

Ophthalmology theatre turn around time

The Shrewsbury and Telford Hospital

Theme | Planned Care Produced by | Rebekah Tudor Case Study Date | 08/09/2025

REASON WHY?

Reducing theatre turnaround time is essential for improving surgical efficiency, increasing the number of procedures completed per session, and enhancing patient flow. It helps minimise delays, boosts staff productivity, and supports better use of resources, ultimately leading to improved patient outcomes and financial sustainability for the service.











To reduce the turnaround time between theatre cases by 50% by 31/08/2025.

PLAN

Following initial observations and feedback, colleagues have expressed concerns that the current turnaround time is reducing the productivity of theatre lists.

The average turnaround time for Theatre 7 for May/ June 2025 was around 17 minutes. Previous observations showed that this had been

Current wastes within the process:

- · Delays in sending for next patient
- Patient not ready

The plan to address this was to review the current process and send for the next patient around 10 minutes before the end of the procedure time.

DO

A process was developed with the theatre and day surgery team for use between 01/07/2025 and 31/08/2025 to trial with one consultant.

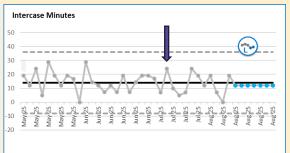
The scrub practitioner will notify the operating department practitioner (ODP) at a designated time prior to the end of surgery. The ODP will then leave theatre and collect the patient from day surgery (DSU) and bring the patient to the anaesthetic room and wait until the theatre team are ready.

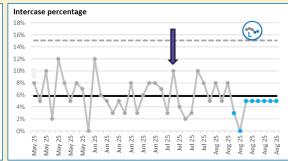
A registered practitioner will then help transfer the patient that's in theatre back onto the wheelchair and return the patient back to DSU and handover the patient whilst the ODP stays in the anaesthetic room with the next patient and the anaesthetist, whilst the remaining scrub practitioner and HCA set up for the next case.

A similar process occurs for both local and general anaesthetic.

STUDY

During the baseline period (May–June 2025), the average intercase time was approximately 17 minutes, accounting for 6% of the total session time. During the trial period (July-August 2025), this reduced to an average of 13 minutes, representing 5% of the total session time. An overall reduction in intercase time of 23%.





Feedback from teams indicates that there is still variability in the process, which ultimately depends on the team involved on the day, including the anaesthetist, theatre team lead, and the skill mix in theatre.

ACT

The newly developed Standard Operating Procedure (SOP) will be ADOPTED and further ideas for improvement gathered from the team in order to further reduce turn around time.

This process will be measured at 30,60,90 days.

ACKNOWLEDGEMENTS & REFERENCES | Mr Viswanathan, Pippa Howard and the theatre team.