

Quality and Productivity Commission
34th Annual Productivity and Quality Awards Program
“Leading with Excellence”

2021 APPLICATION

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

NAME OF PROJECT: INSTITUTIONAL RAPID RECOVERY PROTOCOL OUTCOMES

DATE OF IMPLEMENTATION/ADOPTION: OCTOBER 1, 2019 – PRESENT

(Must have been fully implemented for a minimum of at least one year - on or before July 1, 2020)

CHECK HERE IF THIS PROJECT IS BEING SUBMITTED FOR THE **COVID-19 IMPACT AWARD ONLY**. (Projects must be implemented on or before December 31, 2020. **Note:** Projects implemented less than one year ago will not be eligible for any other PQA awards. In addition, once a project is submitted, you cannot submit the same project for awards consideration in subsequent years).

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 Total knee arthroplasty (TKA) and total hip arthroplasty (THA) are among the most
 2 effective life-improving procedures available to patients. The majority of these patients
 3 reach their long-term goals of pain relief and restoration of function following the
 4 mentioned procedures. The challenge within the organization was operating within the
 5 previous standard of practice wherein general anesthesia, utilization of intraoperative
 6 closed suction drains, insertion of indwelling catheters, and mobilization with physical
 7 therapy postoperative day 1 and inpatient stays >2 midnights was used. This project
 8 demonstrated that implementation of a rapid recovery protocol (RRP) at Rancho Los
 9 Amigos National Rehabilitation Center (RLANRC) 2 North Medical Surgical Department
 10 resulted in exceptional patient outcomes as demonstrated by multiple productivity and
 11 quality measures. This project enabled the surgical team to reduce length of stay, fewer
 12 90-day postoperative complications, decreased readmissions and reoperations, and
 13 ultimately improved patient care outcomes in patients admitted for TKA and THA within
 14 a safety net hospital.
 15

BENEFITS TO THE COUNTY

(1) ACTUAL/ESTIMATED ANNUAL COST	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$ 1,116,000	\$	\$	\$ 1,116,000	<input checked="" type="checkbox"/>

ANNUAL = 12 MONTHS ONLY

SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS Rancho Los Amigos National Rehabilitation Center 2 North 7601 E. Imperial Hwy. Downey, CA 90242		TELEPHONE NUMBER 562.385.6219
PROGRAM MANAGER'S NAME Robert Runner		TELEPHONE NUMBER 562.385.7166 rrunner@dhs.lacounty.gov
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE <small>(PLEASE CALL (213) 893-0322 YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER'S NAME)</small> Bobbi Jean Tanberg-Mitchell (Alternate) signature on file	DATE 05/27/2021	TELEPHONE NUMBER 562.385.6316 EMAIL btanberg@dhs.lacounty.gov
DEPARTMENT HEAD'S NAME AND SIGNATURE Dr, Christina Ghaly signature on file		TELEPHONE NUMBER

****ELECTRONIC, WET, OR SCANNED SIGNATURES ARE ACCEPTABLE****

Quality and Productivity Commission
34th Annual Productivity and Quality Awards Program
“Leading with Excellence”

2021 APPLICATION

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

NAME OF PROJECT: INSTITUTIONAL RAPID RECOVERY PROTOCOL OUTCOMES

Provide measures of success **and specify assessment time frame.** Use Arial 12 point font.

- **Challenge:** The Los Angeles County has identified 200-300 patients awaiting elective procedures related to joint dysfunction and/or pain. On September 1, 2019, RLANRC employed a new arthroplasty surgeon to assist with the growing backlog of patients awaiting joint restoration and pain. Upon joining the team, the surgeon identified that standard recovery protocol (SRP) was still being used at the organization. This SRP consisted of patients receiving general anesthesia, routine use of intraoperative closed suction drains, indwelling catheterization, mobilization with physical therapy starting post-operative day 1 and inpatient stays >2 midnights in the hospital.
- **Solution:** After identification of the above problems, the surgeon and team began coordinating efforts towards a rapid recovery protocol (RRP). RRP differs from SRP such that RRP consists of preoperative patient education, medical optimization, a focus on spinal anesthesia, multimodal pain management techniques with reduced opioid utilization, reduced use of indwelling urinary catheterization and closed suction drainage, and early mobilization with physical therapy postoperative day 0.
- **Benefits:**
 - Productivity and quality patient related outcomes highlighted improvements in multiple aspects of care delivery; reducing length of stay and reducing complications including readmission and emergency visits, promoting interdisciplinary collaboration, encouraging patients' engagement, improving communication, upgrading customer service, and establishing a sustainable, efficient process.
 - Length of stay reduced from 2.97±3.11 to 1.59±0.90 days in the cohort receiving RRP, (N= 279). This translates into a shorter length of stay improvement of ≥ 50% compared to previous practice; expediting recovery by creating a program that efficiently maintains the highest level of patient care.
 - Complications reduced from 21.4% to 11.1% with the implementation of the RRP. Fewer complications included reduction in readmission and emergency room visits.
 - The transition from SRP to RRP of patients receiving TKA and THA through multidisciplinary approach, use of spinal anesthesia, decrease in foley catheter and wound drains, less use of continuous passive motion (CPM) machines, early ambulation with PT and dressing training with OT on postoperative day 0, minimization of narcotics, preop optimization, early detection, and engagement of social support significantly improved the outcomes of the patients resulting in an outpatient rather than inpatient accommodation.

Quality and Productivity Commission
34th Annual Productivity and Quality Awards Program
“Leading with Excellence”

2021 APPLICATION

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

NAME OF PROJECT: INSTITUTIONAL RAPID RECOVERY PROTOCOL OUTCOMES

- The transition of TKA and THA patients to an outpatient procedure freed up beds for patients needing an inpatient medical surgical level of care.
- By transitioning to the RRP, provided in an outpatient setting, the overall cost avoidance to the County of Los Angeles is an average of \$4,000 per patient. Based on the cost range of \$1000-\$8000 per patient per one night hospitalization in a medical surgical bed.

Quality and Productivity Commission
34th Annual Productivity and Quality Awards Program
“Leading with Excellence”

2021 APPLICATION

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

NAME OF PROJECT: INSTITUTIONAL RAPID RECOVERY PROTOCOL OUTCOMES

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

This newly developed Rapid Recovery Protocol for total joint arthroplasty supports the Los Angeles County Strategic Plan initiative 1.1.2. *Deliver comprehensive and seamless services to those seeking assistance from the County.*

The implementation of this innovative protocol created an efficient transition of the total joint procedures from inpatient setting to the outpatient setting. Patient experience a seamless recovery in the outpatient setting and with improved patient outcomes.

Multiple efforts from the interdisciplinary team led to optimized outcomes for patients undergoing procedures by going home on the same day after successful recovery and training. Additionally, the reduced length of stay within the hospital decreased the complications related to the procedures through early mobilization, decrease opioid use, increasing patients’ support, engagement, and promoting collaboration among the team.

