

Ontario surgical network enters mature phase

The maturity of the Ontario Surgical Quality Improvement Network (ONSQIN) and the progress achieved by hospitals involved was on full display at the third annual meeting of the network held recently in Toronto.

The meeting was at once a celebration of achievements to date, a look forward to future initiatives, and a workshop on practical steps to improve patient safety when conducting surgery, with representation from institutions throughout the province.

“Too rarely in the process of change do we pause and celebrate success,” said Health Quality Ontario President and CEO Dr. Joshua Tepper in his opening remarks to the conference with more than 300 registered attendees – some of whom were thwarted in plans to attend by the first arrival of winter weather.

Thirty-one Ontario hospitals currently participate in the ONSQIN program which allows them to benchmark their surgical outcomes against close to 700 hospitals around the world a variety of risk-adjusted outcomes. Hospitals in the Ontario network account for about half of adult surgeries in the province and are present in the 12 of the 14 Local Health Integrated Networks.

With the support of Health Quality Ontario, hospitals in the Ontario network work to develop surgical quality improvement plans, implement best practices and contribute to a community of practice for sharing ideas to support improvement.

One of the biggest achievements noted by Tepper was the recognition by the American College of Surgeons (who founded the program) of six Ontario hospitals with exceptionally low surgical complication rates this year: Brampton Civic, Etobicoke General, Health Sciences North, Peterborough Regional Health, St. Michael's and Sunnybrook.

Other examples of tangible progress made by the Ontario network in its three years of existence as well as future plans were detailed by Dr. Tim Jackson, surgical lead at Health Quality Ontario and a general surgeon at the University Health Network in Toronto. In addition to significant reductions in surgical site infections (SSIs) and urinary tract infections (UTIs) by those hospitals in the network who addressed these issues, Dr. Jackson also discussed plans for a campaign to reduce surgical infections to be launched next year.

Jackson also noted that 29 Surgical Quality Improvement Plans were submitted this year to transform the data found through this program into opportunities for improvement. Work is currently underway to better integrate these plans with Quality Improvement Plans that the province's hospitals are mandated to produce yearly.

One of the highlights of the day for many was a plenary presentation by Dr. E. Patchen Dellinger, professor of surgery at the University of Washington Medical Center, Seattle who presented a comprehensive overview of evidence supporting various measures to reduce surgical infection rates.

As Dr Jean-Frédéric Levesque, chief executive of the Agency for Clinical Evaluation, New South Wales, Australia noted in a tweet summarizing Dr. Dellinger's presentation “prophylaxis, temperature, oxygen,

glucose – prevention of SSIs goes beyond technical proficiency and requires managing patient’s parameters peri-operatively.”

Dr. Dellinger also presented research showing improving teamwork and communications in the operating room and instituting checklists can have as big an impact on reducing surgical infections as other more technical or clinical changes.

Another highlight of the conference was a panel on leadership featuring two hospital CEOs and two surgical program directors providing their insights on how to better integrate patient safety into the work done at their centres. An Alberta study showing that every dollar in quality improvement in surgical care yields \$4 in savings was referenced more than once at the meeting.

Dr. LaFlamme, a Sunnybrook anesthesiologist and patient safety advocate, talked about the importance of partnering with patients in developing and implementing patient safety programs.

“There’s only one member on the team that is there 24/7 and that’s your patient,” he said. Patient reported outcomes in surgery and capturing the patient experience was one of the afternoon breakout sessions held at the meeting featuring two patient presenters.

For the first time at this meeting a series of eight awards were presented to recognize outstanding work to improve in surgical care. Examples of the categories recognized and winners were:

- Greatest Improvement in Post-Surgical Outcomes – Sunnybrook Health Sciences Centre
- Innovation Award - McMaster Children’s Hospital, Quality Improvement Dashboard
- Excellence in Quality Improvement – North Bay Regional Health Centre

In her closing remarks, Lee Fairclough, VP of quality improvement at Health Quality Ontario said there was an ongoing commitment to ONSQIN and a desire to expand the program.

Overall, the sentiments expressed at the meeting were perhaps best summarized by Dr. Andy Smith, president and CEO of Sunnybrook who noted “there’s absolutely no reason that surgical quality in Ontario can’t aspire to be the best in the world.”