Operating Room Delivers Improvements in Efficiency and Quality

By Tim Daly, SMCS Assistant Administrator

Improving operating room efficiencies and communication between surgeons, anesthesiologists, nursing and administration were the goals of a Surgical Services task force created in January 2008. Since that time, the group has spearheaded some changes that have significantly improved affordability and quality on behalf of patients.

The group, made up of key surgeons and anesthesiologists, produced a “blueprint” that mapped out a strategy for improvements. Based on their recommendations, a number of high-level changes were implemented at the hospital. Dave Downs, M.D., and Hal Strauch, M.D., were appointed co-medical directors of Surgical Services and were charged with leading a revitalized OR Council to provide a multi-disciplinary governance committee for OR operations. The scheduling and block time policies were also reviewed and revamped to improve efficiency and access for surgeons.

A series of process improvement projects were identified around this time to help with patient flow and quality. Patient flow through the department – from the pre-op area to the operating room to the recovery room – was refined. Sutter Health Black Belts worked with staff to improve the surgical pre-admit process and decrease surgery delays associated with equipment and supplies. Nursing Directors Dave Berry, R.N., and Andrea Hennig, R.N., worked with staff to improve compliance with national Surgical Infection Prevention guidelines. Furthermore, a new Surgical Hospitalist Program helped fill in the gaps in surgery times to improve efficiency.

The results from these efforts are substantial. Since 2008, compliance with SCIP guidelines improved from 77 percent to 92 percent. More importantly, the incidence of surgical site infections dropped a staggering 30 percent.

“This represents progress that we can really be proud of as a medical center,” said Dr. Downs, who was also one of the original surgery task force members.

Operating room efficiencies have also improved. Worked hours per OR minute, a key measure of efficiency and productivity, has improved 20 percent in the past two years, resulting in millions of dollars in savings and much more efficient operations. Room turnover times have decreased along with delays in starting cases.

The work to improve efficiencies in surgical services at SMCS is ongoing. In fact, the department has just launched initiatives to improve room turnover times for orthopedic spine procedures and to further decrease first case delays.

“We always have opportunities to improve, and we owe it to our patients to provide the most efficient service we can,” said Gregory Graves, M.D., medical director of Sutter Cancer Center and another one of the original task force members.
Dr. Hernandez Will Lead Clinical Improvement Initiatives

Cecilia Hernandez, M.D., Vice President of Medical Affairs for Sutter Medical Center, Sacramento, will assume a new role on Sept. 13 as Sutter Health Vice President, Patient Centered Care, with responsibility for leading advances in heart-failure care, palliative care and hospitalist care throughout the health system.

The Sutter Health System Management Team recently endorsed this series of important clinical improvement recommendations which grew out of benchmarking by Sutter’s Blue Ribbon II team of clinical and administrative leaders. These improvements advance and integrate with Sutter Health’s vision of transforming health care and achieving breakthrough advances in quality, access and affordability.

“Dr. Hernandez is a results-oriented physician leader, bringing experience in driving multiple clinical quality and care management process improvement initiatives,” said Gordon Hunt, Sutter Health Senior Vice President, Chief Medical Officer.

Besides being VPMA, Dr. Hernandez was a hospitalist at SMCS and is a graduate of the Sutter Health Leadership Academy.

“I value the relationship she has been able to establish with the Administrative Team and the medical staff in her tenure as VPMA,” said SMCS CEO Tom Gagen, who expects a new VPMA to be named within a month. “She was a strong proponent of the early recognition of sepsis, as well as many other quality initiatives.”

Quick Reference Guide Available for PACS

As detailed in July’s SMCS Physician, Sutter Medical Center, Sacramento has begun upgrades to the picture archiving and communication systems, or PACS, as well as the cardiovascular imaging systems, also known as CVIS, with the goal to enhance and streamline patient care.

The PACS upgrade began this month, and the regional imaging team developed a Quick Reference Guide for clinicians. For a copy of the guide, or for more information on either PACS or CVIS, please contact Linda Womack, regional imaging systems manager, at WomackL@sutterhealth.org or (916) 614-2653.

Jazz Concert to Benefit Nursing Scholarship Fund

Scott Stringer, M.D., a Sutter Medical Center, Sacramento Emergency Department physician and jazz saxophonist, is holding a benefit concert Oct. 1 with his band, Third Floor Jazz Club, with all proceeds going to the Sutter Nursing Scholarship Fund.

The show, at 7 p.m. at Oshima Sushi’s Fugu Lounge in Natomas, has sponsorships available from $100 to $2,500, with individual tickets to the concert costing $25. Food and drinks will be available for purchase. Tickets or sponsorships can be purchased through the Sutter Medical Center Foundation. For more information, call Tracie Ramsey at (916) 733-3863.
SMCS Administration Implements Improvements in Response to Physician Survey

By Cecilia Hernandez, M.D., SMCS Vice President of Medical Affairs

In April, I wrote about the results of last year’s medical staff satisfaction survey and shared what our administration was going to do in response. The following is an update on what our administration has done. The major categories of focus were: responsiveness of hospital administration; confidence in hospital administration; patient care made easier; administration deals with change; and communication with hospital administration.

- A-team members have attended monthly medical staff department meetings to communicate important information to the medical staff and to solicit input.
- Each member of the A-team has met with individual members of the medical staff on a one-to-one basis to solicit improvements with the goal that each member of the A-team will meet with 12 of the most active members of the medical staff over the course of a year.
- The psychiatric response team has been continuously deployed and improved to meet the increased demand on the ED and hospitalist service by underserved psychiatric patients.
- CEO Tom Gagen has kept the medical staff apprised with weekly radiology updates as well as ad-hoc meetings with concerned members of the medical staff to address radiology transition issues.
- Monthly master plan updates have been more widely distributed and posted in the physician lounges.
- A pharmacy-driven medication reconciliation process has been initiated on a limited basis in the ED at SGH in July with plans to expand hours and to expand to SMH over the course of the next year.
- ED/Hospitalist Collaborative meetings were initiated to improve workflow processes between ED and hospitalist physicians. These meetings grew to include intensivists and, with the assistance of outside consultants, we now have an ED Steering Committee to strategically improve patient flow.
- Nursing directors have met with key physicians on their units to facilitate relationships and improvements in patient care.
- Several surgery department improvements have been implemented with the following highlights:
  - Scheduling forms online with capability to fax to Registration, SPA and ACU simultaneously.
  - ACU R.N. assigned to patient identified to facilitate physician knowing whom to go to with questions.
  - Instituted forced-air blanket warmers in ACU to maintain perioperative normothermia and to improve patient satisfaction.
- Semi-annual forums with medical staff office assistants have been held to address workflow issues between physician offices and the hospital.
- The regional patient transfer center/tertiary care committee/MEC interface has been maintained, keeping the medical staff informed about growth efforts and management of tertiary and quaternary service demand.
- SMCS has continued to leverage the T3 Program through The Effort to effectively manage the increased demand on our facility and physicians due to county clinic reductions.
- We have attempted to increase our communication of interventions to medical staff via this newsletter, e-mails and faxes, posting information in the physician lounges, and reporting out at monthly medical staff meetings.
- Administrators have been rounding regularly with physicians in the hospital.
- The electronic signature program was just rolled out to ED physicians, hospitalists and surgeons in July with plans to roll out to the rest of the medical staff by Sept. 1.
- IS piloted a physician orientation, training and support program for all new physicians as a formalized on-boarding process, which is now being implemented regionally.

Have you noticed the difference? Your hospital administration is committed to meeting your needs and making SMCS the best place for you to practice medicine. If there are additional improvements you would like to see, please share your ideas with us. And, remember to fill out your survey, which will be sent in mid-September.

Dr. Hernandez can be reached by e-mail at HernanC@sutterhealth.org.