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

Morrie Johnson, MD
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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.