

## Clearing the fog of Theatre Utilisation: Cataract Surgery Benchmarking

Jennie Pares<sup>1</sup>  
John Marshall<sup>1</sup>

<sup>1</sup> NSW Agency for Clinical Innovation

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The NSW Agency for Clinical Innovation (ACI) was approached to recommend an appropriate benchmark for operating theatre utilisation for cataract surgery in NSW. The Operating Theatre (OT) utilisation metric is part of the suite of metrics recommended in the ACI OT Efficiency guidelines.

Ten public hospitals across NSW agreed to provide a core set of operating theatre information to the ACI for the purposes of benchmarking. The information was for 10 operating theatre lists that were exclusively for “excision of cataract, insertion of intraocular lens”. The ACI was responsible for the collation and high level analysis of the site specific operating theatre data. Additionally the ACI utilised additional Activity Based Management data for the purposes of calculating Operating Theatre Productivity Index information.

Overall there was variation across the sites in:

- Average OT utilisation rates (57%-79%).
- OT utilisation across the 10 individual sessions within each site.
- Other efficiency factors such as average throughput per session (4 cases to 13 cases per session); average time per case (18 minutes per case to 62 minutes) and average anaesthetic time per case (25 minutes per case to 89 minutes).

The benchmarking project reinforced the importance of analysing a number of metrics rather than focusing on a single metric when examining theatre efficiency. Examination of the OT utilisation metric alone without concurrent examination of additional metrics would have provided an incomplete picture and resulted in potentially different management decisions.

Specifically the benchmarking project found that those hospitals with the highest OT utilisation also had:

- the lowest average case throughput
- the highest average time per case
- with one exception, longer average anaesthetic times per case
- lower OT Productivity Index scores

Conversely those sites with lower OT utilisation rates had:

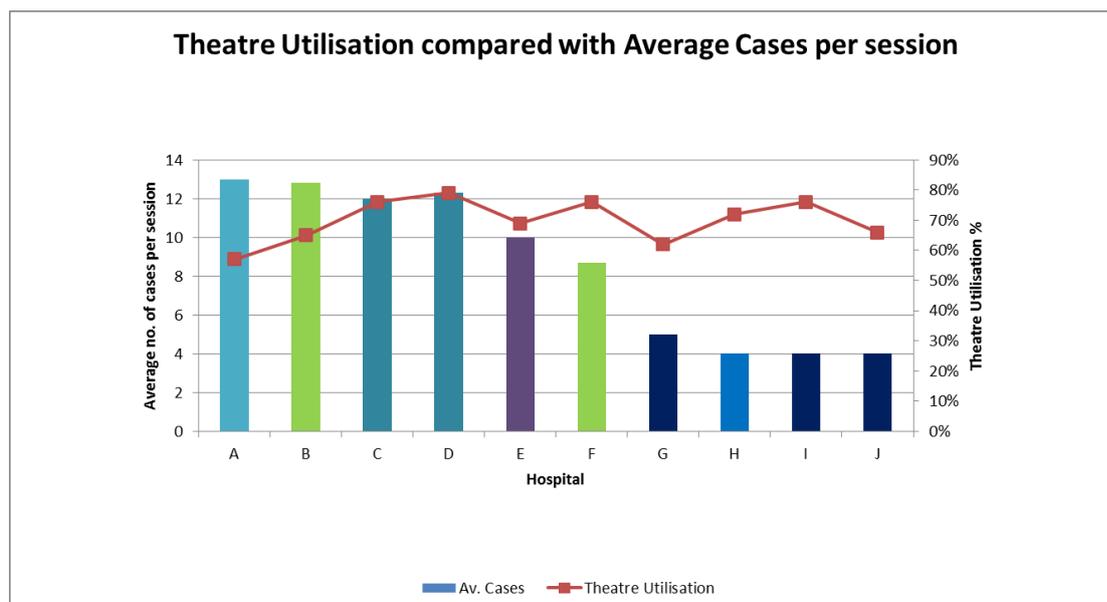
- higher average throughput (higher number of average cases per session)
- lower average time taken per case per session
- lower average anaesthetic time
- higher OT Productivity Index scores

The key findings were:

1. The OT utilisation metric needs to be analysed and interpreted together with other OT metrics to provide a more complete measure of efficient and effective use of the OT.
2. The 80% OT utilisation target may not be an appropriate benchmark.
3. When compared with the tertiary and principal referral hospitals in the study, all other hospitals consistently had shorter case times and higher throughput of cases.

*Notes: It is important to note however, that there were discrepancies identified for some sites between the data provided in sites' Surginet reports compared to the manually derived calculations for key variables such as average case duration and theatre utilisation rates. These discrepancies were fed back to the affected sites.*

*Also of note, although the sites were asked to identify whether the lists assessed were teaching lists, the degree of teaching undertaken was not ascertained.*



**Key for Hospital Peer Groupings**

	Major Hospitals Group 1
	District Group 1
	District Group 2
	Major Hospitals Group 2
	Principal Referral
	Tertiary Referral