



Problem

Syracuse, New York-based SUNY Upstate Medical University — the only academic medical center in Central New York — focuses on improving the health of the community through education, biomedical research and health care. As the region’s largest employer with almost 10,000 employees, Upstate serves 1.8 million people stretching north to Canada and south to Pennsylvania. Upstate faced a shortage of available operating room time to meet demand while experiencing utilization below targets set by OR leadership. A lack of actionable data available to department chairs impeded Upstate’s ability to take appropriate actions for improvement. Surgical services lacked standardized policies based on objective data. Recognizing the need for unified decision-making in key areas, including block policy to allocate time, block release times and areas for operational improvement, Upstate understood the importance of having a “single source of truth” across the academic and community settings to ensure shared best practices and goals while maintaining a high level of visibility into decision-making and trust in data presented during operational and committee meetings. Before deploying iQueue for Operating Rooms, Upstate — as many hospitals do — had various reporting sources that were in conflict with each other.

Solution

By deploying iQueue for Operating Rooms across SUNY Upstate Downtown and Community Hospitals, Upstate hoped to improve access to the OR, increase the accountability of its surgeons for their use of their allocated time, and add transparency through a set of objective, data-driven performance metrics that eliminated ambiguity and helped surgeons develop trust in their key performance indicators. A major thrust of the effort was also to adopt a new framework for measuring OR utilization that focuses on Collectable Time — segments of time in which a case could have been scheduled but wasn’t — and on scheduled downtime to drive OR utilization upwards. The Downtown Main OR leadership team and the LeanTaaS team met with key stakeholders to review the proposed new allocation and its benefits. They also developed updated policy guidelines for how robotic time would be assigned and managed.

Results

In the first quarter after launch, Upstate experienced a 3.4% increase in weekly volume of cases accomplished within existing capacity and during business hours. This is tied to their 5.5% increase in the number of OR minutes used during business hours. Similarly, Upstate has realized a positive impact on key utilization metrics including prime time and staffed room utilization with 2% and 1% improvements respectively. Furthermore, “release proactivity” across the organization has improved from an average of two days ahead of EHR auto release to 12 days in advance of auto release. As more surgeons now release time they know they can’t use further in advance, other surgeons are able to claim that open time for their cases, allowing more efficient patient access to the OR.

3.4%

Increase in weekly case volume

5.5%

Increase in OR usage in minutes

2%

Increase in Prime Time Utilization

1%

Increase in Staffed Room Utilization

10 day

Increase in “Release Proactivity”

