

SCOAP

Involvement in SCOAP has
Improved Quality of Care at
Skagit Valley Hospital

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Administration Support

- Board of Directors passed resolution to increase the focus on Quality Measures.
- Resources were made available for intense focus on Quality measures.
- Quality reports now “trump” Finance reports at Board meetings.

SCOAP Coordination

- Monthly meetings are conducted between:

Dr. Johnson, Physician Champion;
Nancy Kingshott, Quality Coordinator;
and Joyce Cardinal, Quality Director.

Physician & Staff Involvement Is Vital

- Physician awareness was raised.
 - What are the measures?
 - What is the supporting evidence?
- Radiologists review all cases with discordant imaging.
- All elective cases with return to the OR are discussed by the GTV section.

Assign Responsibility for Individual Standards

- VTE Chemoprophylaxis: Surgeon
- Antibiotic timing: Circulating nurse
- Normothermia: Anesthesia
- Mgt. of peri-op blood glucose: Anesthesia
- Processes for Colon Cancer: Surgeon
- Beta-Blocker: Anesthesia/Surgeon

Drill Down on Every Case That Fails to Meet Standard

- Where was the ball dropped?
- Whose responsibility was it?
- For case specific issues where an individual is responsible, reminders are given via e-mail or phone.

Examples of Changes

- **Trend:** All cases that failed the beta-blocker measure were non-elective cases that came to OR via a route other than normal pre-op unit.
- **Action Plan:** Revise pre-op check list.
- **Trend:** Peri-operative blood glucose was being routinely measured consistently only for patients with known history of diabetes.
- **Action Plan:** Revise Anesthesia Pre-op Orders.

Concurrent Review is Key

- **Example:** VTE prophylaxis is reviewed and if not addressed, surgeon is called.
- **Example:** Antibiotic orders are reviewed prior to surgery and post op antibiotic orders are reviewed within 24 hours to confirm that prophylactic antibiotics are discontinued within 24 hours among elective procedures.
- Barriers to moving process improvements through the system were removed.

Added Benefit of SCOAP Drives Process Improvements

- SCIP numbers have shown major improvement.
- First quarter 2009: 97.39% of patients selected in the SCIP sample met the standard for all measures.





