



Driving knee and hip surgical performance improvements with patient experience feedback

Martin Heller, MD, CM, FRCSC; Stefano Gelmi, BSc, EIT; Carleene Bañez, BEng; Braydon Bak, BA, MA; Jennifer Yoon, RN, MSc (QI/PS); Vanessa Burkoski, RN, BScN, MScN, DHA; Barbara Collins, RN, MBA; Michael Gardam, MSc, MD, CM, MSc, FRCPC; Trevor Hall, MSc, Fellow (Quality Improvement)

Description

Through our Post-Discharge Call Centre (PDCC), we are able to gain an understanding of our patients' hospital experience in near real time, which is an important indicator used to identify quality improvement initiatives.

In order to focus our quality improvement efforts and reduce re-admission rates on primary hip and knee surgeries, we utilized our PDCC to understand the surgical and anesthesia experience of our patients. Between April 2017 and March 2018, 1,258 cases were performed involving 12 physicians, with a readmission rate within seven days post-surgery of 0.72% (9 cases).

Aim

Share patient feedback with the orthopedic surgical department to advance patient experience and surgical practice.

Actions Taken

- Developed a de novo questionnaire focused on primary hip and knee surgical and anesthesia experience
- Collected feedback from post-discharge patients between December 2017 and July 2018
- Shared anonymized surgeon specific data analysis about post-op management with the surgical team to encourage future quality improvement discussions and projects.

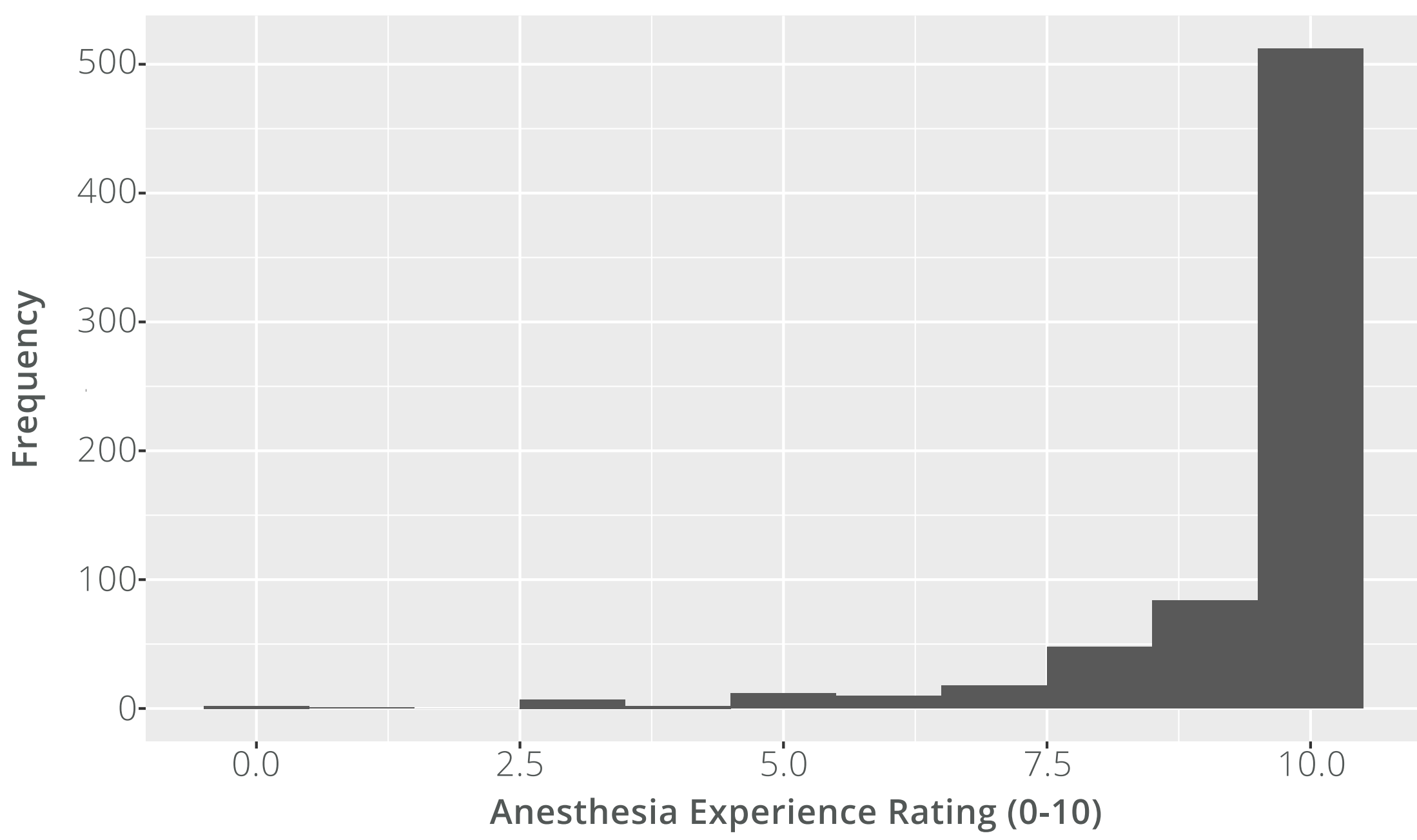


Figure 1. Anesthesia experience rating histogram (n=696)

Summary of Results

- 72.3% response rate for patients surveyed between December 2017 and July 2018
- Positive results for surgery and anesthesia experience (Figures 1 and 2)
- Improvement opportunities revealed when correlating different metrics, such as discharged day of week and post-op review results (Figure 3)
- Ability to measure surgical team performance (Figure 4)

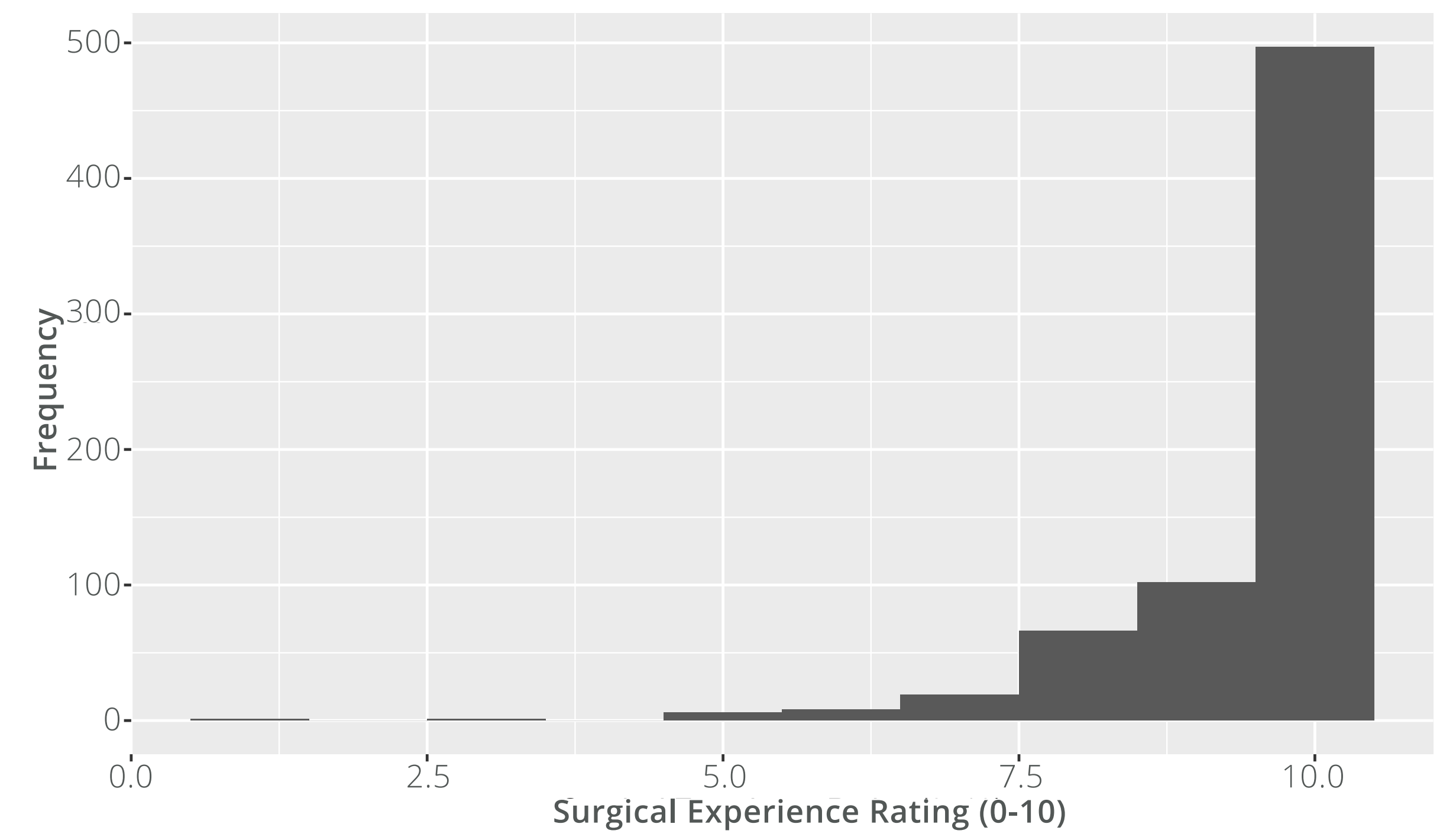


Figure 2. Surgical experience rating histogram (n=700)

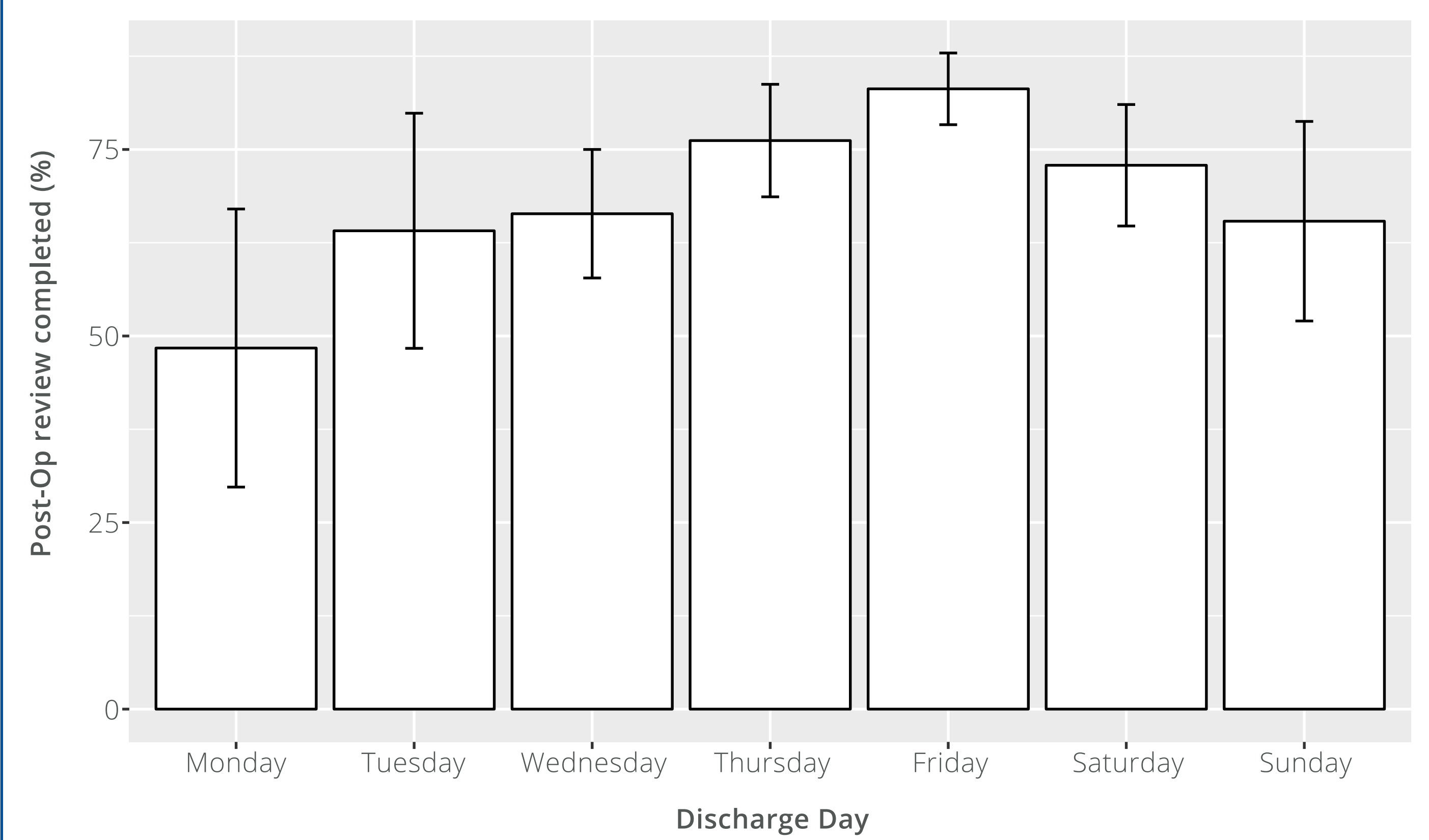


Figure 3. Post-Op review completed by discharged day of week.

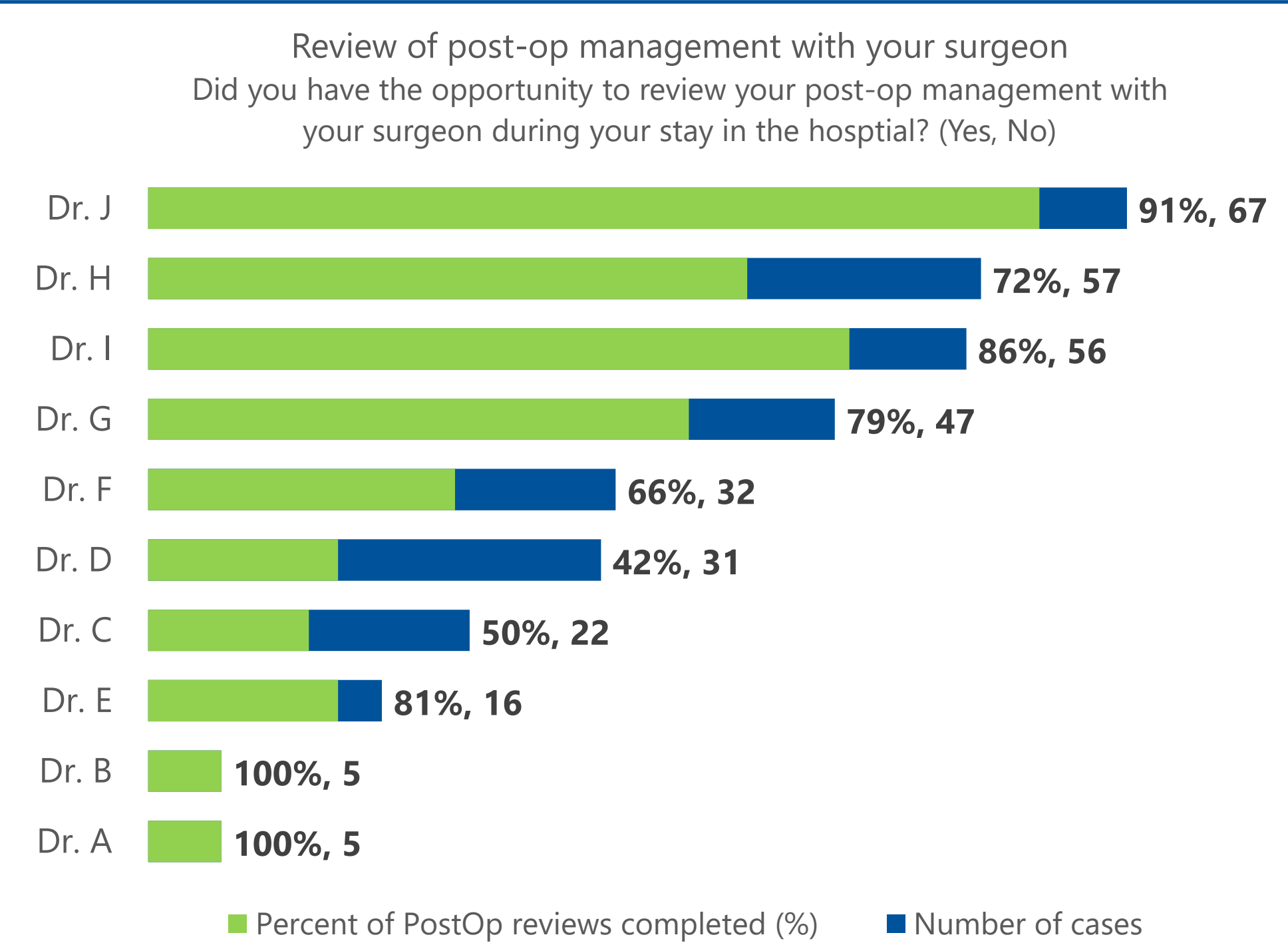


Figure 4. PostOp review performance by physician