

CAN THE IMPROVEMENT OF OPERATIONAL EFFICIENCY IN A SURGICAL CENTER REDUCE WAITING TIMES FOR ORTHOPEDIC SURGERIES IN RESOURCE-LIMITED REGIONS?

147251



Elaine Alves Jesus*, Fabio Pitorri*, Lívia Loamí R. J. de Paula*

* Mudita.CARE, São Paulo, Brasil

INTRODUCTION

In resource-limited healthcare settings, maximizing operational efficiency is essential to improve patient outcomes and reduce waiting times. In regions like the Brazilian Amazon, where healthcare resources are often constrained, optimizing surgical room utilization can be crucial for providing timely access to care, particularly for procedures with high demand, such as orthopedic surgeries. This study evaluates a structured approach to improving efficiency in a public hospital's surgical center without adding substantial new resources. Adopting a cycle of data collection, diagnosis, and implementation of improvements was conducted to identify and address bottlenecks, ultimately aiming to reduce idleness and increase room occupancy. Through this intervention, significant gains were achieved, including a notable reduction in waiting times for surgeries, demonstrating that even in low-resource settings, strategic process improvements can have a substantial impact on healthcare delivery.

OBJECTIVE

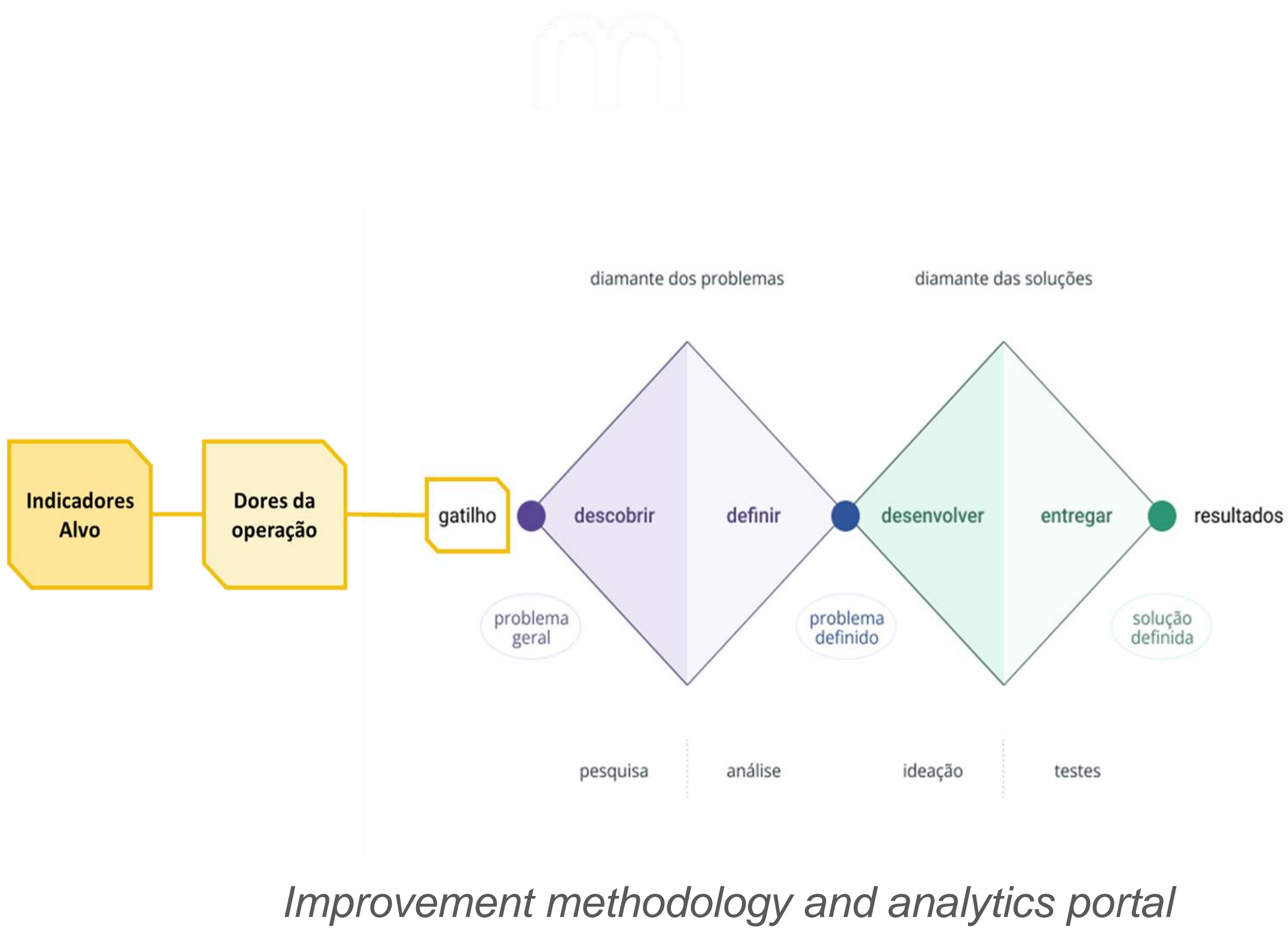
To evaluate whether enhancing operational efficiency, without the addition of substantial new resources, can reduce idleness and increase the utilization of surgical rooms, thereby decreasing the waiting time for orthopedic surgeries in a public hospital in the Brazilian Amazon.

METHOD

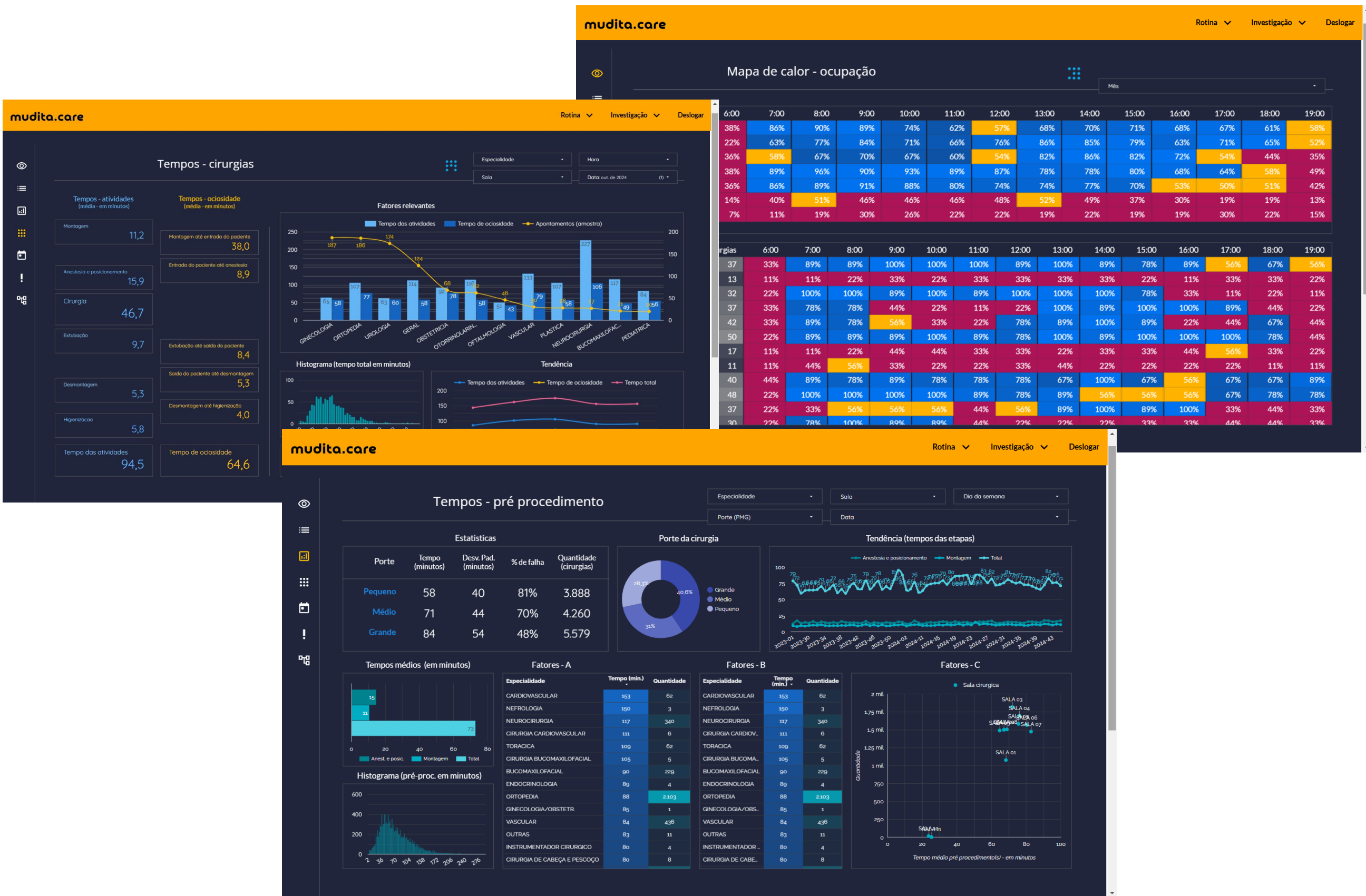
The Mudita.CARE methodology was employed to organize the operational process. This intervention consists of three phases: data collection on the times and movements, idleness, and occupancy of surgical rooms, as well as the waiting time for surgeries; diagnosis of the main bottlenecks and obstacles in the processes; discussion and definition of improvements with the department's multidisciplinary team; and implementation and evaluation of the effectiveness of the changes made. These phases form a cycle that repeats as necessary.

RESULTS

Six cycles of the proposed intervention were conducted with the participation of doctors, nurses, managers, and support staff from the surgical center. After six months of project implementation, the occupancy rate increased from 30% to 47% and the waiting time for surgeries dropped from 181 to 37 days.



Improvement methodology and analytics portal



CONCLUSIONS

Enhancing operational efficiency through the involvement of the surgical center's multidisciplinary team can reduce idleness and increase the utilization of surgical rooms, as well as decrease the waiting time for orthopedic surgeries in resource-limited regions. Further studies are recommended for different surgical specialties and other resource-limited regions, such as in low-middle-income countries.

REFERENCES

Kaplan, R. S.; Anderson, S. R. Time-Driven Activity-Based Costing: A Simpler and More Powerful Path to Higher Profits. Boston: Harvard Business Press, 2007.

Silva, J. P. A Aplicação do Custeio Baseado em Atividades com Enfoque no Tempo em uma Indústria de Transformação. 2015. 120 f. Dissertação (Mestrado em Contabilidade) – Faculdade de Ciências Contábeis, Universidade Federal de Minas Gerais, Belo Horizonte, 2015.

Verhaegen, Jeroen C.F. Perioperative Operating Room Efficiency Can Make Simultaneous Bilateral Total Hip Arthroplasty Cost-effective: A Proposal for a Value-sharing Model. Arthroplasty Today, Volume 18, 202 - 211.e1

CONTACT INFORMATION

Fabio Pitorri – fabio@muditacare.com.br – www.mudita.care