Ontario Surgical Quality Improvement Network



330

Total number of

ON-SQIN

members



Number of hospital sites in **NSQIP-ON** 1 7 5

Number of surgical group members on Quorum



Number of sites that submitted a 2019/20 SQIP mid-year report

SQIP: Surgical Quality Improvement Plan

09

Average number of opioid pills reduced per prescription since April 1

ON-SQIN: Ontario Surgical Quality Improvement Network

Shall

NSQIP: National Surgical Quality Improvement Program

Highlights

NSQIP-ON: National Surgical Quality Improvement Program - Ontario



Quinte Health Care's surgical quality improvement team has standardized opioid prescriptions across a range of surgeries. Quinte Health Care (Trenton location surgical team, from left: Angela Turiff (PACU RN), Barb Gordon, (PACU RN), Dr. Guan (Surgeon Champion), Dr. Braig, (Surgical Medical Director), Tricia Postma (SDS RPN).

• Orthopedic surgeons who received their first MyPractice: Orthopaedic Surgery report were surveyed. Of those who responded, 85% of would recommend the report to their peers and 91% plan to implement at least one change idea or concept from the report into their practice. If you are interested in receiving your confidential report, sign up here-this is a great resource to support your hospital's participation in the Cut the Count campaign.

• Coming spring/summer 2020: MyPractice: General Surgery, a confidential, voluntary report that includes personalized data on postoperative opioid prescribing for select procedures in general surgery.

• Dr. Duncan Rozario, Surgeon Champion at Oakville Trafalgar Hospital, published a forward-thinking article on the Canadian Healthcare Network website (gated) entitled: "Infinite games: A vision based on virtue for healthcare." The article describes health care as a never-ending game: players need to make an "existential pivot" from a deficit approach-what is the problem (disease) and how do I resolve it?-to an appreciative approachwhat great work are we doing here, and how do we do more of that?





Quinte Health Care's (Belleville location) surgical team, from left: Caitlin Gagnon, Kristina Cruess (Surgical Program Director), Dr. Rizvi (General Surgeon), Dr. Chanda (Medical Director for Maternal Child), Carey Johnston (Perioperative Resource Nurse), Susan Steven (Perioperative Manager), and Heather Hartley (Perioperative Professional Practice Specialist).

Cut The Count: Mid-Year Results

Forty-one ON-SQIN hospitals are participating in the Cut the Count: Reducing Opioids After Surgery campaign. A preliminary look at submitted SQIP mid-year data shows that, on average, post-surgical discharge prescriptions have been reduced by 9 pills. This is an amazing start-congratulations to everyone participating! Hospitals are working to reduce the number of opioid pills prescribed at surgical discharge for ENT, general, gynecological, orthopedic, plastic, thoracic, urology, and vascular surgeries. We are only 6 months into the campaign and more than half of teams have already reached or exceeded their improvement target. Resources to support participating teams improve pain management for their patients can be found *here*.

Optimizing Perioperative Antibiotic Selection

A highlight of the August Surgeon Champion call was a presentation by Dr. Alon Vaisman from the Department of Infectious Diseases and

Featured QI Initiatives



Surgical guality improvement team members at Michael Garron Hospital, from left: Melaine Wistuba, Christine Saby, Jonathan Russell, Nancy Elford, Dr. Dmitry Tsevetkov, and Jane Harwood. Missing: Valerie Beadle and Dr. Mary Anne Aarts (Surgeon Champion).

Engaging Patients at Michael Garron Hospital

Number of teams that

have already met their

provincial opioid

reduction targets

As part of their Cut the Count campaign efforts, surgical team members at Michael Garron Hospital have formed an opioid reduction taskforce, which meets monthly and includes representatives from surgery, anesthesia, pharmacy, nursing, and other departments. Their goal is to successfully pilot an electronic multimodal pain medication discharge prescription that can be tailored to the needs of individual patients and specific health histories. The team has not only created patient education materials to address pain while in hospital, but also emphasizes nonpharmacological pain management approaches, including guided imagery and meditation, distraction techniques (iPAD, podcasts), mindfulness, and massage pre-and post-surgery. Special attention has been given to building staff capacity to assuage patients' fears regarding opioid medications and expectations of pain. Says Jane Harwood, Manager of Inpatient Surgery: "We have stimulated a lively and enthusiastic conversation around ways to better manage pain while minimizing opioid use, and around what we can do through this project to improve the quality of our pain management at Michael Garron Hospital."

What's Happening in the

• Congratulations to Etobicoke General Hospital, Grey Bruce Health Services, Markham Stouffville Hospital, North Bay Regional Health Centre, North York General Hospital, Queensway Carleton 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. A special shout out to the Sunnybrook and Thunder Bay teams who have received this recognition for two or more consecutive years. These eight hospitals were among 88 of the 592 eligible teams who achieved the distinction based on an outstanding composite quality score.

Coming Up

- Upcoming Surgical Clinical Reviewer call: January 13, 2020, at 9 a.m.
- · Upcoming Surgeon Champion calls: November 26, 2019, and January 28, 2020, at 7 a.m.
- February 2020—release of the next ON-SQIN Newsletter

ON-SQIN Newsletter: Winter 2020

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

Infection Prevention and Control at the University Health Network on optimizing perioperative antibiotic selection. Dr. Vaisman shared an algorithm for optimizing cefazolin use in perioperative prophylaxis that includes a series of questions to ask when your patient reports an allergy to a beta-lactam antibiotic. A copy of his presentation can be found in the attachments section on Quorum.

Health Quality Ontario and CADTH Resources

Elisabeth Smitko, Liaison Officer, Health Technology Assessments (HTAs) at Health Quality Ontario and the Canadian Agency for Drugs and Technologies in Health (CADTH), presented at the October Surgeon Champion meeting. She shared how ON-SQIN teams could leverage Health Quality Ontario's HTAs and CADTH's rapid response service to support other decision-making, such as the selection of interventions for implementation. Health technology assessments make recommendations on which new health technologies should be publicly funded, while requested CADTH reports may include reference lists, abstract summaries, and critical appraisals. If you would like to learn more or to request a presentation at your hospital, contact Elisabeth here.

Publication

Highlighting the need to review and implement opioid prescribing reduction strategies, Drs. Nathens, Nader, and Nahanni from Sunnybrook Health Sciences Centre published a paper in Trauma Surgery & Acute Care Open describing the need for better opioid stewardship after emergency laparoscopic general surgery.

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

Quinte Health Care Cuts Opioid Prescriptions by One-Third A recent article in *The Belleville Intelligencer* shares how doctors and staff in Quinte Health Care's surgical department (both Trenton and Belleville locations) have reduced the number of opioid prescriptions by more than one-third. As part of the Cut the Count campaign, four surgical divisions-general surgery, orthopedics, gynecology, and urology-have been changing their approach to post-surgical prescribing since April 2019. They standardized their prescriptions, reducing the baseline quantity of pills prescribed and adding lower-strength painkillers, such as acetaminophen and ibuprofen. Now, 75% of surgical patients in these areas are receiving the standardized script. The team also emphasizes an "improved quality of life" approach to pain management rather than a zeropain approach during patient education. Quinte's surgical program director, Kristina Cruess, noted that about 207,360 pills per year have historically been prescribed for their targeted proceduresthat's since dropped to 125,670.

For tools and resources from ON-SQIN members, promotional materials for the Cut the Count: Reducing Opioids after Surgery campaign, and more information on partnering with patients, visit the opioid reduction campaign folder in the surgical quality improvement page on Quorum.



Let's make our health system healthier

