

## **The Perioperative Flow Facilitator's Impact on Capacity Management**

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**Background Information:** Facing continuously high hospital census, capacity management became the focus for maintaining surgical operations. The population served by Children's Hospital of Philadelphia (CHOP) in the surgical area includes cases with complex medical histories and many co-morbidities. Given these complex considerations, the Perioperative Flow Facilitator (PFF) role was developed to positively influence coordination of care in the surgical department at the CHOP.

**Objectives of Project:** The PFF role was created to improve coordination techniques from small scale reactive methods, to proactive hospital wide efforts.

**Process of Implementation:** The PFF role identifies patient needs through PFF reports, daily perioperative flow calls, daily perioperative emails identifying hospital census, and daily surgical admission lists. The PFF reports are compiled from hospital wide patient data reports, and contain pertinent patient information that influence postoperative destinations. These reports also expand the distribution of patient information to departments and professionals across the institution. Daily communication from the PFF begins with a 6:00 multidisciplinary conference call followed by two additional hospital-wide meetings to review enterprise capacity. The "ARC Surgical Throughput" Qlikview report was developed by the Anesthesia Resource Center to capture data describing patient flow. Surgical patient data from 2015-2018 was analyzed to gauge the effect of the PFF role in facilitating patient flow through the Perioperative Complex.

**Statement of Successful Practice:** Prior to the development of the PFF role in early 2016, only 19% of surgical cases were assigned to more than one possible postoperative destination. At this time, approximately 1,500 did not have accurate postoperative destinations identified preoperatively. The PFF role introduced assigning multiple possible postoperative destinations for a patient based on potential postoperative care needs. After the PFF role was implemented, approximately 95% of cases had accurate final postop destinations, identified preoperatively.

**Implications for Advancing the Practice of Perianesthesia Nursing:** This process has increased situational awareness across the organization by increasing transparency of expected patient volume prior to day of surgery. This new role has proactively influenced capacity management and bridges communication throughout the hospital.