Ontario Surgical Quality Improvement Network



Number of Number of hospital hospital sites sites in NSQIP-ON that created a 2017/18 SQIP

Number of teams Number of teams working on SSI working on UTI prevention

Number of teams working on pneumonia prevention

283

Total number of **ON-SQIN** members

Number of mentoring relationships that have been formed through **ON-SQIN**

NSQIP-ON: National Surgical Quality Improvement Program - Ontario

SQIP: Surgical Quality Improvement Plan

26

prevention

ON-SQIN: Ontario Surgical Quality Improvement Network

NSQIP: National Surgical Quality Improvement Program

Highlights



ON-SQIN Program Delivery Team members Nancy (left), Tim, and Pierrette visit Toronto Western Hospital to learn what surgical quality improvement looks like on the ground.

Six months into the collaborative campaign Committed to Better: Reducing Infections After Surgery, preliminary reports indicate a 20% reduction overall in rates of SSI, UTI, and pneumonia (12%, 73%, and 14%, respectively). Next year's campaign focus is expected to be opioids and pain management; further details will be fleshed out in the coming months.

Using the new SQIP Navigator tool, Surgical Network teams have submitted their SQIP 6-month progress reports. Use the tool to compare your hospital's change ideas and outcomes with those of your peers. A mid-year update will be sent to all ON-SQIN members at the end of the month.

Best Practice in Surgery (BPS) has a new surgical site infection prevention guideline and implementation tool. Thanks to Dr. Robin McLeod and Emily Pearsall from the BPS program for sharing this resource with the NSQIP-Ontario Surgeon Champions.

Orthopaedic surgeons who perform hip and knee replacements can now sign up to receive a new, confidential, and personalized report about their postoperative opioid prescribing patterns. In addition to comparative data, the report will offer suggestions and tools - including advice about appropriate opioid prescribing - to help improve patient care. More information is available *here*.

Congratulations to Halton Healthcare - Grand River Hospital, Oakville Trafalgar Memorial Hospital, Sunnybrook Health Sciences Centre, and Thunder Bay Regional Health Sciences Centre for achieving the ACS NSQIP Recognition for Meritorious Outcomes for Surgical Patient Care. These teams are in the top 15% of more than 583 eligible participating hospitals, and four of 83 hospitals recognized internationally.

Coming Up

Upcoming Surgical Clinical Reviewer calls: December 10, 2018, and January 15, 2019, at 9 a.m.

Upcoming Surgeon Champion calls: November 27, 2018, and January 14, 2019, at 7 a.m.

ON-SQIN Newsletter: Winter 2019

The winter edition of the ON-SQIN Newsletter will be released in the next quarter. Please email us at NSQIP@hqontario.ca to share your hospital's work in this newsletter.

What's Happening in the Surgical QI Community?



Tim Jackson, Provincial Surgical Lead, opens the Ontario Surgical Quality Conference and

The 4th annual Ontario Surgical Quality Conference took place on November 2, with 283 delegates representing 57 Ontario hospitals from across the province in attendance. This year's conference was a true call to action, with a notable shift in focus from planning to execution:

- Keynote speaker Dr. Matt Hutter, a general and gastrointestinal surgeon at Massachusetts General Hospital, delivered two powerful presentations. His keynote address on leading quality offered an overview of his hospital's efforts to best relay NSQIP data into actionable change. Emphasizing the value in keeping things simple and "avoiding the data burden," he suggested that smaller scale local data can often be the most useful because it helps surgical team members understand how they might be complicit in suboptimal patient outcomes.
- His second address called on all clinicians to consider how and when opioids are being prescribed and how well they are educating patients on risks. "Local data is great data. It shows me that I am part of the problem," he said, referencing his use of audit data to understand his own prescribing practices. He also spoke to the value of understanding your practice environment to contextualize data and spur action.
- Dr. Sheldon Fine gave a powerful talk on his experiences as a surgical patient who was prescribed opioids, capturing attention by focusing on the medical facts of his case before diving into the holistic dimensions of pain management.
- An opioid prescribing and pain management panel pointed to a new focus on implementation and results. North York General Hospital has experienced great success reducing opioid prescriptions after appendectomy and cholecystectomy. The STOP Narcotics Program at London Health Sciences Centre shared their work to provide excellent postoperative pain control and reduce the amount of narcotics prescribed for all outpatient general surgery procedures using a new standardized pain care bundle. The Transitional Pain Service at the University Health Network highlighted care for patients who are at risk for persistent pain and long term opioid use through the creation of multidisciplinary programs
- For a recap of the day, including reflections from the Vice-President of Quality Improvement at Health Quality Ontario, uploaded slide decks, and a list of the "SQIPPIE" award winners, visit the ON-SQIN Community of Practice page on Quorum.

Featured QI Initiatives



rook Hospital, and Dr. Patrick Whelan, Surgeon Cham Hospital exchange ideas during a networking break at the Ontario Surgical Quality Conference.

Success Stories from the Ontario Surgical Quality Conference

During the morning plenary session three network teams shared their success in reducing infection as part of the Committed to Better: Reducing Infection After Surgery campaign:

- Jennifer Phillipchuk, Patient Safety Specialist at Hamilton Health Sciences - Juravinski Hospital, shared her surgical team's story on reducing incidence of UTI. By conducting a current state and gap analysis, then developing a project charter and work plan, they were able to brainstorm and implement best practice change ideas that had an immediate impact: updated and standardized education for surgical residents; discussions about catheter use at safety huddles; and updated order sets. As a result, the team has been able to achieve a steadily decreasing rate of UTI over the past 3 years.
- Alice Silva, Infection Control Practitioner at Toronto General Hospital, described in detail how this University Health Network team successfully reduced incidents of postoperative pneumonia by implementing the ICOUGH* bundle. Her team achieved an overall 47.7% reduction in combined hepato-pancreato-biliary surgeries.
- David Szalay, Surgeon Champion, Hamilton General Hospital, said their Surgical Quality Improvement Plan Working Group made inroads into SSI reduction by maintaining a guiding principle of having a collaborative, open process and considering all contributing factors to SSIs, "identifying those where we can make early and significant impact." By implementing their perioperative bundle and tracking compliance, the team was able to substantially improve incidence of post-operative vascular SSI.

*Boston University School of Medicine and Surgery [Internet]. ICOUGH. Boston: Boston Medical Center; [cited 2018 Jan 8]. Available from: https://www.bumc.bu.edu/surgery/quality-safety/i-cough.

Surgical Network in the CMAJ

The Surgical Network has published its first article in CMAJ Open: "Accelerating surgical quality improvement in Ontario through a regional collaborative: a quality-improvement study." This article describes the positive impact of ON-SQIN's Community of Practice on quality improvement in surgery in Ontario. Congratulations to the publication's authors and to all Surgical Network members!

To learn more about ON-SQIN and how you can get involved, please visit our website or contact NSQIP@hgontario.ca.





Let's make our health system healthier