INSIGHT:
Are Your Perioperative Services a “Cut Above” and Ready for the Perioperative Surgical Home?

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Recently there has been a significant paradigm shift in perioperative care models, moving from the traditional reactive and sequential process to a more proactive, collaborative and team-based approach, with the goal of improving quality, reducing costs and enhancing the patient experience.1 This has given rise to the concept of the Perioperative Surgical Home (PSH).

In a recent submission to the American Society of Anesthesiologists (ASA), Dr. Bita Kash and his team from Texas A&M Center For Health Organization Transformation, defined the Perioperative Surgical Home (PSH) as a healthcare microsystem where care is planned, delivered and managed, outcomes are achieved, and various providers meet patients and family.2

Perioperative services are expensive, with high fixed costs related to both personnel and equipment. High-performing perioperative services - where patients feel their care is individualized, safe, and provided in a compassionate manner, coupled with practitioners having confidence in operational efficiency and quality professional and support services - can demonstrate a significant positive contribution to the facility’s operating margin. This not only provides straight dollars to the bottom line but also contributes by offsetting necessary, but at times, less profitable services.

So have you ever really looked at the perioperative environment at your facility? Have you ever considered how you might attract more patients to choose your facility for elective procedures or how you might encourage proceduralists to select (and direct their patients to) your facility for their surgical, endoscopic, endovascular and similar procedures?

The fact that you offer the needed or desirable services to both patients and to those performing the procedures is not enough to differentiate your facility from any other facility that offers similar services. Your surgeons, your proceduralists, your nurses, your anesthesia staff and your perioperative support staff may be clinically good, perhaps even excellent, but that does not always ensure a safe procedural environment, a quality clinical outcome, a positive patient experience or a great place for physicians and staff to work. Remember, patients expect clinical competency; it’s the rest of the experience that can differentiate you from others.

These desirable attributes of a surgical or procedural suite depend on teamwork, collaborative processes, efficient flow, good communication skills, safe handovers and other similar factors.

So how can you differentiate your perioperative services? Although there are many factors involved, too numerous to cover in this one Insight, here are some important items related to the perioperative experience that you might want to consider:

**REPUTATION / MARKETSHARE:** Although it is becoming increasingly transparent and publically reported, clinical quality data are complex and difficult to understand for the average consumer. Patients rarely have the ability to judge the technical quality of their care and, as a consequence, they place much more emphasis on what they do understand. Patients can relate to how they experienced their care; how were they communicated with by physicians and staff; how well were they kept informed of what was happening and what to expect next; and did they feel “cared about” not just taken care of. In fact, patients rate their non-clinical experiences as twice as important as clinical reputation when choosing a hospital facility for their care.3

Patients share these perceptions widely with those they are close to and even more widely and more rapidly via the world of social media. Research has shown that these two avenues – word of mouth and publically reported perceptions – are what potential patients rely on when making decisions as to where to get their care.4 No longer is being conveniently located a major driver of patients to your door - patients are willing to travel to get the care that they believe they deserve and the care that they perceive to be of higher quality.5

Patients who have a good experience in the perioperative suite are likely to return and / or refer friends. Some experts believe that this referral piece will have more impact on a hospital’s financial future than the reimbursement penalties being implemented by Medicare.6
Furthermore, studies show that, when deciding where to refer patients, physicians place considerable weight on the patient experience, not just the facility’s technology, clinical facilities, and staff.

**STAFF ENGAGEMENT:** Highly-skilled professional staff prefer to practice and serve patients in a collegial and supportive environment, one in which they feel respected and valued. And when the staff is engaged and passionate about service, they give better care and patients’ experience less anxiety and improved outcomes.

It has long been recognized that high staff turnover stems from a lack of leadership and results in apathy, a lack of consistency in hand-over processes, a breakdown in communication and a significant challenge to the hardwiring a culture of high performance.

Furthermore, a disengaged staff is very apparent when attempting to recruit and retain talented hard-to-find professionals, making such organizations far less attractive to potential hires. This is especially true for individuals that have the desirable experience, work ethic and skills – those exceptional people have choices and tend to select working environments that allow them to realize their potential and feel professionally fulfilled.

**EFFICIENCY:** Operational efficiency, including ease of scheduling, on time starts, case-turnaround time and similar elements are a demonstration of just how much we care about and respect both the patient’s and the proceduralist’s time in the perioperative environment.

In order to create a desirable perioperative environment, efficiency must be coupled with compassion and cannot compromise safety. This is a delicate balancing act and demands experience, accountability and recognition and sharing of best practices.

**QUALITY:** When a culture of high performance is absent, the consequences can be devastating - a lack of adherence to protocols, Surgical Care Improvement Project (SCIP) workarounds, mislabeled specimens, wrong-site procedures, surgical site infections and an overall compromise in quality.

As indicated earlier, quality care is truly a composite that results from hiring the right people, great leadership, and a culture that holds individuals accountable and creates “ownership.”

**Your Perioperative Surgical Home**

We know you strive to create and develop a Perioperative Surgical Home where patients will choose to get their care, where staff will want to work and where proceduralists will select for their patients. So what can you do to give your perioperative services the “cutting edge”? Learn from the experience of those that have accomplished this by hard work and from those who have made missteps and bounced back. You can recruit and retain exceptional professionals. You can improve efficiency and quality. You can reduce patient anxiety and enhance communications between staff-members and between professionals and patients.

Finally, you can adopt recognized best practices that have been well-demonstrated to accomplish these goals.

*References:*


5. HealthGrades, Inc. 2010 survey
