Ambulatory surgery center (ASC) managers responding to the 2008 OR Manager Salary/Career Survey are more satisfied with their jobs than hospital OR managers, despite salaries that are flat compared to last year and lower than their hospital counterparts.

ASC managers report an average score of 4.1 out of 5 for job satisfaction, compared to 3.9 for hospital OR managers. An impressive 41% of ASC managers say they’re very satisfied with their jobs (a score of 5), with 37% reporting a score of 4. Still, many managers are on the move: 4% are actively seeking a new job, and 16% are strongly considering a new job search.

Managers in ASCs may be less satisfied when it comes to their salaries, which are essentially unchanged from last year. However, ASC managers are more likely than hospital OR managers to receive a bonus or profit sharing as part of their compensation package.

Those are some of the highlights from the 18th annual OR Manager Salary/Career Survey. The survey was mailed in April to 1,000 OR Manager subscribers and an external list of nurse managers of ASCs, with 265 returned for a response rate of 27%. The margin of error is ±5.4% at the 95% confidence level. ReadexResearch conducted the survey. Any significant changes in the data reported here have a confidence level of 95%. Results from the staffing portion of the survey appeared in the September OR Manager.

Salary data across the country

ASC managers earn an average of $79,900, lower than the $102,000 for hospital OR managers. Salaries are stable from last year and remain highest in the West and Northeast.

Managers working in hospital-owned ASCs report the top average salary ($87,800), while those in physician-owned ASCs report the lowest—$73,400 compared to $84,200 for both corporate-owned and joint-venture centers.

Size matters when it comes to salary. ASC managers in centers with 5 or more ORs earn an average $14,200 more a year than those in centers with fewer than 5 ORs. Managers working in multispecialty ASCs make an average of $12,200 more than those in single-specialty facilities.

The average total compensation package for ASC managers is $93,200. As with salary, the West ($108,100) and Northeast ($98,400) report the highest packages, and the South the lowest ($83,100). Differences in compensation by number of ORs and specialties mirror those seen with salaries. Managers working in ASCs with fewer than 5 ORs receive total compensation averaging $22,000 less than centers with 5 or more ORs. Those in single-specialty ASCs make an average of $16,000 less than those in multispecialty centers.

ASC respondents reported their last salary raise averaged 5%, similar to 5.1% in
2007, and higher than the 4.3% average reported by hospital OR managers. In all, 10% of ASC managers received the increase as a result of a promotion or change in job responsibilities. Only 21 respondents (8%) hadn’t received a raise from their current employer.

**Bonuses/profit sharing**

The pay difference between ASC and hospital OR managers shifts when bonuses and profit sharing are considered. More than three-quarters (78%) of ASC managers receive one of these as part of their compensation package, significantly higher than last year’s 64%. In comparison, only half of hospital managers receive bonuses or profit sharing.

In the past 12 months, more than two-thirds (69%) of ASC managers received a monetary bonus or profit sharing, compared to only 40% for hospital OR managers. The average amount received for ASC managers was $5,880, and those in the Midwest reported the highest average ($7,290).

**Benefits**

Benefits packages for ASC managers are leaner than for hospital OR managers, with insurance, educational, and pension benefits less common.

<table>
<thead>
<tr>
<th>ASC</th>
<th>Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paid time off</td>
<td>100%</td>
</tr>
<tr>
<td>Health insurance</td>
<td>91%</td>
</tr>
<tr>
<td>401(k) retirement plan</td>
<td>88%</td>
</tr>
<tr>
<td>Life insurance</td>
<td>75%</td>
</tr>
<tr>
<td>Dental insurance</td>
<td>69%</td>
</tr>
<tr>
<td>Disability insurance</td>
<td>56%</td>
</tr>
<tr>
<td>Eye care</td>
<td>53%</td>
</tr>
<tr>
<td>Dependent health ins</td>
<td>49%</td>
</tr>
<tr>
<td>Educational benefits</td>
<td>42%</td>
</tr>
<tr>
<td>Tuition reimbursement</td>
<td>30%</td>
</tr>
</tbody>
</table>

ASC managers have an average of 26.9 days off, including vacation, sick time, and holidays. A few (9%) have 40 or more days off, while 16% have less than 20. A bit more than half (57%) have between 20 and 34 days off.

**Scope of manager’s role**

ASC managers oversee an average of 3.7 ORs, with about one-fourth managing 5 or more and three-fourths managing fewer than 5. Those in joint-venture ASCs average the most ORs at 4.9, followed closely by hospital-owned centers (4.5).

ASC managers supervise an average of 22 FTEs, including an average of 18.2 clinical FTEs and 3.7 nonclinical FTEs. Those in joint-venture centers supervise the highest average number of employees (34.9).
One-third (34%) of respondents have the title of nurse manager, 31% are administrator/administrative directors, and 28% are clinical directors.

Most ASC managers report to administration (37%) or physician owners (20%). Other reporting entities include the board of directors (14%), medical director (10%), and corporate office (5%).

On average, ASC managers chalk up 46.9 work hours per week (compared to 53 for hospital OR managers), with 14% reporting they work 55 hours or more.

**Purchasing influence**

Nearly all respondents (97%) participate in selecting and purchasing decisions. Most (48%) are the primary decision makers, while 40% are members of a decision team or committee, and 29% serve in an advisory capacity.

Managers are most likely to be the primary decision makers in physician-owned (52%) or joint-venture (46%) ASCs. Those who work in a hospital-owned center are more likely to serve on a team or committee.

ASC managers influence purchasing decisions for OR supplies and equipment (91%) and for OR capital equipment (76%). More managers in multispecialty ASCs (82%) influence decisions related to capital equipment than those in single-specialty centers (68%).

**Surgical volume**

The average surgical volume is 4,350 per year, ranging from less than 1,000 to 20,000 or more. Joint-venture and multispecialty ASCs report higher average volumes.

Growth in patient volume slowed this year. For the past 12 months, about half (49%) of ASC managers said their volume of surgical procedures remained about the same, significantly higher than 2007, when it was 39%. Still, more than one-third (34%) reported increased volume, and only 15% reported a decrease.

**About your ASC**

Most respondents (45%) work in physician-owned ASCs, followed by joint-venture (24%), corporate-owned (22%), and hospital-owned centers (6%). In all, 57% work in multispecialty ASCs, with 43% in single-specialty facilities.

The average annual operating budget is $5.0 million. Hospital-owned ASCs have the largest operating budget, averaging $7.1 million, followed by joint-venture ($6.4 million), corporate-owned ($3.6 million), and physician-owned ($2.4 million) centers.

**ASCs high on accreditation**

The Accreditation Association for Ambulatory Health Care (AAAHC) leads the pack of accrediting agencies with 36% of respondents. The Joint Commission is in second place (20%), followed by Medicare and state governments (11%), and the American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF) (2%).

Only 6% of ASCs are not accredited.

**Information, please**

Just over half (53%) of ASC managers report having a computerized information system (IS). Of those, 36% have a computer in each OR. Single-specialty centers, physician-owned centers, and ASCs in the South are least likely to have an IS.

**All about you**

Nearly all respondents (93%) are women, and 98% are RNs.

The average age is 51 years, slightly lower than the average hospital OR manager’s 52.3 years.

ASC managers have been in their current positions an average of 9.1 years, and
**What's your ASC's greatest achievement?**

Growing the ambulatory surgery center’s business and upgrading facilities and equipment top the list of achievements and goals for next year, according to respondents to the OR Manager Salary/Career Survey. Also leading the list were efforts to harness the strength of the staff.

### What was your ASC’s greatest improvement?

#### 1. Upgraded facilities and equipment
- Electronic medical record for nursing notes and physician dictation. It captures coding for billing.
- Update of equipment—same in all ORs.
- Implemented a custom pack system for many of our case specialties.
- Better control of IOL (intraocular lens) consigned inventory/logs, etc, via use of free software and hardware system.

#### 2. Growing the ASC’s business
- Increased volume by 10% in 1 year by adding orthopedic program.
- Increased volume and turned around negative cash flow.
- Additional interventional pain/spine procedures.
- Becoming a multispecialty facility for bariatrics and minimally invasive spine surgery.
- In addition to increasing surgical cases, we have opened a pain clinic that is doing very well.

#### 3. People power
- Established staffing pattern that matches our volume to decrease need to furlough staff on daily basis.
- Working more as a team and being multifunctional. Able to perform several tasks.
- We have continued to cross-train our staff so we can use staff more effectively and creatively.
- Replaced a "drama queen"/bully.

#### 4. Quality & efficiency
- New culture of patient safety by following TeamSTEPPS patient safety program.
- Improved turnover time with minimal staffing changes.
- We are at 90% capacity in the OR—very busy and successful ASC.
- We maintained 95% and greater each month in our patient satisfaction scores.

### . . . and what do you hope to achieve this year?

#### 1. Grow the ASC’s business
- Increase volume; hire new surgeons and possible expansion.
- Addition of orthopedics; recruitment of third ENT physician.
- We are hoping to open a new ASC by 2009.
- Increase volume; bring new services in.
- Opening third outpatient surgery center north of town—expansion will provide more jobs and increase total ORs I manage to 19.
- Finish planning and breaking ground on an addition—due to success of current center.

#### 2. Upgrade, add new equipment
- Purchase new endoscopes and processors.
- Equip our 4th room with an equipment boom and upgrade arthroscopy equipment.
- Cost reduction with reports from our new OR EHR (electronic health record).
- Add high-definition video cameras.
- Decrease overnight shipping needs by improved communication and planning.

#### 3. People power
- Improve staffing numbers and add part-time staff.
- Profit sharing with employees.
- I would like to see them encourage and promote certification of nurses.
- Reduce use of agency to zero.

#### 4. Improve efficiency
- Decrease overtime by spreading cases out during the day.
- Increase time management to decrease patient wait times.
- Increase room utilization and attract more MDs.
in nursing an average of 26.6 years.

Most respondents report their highest level of education as a bachelor’s degree (42%), followed by an associate degree, diploma, and master’s degree.

Fewer than half of respondents (44%), say their ASC requires a specific degree for their position. The most common degree required is a bachelor’s (64%).

— Cynthia Saver, RN, MS

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