

IOE Lunch & Learn

October 10th, 2014 Ross Miller



Background



- Graduated in 2011 with a B.S.E. in IOE
- Began working for Tefen Consulting after graduating
 - Projects in the Healthcare, Manufacturing, and Semiconductor industries
- Transitioned to the John Hopkins University Applied Physics Laboratory (JHU/APL)
 - Execute process improvement projects for the Bureau of Navy Medicine (BUMED)
 - Headquarters for Navy healthcare
 - Provides guidance, instruction, and funding to all Navy medical facilities





Project Experience

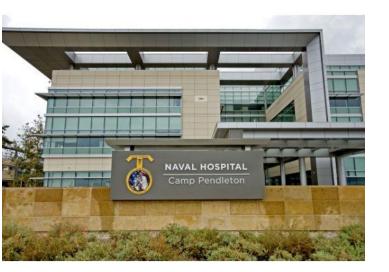
Project	Scope	Goal
Cardiac Surgery Department	Patient process from initial contact with the department through discharge after surgery	 Improve patient satisfaction Assess roles and responsibilities to balance workload
Bed Utilization	All hospital inpatient units	 Calculate historic bed utilization Create tool to automate utilization analysis
Main Operating Room Processes	 Inventory Management Purchasing Patient Flow Sterile Processing Scheduling 	Create an environment that allows for safe, cost effective, and predictable surgery
Family Practice Primary Care	SchedulingStaffing modelPatient Flow	Maximize the number of patients that can be seen using current resources while maintaining quality of care



Naval Hospital Camp Pendleton (NHCP) MOR

Workstreams

- Inventory Management
- Purchasing
- Patient Flow
- Scheduling
- Sterile Processing



Goal

Reduce white space throughout the day to increase utilization of the operating rooms and open space for additional cases

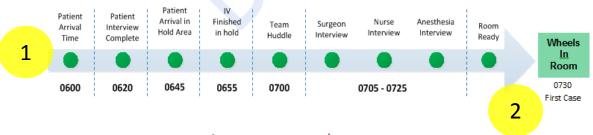
Focus Areas

- 1. Pre-op process
- 2. On-time start
- 3. Case delays
- 4. Room turnover
- 5. Patient flow tracker



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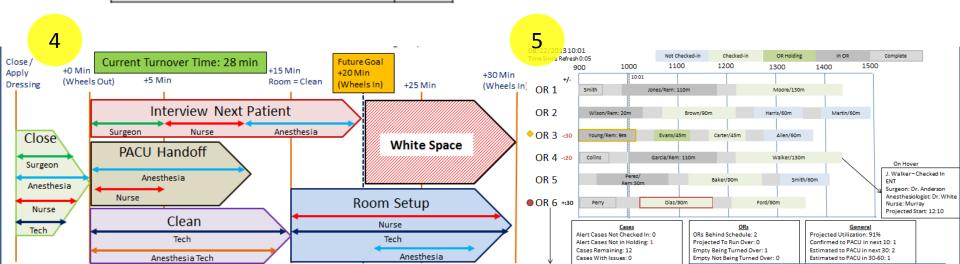


Top 5 Case Delay Reasons: 1st Case

	Case Delay Reason	Total
Surgeon Not On Floor Pre Interview		15
2	Anesthesia Block Delay	13
3	Add On	9
	Anatomically Difficult Patient	7
	Patient Late Arrival	6

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Questions?