**Executive Summary on Nursing Quality Improvement**

Student’s Name

Institutional Affiliation

Date

**Problem Statement**

Operating rooms, also called operating theatres, are the specific facilities in hospitals where trained medical staff such as surgeons, doctors and nurses carry out surgical operations on patients under sterile environments (Hopkinsmedicine.org, 2021). Operating rooms are, therefore, all about saving lives. In saving lives, time is a very crucial resource as delays even in a few minutes often determine whether a patient lives or dies or whether their ill health situation can be reversed or not. Therefore, the delay in between cases in the operating room could prove costly and detrimental to the lives and health of patients. These delays can be caused by several reasons such as inadequate staff to check and prepare patients before and after the operation, preparing for the equipment needed before the operation, cleaning up the operating room and surfaces after an operation in preparation for the next patient and breaks that the operating staff have to take to ensure they remain sober and alert in between operations (Hopkinsmedicine.org, 2021). This executive summary contains a proposal on how to prevent delays between cases in the operating rooms, hence improving quality in the delivery room.

**Purpose of the program or project**

The project aims to decrease the turnover time in between cases in the operating room, hence preventing the delay by fixing the issues while a case is still going on in the room. This purpose can be achieved in various ways, such as hiring more staff assigned to their specific tasks to prevent delays (Kevin, 2016). These tasks include doing the preoperative checklists, ensuring that the consents and other paperwork are complete, and getting all the equipment and supplies ready for the next case ahead of time.

**The target population or audience**

The target population of this project are all the people connected to the operating rooms, including patients, supervisors, director of surgery and anesthesia and the top hospital management (Goras, 2020). It is very crucial for the hospital staff connected or working in the operating room to be fully informed of their individual responsibilities within the team and how they each play a role in the successful operation of a patient.

**The benefits of the program or project**

This program will bring several benefits to operating rooms and the hospital performance in general. The first benefit is increased productivity in the operating room. This is because even before a patient comes to the operating room, everything they need for the process is ready, and every specialist in the room has been well informed on what is expected of them. This, in turn, creates a system that works, hence maximizing efficiency and productivity within the operating rooms (Goras, 2020). For instance, assigning specific nurses to ensure patients are pre-checked before getting into the operating room, while other nurses prepare all the equipment needed for the next case even as another case is ongoing. The second benefit is that the program proves to every specialist in the operating room how vital teamwork saves a patient's life. When the healthcare workers are fully informed of their individual responsibilities and how interdependent they are, their morale is boosted, and each is motivated to do their very best for the sake of the patient and the team.

**The cost or budget justification**

This project will necessitate hiring extra employees for the operating room to ensure that the numerous tasks are distributed among many people and hence the simultaneous but accurate performance in the operating rooms (Rosen, 2021). More labour will definitely mean more costs. The cost will increase since the new labour will need compensation in the form of wages or salaries, new uniforms and equipment, any additional training they may need to successfully be incorporated in the hospital's operating rooms, and any other benefits that existing staff have. However, given the program's benefits, such as improved turnover and preventing the rate of burnout cases among nurses working in the operating room, override the additional costs of the program.

**The basis upon which the program will be evaluated**

The program will be evaluated based on the transition time from one patient case to the next within the operating room. Reduced delays between operating room cases will be that the program is effective and should be retained (Tine, 2018). Additionally, the program could be evaluated based on changes in the levels and frequency of burnout rates among nurses in the operating room. If additional staff in the operating room reduces burnout rates among the nurses, it thus means that the program is efficient and working as expected.

**Final thoughts**

**Would the proposal be approved if formally proposed?**

I believe that if this proposal is formally proposed, it will be approved. This is because the end results of this proposal include increased efficiency in the operating room, better working conditions for the operating room staff, improved teamwork among the staff and consequently maximized patient care in the operating rooms. Overall, these results cumulated to increased efficiency within the hospital. The benefits of this program outweigh the costs that would be incurred in its implementation.

**Strengths of the proposal**

This proposal has several key strengths as outlined below:

* Decreased delays between cases in the operating room – Additional operating room staff will mean that as some of the team are operating on one patient, the other staff are preparing the next patient in terms of preoperative requirements and the equipment needed for the operation (Tine, 2018). This preparation ensures that the next patient is ready for operation immediately, without delay, as soon as one patient is done for.
* Increased efficiency in the operating room procedures – Having different start working on other activities and patients ensures that no task is overlooked (Kevin, 2016). Hence, everything will run smoothly as it should.
* Decreased rates of burnouts among operating room nurses – Additional staff will mean that time and tasks are distributed among more staff, and hence no staff will be burdened with the work that two or more people should do (Rosen, 2021). This will allow staff, including operating room nurses, to have time for short breaks and meals between operations, thus ensuring they remain alert and fresh enough to carry out the operations effectively.
* Increased teamwork among the staff members working at the operating room – Since every team member of the operating room will be fully informed of the tasks expected of them and how achieving them or failing in them will affect the other staff depending on them, the staff in the operation rooms will be keener of the role they play within the bigger team (Kevin, 2016). Each individual will ensure success in their individual tasks and teamwork tasks to achieve the common goal, which is to successfully and effectively operate on the patients.

**Weaknesses of the Proposal**

This proposal has a few weaknesses, including:

* Cost of implementation – The hiring of the new extra staff necessary for the program's implementation will be accompanied by new expenses such as their wages and salaries, uniforms, training per hospital policies, and any equipment they may need.
* Obsolete hospital labour – When the number of patients to operate on is lower than average, a significant percentage of the operating room staff may be idle with not much to do and hence wastage of resources.

**Conclusion**

In conclusion, the benefits of this proposed program outweigh its costs. If implemented, the program will result in better care for patients in the operation rooms and improved work conditions for the staff working in the operation rooms. Nurses will not be easily burnt out, and hence they will be in a better position to care for the patients before and after the operation.

**References**

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