In response to the COVID-19 pandemic, and at the recommendation of the Centers for Disease Control and Prevention (CDC), the U.S. Surgeon General and many medical specialties such as the American College of Surgeons, and the American Society of Anesthesiologists, physicians and health care organizations canceled non-essential cases, resulting in many patients having their surgeries postponed.

States around the country have now permitted elective surgeries to resume, and the pent-up patient demand for surgical and procedural care is immense. Health care organizations, physicians, and nurses must manage this demand against multiple internal and external constraints.

To assist perioperative leadership, physicians, and nurses optimize care in operating rooms and all procedural areas, as well as accommodate the high surgical demand, Hospital IQ has developed these guidelines.
COVID-19 Impacts on Case Volume

Elective surgeries have resumed, but original case volume has not due to a number of factors:

INTERNAL FACTORS

» Case prioritization
  • Significant backlog of cases to assess, prioritize, and reschedule
  • Ability to monitor and predict future demand

» Workforce
  • Furloughs have limited the availability and capacity of employees and departments
  • Staff who contracted or were exposed to COVID-19 in recovery or quarantine

» Resource availability
  • Lack of supplies (e.g., PPE, sterile processing machines, anesthesia machines converted to ventilators)
  • Supply chain shortages and delays

EXTERNAL FACTORS

» Patient concerns
  • Loss of income or insurance coverage due to historic unemployment rates
  • Reluctance to enter hospitals during a pandemic
  • Hospitals struggling with the financial clearance process

» Continuation of COVID-19 prevalence
  • Demand still spiking in certain regions
  • State and local guidelines are subject to frequent change
  • No timeline for resumption of normal activities
## 7 Guiding Tenets for Optimizing Perioperative Efficiency

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Establish COVID-19 Governance

**PURPOSE**

Provide defined, transparent, and responsive oversight of the COVID-19 Perioperative Performance Plan, as well as guidance to the multidisciplinary task force implementing the plan.

**GUIDELINES**

The committee should establish their governance based on the following:

- The development and implementation of guidelines
- Ensure guidelines are transparent and equitable for the system in consideration of rapidly changing local and regional issues
- The committee should be multidisciplinary:
  - C-suite
  - Surgery
  - Anesthesia
  - Nursing leadership
  - Additional teams as necessary
Develop Guiding Principles for Case Prioritization

**PURPOSE**

Guiding principles for case prioritization can be shared with surgical offices to assist them in organizing and planning their backlog as well as providing support to frontline staff (OR schedulers, etc.) when deciding what cases get on the day’s schedule.

**GUIDELINES**

**Items for Consideration:**

- Medical Necessity Time Sensitive Procedure (MeNTS*)
- Case acuity
- Likelihood and impact of condition worsening with delayed surgical treatment
- Logistical feasibility (facility resources, community impacts)
- Patient willingness to continue with surgical treatment (how safe do they feel going to the hospital, do they still have health insurance, etc.)
- Patient living conditions and risks (do they have care at home/what is their risk of exposure to COVID-19, etc.)
- Does your organization need to consider the revenue implications while prioritizing the backlog?
- What criteria needs to be met for the organization to consider additional operating hours?

Source: https://www.facs.org/media/press-releases/2020/covid-scoring-system0414
Design Operating Model

PURPOSE
Designing an operating model assists the organization in addressing the current state and in looking forward to set priorities and goals, and operationalize plans.

GUIDELINES
Process will need to be iterative in a fluid environment and continually consider:

» New information
» Resource availability
» Simultaneous organic growth
» Tracking backlogged cases to completion
Establish Multidisciplinary Task Force

**PURPOSE**

To operationalize and adhere to the COVID-19 Perioperative Plan with set goals and targets, the task force should review conflicts and provide recommendations to the COVID-19 Governance team.

**GUIDELINES**

**Membership of this task force should include representatives from the following areas:**

- Surgery
- Anesthesia
- Hospitalist Groups
- Perioperative Nursing
- Inpatient Nursing
- Supply Chain
- Sterile Processing
- Organizational Operations (Intake, Revenue Cycle, EVS, Transport, etc. as needed)
- Perioperative Business Operations (Analyst, Business Manager, etc.)
- Other areas as organizationally indicated (e.g., Radiology, Lab, Pharmacy, Pathology, etc.)
Develop a Mixed Media Communications Plan

PURPOSE

With surgeons, office staff, and patients not always available at their office locations or phones, it is crucial to have multiple ways of passing information back and forth between key participants and to have one agreed upon source of truth.

GUIDELINES

» Include expectations around case prioritization, the operating model, and other pertinent information for bringing patients back into the OR.

» Include operational information such as allocated block time (surgeon / practice specific), open time, and released time that is available for surgeons and their offices to fill according to the case prioritization guidelines.

» Include information regarding resources and anticipated ramp up if an organization is still unable to access or fully operationalize all resources.
Initiate a Daily Huddle Schedule

**PURPOSE**
Proactively manage current and future operating room schedules to optimize capacity and predictability.

**GUIDELINES**
Establish a multi-disciplinary huddle to efficiently and effectively optimize resources and capacity:

- Review current day’s OR schedule
  - Understand how rooms are running in real-time
  - Determine if rooms need to stay open later than planned
- Review OR schedule 3–5 days in advance
  - Identify opportunities to fill current released time
  - Review anticipated block releases
  - Align case waitlist to available OR time
Create, Track, and Report Performance Indicators

PURPOSE
Identifying, tracking, and reporting metrics and performance indicators ensures focus is kept on critical issues as well as providing insight into which recovery methods are working and which ones are not. It also provides documentation to reference for future instances of massive disruption.

GUIDELINES
» Establish a pre-COVID-19 baseline for all KPIs
» Prioritize backlogged cases
» Monitor organic growth vs. backlog volume
» Calculate block utilization
» Create additional operating hours and utilization, if needed
» Determine labor use
Key Takeaways

» COVID-19 is a dynamic situation that requires strong governance and communication plans across all perioperative stakeholders.

» Traditional methods used to manage the perioperative department may not be effective, necessitating the need to discuss and consider the impact of all options.

» Advanced workflow and analytics systems are crucial to improving operational efficiency, helping leaders manage through COVID-19 and emerging from it more optimized than ever.
Hospital IQ’s operations management platform uses AI to direct actions, enabling health systems to sustain peak operational performance that improves patient access, care delivery and staff productivity. Hundreds of leading hospitals rely on Hospital IQ to help them make the right operational decisions the first time, every time.
Hospital IQ’s Perioperative solution

Hospital IQ’s Perioperative solution makes actionable recommendations that help leaders optimize capacity to better meet true surgical demand and improve performance.

This real-time, data-driven platform applies system-specific policies, machine learning, and optimization algorithms to the hospitals perioperative data to accurately forecast OR usage and make recommendations that will increase surgeons’ access to the OR, improve OR and staff utilization, and identify opportunities for growing volume.
Guidelines for Managing Surgical Services During COVID-19

Hospital IQ streamlines access to the OR, enabling surgeons and their staff to view and request the available OR time that best fits their schedules using their mobile devices. In addition, it predicts which surgical blocks are most likely to go unused, giving other surgeons and schedulers the opportunity to book cases and fill those primetime slots. Integrated surgeon-specific scorecards enable surgeons to see their own OR utilization rates and performance trends, and to compare those with their peers.

Hospital IQ's workflows simplify administrative tasks and help drive improvements by applying robust analytics and machine learning to the hospital's own data. Automated block change recommendations, first case on-time start workflows, and block release recommendations help leaders, surgeons, anesthesiologists, and staff reach consensus on which actions will improve performance and then work together to achieve those goals.

Hospital IQ's robust workforce planning capabilities demystify the staffing process. Hospital IQ predicts the OR's needs based on historical patterns and optimizes staffing levels, automatically scheduling staff based on flexible, user-defined policies, which can save hours and even days of a charge nurse's time. And Hospital IQ identifies potential overstaffing and understaffing situations in advance, allowing managers to adjust proactively.
Hospital IQ’s Client Operations team

Incremental adoption is the key to transforming operations. The following combination of people, process, and technology ensures that sustainable improvements are achieved by our clients.

» **Industry expertise:** Our Client Optimization team is staffed with subject matter experts to ensure client success. The team has knowledge and experience with client issues and extensive years of combined experience, which includes former hospital executives, industry leaders, consultants, and subject matter specialists in hospital operations, all of whom have performed similar engagements for various institutions across the country.

» **Trusted partner:** Our team of experts approaches our clients as partners, starting every relationship with a discovery process to ensure we understand and support a client’s priorities. We approach transformation with future sustainability and success in mind, focusing on aligning your operational structure to enable your vision, empowering your leaders to own the process, and engaging stakeholders to harness your culture to drive change.

» **Proven methods:** System-wide transformation does not happen overnight, and technology adoption should mimic a system’s journey to sustainable improvement. In as little as 30-days, working “elbow-to-elbow” with our team, clients experience the benefit of Hospital IQ firsthand through the automation, communication, and predictions of their health system’s operations.
Results

With standard operating practices implemented and supported by software, leaders are given back critical time to better manage their operations, and care teams can focus more time on caring for patients. Staff can rely on prescriptive analytics to guide their decisions and plan for future events. The combination of more time and better insight improves performance in a sustainable way; priorities are naturally adjusted over time, ultimately resulting in improved patient care and satisfaction.

Using Hospital IQ, Perioperative clients across the country are seeing the following results:

- 120 additional monthly procedures
- 5% increase in OR utilization
- 600 hours proactively released each month
- 21 day average lead time for block releases
To learn more about Hospital IQ and understand how we are helping hundreds of leading hospitals and health systems make the right operational decisions the first time, visit hospiq.com.