

## **Abstract**

**Background:** Perioperative (periOp) managers and administrators are tasked with monitoring and evaluating efficiency and productivity. The first case on-time start (FCOTS) is a metric to measure efficiency for the daily Operating Room (OR) schedule. The delays are addressed to improve OR performance. The perioperative Registered nurses (RNs) play a significant role in preparing for this event in the OR. PeriOp-RNs document delays in the electronic chart medical record. By improving the documentation's accuracy on the delays, the specific reason for the delay will be addressed quickly, resulting in an improvement of the FCOTS.

**Local Problem:** In the first quarter, 495/1299 (38%) first cases were recorded as delays in the OR of a Level I trauma hospital. The delay is directly and indirectly attributed to the OR-ready elements carried out by the periOp-staff, which includes the RNs, surgical techs, and surgical support techs. The periOp area is now confronted with the inconsistent and incorrect practices of the periOp-staff in carrying out OR ready elements, which affects their documentation and FCOTS. A quality improvement project addressing OR-ready practices reflecting documentation has been approved by the OR director.

**Methods:** A pre/posttest design will be used for the project. The hospital IRB and JMU IRB approved the quality improvement project. The Iowa Model Revised: Evidence-based practice will be used as the conceptual framework. Moreover, a literature review was conducted to generate an evidence-based intervention. Six-month retroactive pre-intervention data was collected to assess the documentation and routine practices of the periOp-staff. An approved and secured SurveyMonkey questionnaire was administered to the periOp staff, measuring the OR-Ready elements before the intervention. Post-intervention data will include the number of inconsistent OR-ready delays in the documentation and an assessment of the periOp-staff's ideas about the OR-ready elements. Descriptive statistics will be used to analyze the results.

**Intervention:** The intervention will be an education-driven approach highlighting the definition of the OR-ready elements and the proper way to document in the medical record. Routine rounding will be done during the implementation phase of the project. The project progress and results will be reported to the interdisciplinary leadership OR team during rounding meetings to facilitate an interdisciplinary approach.

**Results:** Initial questionnaire respondents were 88, comprising 55% of the workforce. The results revealed a high percentage of misinformation and misinterpretation of the OR-ready elements. The pre-intervention data revealed 495 cases or 31% that were delayed. Four hundred of those cases showed inaccurate documentation. Post-intervention data will be collected after the implementation phase.

**Implications:** Results pending. Implementation of this quality improvement project would ultimately address the inconsistent practices and documentation surrounding the OR-ready elements to improve flow and prevent delays on FCOTS. The project also facilitates interdisciplinary collaboration on FCOTS.