

WEST CLINICAL LEADERSHIP

The Perioperative Leader's First 90

*A Practical Field Guide to Building Trust, Stabilizing
Operations, and Delivering Results*

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Begin with the Responsibilities of the Appointment

Your clinical experience gives you a strong starting point. It does not prepare you for every decision that comes with responsibility for a perioperative service.

You may know the rooms, the surgeons and the work well. You can anticipate a missing tray, recognize a strained team and help a difficult day recover. Leadership adds another set of responsibilities: deciding which problem deserves attention, agreeing who can act, understanding the cost and checking whether the change worked.

Those responsibilities begin before you feel fully prepared. A new manager is still learning while payroll is due, a staffing concern needs an answer and a surgeon wants a commitment. You need a way to make sound decisions with incomplete information and to recognize the decisions that require help.

This book helps you prepare those decisions. Start by confirming your responsibilities with your leader, choose a useful next action and review what happens. Build from there.

A working guide

This field guide is for your first ninety days, with tools you can continue using as your responsibilities grow. It organizes the work into six areas: leadership, operations, finance, analytics, strategy and improvement.

Each chapter combines an operating question, practical examples, reusable tools and a first action. The tools support your judgment; they do not make the decision for you.

Scope and professional judgment

This is not a clinical text. Nothing here replaces technique, protocol, patient-care decisions, or the requirements of your organization. It is not a substitute for your organization's policies, your human resources partner, or professional legal and financial advice. Where a chapter approaches those boundaries—and several do—it says so plainly and tells you who to talk to.

Use the examples to organize your thinking, then replace their assumptions with evidence from your own service. A hospital operating room and an ambulatory surgery center may face similar problems while having different governance, staffing and resources.

Adjust the work to your level of responsibility

A manager may investigate a delay and coordinate an approved local test. A director may need to resolve a dependency between services, allocate resources or bring a recommendation to block governance. An executive may decide enterprise priorities, capital commitments or changes that affect several facilities. Titles alone do not establish authority. Confirm the actual decision owner before making a commitment.

For an interim appointment, also agree what must be stabilized, what can be changed and what must be handed over. Use the same reasoning at each level: define the issue, examine the evidence, compare options, obtain the right decision and review the result.

How to Use It

Start with the responsibility in front of you. If you have just accepted the role, use the appointment agreement below and Chapters 1 and 2. For an operating or financial decision already due, go directly to the relevant chapter and worked example. You do not need to finish the book before using it.

Then use it as a reference. When the budget lands and you cannot read it, go to Part Three. When the schedule will not behave, go to Part Two. When you are avoiding a conversation, go to Part One. The contents page is deliberately built around problems rather than topics, so you can find the chapter you need by recognizing the situation you are in.

During your first month, use the opening agreement and Chapters 1 and 2 while meeting your immediate responsibilities. If the appointment is interim, confirm its scope, decision authority and handover date.

Learn enough to make the next decision well. Respond promptly when the situation cannot wait.

What you should leave with

By the end of your first working session, you should have a draft appointment agreement or a clearly framed decision to discuss with the appropriate leader. The time needed will depend on your access to people and information.

Over the next ninety days, the aim is a manageable set of agreed priorities, reliable working relationships and evidence about one improvement. You will also need to identify what remains unresolved and who must decide it.

Use the first tool that helps you make a clearer decision, then return to the book when the next problem requires it.

Clarify your role and authority

Before changing the service, confirm the role with the person who appointed you. Bring a draft that names the appointment period, the responsibilities you own, decisions requiring approval, current urgent concerns, available support and the first review date.

For an interim appointment, add a handover date or review trigger. Confirm authority for spending, scheduling, personnel processes

and cross-department changes. A temporary title alone does not establish those permissions.

Use the calendar as a planning aid. Address urgent risks, payroll and other fixed deadlines, required reporting and active operational responsibilities through the approved process while you learn. Never delay a required response to finish this book.

Your first useful output is a one-page agreement you can explain to the sponsor: what I own; what I must escalate; the first priority; the support available; and when we review it.

Start here: the first useful conversation

Bring a draft appointment agreement to the leader who appointed you. In this book, that person is the sponsor: the leader authorized to confirm your scope and resolve decisions beyond it. If the sponsor is unavailable, identify the designated covering leader. Do not fill an authority gap by assuming permission.

The example below concerns a fictional interim manager in a six-room perioperative service. The organization has asked for twelve weeks of cover while recruiting a permanent manager. The outgoing leader has left, two improvement projects remain open and staff have heard different accounts of what the interim manager can decide. The first task is to make the assignment workable.

A completed appointment agreement

Question	Illustrative agreement
Purpose and period	Provide operational management for twelve weeks. Maintain current required services and establish a reliable handover for the permanent manager.
Responsibilities now	Daily staffing coordination within approved rules; payroll and required reporting; staff access to the manager; review of outstanding operating issues.

Question	Illustrative agreement
Decision authority	Routine assignments within approved competency and coverage rules. Director approval for new positions, overtime exceptions, capital commitments and changes affecting other departments. Formal HR decisions use the required joint process.
Inherited commitments	Two projects remain listed as active. Confirm their sponsors, requirements, next deadlines and resources by the first weekly review. Do not cancel required work.
First priority	Verify the reported first-case readiness problem and bring a shared description of the issue to the director and affected partners. No performance target is assumed before definitions and baseline are checked.
Support and access	Scheduled director review; identified finance and HR contacts; access to current staffing, operating and project records through approved systems.
Escalation and coverage	Use established urgent-response and reporting routes. Confirm who covers when the director or interim manager is unavailable.
Review and handover	Review the agreement at the end of week one and when scope changes. Prepare an initial handover record by week ten; confirm the receiving leader and final review date.

The agreement is useful because it exposes decisions that the title alone did not settle. The manager owns current duties, can investigate the readiness issue and knows which commitments require approval. The twelve-week appointment does not justify a twelve-week pause in required work.

The conversation

"I want to confirm what you need from this appointment. My draft gives priority to current operating responsibilities, a verified view of the readiness issue and a usable handover. I can manage routine assignments within the existing rules. I need your decision on the two inherited projects and on the approval route for staffing exceptions.

What have I missed, and what would you change before I discuss the assignment with the team?"

Record the decisions, including a disagreement or an unanswered question. Send the agreed summary through the organization’s normal route. A draft becomes an agreement when the responsible people confirm it; completing the page by yourself does not do that.

Your matching working page

Use the same questions for your own appointment. Keep confidential details in your organization’s approved records. Where permitted, note a record reference here without copying sensitive information. The full-page version in Working Pages provides more writing space.

Question	Your draft
Purpose and appointment period	
Responsibilities that begin immediately	
Decisions I own; decisions requiring approval	
Inherited commitments to verify	
First priority and evidence needed	
Support, access and covering leader	
Escalation route; first review; handover	

A practical first-week route

When	Work and useful output
At appointment	Confirm immediate responsibilities, urgent-response coverage, access and fixed deadlines. Output: a draft appointment agreement with authority gaps identified.
Early in the week	Meet the sponsor and the partners needed for current decisions. Output: an agreed scope and a short list of commitments with owners and dates.
Across the week	Listen to a range of staff and observe a relevant process without disrupting care. Output: a question to investigate, with facts separated from assumptions.
Before the first review	Check one material operating claim with the metric owner. Output: a definition and a reproducible count, or a clear record of what is missing.
At the review	Present current duties, the evidence gathered and the decision needed next. Output: an agreed next action, support and review date.

Adapt the order when an urgent concern, payroll deadline or another required task takes precedence. Your first week is successful when the work is clearer and the next responsibilities are agreed—not when every box in a generic plan has been completed.

If you inherit a promise you cannot verify

A surgeon tells the interim manager that an additional Thursday block was promised before the previous manager left. The schedule has no approved change, and anesthesia and PACU have not confirmed coverage. The manager should neither dismiss the promise nor treat it as permission to book additional work.

“I understand that this was discussed before I arrived. I will check the documented decision and the coverage required with the responsible

leaders. I cannot confirm the added block today. I will return by our agreed review with the status and the options we can support.”

The next action is a record and capacity check. Confirm what was approved, by whom, under which conditions and whether those conditions still hold. If there is no complete decision, bring the options to the authorized sponsor. Record the resulting commitment so the next leader does not inherit the same ambiguity.