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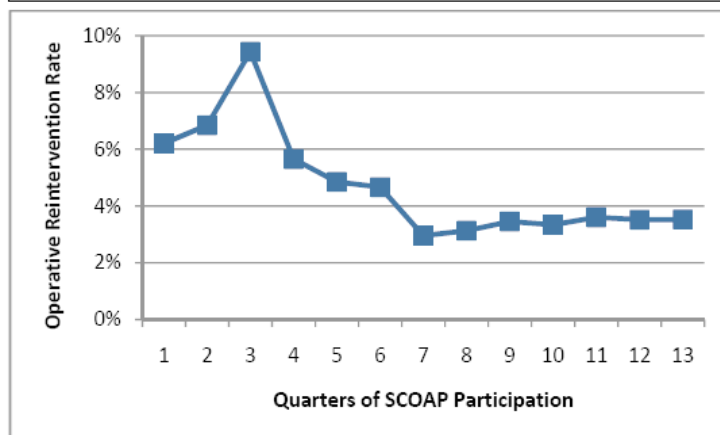
The SCOAP Community Speaks Up
We were recently asked by colleagues at Virginia Mason, “how will we know if SCOAP is working?”

Each month in The SCOAP Box, we show a different process of care or outcome metric getting better with each quarter of SCOAP participation. We also show the persistent variability in performance across the SCOAP hospitals and suggest there’s “more work to be done.” This month we highlight the dramatic improvements in rates of reoperative complications after elective colon and rectal resections. SCOAP hospitals have nearly halved the rate of this devastating complication using a combination of changes in patient

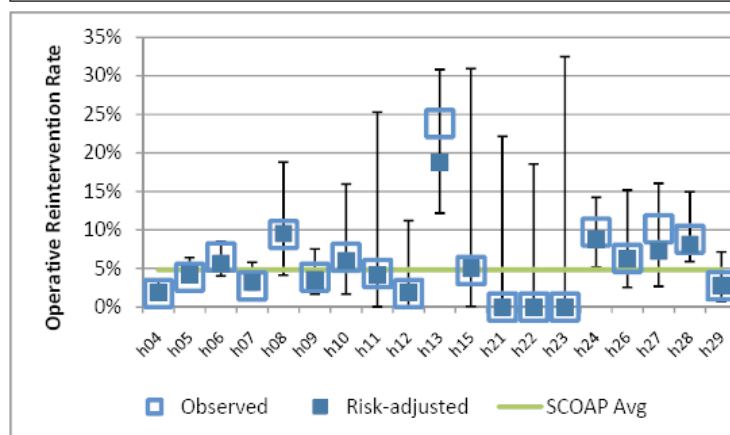
SCOAP is the future of surgical quality improvement. It is a physician-led, voluntary collaborative creating an aviation-like surveillance and response system for surgical quality. SCOAP’s goal is to improve quality by reducing variation in process of care and outcomes at every hospital in the region.

SCOAP Making a Difference

SCOAP hospitals have shown improvement in rates of reoperative intervention after elective colorectal surgery.



There is still significant variability among SCOAP hospitals in reoperative complications and much work to be done.



For more on reoperative complications, please see The SCOAP Community Speaks Up column to the left. To learn which hospital is yours in the slides above, or to ask questions about your data report, please contact Rosa Johnson at (206) 682-2811 x 20 or rjohnson@qualityhealth.org.

SCOAP Annual Meeting

The second annual SCOAP retreat will take place on June 13, 2009, in conjunction with the Washington State Chapter of the American College of Surgeons annual meeting, at Campbell’s Resort in Lake Chelan, WA. We look forward to

selection and process of care that we will be highlighting in future issues. We have shown the rates of negative appendectomy reducing dramatically with benchmarking of diagnostic testing and length of stay after surgery being reduced by more than a day with increased used of care pathways. Most would agree that for our patients, our hospitals, and our own drive for excellence as surgeons, significantly reducing the rate of anastomotic leak, negative appendectomy, and length of stay are great achievements. This is something we should all be proud of and great motivation to tackle the things that have yet to improve in SCOAP.

To see the rest of this answer, [click here](#) (for paper copy, see back of page).

Visit the [SCOAP website](#) for answers to other questions raised by members of the SCOAP community.

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celebrating our achievements of the past year and engaging in important strategic discussions with the SCOAP community regarding plans for the upcoming year.

Governor Christine Gregoire will welcome participants to the meeting. Keeping SCOAP vital will be a core theme of the day and discussion with the SCOAP community will revolve around new metrics, new reporting formats, and expanded SCOAP focus. SCOAP members will also share their SCOAP successes so that everyone can learn how to maximize SCOAP's impact within their own organizations. Dr. Sean Sullivan, Professor in the Schools of Pharmacy and Public Health/Community Medicine at University of Washington, will outline the business case for SCOAP and how SCOAP can show return on investment to hospitals. This discussion is critical to the future growth and development of SCOAP and will inform the afternoon sessions. Break-out sessions will look at the issues of post-operative nausea and vomiting, discharge DVT prophylaxis, and higher/lower risk SCOAP modules. Data abstractors and QI personnel will also have the chance interact in order to learn from each other, to communicate issues from the past year at their hospitals, and to share best practices and tips for ensuring high-quality data.

We are looking forward to a stimulating, thought-provoking, and productive meeting and hope to see you there! Look for an overview of discussion and decisions in the next issue of The SCOAP Box!

SCOAP Marches Across Washington State

50TH AND 51ST HOSPITALS JOIN SCOAP!

SCOAP is proud to welcome its 50th and 51st members, Southwest Washington Medical Center, in Vancouver, WA, and Mason General Hospital, in Shelton, WA. Southwest is a 360-bed serving the Vancouver, WA/Portland, OR areas and was the first permanent hospital to open in the Northwest territories in 1858. Mason General is a 32-bed critical access hospital serving Mason County, WA, on the Olympic Peninsula. Southwest Washington Medical Center and Mason General Hospital joins 49 other hospitals from across the State of Washington in this clinician-led, voluntary collaborative that links hospitals across the state to increase the use of best practices in surgical care. SCOAP's goal is to provide the kind of surveillance of procedures and response to negative outcomes that exists in the world of aviation. Now in its fourth year, SCOAP's membership represents over 80% of the general surgical care in Washington State. To see a list of SCOAP and non-SCOAP hospitals or to learn more about SCOAP, [visit the SCOAP website](#).

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