional clinicians
- (BCHSF) was at 44% in October 2020
- FCOTS directly correlate to patient experience data with survey question, "Did your procedure begin on time?"
- Poor performing FCOTS reflect inefficiency, decreased revenue and result in poor staff and patient satisfaction

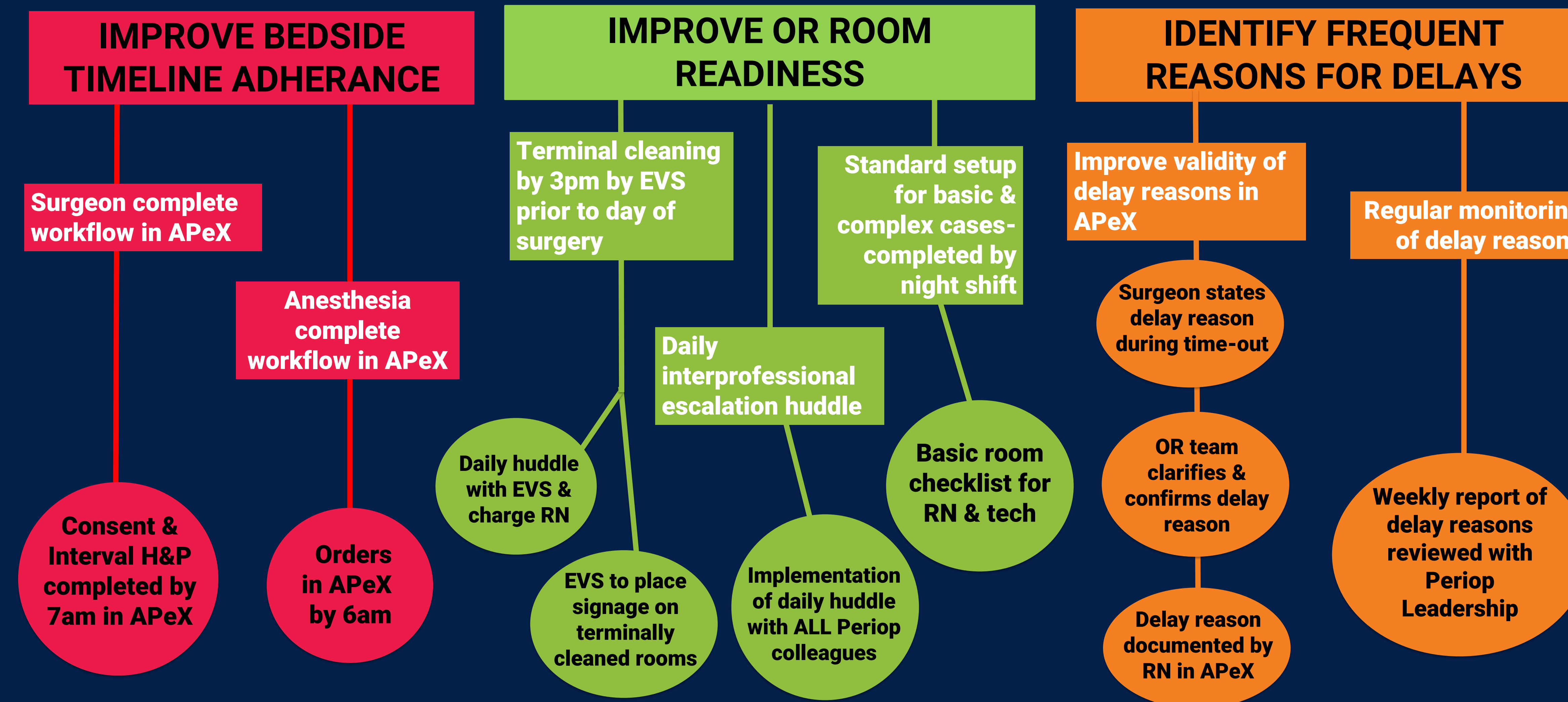
PROBLEM STATEMENT

Unclear workflows and role confusion among perioperative staff may be contributing to inefficiencies in FCOTS. Patient flow bottlenecks were multi-factorial and occurring from inconsistent surgery scheduling, documentation issues, and OR readiness delays. To improve staff and patient satisfaction in the perioperative settings at UCSF Health, improving the current rate of FCOTS (overall 44%) was identified as a systems initiative in Oct 2020.

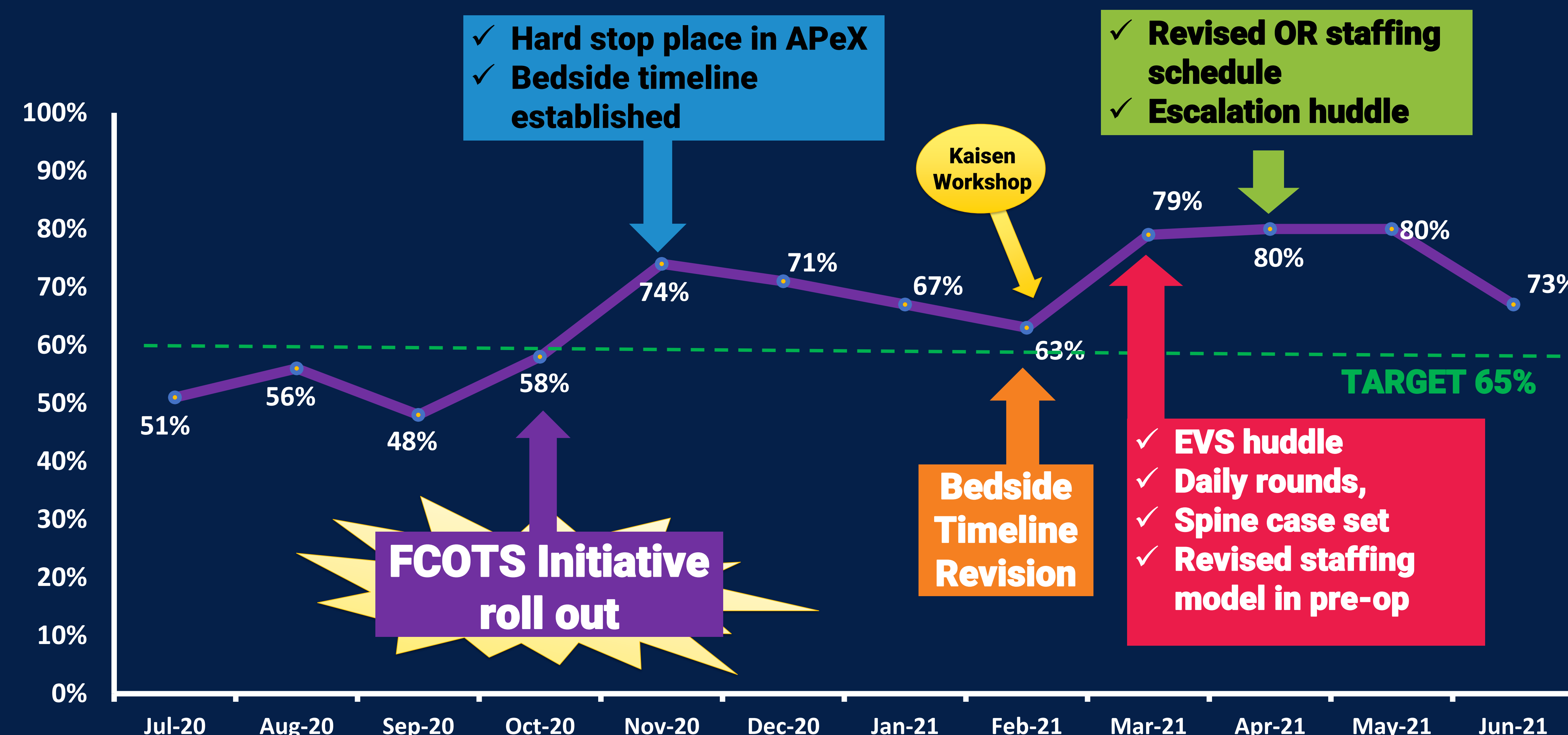
PROJECT GOALS



PROJECT PLAN & INTERVENTIONS



RESULTS



LESSONS LEARNED

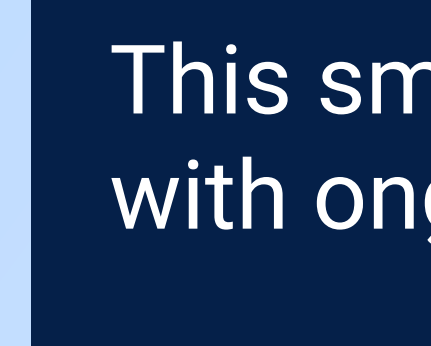
- Patients should guide all interventions and remain the focus throughout the project
- Celebrate small victories and recognize that improvements are gradual over time
- Quality improvement projects are an opportunity to engage front line staff and advance their professional development
- Unit culture influences changes in practice and behavior and require acceptance of trial and error
- Interprofessional involvement and commitment is crucial to ensure accountability in a highly complex academic medical center
- Constant and consistent communication at all levels and modalities is necessary to disseminate data and to support transparency

DISCUSSION

Through a multi-pronged approach, FCOTS were improved as well as an increase to >90% of patient satisfaction scores.



Providing role clarity through this project has been the impetus to drive other QI initiatives.



This small test of change continues at BCHSF with ongoing opportunities for improvement.

ACKNOWLEDGEMENTS

Thanks and appreciation to all BCHSF Perioperative Staff

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