Theatre Utilisation
Implement information systems that enable you to monitor theatre efficiency

The Challenge
Analysis of theatre efficiency shows that at least £40m income is lost each year due to cancelled operations and empty theatres. In many cases, the root cause of poor theatre utilisation can be identified and addressed – leading to improved clinical standards and improved financial performance.

The CHKS Solution
One of the difficulties faced by theatre managers is recording information accurately and completely. Many trusts have implemented theatre systems but are unable to extract reliable performance indicators that inform management decision-making.

Our NHS-experienced consultants will help you implement information systems that enable you to monitor theatre efficiency using data that is accurate, complete and up to date.

Working closely with your clinical teams, they will show you how to identify reasons for low utilisation and put in place corrective actions - ultimately increasing care quality, trust efficiency and financial performance.

Theatre Utilisation focuses on four typical measures of performance that monitor ‘planned’ versus ‘actual’ performance. This analysis clearly highlights the key areas for improvement and creates a baseline for measuring improvement.

1. Planned hours of sessions used
2. Actual run time of sessions used as a percentage of planned hours
3. Patient hours as a percentage of used sessions
4. Utilisation of original schedule.

Benefits
- Increased efficiency and financial performance
- Better use of staff resource
- Improved patient experience
- Improved clinical outcomes.

“CHKS is helping to support our clinical governance work very effectively. What makes them different is the extremely good access to and interaction with the dedicated CHKS consultant. It is a valuable addition to the excellent CHKS clinical benchmarking system.”

Chief Operating Officer/Deputy Chief Executive, North Cumbria University Hospital NHS Trust
Why are theatres not fully utilised?

- Manual, poorly maintained management information systems
- A lack of agreed start and finish times for theatre sessions
- No separate emergency theatre session - leading to interruptions in routine lists
- Over-ambitious or poor list planning
- A lack of ward beds
- Surgeon or anaesthetist availability
- Poor shift rostering and high utilisation of part-time staff
- Delays due to external factors such as patients, equipment and supplies not being delivered to theatre on time
- Persistent bottlenecks elsewhere in the hospital that were not foreseen when the list was planned e.g. a lack of intensive care or general ward beds
- Operations are cancelled because patients were not assessed adequately beforehand
- Patients have cancelled or not turned up at the hospital
- Theatre timetables are not updated to reflect changes in workloads such as case mix or specialty.

"On average only 73% of total operating hours are actually used."

CHKS

Project outline

Day 1 - Team briefings and data audit
Day 2 - Data collection
Day 3 - Data analysis
Day 4 - Team workshop – problem solving
Day 5 - Management presentation and plan

CHKS, part of Capita plc, is a provider of healthcare intelligence and quality improvement services. In the last 23 years it has worked with 374 healthcare organisations worldwide. With 70 per cent of acute healthcare providers in the UK choosing CHKS to support them on their improvement journey, CHKS has the skills and know-how to boost quality, cost and delivery

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