

**Quality and Productivity Commission**  
**30<sup>th</sup> Annual Productivity and Quality Awards Program**  
**“Heritage of Excellence”**

**2016 APPLICATION**

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

**NAME OF PROJECT: REDUCING CATARACT SURGERY PATIENTS VISITS**

**DATE OF IMPLEMENTATION/ADOPTION:** MARCH 2015  
 (Must have been implemented at least one year - on or before July 1, 2015)

**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

LAC+USC Medical Center undertook a Performance Improvement initiative to eliminate routine preoperative testing for patients undergoing cataract surgery. Initial data analysis of patients revealed 90% of these patients received pre-op testing which included pre-op labs, EKG, X-ray and a clinic visit. Our team consisted of Quality Improvement Advisor, Chief Quality Officer, Chief Population Health, Anesthesia and Ophthalmology in collaboration with UCLA Division of Geriatrics. New guidelines were developed and implemented based on the Choosing Wisely Campaign’s recommendations. Initial 3-month chart review demonstrates that approximately 90% of patients had preoperative tests prior to guideline implementation, and only 9% of patients had preoperative tests 3-months post project implementation. Timely delivery of customer-oriented and efficient public service was achieved by reducing time of cataract identification to cataract surgery from 77 days to 22 days.

**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
<b>\$40,000.00</b>	<b>\$753,750.00</b>	<b>\$</b>	<b>\$</b>	<input type="checkbox"/>

**ANNUAL = 12 MONTHS ONLY**

<b>SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS</b> LAC+USC Medical Center Quality Department 2020 Zonal Avenue Los Angeles, 90033	<b>TELEPHONE NUMBER</b> 323-323-226-7819
<b>PROGRAM MANAGER’S NAME</b> Patricia Godoy-Travieso Ph.D (c), MSN,MHA, RN Quality Improvement Advisor	<b>TELEPHONE NUMBER</b> 323-409-8176  <b>EMAIL</b> pgodoy@dhs.lacounty.gov
<b>PRODUCTIVITY MANAGER’S NAME AND SIGNATURE</b> <small>(PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER’S NAME)</small> Gerardo Pinedo  SIGNATURE ON FILE	<b>DATE</b> 7-5-2016  <b>TELEPHONE NUMBER</b> 213-240-8104 <b>EMAIL</b> gpinedo@dhs.lacounty.gov
<b>DEPARTMENT HEAD’S NAME AND SIGNATURE</b> Mitchell H. Katz, M.D.  SIGNATURE ON FILE	<b>DATE</b> 7-5-2016  <b>TELEPHONE NUMBER</b> 213-240-8101

Quality and Productivity Commission  
**30<sup>th</sup> Annual Productivity and Quality Awards Program**  
*“Heritage of Excellence”*

**2016 APPLICATION**

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

**NAME OF PROJECT: REDUCING CATARACT SURGERY PATIENTS VISITS**

**1<sup>st</sup> FACT SHEET – LIMITED TO 3 PAGES ONLY:** Describe the **Challenge, Solution, and Benefits** of the project. State clearly and concisely what difference the project has made. Use Arial 12 point font

An estimated 1.7 million cataract surgeries are performed annually in the Medicare population. Cataract surgeries are mostly performed in older adults with pre-existing conditions. Physicians have routinely ordered pre-operative test despite the fact that cataract surgery possesses a small risk to patients and routine preoperative testing has been shown not improve a patient’s health or clinic outcome.

In 2014, LAC+DHS performed 2,450 cataract surgeries with 90% of patients receiving unnecessary pre-operative tests (clinical labs, EKGs and chest x-rays) and clinic visits. LAC+USC Medical Center collaborated with Ophthalmology & Anesthesia Departments to eliminate routine pre-operative testing and pre-operative clinic visits for patients undergoing cataract surgery as an initiative on Ophthalmology Department’s balance score card. The initiative was to reduce pre-operative testing and clinic visits for patients undergoing cataract surgery. The performance improvement team consisted of a Quality Improvement Advisor, Chief Quality Officer, Chief Population Health, Anesthesia, and Ophthalmology in collaboration with UCLA Division of Geriatrics.

The intervention was as follows: chart reviews were conducted along with staff and patient interviews to understand the cataract surgery patient flow. Leadership buy-in was obtained by sharing baseline data and cataract surgery patient flow. Choosing Wisely recommendations for reduction of unnecessary pre-operative testing for patients undergoing cataract surgery along with guidelines from The American Academy of Ophthalmology and The American Board of Internal Medicine Foundation were shared with senior leadership. New guidelines for cataract surgery patients were developed and implemented at LAC+USC Medical Center Department of Ophthalmology. Resident champion drafted, drove, and implement new guidelines. The new guidelines for preoperative testing were e-mailed to all ophthalmology and anesthesia physicians by the resident physician and department champion.

Initial 3-month chart review demonstrates that approximately 90% of patients had preoperative tests prior to guideline implementation, and only 9% of patients had preoperative tests 3-months post project implementation. Given the “no-net-benefit” of preoperative testing for older adults undergoing cataract surgery, preoperative tests and visits were reduced, lengthy clinic visits were eliminated, and a full time employee was freed. Timely delivery of customer-oriented and efficient public service was achieved by reducing time of cataract identification to cataract surgery from 77 days to 22 days. An interdisciplinary quality improvement initiative can lead to the dramatic reduction in unnecessary preoperative testing and clinic visits.

Quality and Productivity Commission  
30<sup>th</sup> Annual Productivity and Quality Awards Program  
*"Heritage of Excellence"*

2016 APPLICATION

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

**NAME OF PROJECT: REDUCING CATARACT SURGERY PATIENTS VISITS**

Use Arial 12 point font

Quality and Productivity Commission  
**30<sup>th</sup> Annual Productivity and Quality Awards Program**  
*“Heritage of Excellence”*

**2016 APPLICATION**

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

**NAME OF PROJECT: REDUCING CATARACT SURGERY PATIENTS VISITS**

**LINKAGE TO THE COUNTY STRATEGIC PLAN (DETAIL IS REQUIRED FOR COUNTY DEPARTMENTS):** Use Arial 12 point font

This project is linked to the county strategic plan goal 1: Operational effectiveness/fiscal sustainability. The aim in this strategic goal is to maximize the effectiveness of processes, structure, operations, and strong fiscal management to support timely delivery of customer-oriented and efficient public services. Through reduction of pre-operative testing and clinic visits for cataract surgery patients, no-net benefit pre-operative testing and clinic visits were reduced from 90% to 9% in a 3 month period. In addition a full time employee position was freed in the ophthalmology department. Timely delivery of customer-oriented and efficient public service was achieved by reducing time of cataract identification to cataract surgery from 77 days to 22 days.

The cost avoidance is based on full time salary of an LVN that was freed up from doing pre-op screening visits in the ophthalmology clinic. The cost savings is based on 603 cataract surgery patients that did not have pre-operative testing. Each pre-operative testing which includes a chest x-ray, EKG, lab work (CBC,MP, PTT, PT, and UA) cost \$1250 per patient and producing a savings of \$753,750.

**Quality and Productivity Commission**  
**30<sup>th</sup> Annual Productivity and Quality Awards Program**  
*“Heritage of Excellence”*

**2016 APPLICATION**

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

**NAME OF PROJECT: REDUCING CATARACT SURGERY PATIENTS VISITS**

**COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFITS TO THE COUNTY):** If you are claiming cost benefits, include a calculation on this page. 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.

**Cost Savings:** A reduction or lessening of expenditures as a result of program outcomes.

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

(1) ACTUAL/ESTIMATED <b>ANNUAL COST</b> AVOIDANCE	(2) ACTUAL/ESTIMATED <b>ANNUAL COST</b> SAVINGS	(3) ACTUAL/ESTIMATED <b>ANNUAL REVENUE</b>	(1) + (2) + (3) <b>TOTAL ANNUAL</b> ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
<b>\$40,000.00</b>	\$753,750.00	\$	\$	<input type="checkbox"/>

**ANNUAL= 12 MONTHS ONLY**