

# Optimized Operating Room Utilization and Scheduling at University of Virginia Medical Center

Facing operating room (OR) capacity constraints and a need for utilization optimization, University of Virginia Medical Center worked with Huron to implement surgical flow, emergency department and inpatient flow solutions, resulting in increased OR utilization during prime hours.

## Challenge

With operating room (OR) utilization trending above 85%, University of Virginia Medical Center (UVMC) leadership faced growing capacity constraints and wanted to ensure optimum utilization during an expansion of facilities. They also wanted to establish consistent processes and systems across the OR and inpatient care settings.

## Approach

Huron implemented its surgical flow solution along with emergency department and inpatient flow solutions.

“Huron’s data analysis and problem solving are exceptional. They bring a lot of experience, but they’re also very collaborative. They truly became part of our team.”

**A. BOBBY CHHABRA, M.D., ASSOCIATE CHIEF  
MEDICAL OFFICER, SURGICAL SERVICES,  
UNIVERSITY OF VIRGINIA HEALTH SYSTEM**

## Results

**5.3%** increase in OR utilization during prime hours

**42%** reduction in pre-anesthesia visits needed on the day of surgery

**14%** increase in scheduling accuracy

The surgical flow solution focused on improving access to the OR for both patients and surgeons, streamlining key processes and communication around patient preparation and providing weekly operational performance reporting for all key departments.

### Enhanced surgical access and preparedness:

Improved pre-admission testing and documentation led to reduced variation on the day of care, empowering the team to take a proactive approach to preparing patients for surgery.

**Reduced wait times:** Restructured roles and responsibilities within the Pre-anesthesia Evaluation Testing Center increased throughput and parallel

processes during patient visits. New procedures resulted in a 16% reduction in pre-anesthesia testing wait times, and phone pre- anesthesia evaluations increased from 0% to 15% of visit volume.

**Provided data to enable informed business**

**decisions:** Huron helped staff and management use operational measures, reports and data to make informed and rapid business decisions.

**Improved governance:** A redesign of the governance structure helped refine oversight of the OR and positioned leadership to more effectively revise existing policies and procedures.

**Increased utilization:** The team improved schedule close and block release procedures and refined block utilization measurement policies.

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The University of Virginia Medical Center is a 570-bed Level I trauma center with 27,000 inpatient stays each year.

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