# 7 Smooth demand for PACU and admissions by scheduling shorter and/or outpatient cases as the first case in some blocks

## Challenge Identified

There are notable peaks when multiple surgeries conclude together within a short period of time, placing a considerable strain on the Post Anesthesia Care Unit, which is often operating short-staffed. Lack of capacity in the PACU can force ORs to be put on hold, postponing surgeries until the patient flow is manageable, which can lead to delays and cancellations.

The Central Zone Perioperative Team was interested in optimizing the scheduling system with the objective of smoothing the inflow of patients to the PACU.

## Solutions Tested

Using Orthopedics at the Halifax Infirmary as a test case, a paper exercise was conducted to test the viability of implementing a surgical sequencing protocol to:

- Prioritize some outpatient cases earlier in the day, to allow time for inpatient discharges.
- When possible, stagger surgery end times by balancing short and long case times, ensuring a smoother, more efficient flow of patients to prevent surges in PACU.

Through this exercise, many barriers to implementation were discovered:

- **Block Room**: Adjusting surgical sequencing may cause issues with the block room as there is only Anesthesia coverage from 6:30am - 2:30pm.
- **Patient Variables**: Patient variables may impact the way surgeries are scheduled (e.g., patient may be diabetic, patient may not live in the HRM, patient may have been previously cancelled therefore prioritized, etc.).
- **Procedure Variables**: Surgery may require specific equipment (e.g., MAKO) or diagnostic imaging (e.g., radiology) that may only be available at certain times, and is often re-sequenced day-of surgery to accommodate for these factors.
- **Resourcing**: There is no position 'best suited' to alter surgical sequencing.

## Next Steps

Recommendation:

- Surgical sequencing to smooth PACU admission should be abandoned due to barriers to implementation.
- Place focus on resolving extended patient stays in PACU due to delays on in-patient floors.
- Support Unit 7.3 QI Project, and spread successes to other units.

Future Considerations:

- Investigate and escalate access and flow to inpatient units (e.g., set targets for time to accept patients, prioritize accepting patients from PACU over other end of shift duties, consider staggering inpatient nursing shifts, etc.)
- Shift surgeon's OR days such that competing for resources is minimized.