Bringing excellence in Dashboard Metrics

Helping clients to improve performance

Abstract
Our client was a premier institute, based out of the UK, which worked with multi–specialty physicians that offer its patients non–invasive options for several conditions. The institute approached Research2Systems for a proper Dashboard Metrics solution that can assist to track the metrics that can lead to the institutional success. An accurate and pertinent dashboard metrics solution will help in tracing the fortes and flaws of the company and guide its future planning.

The Challenge
Research2Systems engaged to assist the institute to get an immaculate metrics that actually correlate with institutional success. Building dashboards that are grounded on such metrics were required to yield actionable acumen and money-spinning development.

How we helped
In order to provide dashboard metrics that proves to be the best predictor of this institute's success Research2Systems helped its client to execute the project over three phases:

Phase 1: Volumes –
The Volumes in turn comprised of:
– Case Volume
– Case Minutes
– Case Minutes by Time of the Day

The Case Volume reflects total number of cases over time. We studied the surgical case volume trend to develop a better and superior dashboard.
The Case Minutes reflect total number of minutes of surgery per month as well as the growth and seasonal variation. With the comparison between volume and minutes we determined growth patterns.
The Case Minutes by Hour of the Day allow you to look at what percentage of case minutes are completed in each shift. The goals were:
– 90% of minutes completed between 7am-3pm
– 95% of minutes completed by 5pm

Phase 2: Utilization –
The Utilization in turn comprised of:
– OR Utilization by Day of Week
– Block Utilization

The Utilization by Day of the Week reflects total OR utilization on each day of the week. Our goal was to even out the utilization so there is little variation between the days of the week.

The Block Utilization is calculated by surgeon/service. It is best to use adjusted utilization in order to not penalize a surgeon for TOT. Our Goal was 75% block utilization in order to maintain block.

Phase 3: Operational Stats –
We worked on the operational stats of the institute and centered our working on the following:

Turnover Time –
Turnover time is calculated as patient out of the room to next patient in the room. Our goals were:
– Outpatient 10-20 minutes
– Inpatient 30-40 minutes

On Time Starts–
It is the time when a patient enters the operating room. Our goal was to make it > 90% within 10 minutes.

Cancellations –
Usually the institute was monitoring same day cancellations. We made it:
– <1% for an outpatient setting
– <10% for a major trauma center

Add Ons –
It reflects adequate open/urgent time. Open time is time available to anyone and can be booked in advance. Urgent time is time available starting 24 hours before. We worked on making it < 20%.

Overtime Minutes –
This reflects the amount of overtime minutes paid to OR staff. By addressing the On time starts, TOT, Staffing levels by time of the day and Block Scheduling, we decreased overtime minutes significantly over a 4 months duration.

The Deliverable
We delivered exceptional dashboard metrics to the institute that was grounded on increasing its efficiency and productivity. Our client got a great and proficient tool which assisted in measuring and tracing its performance effectually.
Our dashboard deliverables were focused on aligning metrics with the tactical goals of the client. It made it easier for the institute to share key information between different departments in such a manner that all the members are aligned towards the firm's core value proposition.