Improving the Surgery Pre op Clinic Process in Southern Health Santé Sud

September 15,2015

Eileen Vodden

Chair –PAC Team



The PAC Team

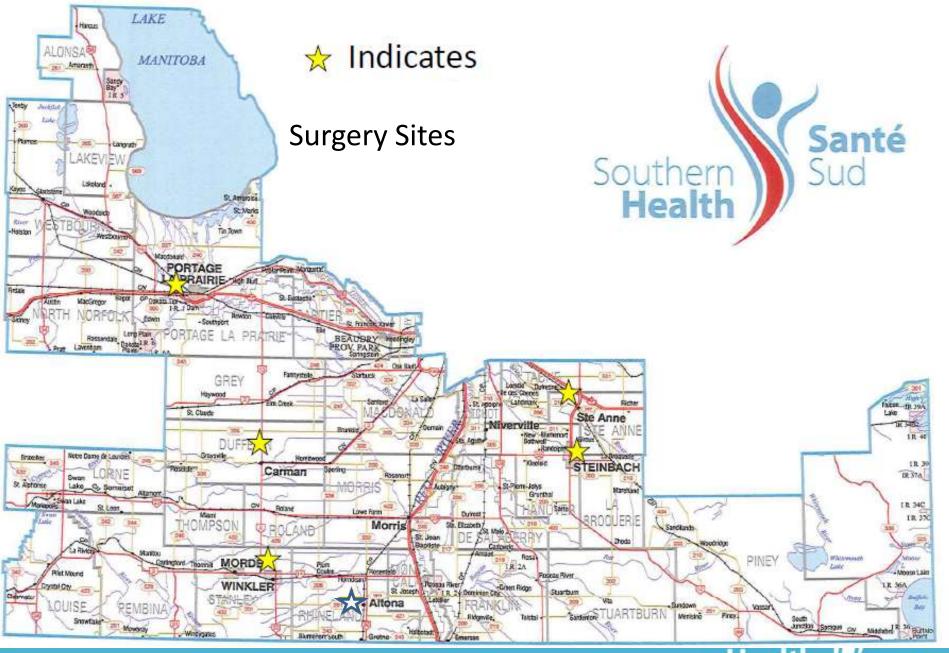
Southern Health Sante Sud PAC Team:

- Dr. Denis Fortier- Executive Sponsor
 Eileen Vodden Chair Regional Director- Acute Care
 Maureen Gamache Boundary Trails CSM –OR/SDS/PACU
- Dalyce Fredette-Percy Portage CSM- OR/SDS/PACU
 Carole Lavack Bethesda/Ste.Anne CSM OR/SDS/PACU
 Val Askin –Clinical System Analyst –Regional Surgery Program

Ad Hoc Members:

- Johann Schaffer Boundary CRN- OR
- Kristin Zacharias Boundary slating clerk
- Jim Neufeld- Surgeons Clinic
- Dr. Abbu- Anesthesia
- Dr. Jacob- Surgeon

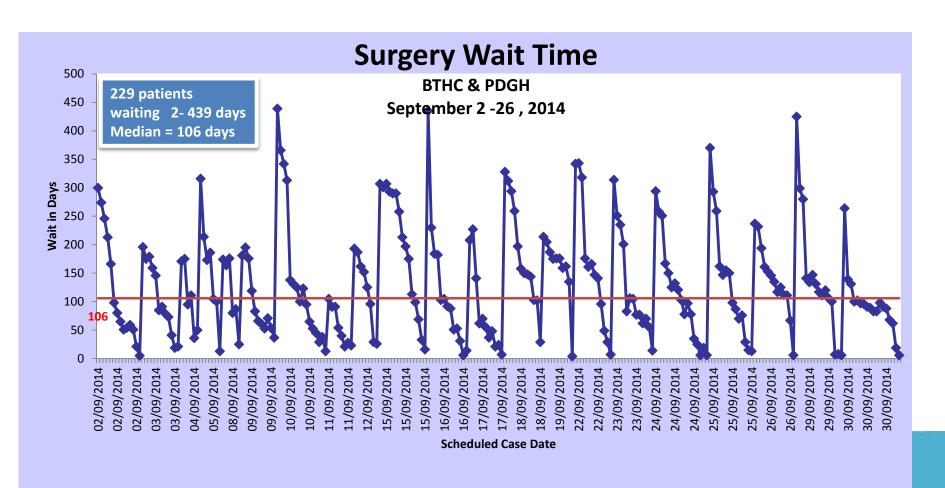




Southern Health-Santé Sud PAC Project

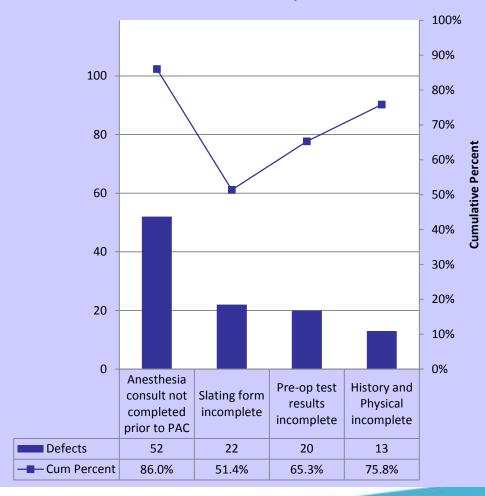
AIM: To reduce urgent referral wait times from decision to treat to surgery date by 50% by January 2015. Measure—referral received at slating clerk office to surgery or OR date Baseline data 5 surgery sites Process Mapping • PC referral data to surgeons clinic **Understand the System** Determine standards for · Urgent surgery Pre-Op clinic requirements **Understand Best Practice** Anaesthesia consults Surgeona BTHC –Surgery Team/slating office Anesthestists **Engage Stakeholders** Primary Care Clinics -• Revised referral process from Primary care to surgeons office • Revised Slating policy for urgent and elective surgeries Address system gaps Implement best practices Formalize Pre OP Clinic processes Phased in roll out across region **Improve** Surgeon Anesthesia regional mtg tor review processes Education sessions with site slating, surgeons offices, family physician Clinics SIMS integration (Surgical Information Mgmt System) • 42 days for urgent surgeries from decision to treat to OR date Central • 94% compliance (all referrals received at BTHC and PDGH slating office) Monitoring Wait times

Baseline Data Referral to Surgery Date

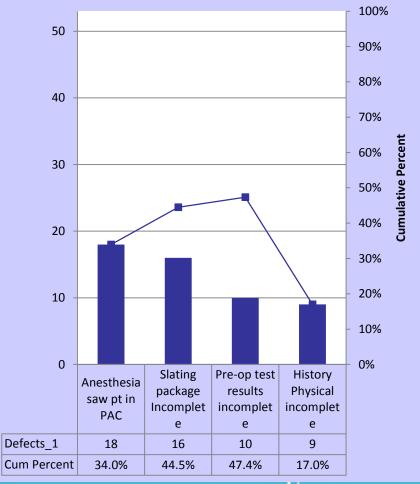




Pre Op Clinic Defects November 1- 30, 2014



Pre op Clinic Defects January 9-31,2015



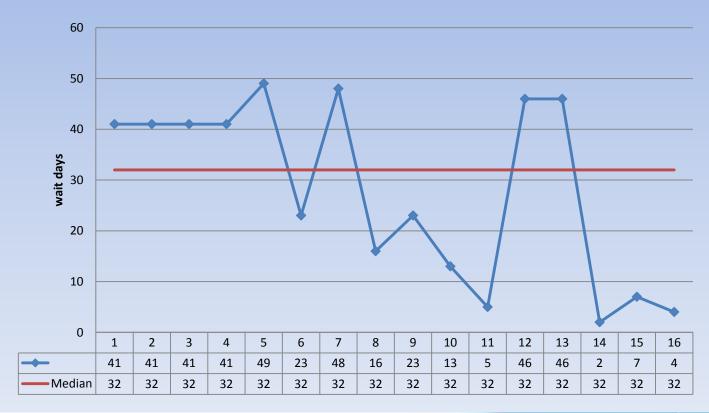


How was the problem addressed?

- Meetings with anesthesia, surgeons, physician clinics, slating staff, pre op clinic staff to review the evidence of the urgent surgery cases NOT meeting the 42 day standard.
- Follow cancer patient journey principles at the clinic of "out the door in 24" from primary care & surgeon clinic
- Monitor urgent case referrals at the BTHC site for defects.
- Engage Pre op clinic staff and anesthesia to see patient ASAP.
- Work with Family Physician clinics to ensure history and physicals and pre op tests are completed within 2 weeks.



BTHC Urgent Surgery wait times Post PDSA





Outcomes and lessons Learned

Improvement Summary

- 86% decrease in median wait times for laparoscopic cholecystecomies from 77to 11 days
- 79% decrease in median wait time for urgent surgeries from 48 to 10 days
- 56% improvement in anesthesia see patients in Pre -op clinic for urgent surgery.



Outcomes and lessons Learned

Urgent Surgery pre - Sept-Nov 2014 and post-Dec-Jan2015

