

Aligning Surgeon and Hospital Performance: A Focused Perioperative Service Line

In today's healthcare landscape, hospitals face mounting pressure to deliver high-quality, efficient surgical services while enhancing both patient outcomes and provider satisfaction. At the heart of achieving this goal lies the perioperative service line, a critical engine making up 65% to 70% of a hospital's revenue and heavily influencing clinical performance and quality. When effectively structured and strategically led, the perioperative service line can become a unifying platform to align surgeon and hospital performance. Here are five core capabilities essential to building a high-performing perioperative service line:

1. Optimizing OR Scheduling Capacity and Room Performance Efficiency

Maximizing surgical volume and throughput begins with efficient OR scheduling. Hospitals must ensure case scheduling practices prioritize predictable access for high-value surgeons, minimize gaps between cases and turnover of rooms, minimize delays and cancellations. Leveraging advanced scheduling analytics, surgical block management systems, surgical room heatmaps and real-time case tracking allows hospitals to increase OR utilization and reduce turnover time. Prioritizing "prime-time" capacity (7:00 AM–3:30 PM) ensures the highest case yield per OR hour and minimizes overtime labor costs and surgeon inefficiencies.

2. Establishing a Strong OR Business Structure

High-performing perioperative service lines are backed by a well-defined business structure. This includes key leadership roles such as:

- Vice President of Perioperative Services to oversee strategic operations and align clinical and financial goals;
- **OR Medical Director** to lead clinical quality and drive engagement and accountability with surgical staff;
- OR Nursing Director to manage intraoperative care delivery, OR processes and staffing performance;
- **Perioperative Business Manager** to monitor key performance indicators (KPIs), optimize case costing, and identify revenue opportunities.

Together, this leadership team ensures that perioperative operations are agile, data-driven, and responsive to the needs of both surgeons and the health system.

3. Implementing Surgical Executive Governance

Governance is critical to driving surgeon-hospital alignment and ensuring continued improvement of perioperative services operations. A **Surgical Executive Committee** composed of surgeon leaders, anesthesia chiefs, perioperative leaders, and hospital executives creates a shared leadership model based on performance goals, transparency, communication and trust. This committee should meet routinely to review performance dashboards, address barriers to throughput, approve OR policy changes, and champion strategic initiatives. A surgeon-led governance model builds trust, increases transparency, and empowers surgeons to take ownership in improving perioperative outcomes.

4. Aligning Ambulatory Surgical Visits with the OR Schedule

A coordinated approach between surgical-specialty ambulatory clinics and the OR ensures patients are scheduled timely for their procedure, arrive surgery-ready and optimizes room time utilization. Given the many challenges with preauthorization of procedures, an integrated process between the surgeon's office and hospital surgical schedule team will ensure the patient can be schedule timely and the surgeon's block time is optimally utilized.

Streamlined surgical scheduling, pre-admission testing, pre-op clearances, and same-day surgical workflows reduce case cancellations and delays. Digital tools and clinical pathways should enable surgeons and schedulers to manage these touchpoints seamlessly while minimizing preauthorization denials and reducing lost revenue.

5. Tracking Comprehensive Perioperative Performance Measures

A robust set of perioperative KPIs provides visibility into performance and drives continuous improvement. Key metrics include:

- First case on-time starts (>85%)
- Turnover time (<25 minutes)
- Block utilization (>75%)
- Surgical volume growth
- Day-of-surgery cancellation rate (<2%)
- Preauthorization denials (<5%)

Benchmarking against industry standards enables performance comparisons, while surgeon-level reporting fosters accountability. Transparency in metrics builds alignment around mutual goals of efficiency, quality, and patient experience.

Conclusion

Hospitals that commit to a disciplined, focused approach to perioperative service line development can unlock tremendous value. By building strong operational foundations, engaging surgeons in governance, and using data as a strategic asset, hospitals can align their interests with those of their surgical teams to driving better outcomes, greater efficiency, and improved financial performance.