

January 30 – February 2, 2017 | New Orleans Marriott
Pre-Conference Workshop: January 30
Conference: January 31 – February 2

The premier conference on business management of the surgical suite.

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## A LETTER FROM...

#### the Conference Chairs

#### Dear Colleague,

In today's healthcare environment, meeting budget requirements, improving efficiencies and patient throughput, and making the best use of technology are among the daily challenges across facilities nationwide. As regulations and recommended practices change, reimbursements are reduced, and Medicare penalties rise, continuing education becomes increasingly important. Today's OR leaders must oversee room utilization and supply chain management, keep up with ever-changing tools and techniques, promote a respectful workplace, maintain appropriate staffing levels, and provide excellent healthcare.

The **OR Business Management Conference** is designed to inform OR directors and business managers about improved processes, new technologies, best practices for staffing, and ways to optimize efficiencies in surgical services. Conference attendees learn together, work together, and network during the interactive presentations, gaining critical skills needed to stay afloat in today's healthcare environment.

In its sixth year, the **OR Business Management Conference** has grown to include a **Pre-Conference Workshop** in addition to more than **40 conference sessions** presented by more than **70 perioperative services expert speakers.** This year's program features five educational tracks designed to help attendees build their conference schedule and earn up to 19 continuing education credits and 17.50 AEU credits.

Among the many new topics that perioperative services experts will address in 2017 are:

- Fixing and maintaining surgical preference cards
- Mindful leadership
- Enhanced recovery after surgery: The new paradigm for anesthesia care delivery
- Improving OR utilization using lean and predictive analytics
- Leveraging data analytics to optimize scheduling and resources
- Accelerating surgical services innovation
- · And more!

The 2017 **OR Business Management Conference** will take place January 30 – February 2 at the New Orleans Marriott. We look forward to seeing you there!

Best Regards,



Dana Crompton, MHA
Conference Co-Chair,
Director, Clinical Capital Planning and
Facilities Management,
Kaiser Permanente, South Bay



Paul Rhodes, RN, CSSM
Conference Co-Chair, Former Operating
Room Business Manager,
Maricopa Integrated Health System

#### The 2017 Program Committee



**Gail Avigne, MSN, RN, BA, CNOR** Principal Consultant, *Press Ganey Associates, Inc.* 



Megan Mitchell, BS
Finance Manager,
Perioperative Services
Memorial Medical Center



**Tandi Toone, BSN, RN, CNOR** Clinical Nurse Manager, St. Luke's Hospital



**Nancy Berlin**Program Manager,
OR Business Management
Conference



**Elizabeth Wood** Editor, *OR Manager* 



**Colleen Wilcoxen, MSN, RN**Director of Perioperative Services, *Providence Little Company of Mary Medical Center-Torrance* 



Mary Lou Jones, BSN Manager of Perioperative Business Support and Preadmission Testing, Maricopa Integrated Health System



#### **Continuing Education**



You have the opportunity to earn **19 contact hours** during the full conference, which includes the pre-conference workshop, breakout sessions, and general sessions. Access Intelligence is approved as a provider of continuing education by the California Board of Registered Nursing, provider #15831.



#### **New for 2017!**

You can now earn up to **17.50 AEU credits** from this year's program towards your Certified Administrator Surgery Center (CASC) certification. This program is approved for 17.50 hours of AEU credits by BASC Provider #1301.



The OR Business Management Conference program is approved for your Certified Surgical Services Manager (CSSM) continuing education requirements! Be sure to save your CE certificate provided by *OR Manager* after the conference and the schedule of sessions you attended.

## Look for these icons in the program to build your personalized agenda!



#### **Finance & Analytics**

Overseeing the bottom line takes a deep understanding of how to balance costs with operational improvements. Discover how to leverage analytics to sustain productivity, reduce costs, and grow new service lines.



#### Leadership

Providing excellent healthcare requires an excellent team. Learn from the experts about how to engage staff at all levels to improve processes and consistently use best practices.



#### **Performance Improvement/Quality**

Changing the culture and adapting to new staffing and workflow models are hallmarks of success in many ORs. Learn how others have done it and the methods that have helped them take their organizations to the next level.



#### **Supply Management**

Matching supply with need can produce major improvements in the operating room, but it is no easy feat. Find out how data transparency and use of the right technology can drive efficiencies and cost savings.



#### **Technology**

Innovative tools for tracking devices and instruments provide a wealth of information needed for compliance with today's regulatory requirements. Discover the newest developments in this rapidly evolving era of enhanced information.



#### Monday, January 30

1:30 p.m. - 4:30 p.m.

#### Pre-Conference Workshop: Perioperative Resource Optimization

The business of delivering perioperative services is shifting from a revenue source to a cost center. This will have a significant impact on the bottom line and operational sustainability. What does this mean to your organization? How dependent is your health system on this revenue stream? How do you future-proof your operations? Get some insights from administrative and clinical leaders at Mercy Health, who converted their perioperative service line into a long-term, sustainable operation. They will offer tools to help identify inefficiencies and engage staff across departments in process improvements.

Matthew Mentel, CMRP, Executive Director, Integrated Performance Solutions, *Mercy Hospital*Betty Jo Rocchio, MS, BSN, RN, CRNA, VP, Perioperative Performance Acceleration, *Mercy Hospital*Emily Tchiblakian, MHA, BSN, RN, Perioperative Services Resource Optimization, *Mercy Hospital* 

#### Tuesday, January 31

8:00 a.m. - 8:30 a.m.

Continental Breakfast

8:30 a.m. - 9:15 a.m.

#### Keynote: Changing How We Change

Leading change is difficult, and changing behaviors is even harder. Discover the research behind making great change happen. Then, discover four barriers to getting change to stick, and how to overcome them. You'll learn how to how to recognize barriers impeding change, the research and science behind making lasting change, and how to make lasting change happen, no matter what your role and work environment.



**Jane McLeod, MSN, RN,** Co-Founder, *Capstone Leadership Solutions, Inc.* 



**Sue Tetzlaff, MHA, RN, RHIA, FACHE,** Co-Founder, *Capstone Leadership Solutions, Inc.* 

9:30 a.m. - 10:30 a.m.



## Fixing and Maintaining Surgical Preference Cards Forever

Preference cards are neglected, out of date, and largely of little value when it comes to enabling supply consumption, accurate procedural supply cost, or accurate and useful case pick. These issues plague many operating rooms in large and small facilities alike. An accurate, scalable solution for repairing and maintaining surgical preference cards is long overdue. The presenters will share tips for how to plan and implement a sustainable, logical, fact-based approach to cleaning and maintaining surgical preference cards.

Richard Sokoler, President, ORmetryx

**Ned Turner,** Senior Vice President, Perioperative Consulting Services, *Medline Industries, Inc.* 



#### Redesigning Perioperative Staffing to Reduce Inefficiencies of OR Delays

Efficient use of space and staffing in perioperative services is vital, especially in the current era of declining reimbursement. At our hospital, the postanesthesia care unit was frequently full and patients had to stay in the OR to recover from the anesthetic. The next surgical case could not be started, resulting in frequent, long delays as well as surgeon and staff dissatisfaction. Our management team addressed these issues using methods that improved efficiency, avoided costs, and increased staff morale and engagement.

Marialena Murphy, MSN, MHA, RN, NEA-BC, CNOR, Nurse Administrator, Surgical Services, Mayo Clinic Hospital Arizona



## Improving OR Utilization Using Lean & Predictive Analytics

ORs often are underutilized when traditional processes are used to allocate and manage OR block time. A combination of proven Lean methodologies, predictive analytics, and advanced data science has helped develop a three-step approach to improve scheduling efficiency and OR utilization. This method, which reveals the key causes of underutilization and usage patterns over time, applies predictive analytics and machine learning to increase the transparency of key performance metrics across surgeons and administrators, correct for unforeseen situations like last-minute block cancellations, and systematically reallocate OR block time. As a result, "smart block schedules" are created. The presenters will discuss the application of this approach at UCHealth, which has more than 100 ORs, and the resulting performance improvement.

**Sanjeev Agrawal,** President, Healthcare & CMO, *LeanTaaS* **Ashley Walsh,** Perioperative Business Manager, *UCHealth* 



10:30 a.m. - 11:00 a.m.

#### Morning Networking Break



11:00 a.m. - 12:00 p.m.



#### **Maintaining Doctor Preference** Cards Across a Multihospital Health Network - A Process Created Prior to Going Live with EPIC

Lehigh Valley Health Network (LVHN) has nine operating sites, and each site maintains a set of doctor preference cards. Before going live with EPIC, LVHN had more than 11,300 active doctor preference cards, and more than 2,000 were duplicates. As part of a process improvement project, we sought to reduce the number of cards by at least 30% and create a standardized, EPIC-friendly workflow for all operating sites. We reduced the number by 44% cards prior to go-live, and we reviewed all cards to ensure they were imported accurately. We also created a measurable process and a sustainable maintenance work plan that allowed us to meet the strict EPIC timelines for preference card implementation.

Janeen Quanstrom, MBA, Manager, Perioperative Business Services, Lehigh Valley Health Network

Alexandre Warman, MBA, Director, Perioperative Business Services, Lehigh Valley Health Network



#### The Journey from Doctor **Preference Cards to Doctor Procedure Cards**

In 2013, Intermountain Healthcare's Surgical Services Clinical Program began shifting away from preference cards toward procedure cards. By working with physician champions, creating system-wide aligned goals, and generating transparent, meaningful data, we began to decrease variation across our integrated 22-hospital health system. With the system migrating to a new electronic medical record, the value of reevaluating the existing preference cards became even more pertinent. This session focuses on the value of standardizing how doctor procedure cards are updated and maintained.

Jeannette L. Prochazka, MSN, RN, ACNS-BC, Clinical Operations Director, Surgical Services Clinical Program, Intermountain Healthcare

Ann Z. Putnam, MSN, BSN, CNOR, ProComp Project Manager, Intermountain Healthcare



#### Item-Level RFID Tracking in Healthcare: The Value to Patients, Providers, and Products

With the increased need for resource visibility and regulatory compliance, item-level tracking has become a necessity. This session will highlight the multiple advantages now obtainable with item-level tagging and offer solutions on how to get started. Topics will include an introduction to radio frequency identification (RFID), examples of RFID adoption in healthcare, how RFID can assist with the tracking and documentation of unique device indicators, and how item-level tracking can improve supply and preference card management.

Beth Kaylor, RN, Director, Clinical Innovation, DeRoyal

12:00 p.m. - 1:15 p.m.

#### Keynote: Patient-Centered Care: The Heart of Our Business

Ensuring that the patient is at the center of our work is right thing to do. There is also evidence that when we align our work around patients and create an environment in which caregivers are engaged and satisfied, not only do patients have a better experience, but safety and quality also improve. You'll learn to think about the patient experience in a different way that makes patient-centered care more relevant, and we will explore strategic elements to help improve performance.



James Merlino, MD, President and Chief Medical Officer, Press Ganey Associates, Inc.

Sponsored By:

**Cardinal**Health

1:15 p.m. - 1:45 p.m.

Dessert Networking Break



1:45 p.m. - 2:45 p.m.



#### The Price Is Right vs Let's Make a Deal: Reducing High-Cost Supplies and Services

Often times, vendors offer GPO, tiered, or local agreement pricing "deals" for new products. However, their best deal may not represent the right price a provider should pay to ensure profitability of the OR. The presenter will explain a process to vet the financial efficacy of a procedure, product, or service and will review case studies showing how to reduce costs by working backwards from the procedural reimbursement to determine what is affordable.

**Melissa Strickland,** Manager, Perioperative Business, *University Healthcare System* 

3:00 p.m. - 4:00 p.m.



## Establishing CPT Group-Based Preference Cards

Establishing a CPT group-based preference card system is becoming increasingly popular as operating rooms convert to CPT-based scheduling. Although establishing a new system is challenging and requires dedicated time and resources, a CPT group-based system helps minimize case delays due to missing or inappropriate resources and resource conflicts, improves reporting accuracy and analysis through standardization, and right-sizes the number of preference cards while still maintaining individual levels of specificity.

**Toni Wing, BSN, RN, CNOR,** Clinical Consultant, *Coratek Perioperative Consulting* 



#### Open for Business: A Modern Approach to Growing Surgical Volume

Imagine adding an ambulatory surgery pavilion of 12 ORs to a campus with an existing hospital of 28 ORs, and finding that surgical volume did not grow with the expansion. Discover how one organization tackled inefficient scheduling practices and block policies by implementing strategies such as automated notification of available OR time to physician offices, which increased OR utilization by 22%. With this accomplishment, the facility is now recognized as a healthcare provider of choice for not only tertiary and quaternary surgical care, but also elective outpatient procedures.

**Matthew Balog,** MS-HSM, Director of Business Operations, *Advocate Christ Medical Center* 



## Unite Your Perioperative Team Through Employee Engagement

The Affordable Care Act has provided the Triple Aim goal of providing better community health, better quality care, and more affordable care. To meet this goal, organizations must create a high-performing perioperative team. The shared governance model has been very successful in increasing employee engagement and retention, which in turn have helped achieve critical objectives and metrics including patient outcomes and safety. In this presentation, you will learn how to unite your perioperative team to improve outcomes by increasing quality of care and patient satisfaction while also decreasing costs.

**Donna Ray, BS,** Business Analyst of Surgical Services, Northern Arizona Healthcare

**Lori Smithson, MSN, RN, CNOR, LSSBB,** Director of Surgical Services, *Northern Arizona Healthcare* 



#### Suture and Endomechanical Management as an Internal Cost-Saving Initiative

Although there are good third-party options to manage endomechanical and suture expenses, they can be cost prohibitive. Hospitals that adopt a more focused approach, with a dedicated plan and resources, will realize savings and a solid return on investment. Creation of a business plan, savings tracking tools, and key metrics will be discussed.

**William P. Stitt, CHL, CRCST, CMRP, FAHRMM,** Principal and Chief Operating Officer, *Credibility Healthcare, LLC* 



#### Ready, Set, Operate: Making Sure Surgical Equipment Is Good to Go

Readiness of surgical equipment for the OR is often overlooked as a key component of operational and financial performance. The use of five strategies can improve equipment readiness and enhance patient safety, leading to better outcomes. Each strategy has a clear action item for successful implementation, as well as clinical evidence of its value.

**David Anbari,** Chief Operating Officer, *Mobile Instrument Service & Repair* 



4:00 p.m. - 4:30 p.m.

#### Afternoon Networking Break



Sponsored By: VUEMED

4:30 p.m. - 5:30 p.m.



#### **Enhanced Recovery After Surgery** (ERAS): The New Paradigm for **Anesthesia Care Delivery**

The Enhanced Recovery After Surgery (ERAS) protocol focuses on improving the quality of perioperative surgical care while enhancing surgical outcomes and lowering the total cost of providing that care. These objectives are commensurate with Medicare's movement away from fee-for service toward highquality, value-based care. ERAS is well established and accepted in many European countries, but not yet widely used in the US. As indispensable members of the anesthesia care team, certified registered nurse anesthetists make critical decisions that affect the perioperative phases of care. Based on our knowledge of ERAS, we believe these protocols may become the new standard of care for anesthesia in the US.

Lorraine Jordan, PhD, CRNA, CAE, FAAN, Chief Executive Officer of the AANA Foundation, AANA Senior Director of Research and Quality, American Association of Nurse Anesthetists



#### The Paradigm Shift from a Siloed Approach to Team Methodology for Reliable Turnovers

In an effort to reduce turnover times at Vanderbilt University Medical Center, a multidisciplinary team was formed that used Lean methodology and tools to review processes and reengineer the workflow. Dissecting the time intervals in the turnover process helped to identify the greatest opportunities for improvement, and focusing on a set of specific, measurable goals helped us succeed. The cornerstones of our initiative were to engage the entire team, increase communication about expectations, enforce accountability, and use analytics to drive the process and measure the outcomes.

Cindy I. L. Kildgore, BSN, RN, MSHA, CNOR, Perioperative Services Director, Vanderbilt University Medical Center

Barbara Sanders, BSN, RN, MMHC, Director of Perioperative Administration, Vanderbilt University Medical Center



#### Leveraging Data Analytics to Optimize Scheduling and Resources

The lack of accurate and timely reporting can mean surgical resources are unavailable when and where they are needed, resulting in delayed room turnover and case starts or cancelled procedures. Trying to produce utilization analytics and forecasting information for multiple departments from different information systems can be challenging. The presenters will explain the use of supply and instrumentation usage analytics to improve resource utilization and forecasting tools to ensure the necessary instruments and equipment are on hand.

David Andrew, MBA, BSN, RN, CNOR, Manager of Surgical Services, Swedish Medical Center

John Harper, MBA, System Manager of Perioperative Central Services, Swedish Medical Center

Derek Mudd, CRCST, CHL, Consultant, Novia Strategies

5:30 p.m. - 7:30 p.m. Welcome Reception



#### Wednesday, February 1

8:00 a.m. - 8:30 a.m.

#### Continental Breakfast

8:30 a.m. - 9:15 a.m.

#### **Keynote: Beliefs to Results**

Being an excellent business manager requires a particular mindset and focus on productivity and efficiency. In this dynamic, interactive presentation, you'll learn how to activate the driving force that moves you to action and results, get past limitations to reach resourcefulness, cultivate a state of mental strength to overcome barriers, and embrace the power of focus to improve productivity.



Thomas Nestor, CEO, Thomas Nestor Leadership Institute

9:30 a.m. - 10:30 a.m.



#### Sustain the Gain: How to Reduce Costs Year After Year

Reducing costs year after year requires a well-developed strategic plan from the beginning. A shared accountability goal at Intermountain Healthcare has focused on refining resources, such as reports, dashboards, doctor preference cards, and culture change. Empowering stakeholders, both physicians and staff, to understand the impact of their choices on costs has saved \$119 million throughout the 22-facility system since 2013. To sustain these savings, the surgical services clinical program has partnered with the supply chain, gained the support of physician champions, and looked beyond surgical services for opportunities. This session will highlight lessons learned and how to implement new processes in any size facility or system.

**Jeannette L. Prochazka, MSN, RN, ACNS-BC,** Clinical Operations Director, Surgical Services Clinical Program, *Intermountain Healthcare* 

**Ann Z. Putnam, MSN, BSN, CNOR,** ProComp Project Manager, *Intermountain Healthcare* 



## Change Your OR Culture Through Data Transparency

With more information being captured than ever before, it is increasingly important for data to be accessible, meaningful, and transparent among leadership, physicians, staff, and patients. The old saying, "you can't fix what you don't understand" means data transparency is essential for identifying opportunities for improvement in your surgical services department. Openly sharing information can help reduce errors, improve patient satisfaction, decrease costs, and improve efficiency in the OR.

Andi Dewes, BSN, RN-BC, CNOR, Vice President, Surgical

Excellence, Syús, Inc.

**Blake Stock, MBA,** Business Manager, Perioperative and Imaging Services, *UC San Diego Health System* 



## Innovation Navigation Accelerating Surgical Services Innovation

Accelerating changes in clinical methods, technology, and working relationships are overwhelming surgical services leaders with a wave of innovations. These innovations create breakthrough changes in technology, organizations, and process that require different methods than Lean Six Sigma and performance improvement. Most innovations start with a poorly defined business case and high expectations from physicians and executives, and they go downhill from there. Having a clear innovation method and tools can help you streamline and take control of the process. Using innovation navigation methods and best practices gathered from leading hospital innovation centers, the presenters will demonstrate how to manage the innovation pipeline and streamline the decision and development timing for successful innovations.

**Thomas Fee, MBA,** Managing Partner, *Verity Partners LLC* **Johanna Thomas, PhD,** Partner, *Verity Partners LLC* 

10:30 a.m. - 11:00 a.m. Morning Networking Break

Sponsored By: CareersAtHCA.com

11:00 a.m. - 12:00 p.m.



### Bundled Payments: The Next Generation

Hospitals depend on perioperative services to drive profitability, but evolving healthcare trends are putting the traditional OR at risk. For hospitals that are unprepared, new payment models, new quality requirements, and shifting utilization patterns will steadily erode surgical revenue. Discover how hospital strategists can help ORs prepare for the future by using the Society for Healthcare Strategy and Market Development's "Bridging Worlds" roadmap to reinvent the delivery of surgical care, and how these principles apply to other service lines.

Jeff Peters, MBA, CEO, Surgical Directions

**Alecia Torrance, MBA, MSN(c), RN, CNOR,** Senior Vice President, Clinical Operations, and Certified Nurse Educator, *Surgical Directions* 





#### Lean-Based Standardization Cuts Costs and Instrument Sets

In 2015, Humber River Hospital (HRH) in Toronto, Ontario, completed a significant redevelopment project by merging two autonomous centers of care into one location. Concepts based on the Lean 5S workplace organization program, along with the Rogers' Diffusion of Innovations model, were used to standardize surgical instruments and gain clinical stakeholder acceptance. As a result, the total number of sets in service was reduced by 50%, and more than 1,600 individual instruments were eliminated.

Cyndi Difilippo, BSN, RN, CPNC, Clincal Practice Leader, Humber River Hospital

Derek T. Hutchinson, BSN, MN, RN, Clinical Practice Leader, Humber River Hospital



#### How Do Instructions for Use Fit into Staff Education?

Instructions for use (IFU) contain the information needed for cleaning, assembly, processing, and use of medical devices in accordance with the validated measures prescribed by the device manufacturer. If the IFU is not properly followed, the device likely will not be safe for use on any patient. Studies on IFU compliance will be reviewed and discussed, with emphasis on arthroscopic shavers and flexible endoscopes. Providing training and competency is key for ensuring adherence to medical device IFUs.

Stephen Kovach, Director of Education, Healthmark Industries

12:00 p.m. - 1:15 p.m.

#### Keynote: Mindful Leadership: Using Positive Psychology and Personal Wellness to Balance Work and Home

How do you feel at the end of the work day? When does the work day actually end? Burnout among nurses and nurse leaders is on the rise, and caregivers often find it hard to take care of themselves. But imagine feeling exhilarated about your work and recharged to fully participate in activities at home. That can happen through mindful leadership, positive psychology, and personal wellness - the keys to help you achieve balance at work and at home. Learn five ways to incorporate mindful leadership and positive psychology into the OR, and develop a formula for wellness.



Tandi Toone, BSN, RN, CNOR, Clinical Nurse Manager, St. Luke's Hospital

Sponsored By: GETINGE GROUP

1:15 p.m. - 1:45 p.m.

#### Dessert Networking Break



Sponsored By: PEALTHCARE Q

1:45 p.m. - 2:45 p.m.



#### **Data and Productivity** Benchmarks Help Meet Surgeon and Staffing Demands

Hospital CEOs believe talent shortages and workforce staffing are one of their biggest threats, according to a recent survey. Matching staffing supply with actual demand while minimizing overtime and premium pay is a vexing problem for many OR leaders. In this presentation, experts in OR optimization and labor analytics will share case studies and best practices to identify staffing levels and schedules. They will explain how the use of data and productivity benchmarks can improve physician relations and right-size the OR.

Susan Bisol, MSN, RN, CNOR, Director, Novia Strategies/Novia Solutions

David Murdock, Managing Director, Novia Strategies/Novia Solutions



#### Cost-Saving Strategies of the Perioperative Surgical Home

The perioperative surgical home (PSH) is a multidepartment initiative aimed at transforming surgical care by improving quality, lowering costs, and increasing patient and provider satisfaction. Discover how the PSH care model can be used to improve resource utilization, reduce personnel costs, and ensure the most efficient provider mix. The importance of data analysis in establishing and evaluating a PSH will be explored, particularly in relation to optimizing staff scheduling and reducing late starts.

Zeev Kain, MD, MBA, Associate Dean for Clinical Research, Director of the Center for Advancement of Pediatric Health, University of California, Irvine

**Rich Miller,** Founder and Chief Strategy Officer, *OpenTempo* 





#### Information, Involvement, and Improvement - How Engaged Leaders Drive Value

Creation of formal committee structures and consistent sharing of data helped gain physician buy-in and ongoing engagement at Virtua Health. The process involved both internal service line and physician leadership. We will describe how we built our communication tools (program and individual physician dashboards) to make clinical quality and patient satisfaction top priorities. Dashboards, data gathering, and communication will be discussed, along with our process for forming the committee structures and enhancing physician leadership.

**Bill Christie**, AVP Support Services, *Virtua Health* **Kevin Manley**, Director of Financial Management, *Virtua Health* **Howard J. Winter, MD, FACS**, Chairman of the Department of Surgery and Program Director for Surgery, *Virtua Health* 

3:00 p.m. - 4:00 p.m.



#### Reduce Costs and Improve Efficiencies with New Shared-Savings Model

The healthcare industry is rapidly shifting from "pay for volume" to "pay for value" business models. To align internal processes with these new payment models, some hospitals have partnered with industry and reduced costs by 15% or more through performance improvement initiatives. The presenter will explore how shared savings models between industry and hospitals can bring value. She will explain the important relationship between clinical, operational, and economic performance, and how data can be used to sustain improvements over time.

**Julie Blatnik, BSN, CNOR,** Senior Director, Clinical Performance Improvement, *Medtronic* 



#### Perioperative Leadership: How Can We Make Your Position as a Leader More Fulfilling?

Informal leadership development can enhance our position as leaders, leading to an improved work-life balance. This session focuses on the role attitude and emotional intelligence play in effective leadership, the development of informal leadership, and succession planning. The speaker will explain the importance of celebrating good attitudes versus tolerating poor ones. Attendees will receive a self-evaluation to test their own emotional intelligence and resources to learn more about this topic.

**Veronica Petersen, MSN, CNOR, NE-BC,** Assistant Vice President-Perioperative Services, *Northwell Health System* 



#### Making 'OR Hold' a New Bad Word: A Process Redesign for Perioperative Services

Hackensack University Medical Center, a 775-bed nonprofit teaching and research hospital in Bergen County, NJ, is the largest provider of inpatient and outpatient services in the state. Inefficiencies in preoperative clearance, bed management in the postanesthesia care unit (PACU), hospital capacity management, and team dynamics led to an average of 14 to 22 hours of OR hold per day. Through a collaborative team approach involving the surgical admissions suite, OR, PACU, and hospital capacity management, the team reduced OR holds to 1 hour per day per month and has sustained that for approximately 12 months while increasing overall case volume.

**Terri Freguletti, MAS, RN, CNOR,** Vice President, Perioperative Services and Capacity Management, *Hackensack University Medical Center* 

**Christopher Gazdick, BSN, RN, CEN,** Manager, Perioperative Services, *Hackensack University Medical Center* 

**Robyn Kretzschmar, MAS, BSN, CNOR,** *Hackensack University Medical Center* 

4:00 p.m. - 4:30 p.m. Afternoon Networking Break

4:30 p.m. - 5:30 p.m.



#### Tools for Successful Gap Analysis

Improvements in efficiency, patient safety, and effectiveness of care are possible when gap analysis is used to compare current processes and practices with evidence-based, best practice standards of patient care. Routine gap analysis is also recommended to ensure continuous survey preparedness. Gap analysis tools specifically tailored for perioperative nursing, along with scenarios that reinforce concepts for each tool, will be presented. A flowchart to map a process from start to finish, a cost analysis showing how incorrect processes increase costs, and a contingency diagram to assist in turning potential problems into solutions will be included.

**Heather Hohenberger, MSN, RN, CIC, CPHQ, CNOR, FAPIC,**System Perioperative Quality Improvement Consultant, *Indiana University Health* 

### (D)

## What to Expect When You Are Expecting to Convert to Your EHR

Many health systems are embarking on conversion of their electronic health record (EHR), and the preparatory work needed for overall success is often overlooked. A pre-project



optimization effort should occur during the period between deciding to convert and kicking off the new system. This process is critical for ensuring that conversion stays on time and that the expected return on investment is obtained. Real-world recommendations will be covered.

**Linda Fallon, BS,** Clinical & Application Informatics Consultant, *The J2 Group Inc* 



#### Lessons Learned in Bundled Payments: Taking Control of the Total Episode

Understanding total cost of care is critical for today's healthcare systems. The panel will focus on the growth in alternative payment models, including bundles stipulated under the Centers for Medicare & Medicaid's Comprehensive Joint Replacement Program. The presenters have led their organizations to great success in early BPCI (Bundled Payments for Care Improvements) models and bundled payment programs. They will share best practices for managing costs and improving outcomes across the care continuum.

**Richard Iorio, MD,** Dr. William and Susan Jaffe Professor of Orthopaedic Surgery, department of orthopaedic surgery, *NYU Langone Hospital for Joint Diseases* 

**Michael Kelly, MD,** Chairman, Department of Orthopedic Surgery and Sports Medicine Chairman, Department of Physical Medicine and Rehab, *Hackensack University* 

#### 5:30 p.m. - 7:30 p.m.

#### Creole on Canal Networking Dinner

Join us at the Creole House and Oyster Bar for the best food and jazz on Canal Street, located conveniently across the street from the Marriott. Enjoy a three-course meal, a bar, live music, and network with your fellow attendees! Separate ticket required.



#### Thursday, February 2

8:30 a.m. - 9:30 a.m.

#### Continental Breakfast

9:30 a.m. - 10:30 a.m.



#### Optimizing Surgical Capacity for Bundled Payments Using Data Analytics and '2-3' and '3-4' Flips

Designing a joint program or bundled payment model that melds with an existing block schedule, entrenched surgeon preferences, and "flip room" demands can be challenging. This presentation will detail the use of unique data analytics, simulation, and creative scheduling strategies to launch a new joint program in a small community hospital. The "3-4 Flip" and other schedule optimization strategies along with standardization led to improvements including a 19% increase in orthopedic volume, \$300,000 in new net revenue, higher patient satisfaction, and decreased length of stay and blood transfusion rates.

**Don Hislop, BSN, RN, MAOM,** Director of Surgical Services, *Tennova Healthcare* 

Pierce Story, VP of Concept Development, Capacity Strategies, Inc



## The Gang Mentality: Upward Bullying and Mobbing

Bullying and lateral violence have long been a problem in healthcare. Managers are often tasked with seemingly impossible measures to implement, and the changes they need to make are often met with hostility and resistance. Nurses and nurse leaders alike are at risk for bullying and mobbing behaviors in the workplace. These antagonistic group behaviors place patients in danger and further contribute to the nursing shortage we are currently experiencing. OR managers need to understand and utilize tools to effectively combat these behaviors. Recognizing and controlling bullying behaviors is vital to ensuring patient safety and quality outcomes.

**Rebecca Holland, MSN, CST, CRCST, RN, CNOR,** Director, Surgical Services and Sterile Processing, *Doctor's Hospital of Augusta* 

**Donna Label, MSN, RN, ENA-BC, CNOR,** Interim Perioperative Organizational Leadership Advisor, *B.E. Smith, Inc.* 





## Transforming the Supply Chain with UDI-Compliant RFID Technology

The use of ultra-high frequency passive radio frequency identification (RFID) technology is helping leaders of some healthcare facilities comply with the FDA-mandated unique device identifier (UDI) standards. VUEMED, a global healthcare information business, has partnered with Beth Israel Deaconess Medical Center to help track recalled and expiring devices, achieve optimal par levels, and improve inventory tracking and patient records. The technology is allowing more accurate electronic medical records to be generated and is increasing charge capture.

**Arnold Chazal, JD,** CEO, *VUEMED* **Lana Makhanik, BS,** COO, *VUEMED* 

10:30 a.m. - 11:00 a.m. Morning Networking Break

11:00 a.m. - 12:00 p.m.



#### Cost Control in the OR: A Multipronged Approach for

#### Success

A multipronged approach to reduce costs requires collaboration between staff and suppliers as well as data collection and monitoring. Our efforts involved cost awareness and education for surgeons and nurses, partnering with administration, collaborating with vendors, highlighting waste, monthly reporting, and the development of clear reporting tools. We improved transparency by providing information on the impact of product change on the total cost of the patient stay.

**Stephen Spring,** Perioperative Services, Anesthesia, Critical Care and Pain Medicine, *Massachusetts General Hospital* 

**Stephanie Weilert,** Manager, Perioperative Business Services, *Massachusetts General Hospital* 



#### Developing Supply Value Streams Beyond Implant Pricing

Implant negotiations invariably center around the price of the implant, but what can you do to save money in addition to negotiating the most appropriate price? Non-monetary strategies, such as reducing the number of instrument/implant trays required for a procedure, getting longer-term contracts, moving toward per-sterilized implant systems, and standardizing biologic implants, can help save costs. Risk sharing with suppliers and surgeons is always fraught with legal and financial challenges, but there are ways to gain their support for successful implementation of strategies to keep costs down.

**Vincent Oda, MBA, BSN,** Category Manager—Surgical Services, Intermountain Healthcare

## **Explore New Orleans**

#### Hotel

**New Orleans Marriott** 

555 Canal Street, New Orleans, LA, 70130

The OR Business Management Conference has secured a discounted rate of \$219 (plus tax) per night for attendees. To reserve your room, contact the New Orleans Marriott at 504-581-1000 and mention OR Business Management Conference, or book online at https://resweb.passkey.com/go/ORBusiness2017.

Reservations must be made before January 6, 2017 to receive the discounted rate.

#### **General Information**

**Who Should Attend:** Participants will include business managers, OR directors, OR managers, supply chain managers, materials managers, and others involved in the business decisions that drive the OR's economic, quality, and technical development.

**Dress/Attire:** Business casual is recommended for the 2017 OR Business Management Conference. The temperature in meeting rooms tends to be cool, so please bring a jacket or sweater for your comfort.

**Special Requirements:** If you require special accommodations to fully participate, please attach a written description of your needs with your registration form. Specific questions can be directed to clientservices@accessintel.com or 1-888-707-5814.

**Group Rate:** When two to four people register in a group, each additional person will receive 15% off the cost of registration.

**Additional Group Plans:** If you are interested in sending five or more people to the conference, there are additional group plan options with discounted rates of up to \$500 per person. For more information, contact Mai Hanoon at 301-354-1504 or mhanoon@accessintel.com.

#### Join OR Business Management Conference as a Sponsor Before Space Runs Out!

As a sponsor of the OR Business Management Conference, you can align your company as a market leader in front of a highly influential audience. Interested in becoming a sponsor or exhibitor at the OR Business Management Conference?

#### Please contact:

#### **Nancy lannotta**

Sales Representative P: 203-899-8429 F: niannotta@accessintel.com

#### Cancellations:

All cancellations must be made in writing and are subject to a \$300 service fee (per attendee). Registrants who cancel before December 30, 2016 will receive a refund of payment minus the service fee. Registrants who cancel after December 30, 2016 can have their payment credited toward the next OR Business Management Conference, minus the service fee. Non-payment or non-attendance does not constitute cancellation. If for any reason Access Intelligence decides to cancel or postpone this conference, Access Intelligence is not responsible for covering airfare and other travel costs incurred by the clients. Refunds due to registrant error will be charged a \$199 processing fee. Discounts will not be applied to current registrations.





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Pre-Conference Jan. 30 Conference Jan. 31 - Feb. 2

New Orleans Marriott New Orleans, Louisiana

## **Registration Form**

1. CONTACT INFORMATION		FOUR EASY WAYS TO REGISTER
Name		
Title		Mail this completed form to:  Client Services
Facility		OR Business Management Conference
•		9211 Corporate Blvd. 4th Floor Rockville, MD 20850
Address		Web:
City State/Province		www.ormanager.com/managementconference
Zip/Postal Code Country		Phone: 1-888-707-5814
Phone	Ext	- 1 Holle: 1-000-707-5014
Fax		Fax this completed form to:
Email		When faxing or mailing, please photocopy
(Required to confirm registration)		the form for each registrant.
2. REGISTRATION & FEES		
Package	Ear	ly Bird (December 15, 2016) Regular Rate (January 31, 2017)
2017 OR Business Management Conference a	nd Pre-Conference Workshop \$1,	240 \$1,440
<b>☐ 2017 OR Business Management Conference</b> \$995		5 \$1,095
☐ Pre-Conference Workshop Only	\$59	5 \$695
Register with at least 2 or more people a Breakfasts, lunches, and reception included in registrati		istrations in your group with VIP code GROUP
3. PAYMENT INFORMATION		VIP CODE: <b>EBROCHURE</b>
☐ Check Enclosed ☐ PO/Bill Me		VII GODE. EDITOGICIE
□ Credit Card: □ Visa □ MasterCard □ A	American Express   Discover	Access Intelligence Federal Tax ID#: 52-2270063
Card Number	Signature	
Expiration Date CVC #	Name as	Shown on Card
4. CREATE YOUR PROFILE		
1. How many years have you attended OR Business Manager Conference?  □ First-Time Attendee	3. What best represents you job position? OR, Nursing, Surgical,	4. What role(s) do you play in purchasing new products and services at your institution? (Please check all that apply)
☐ 2 years	Perioperative	☐ Recommend new products
☐ 3 years ☐ 4 years	☐ Manager	<ul> <li>□ Specify suppliers to evaluate products and services</li> <li>□ Member of purchasing/evaluation committee</li> </ul>
2. What best describes where	<ul><li>□ Director</li><li>□ VP</li></ul>	☐ Final decision making authority on purchases
you are employed?	<ul><li>☐ Admin Specialist/Director</li><li>☐ Coordinator</li></ul>	☐ I do not play a role in purchasing decisions
☐ Ambulatory Surgery Centers (Free-standing, In-hospital or Office-based)	☐ Business Manager	
☐ Academic Hospital	☐ Educator/Staff Development	Presented by ORManager,
☐ Community Hospital	OR Industry  ☐ Consultant	9211 Corporate Blvd.4th Floor   Rockville, MD 20850
☐ Tertiary Hospital☐ VA Hospital	☐ Student	Tel: 1-888-707-5814   www.ormanager.com
□ Clinic	☐ Sales/Marketing	www.ormanager.com/managementconference
■ Manufacturer/Vendor	Representative	

■ Other \_

☐ Other \_\_\_\_\_

# BUSINESS NA MANAGEMENT CONFERENCE

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