

Origination	8/28/2018	Owner	DEANA
Last Approved	9/1/2022		MANNING: SR CLIN DIR-PERIOP SVCS
Effective	9/1/2022	Area	
Last Revised	9/1/2022		Perioperative
Next Review	8/31/2024	Applicability	All HonorHealth Entities

Surgery Block Scheduling Policy

PURPOSE:

To provide a block scheduling system that combines elements of both first-come, first-served and block scheduling to increase OR utilization and promote effective resource utilization.

POLICY:

It is the recommendation of the Perioperative Services Committee to provide appropriate guidelines for block time scheduling and utilization. These guidelines will be reviewed on an on-going basis to ensure alignment with Surgical Growth Strategies and improved OR efficiencies. Each facilities' designated committee will make recommendations for block scheduling, block allocation, and maintain responsibility for block assignments, and ensure adherence to guidelines, utilization targets and release protocols.

GOALS:

- 1. Provide variable access based on utilization which adjust to demand patterns.
- 2. Maximize patient, surgeon, anesthesia provider and perioperative staff satisfaction.
- 3. Maintain a block/open time ratio of 80% block time allocation and 20% open time for surgical scheduling or as defined by the facilities' designated committee.

PROCEDURE:

- 1. Requests for block time must be submitted in writing to the facilities' designated Committee.
- 2. Decision of allocations of block time will be made at this meeting by the committee members and communicated to surgeon requesting block time.

- 3. If block allocation is reduced or eliminated, the committee will notify the physician. If the physician wishes to contest the change, they may attend the facilities' designated committee meeting.
- 4. Required block time utilization is at 75%. Block utilization will be reviewed monthly and/or quarterly at the facilities' designated committee.
- 5. Block time reflecting utilization below 75% may be adjusted, reduced, or eliminated according to operational needs, under the direction of the facilities' designated committee.
- 6. Unscheduled block time will automatically release as defined by surgical specialty release times under the direction of the facilities' designated committee.

7. Release times:

- a. Surgeons with planned time away, schedule changes or outside commitments are requested to release their block a minimum of two weeks prior to assigned block, allowing OR to backfill available time. Notification must be made to Centralized Surgical Scheduling Office at which time block will be manually released
- b. Automatic block release times per specialty can be set by facilities' designated committee, and is based on capacity, utilization and block waiting list.

c. Suggested auto release times:

Specialty	Number of Release Days (working days)		
CCVT	0		
Neuro	0		
Trauma	0		
Ortho trauma	7 am day of		
ENT	5		
General	5		
OB/GYN	5		
Plastics	5		
Orthopedics Robotics	5 5		

- d. Released block time fulfilling the minimum notification requirement will not be calculated into utilization review of block time.
- 8. Repeated release of block will be assessed when evaluating block utilization.
- 9. Block may be allocated to a single surgeon or group, at the committee's discretion
- 10. Block hours and frequency will be determined by the facilities' designated committee (i.e. 4 hours, 8 hours, once per month, 1st & 3rd week, etc.).

Guideline #: OR1071

All Revision Dates

9/1/2022, 8/28/2018

Approval Signatures

Step Description	Approver	Date
Final Approval	Noelle Diesfeld: SR CLIN DIR- PERIOPERATIVE SERVICES	9/1/2022
PeriOp Team	Deana Manning: SR CLIN DIR- PERIOPERATIVE SERVICES	9/1/2022
Management Review	Deana Manning: SR CLIN DIR- PERIOPERATIVE SERVICES	9/1/2022
	Deana Manning: SR CLIN DIR- PERIOPERATIVE SERVICES	9/1/2022

