

Ontario Surgical Quality Improvement Network

ISSUE 19
Winter 2021

46

Number of hospital sites in NSQIP-ON

27

Number of hospital sites that created a 2020/21 SQIP

22

Number of hospital sites collecting *Enhancing Surgical Recovery* variables

195

Number of ON-SQIN team members on Quorum

18

Average number of participants in Surgical Clinical Reviewer calls

23

Average number of participants in Surgeon Champion calls

NSQIP-ON: National Surgical Quality Improvement Program - Ontario

SQIP: Surgical Quality Improvement Plan

ON-SQIN: Ontario Surgical Quality Improvement Network

NSQIP: National Surgical Quality Improvement Program

Highlights



Surgical Quality Improvement Team from Niagara Health—St. Catharines site (left to right): Patty Welychka, Dr. Ian Brown, Dr. Christopher Blewett, Cristina Huffman, Ted Nangle, Steve Walker, and Dr. Lucas Ciprietti

Committed to Better: Enhancing Surgical Recovery

As we pass the 1-year milestone of the COVID-19 pandemic, the ON-SQIN program delivery team would like to thank all of our network members for their continued dedication to surgical quality improvement. We hope that efforts will soon shift toward post-pandemic recovery, along with the opportunity to focus on the upcoming *Committed to Better: Enhancing Surgical Recovery* provincial campaign. This topic emphasizes improving outcomes for surgical patients, including an ongoing focus on reducing infections and improving pain management after surgery, and reducing length of stay after surgery. Special thanks to our surgical clinical reviewers and surgeon champions who have assisted with campaign planning.

The new collaborative campaign gets underway April 1, 2021. Teams from across Ontario will target a province-wide goal of 20% reduction in at least one outcome measure (e.g., surgical site infection, urinary tract infection, pneumonia, venous thromboembolism, and pulmonary embolism) and will monitor for improvement in patient length of stay through the implementation of the *Enhancing Surgical Recovery* pathways (in one or more surgical specialties: colorectal, gynecological, orthopedic, and emergency general surgery).

—Dr. Tim Jackson, ON-SQIN Provincial Surgeon Lead

Coming Up

- *Committed to Better: Enhancing Surgical Recovery* Campaign Kick-off and SQIP Navigator Training: March 8, 2021 at 12–1 p.m.
- Upcoming Surgical Clinical Reviewer meeting: May 10, 2021 at 9 a.m.
- Upcoming Surgeon Champion meeting: March 23 at 7 a.m.
- Please email us at ONSQIN@ontariohealth.ca to share your hospital's work in the next update

To learn more about ON-SQIN and how you can get involved, please [visit our website](#) or contact ONSQIN@ontariohealth.ca. Past issues of these updates can be found [here](#).

What's Happening



Some of the General Surgeon Team from Grand River Hospital (left to right): Dr. Bogdan Paun, Dr. Monica Torres, Dr. Michael Saunders, Dr. Mohamed Husien, Dr. Adnan Qureshi, Dr. Matthew Kilmurry, and Dr. Daniel Charleton

Building Surgical Efficiency

In the fall of 2020, the Ministry of Health initiated a multi-pronged plan to support hospitals and address the surgical backlog created by the pandemic. One aspect of this plan involved improving surgical efficiency through a request for proposals to fund efficiency projects (Phase 1) and a surgical smoothing pilot (Phase 2). The immediate objective of this work is to alleviate pandemic-related backlog in surgical and procedural care, with a longer-term objective of managing surgical resources more efficiently. In Phase 1, 25 projects were approved across all five regions. Project themes included: surgical smoothing, operating room workflow systems, physical patient flow, equipment to augment capacity, and improvement evaluations. We look forward to sharing the lessons learned from this work with members of the surgical network.

Niagara Health Featured in SCR Meeting

Keeping the members of a surgical quality improvement team connected and informed can be challenging—and all the more so during a pandemic. At the January Surgical Clinical Reviewer virtual meeting, Cristina Huffman, Niagara Health System—St. Catharines, shared some of the strategies that her team uses to keep everyone up-to-date with the latest quality improvement initiatives. Cristina shared photos of both their physical dashboard in the peri-operative area (below) and their online dashboard. These dashboards include updates on the results of their latest quality improvement initiatives to help celebrate successes.

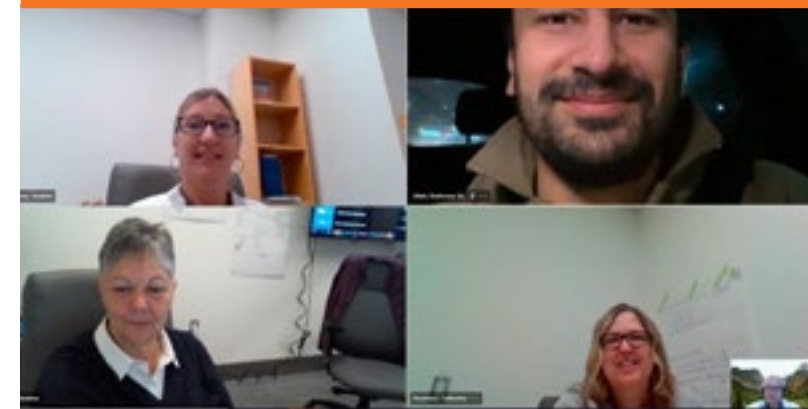


Niagara Health—St. Catharines NSQIP Communications Board

Cut the Count Campaign: Year 2

A total of 27 teams are working to reduce opioid prescribing by participating in year 2 of *Cut the Count*, a provincial campaign focused on pain management after surgery. By April 1, 2021, these teams are targeting a 25% reduction in the number of opioid pills per prescription at surgical discharge.

Featured Initiatives



Surgical Quality Improvement Team from Mackenzie Health (left to right): Heather Whittemore, Dr. Shanoor Ullah, Heather Riddell, and Catherine Arseneau

Learning From the Michigan OPEN

Michigan Opioid Prescribing Engagement Network (OPEN) was founded in an effort to develop a preventive approach to the opioid epidemic in the state of Michigan by tailoring postoperative and acute care opioid prescribing and pain management supports. See how some hospitals have adopted this approach to opioid prescribing below.

Mackenzie Health—After months of hard work and interdisciplinary collaboration, the surgical quality improvement group at Mackenzie Health are beginning to see real change. The team embarked on a multi-tiered education program targeting surgeons, nurses, and patients. Surgeons were educated on the *Michigan OPEN* opioid prescribing recommendations and underwent an audit to discover opportunities for improvement. Nurses learned to inform patients about pain management, including an "After Visit Summary," which is automatically printed and given to the patient at discharge. The hospital electronic medical record system (EPIC) has been programmed with a post-operative pain order set that allows surgeons to choose a new reduced opioids prescription at discharge. These change ideas have resulted in a significant reduction of opioid prescriptions. Their next goal is to expand their opioid reduction campaign to the entire department.

Grand River Hospital—The team at Grand River Hospital also drew from the Michigan OPEN prescribing recommendations when developing their opioid reduction strategies. In addition to providing education to patients about multimodal non-opioid therapies and providing procedure-specific opioid recommendations to their surgeons, the team also implemented interval prescribing with expiry dates, patient and staff education on opioid dependence, symptoms of withdrawal, tapering/discontinuing, and safe disposal. One of the key elements of this quality improvement project was the post-surgery follow-up calls to patients to monitor pain management. The project encouraged them to use over-the-counter non-opioid pain relievers instead of opioids and non-pharmaceutical techniques such as relaxation and yoga before resorting to opioids. These efforts have resulted in fewer opioid pills used per prescription (on average).

"Initially, I think many of the surgeons didn't know that many of the pills they were prescribing were not being taken. Once we had that evidence, we immediately involved the surgeons. It just gives patients a little more control and knowledge on how they can manage their pain with many methods, not just taking their opioids."

—Dr. Monica Torres, Surgeon Champion, Grand River Hospital