

**Quality and Productivity Commission
32nd Annual Productivity and Quality Awards Program
"Innovating for Impact"**

2018 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):
NAME OF PROJECT: IMPLEMENTING A PERIOPERATIVE SURGICAL HOME

DATE OF IMPLEMENTATION/ADOPTION: JANUARY 1, 2016
(Must have been fully implemented for a minimum of at least one year - on or before July 1, 2017)

PROJECT STATUS: Ongoing One-time only

HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT? Yes No

EXECUTIVE SUMMARY: Describe the project in 15 lines or less using Arial 12 point font. State clearly and concisely what difference the project has made.


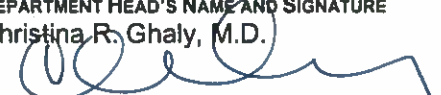
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15

The implementation of a Perioperative Surgical Home (PHS) at Olive View-UCLA Medical Center (Olive View) has improved the quality of care our patients have received, while reducing costs and variability in care. The PSH has resulted in decreased length of stays for various surgery types from 1 to 1.8 days (depending on the type of surgery) compared to baseline. The implementation of a PSH also led to significant reductions in our patients' postoperative pain – decreasing pain by more than 60 percent on postoperative days one through three.

BENEFITS TO THE COUNTY

(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$	\$384,000	\$	\$ 384,000	<input checked="" type="checkbox"/>

ANNUAL = 12 MONTHS ONLY

SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS Department of Anesthesiology - Olive View-UCLA Medical Center 14445 Olive View Dr., Suite 3A108 Sylmar, CA 91304		TELEPHONE NUMBER 747-210-4350
PROGRAM MANAGER'S NAME Sachin Gupta, MD		TELEPHONE NUMBER 747-210-8034 EMAIL Sgupta2@dhs.lacounty.gov
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE (PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER'S NAME) Lisa Finkelstein 		DATE 07/02/2018 TELEPHONE NUMBER (213) 288-8104 EMAIL lfinkelstein@dhs.lacounty.gov
DEPARTMENT HEAD'S NAME AND SIGNATURE Christina R. Ghaly, M.D. 		DATE 7/2/2018 TELEPHONE NUMBER (213) 288-8101

Quality and Productivity Commission
32nd Annual Productivity and Quality Awards Program
"Innovating for Impact"

2018 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: IMPLEMENTING A PERIOPERATIVE SURGICAL HOME

1st FACT SHEET – LIMITED UP TO 3 PAGES ONLY: Describe the **challenge(s), solution(s), and benefit(s)** of the project to the County. What quality and/or productivity-related outcome(s) has the project achieved? Provide measures of success and specify assessment time frame. Use Arial 12 point font.

The Department of Anesthesiology at Olive View is always seeking ways to provide optimal, evidence based, patient centric care to all our patients requiring anesthesia services while optimizing the value added to the DHS healthcare enterprise. As part of this goal, starting in 2016, the department implemented a Perioperative Surgical Home (PSH) to provide for a more rigorously coordinated and integrated management of complex surgical patients to enhance patient satisfaction, improve quality of care and outcomes, all while cutting costs. Too often, perioperative care plans are variable and fragmented, with each service working within their own silo. The decision to pursue a surgical intervention often disconnects patients from their typical medical care. Surgical patients may experience lapses in care, duplication of tests and preventable harm. Costs rise, complications occur, physicians and other healthcare team members are frustrated, and the patient and family endure a lower-quality experience of care. In our PSH, the patient's surgical experience – preoperative, intraoperative and postoperative – is fully coordinated and treated as one continuum of care with a physician anesthesiologist leading the seamless integration from one phase to the next.

Major concepts integrated into the PSH include expectation management, early discharge planning, standardized protocol-driven health and risk assessment, optimization of underlying medical conditions, perioperative standardized anesthetic/nursing/surgical protocols and fluid management strategies. Similarly, multimodal analgesia, postoperative targeted recovery plan, early ambulation, nutrition management, rescue from complications and smooth transition of care to an appropriate discharge setting are all also part of a PSH pathway. Our goal is that each patient will receive the right care, at the right place and the right time.

Conceptually, the PSH model aims to reduce variability in perioperative care, given that variability increases the likelihood for errors and complications. Working with our surgical colleagues, pharmacy, physical therapy, nursing and information technology among many other divisions, a robust protocol using enhanced recovery after surgery (ERAS) principles and tailored to our healthcare institution was developed for patients undergoing Pancreaticoduodenectomies ("Whipples") and radical cystectomies. Using this protocol, data were measured for 1.5 years (Jan 2016-July 2017), we reduced average pain scores by approximately 80%, 75% and 60% on postoperative days 1, 2 and 3 respectively. Inpatient length of stay was reduced by 1.8 days over this time period. Given the impressive results of the initial program,

**Quality and Productivity Commission
32nd Annual Productivity and Quality Awards Program
"Innovating for Impact"**

2018 APPLICATION

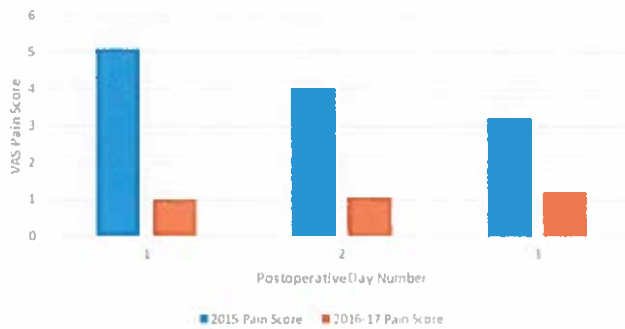
Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: IMPLEMENTING A PERIOPERATIVE SURGICAL HOME

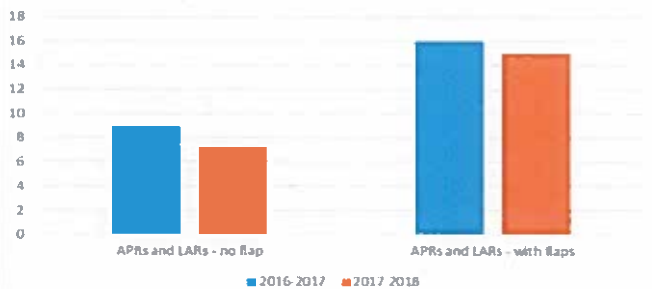
Use Arial 12 point font.

a decision was made to include more complex surgical procedures and medically complex patients. Working with our colorectal surgeons, we developed a protocol for colectomies, and in the year to date (July 2017-current) we have reduced the inpatient length of stay by 1 to 1.4 days for selected major colon resections (APRs and LARs, with and without tissue flaps).

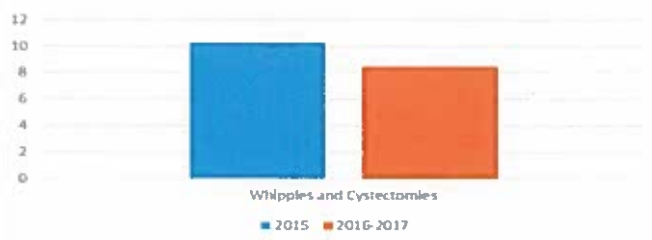
Postoperative Pain Score Before and After the Implementation of a PSH



Length of Stay Before and After the Implementation of a PSH



Length of Stay Before and After the Implementation of a PSH



Quality and Productivity Commission
32nd Annual Productivity and Quality Awards Program
"Innovating for Impact"

2018 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: IMPLEMENTING A PERIOPERATIVE SURGICAL HOME

Linkage to the County Strategic Plan – 1 page only. Which County Strategic Plan goal(s) does this project address? Explain how. Use Arial 12 point font.

*GOAL III. Realize Tomorrow's Government Today
Strategy III.3 - Pursue Operational Effectiveness, Fiscal Responsibility, and Accountability. Continually assess our efficiency and effectiveness, maximize and leverage resources, and hold ourselves accountable*

The aim of the PSH is to improve patient care, while reducing costs. By reducing the length of stay for these complex procedures, we are directly reducing the costs of healthcare delivery for the organization by approximately \$8,000 per patient per day. Our results to date have shown a minimum decrease in length of stay of 1 day across multiple surgeries. With approximately 4 patients enrolled per month, there is an estimated cost savings of \$384,000 per year by reducing length of stay alone.

By reducing variability in care, and following evidence based guidelines, we reduce complications, morbidity and mortality and thus decrease the financial costs associated with perioperative complications.

By improving patient pain, we believe we have also improved patient satisfaction. A satisfied patient is one who will return to the organization for their continuing healthcare needs and recommend the organization to their friends and families, thus ensuring patients continue to seek high quality healthcare at DHS hospitals.

Quality and Productivity Commission
32nd Annual Productivity and Quality Awards Program
"Innovating for Impact"

2018 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: IMPLEMENTING A PERIOPERATIVE SURGICAL HOME

COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFITS TO THE COUNTY): If you are claiming cost benefits, include a calculation on this page. Please indicate whether these benefits apply in total or on a per unit basis, e.g., per capita, per transaction, per case, etc. You must include an explanation of the County cost savings, cost avoidance or new revenue that matches the numbers in the box. Remember to keep your supporting documentation. Use Arial 12 point font

Cost Avoidance: Costs that are eliminated or not incurred as a result of program outcomes. Please indicate whether these are costs to the County or to other entities.

Cost Savings: A reduction or lessening of expenditures as a result of program outcomes. Please indicate whether these were expenditures by the County or by other entities.

Revenue: Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$	\$ 384,000	\$	\$ 384,000	<input checked="" type="checkbox"/>

ANNUAL = 12 MONTHS ONLY

2. Cost Savings –

- Across several surgery types, we have shown a consistent decrease in length of stay from 1 to 1.8 days. On average, a Med/Surg inpatient bed costs approximately \$8,000 per day at Olive View-UCLA Medical Center. So for every patient enrolled in the PSH undergoing a complex surgery, we estimate an average cost savings of \$8,000 per patient.
- Currently 2 to 4 patients a month undergoing complex surgery are enrolled in the PSH, with plans to continue expanding enrollment
- 4 patients per month x \$8,000 per patient x 12 months = \$384,000

Quality and Productivity Commission
32nd Annual Productivity and Quality Awards Program
"Innovating for Impact"

2018 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: IMPLEMENTING A PERIOPERATIVE SURGICAL HOME

FOR COLLABORATING DEPARTMENTS ONLY

(For single department submissions, do not include this page)

DEPARTMENT NO. 2 NAME AND COMPLETE ADDRESS	
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE
EMAIL: _____	EMAIL: _____
DEPARTMENT NO. 3 NAME AND COMPLETE ADDRESS	
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE
EMAIL: _____	EMAIL: _____
DEPARTMENT NO. 4 NAME AND COMPLETE ADDRESS	
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE
EMAIL: _____	EMAIL: _____
DEPARTMENT NO. 5 NAME AND COMPLETE ADDRESS	
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE
EMAIL: _____	EMAIL: _____
DEPARTMENT NO. 6 NAME AND COMPLETE ADDRESS	
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE
EMAIL: _____	EMAIL: _____
DEPARTMENT NO. 7 NAME AND COMPLETE ADDRESS	
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE
EMAIL: _____	EMAIL: _____