

THE ORGANIZATION

Bed Size: 233

Number of Sites/Locations: One

Academic or Community: Academic

THE TEAM

Description: Orthopedic Episodic Management Team

Multidisciplinary: Yes

Established: 2015

Care Setting: Crossing the entire continuum from preoperatively as the patient is preparing for surgery, to short stay, to the operating room, to PACU, to inpatient while they are in the hospital, and postoperatively

Patients: Orthopedic (i.e., total hip/knee replacement, hip/long bone fracture repair, ligament/meniscus repairs, foot/ankle replacement/repair, hand/wrist procedures, shoulder replacement/repair, care of spine/neck disorders)

TEAM STRUCTURE

Location: Team members work in various settings and locations throughout the hospital depending on their area of expertise.

Outcomes Access: Monthly team meeting dashboard includes length of stay, infection rates, readmissions, volume, postoperative mobility, VTE compliance, preoperative joint replacement class participation, blood transfusion, HCAHPS.

Shared Goals: VTE compliance >90%, Preoperative Joint Replacement Class >85%, sit on edge of bed on surgery day >90%, patients utilize gym >90%, HCAHPS (pain, overall, nurse, discharge, physician) >90% top box, length of stay <3.5 for hips and knees, SSIs 0, PE and DVT 0, complications <3.5, blood transfusion <10%, readmissions <3.7.

Team Incentives: Awards presented to patient care areas with highest HCAHPS performance, and highest or most improved quality metrics (e.g., CAUTI, CLABSI, falls, medication events).

Team Building Example(s): Monthly orthopedic team meetings, daily multidisciplinary rounds, and team-led preoperative joint replacement class for patients and families prior to having hip or knee surgery.

TEAM PERFORMANCE

Team Contributions to Improving Value and Enhancing Care

- Team has shown positive outcomes for elective hip and knee replacement patients by reducing length of stay by over a day, reducing surgical site infections, and decreasing the blood transfusions by almost 50%.
- Volume of patients seeking to have their hip or knee surgery performed at Wellington has grown from 413 patients in 2014 to 454 patients in 2015. 600 patients are targeted for 2016.
- A multi-modal pain management program has decreased pain for patients after surgery and reduced the amount of opioid medications required, thereby reducing complications associated with taking these types of medications.
- When a patient does not flow through the program as designed, members of the team get together right away to figure out what could have been done to improve the outcome for that patient.
- For a patient who comes to the preoperative class with chronic pain and is worried about their pain after surgery, the pharmacy, nursing, and physician team discusses and organizes a plan to prepare for this patient before their surgery day.

Team Impact on Delivering Care that Reduces Patient Suffering

- Team worked to develop a preoperative patient education class to better prepare patients for their upcoming hip or knee surgery so they knew what to expect in relation to pain management, mobility, and discharge planning. In July 2016, 89% of patients having a hip or knee replacement surgery went to the class. Feedback has been overwhelmingly positive.
- Team has also implemented daily multidisciplinary rounding, standardized order sets that include three phases with a multi-modal approach to pain management, standardization of VTE prophylaxis among all physicians, and a MRSA/MSSA screening process preoperatively.

Outcome Highlights

PATIENT EXPERIENCE

Overall Patient Experience

- HCAHPS (target ≥ 90)
 - HCAHPS Discharge (Help when you left) YTD 97%
 - HCAHPS Discharge (Info symptoms) YTD 99%

Patient Evaluation of Teamwork

- Results from Press Ganey patient experience surveys are used after discharge to evaluate how well the team is doing related to communication, responsiveness, etc. Anecdotal feedback about team performance is gathered during daily leadership rounds, as well as during “connect calls” that are made to patients post-discharge.

SAFETY, CLINICAL, OPERATIONAL, COST

Safety

- Falls: Number of falls that occur in hip and knee patients each month are evaluated and presented at weekly HAC meeting and monthly orthopedic meeting.

Clinical Process

- VTE prevention: Monthly audits performed to evaluate the number of patients that have foot pumps or SCDs on and if the machine is working properly.
- Participation in the Preoperative Joint Replacement Class: This measure is reported monthly.
- Mobility: The percentage of patients who utilize the gym for therapy during the hospital stay is measured, as well as the percentage of time the patients dangle or sit at the edge of bed on surgery day. Measure reported monthly to team.

Clinical Outcomes

- Length of stay: The goal for the length of stay is <3.5 . The team has successfully reduced length of stay from just over 4 days to 2.89 days in July 2016 for both hips and knees.
- Readmission rates: Team monitors readmission rates for all hip and knee patients that are readmitted within 30 days as well as hip and knee bundle patients for 90 days. Measure is reported monthly.
- Surgical Site Infections: This team monitors surgical site infection rates and reports on this measure monthly.
- Complication rates: Team monitors complication rates for all hip and knee patients and performs a deep dive on the reasons for the complications. Measure reviewed monthly.

ENGAGEMENT

Overall Team Member Engagement

- Team measures overall engagement of the team by participation in the monthly meetings, by being available to support changes, and by having an open line of communication when questions arise or an immediate change to a process or order set is needed.

Team Perception of Teamwork

- The hospital has a “Life Wings” initiative that promotes a culture of safety and the expectation that all members of the team speak up if there is a question or concern.
- All members of the team are responsive and make themselves available via text, cell phone, or email for impromptu meetings when there are questions or concerns that arise regarding an orthopedic topic.
- Every member of the team is positive and professional in their interactions. The team has grown very close as a result of the monthly meetings and implementation of process changes.