

### THE ORGANIZATION

**Bed Size:** 421 beds in eight locations

**Number of Sites/Locations:** Integrated health care system with more than 80 locations

**Academic or Community:** Community

### THE TEAM

**Description:** Akron Children's Hospital GOJO Outpatient Surgery Center (OSC) and Pre-surgical Preparation Center (PSP)

**Multidisciplinary:** Yes

**Established:** 2012

**Care Setting:** Outpatient surgery

**Patients:** Healthy ASA (American Society of Anesthesiologists) level one and two pediatric patients

### TEAM STRUCTURE

**Location:** Team members work in two connected buildings and communicate by phone, email, and/or a secured text messaging system to relay important patient information that may impact the day of surgery outcomes.

**Outcomes Access:** A dashboard containing clinical outcomes, patient experience measures, and financial data is updated monthly and is posted on the team's GOJO OSC Huddle Board.

**Shared Goals:** Zero serious safety events, patient experience scores at or above mean, 100% hand hygiene compliance, zero specimen errors, >80% first-case on-time starts, zero admissions to a patient care unit, and <3% cancellation rate.

**Team Incentives:** Verbal recognition during huddles, personal e-mails, receipt of Extra Mile Cards, lunch celebrations supplied by the anesthesiologists and surgeons, and posting of positive survey comments.

**Team Building Example(s):** Educational sessions, teamwork opportunities, cross-training, morning huddles, and monitoring key behavioral indicators (e.g., positively acknowledging team members, giving/accepting constructive feedback).

### TEAM PERFORMANCE

#### Team Contributions to Improving Value and Enhancing Care

- Home-going dental instructions with consistent directions that support quality of care at home.
- Day-before-surgery call script with clear instructions for eating and drinking prior to surgery.
- New trucks to transport patients within the preoperative unit and at discharge.
- Chart rack to help anesthesia providers determine the order in which to see patients in the preoperative unit.
- "Cheat sheet" to provide direction for drawing up medications and important interventions to take in crisis situations.
- Spacious reception area with children's toys, vending options, television, and the ability to easily use cell phones.
- Recovery room with adjoining bay so families with two children in surgery can be present at the bedside.
- Efficiency improvements in Total Perioperative Time allow patients to spend more time recovering in the comfort of home.
- Home-going medications delivered to the patient's bedside in the recovery room.

#### Team Impact on Delivering Care that Reduces Patient Suffering

- To facilitate timely responses to patients' needs, all staff members respond to patient call lights.
- Recovery Room is designed so that all patient rooms are easily visible from the work station.
- Improvement ideas that impact patient care are openly shared during morning huddles.
- Questioning current processes is encouraged, regardless of position or rank.
- It is the responsibility of all OSC team members to provide good customer service.
- Waiting room staff makes certain that the surgery tracker board is current.
- Real-time scheduling increases efficiency and decreases non-value added time for both staff and families.
- Use of preoperative area induction allows parents to be with their child until just prior to being taken into OR.

## Outcome Highlights

### PATIENT EXPERIENCE

#### Overall Patient Experience

- Team goal to treat every child as if he or she were their own is visible during daily operations and supported by feedback received from families during leadership rounds, in writing, and through Press Ganey patient experience measures.

#### Patient Evaluation of Teamwork

- Teamwork scores are above the Press Ganey pediatric peer mean for both quarters of 2016 (i.e., 99.2 for Q1, 97.7 for Q2).
- During purposeful leadership rounding, families concur that staff displayed positive teamwork as they cared for their child.
- Staff and providers are often recognized by name, and the team frequently hears, "Everyone has been great!"

### SAFETY, CLINICAL, OPERATIONAL, COST

#### Safety

- Specimen Errors: 0.1% (one error in 1272 specimens)
- OR Time-Out Completion: Intermittent audits showed a completion rate of 100%

#### Clinical Process

- The Operating Room and Sterile Processing Department improved accuracy of pulling equipment and supplies for OR cases
  - Accuracy rate improved to 98.9% from 78% within four months
- Cycle times
  - Registration time steady, averaging 15.5 minutes
  - Preoperative times decreased from 68 to 60 minutes during first 15 months of operation
  - Total perioperative time decreased from 206 to 186 minutes

#### Clinical Outcomes

- Returns to Operating Room: 0.2% (7 of 3368 cases)
- Codes: Zero codes in 2016

#### Operational

- Productivity: Average 124.5% for the first sixteen pay periods of 2016
- Overtime Hours: 62.25 hours across five cost centers and 44 employees

### ENGAGEMENT

#### Overall Team Member Engagement

- Team members are actively engaged in providing high-quality care.
- Team members suggest ideas for improvement without hesitation and think outside the box for ways to make processes more efficient for patients and families.
- Team members are empowered to immediately implement process changes suggested during the morning huddle (key phrase, let's "just do it").
- Team members support the key behavioral indicators and often verbalize what a pleasure it is to work in the positive environment of the OSC.

#### Team Perception of Teamwork

- Team's 2016 engagement survey results for the item, "My work unit works well together," exceed both the overall results and the national children's healthcare averages.
- 2015 NDNQI scores were above average in all areas. A score of 100% was achieved for the question "Percent Planning to Remain in Direct Patient Care on Same Unit."
- Seventeen team members participate in Nursing Shared Governance councils and Clinical Process councils that meet monthly. Ideas and topics are presented at the department unit-based council meetings for staff discussions.