



Background and Overview: Ambulatory Surgery Center Survey on Patient Safety Culture

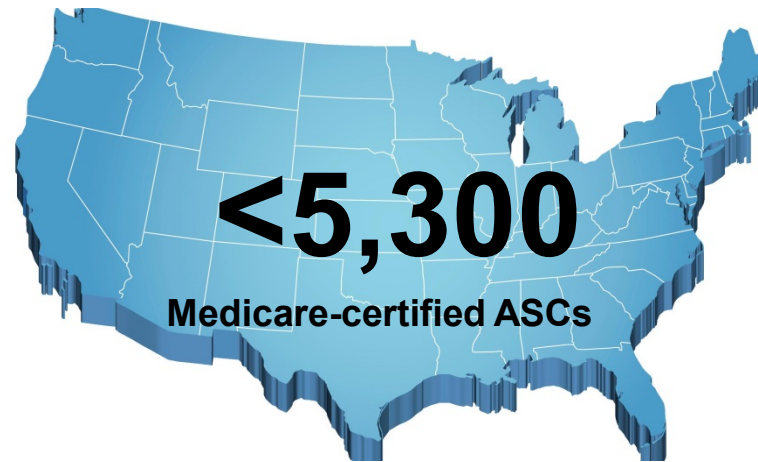
**Jim Battles, PhD
Senior Service Fellow
AHRQ Center for Quality Improvement and
Patient Safety**

Background on the Ambulatory Surgery Center Survey



- Latest addition to Surveys on Patient Safety Culture family of surveys:
 - Hospital Survey on Patient Safety Culture
 - Nursing Home Survey on Patient Safety Culture
 - Medical Office Survey on Patient Safety Culture
 - Community Pharmacy Survey on Patient Safety Culture
- Surveys and related material available at:
<http://www.ahrq.gov/professionals/quality-patient-safety/patientsafetyculture/index.html>

Current state of ASCs



- More than 25 million procedures are performed in ASCs each year (2014)
- Nearly two-thirds of US surgeries are performed in ambulatory facilities (2015)

(2014). AHRQ Safety Program for Ambulatory Surgery. December 2014. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/professionals/quality-patient-safety/hais/tools/ambulatory-surgery/index.html>

(2015). American Hospital Association. Utilization and volume. In: Trends Affecting Hospitals and Health Systems, chapter 3. <http://www.aha.org/research/reports/tw/chartbook/index.shtml>. Accessed July 18, 2015.

Overview of ASCs



- The majority of ASCs are:
 - Single-specialty (65%) (2009)
 - Partially or completely physician owned (74%-90%) (2015)

- A growing number of ASCs are:
 - Owned or managed by multifacility chains (22%) (2011)

(2009) Koenig L, Doherty J, Dreyfus J, et al. An analysis of recent growth of ambulatory surgery centers. In: KNG Health Consulting, LLC. ASC Coalition.

(2015) Medicare Payment Advisory Commission. Ambulatory Surgical Center Services. Report to the Congress: Medicare Payment Policy.

(2011) Koonsman, G, O'Sullivan, J, Murski A, et al. Ambulatory surgery center financial & operational benchmarking study. Dallas, TX: VMG Health.

Patient Safety in ASCs



- On average, preventable patient safety events in ASCs are low (\approx less than 1 per 1,000 admissions) (2015)
- However, there is significant variability across outpatient surgery facilities in the rates of (2015):
 - 30-day venous thromboembolism (0-3.4%)
 - 30-day admission rates (0-7.7%)
 - 30-day emergency department visits (0-22.8%)

(2015). ASC Quality Collaboration Quality Report: 1st Quarter 2015. Accessed at <http://www.ascquality.org/qualityreport.cfm>.

(2015). Parina R, Chang D, Saad AN, Coe T, Gosman AA. Quality and safety outcomes of ambulatory plastic surgery facilities in California. *Plast Reconstr Surg.* Mar;135(3):791-7. doi: 10.1097/PRS.0000000000001041.

AHRQ Safety Program for Ambulatory Surgery



- 4-year project developed to apply principles of the Comprehensive Unit-based Safety Program (CUSP) in ASCs
- Goal: implement a surgical safety checklist-centered quality improvement intervention to reduce surgical site infections (SSIs) and other major complications related to ambulatory surgery while improving teamwork and communication

Safe Surgery 2015 Checklist Template		
Before Induction of Anesthesia	Before Skin Incision	Before Patient Leaves Room
<p>Nurse and Anesthesia Provider Verify:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Patient identification (name and DOB) <input type="checkbox"/> Surgical site <input type="checkbox"/> Surgical Procedure to be performed matches the consent <input type="checkbox"/> Site marked <input type="checkbox"/> Known allergies <input type="checkbox"/> Patient Positioning <input type="checkbox"/> The anesthesia safety check has been completed <p>Anesthesia Provider Shares Patient Specific Information with the Team:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Anticipated airway or aspiration risk <input type="checkbox"/> Risk of significant blood loss <ul style="list-style-type: none"> - Two IVs/central access and fluids planned - Type and crossmatch/screen - Blood availability <input type="checkbox"/> Risk of hypothermia - operation >1h <ul style="list-style-type: none"> - Warmer in place <input type="checkbox"/> Risk of venous thromboembolism <ul style="list-style-type: none"> - Boots and/or anticoagulants in place 	<p>Entire Surgical Team:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Is everyone ready to perform the time out? <input type="checkbox"/> Please state your name and role <input type="checkbox"/> Patient's name <input type="checkbox"/> Surgical procedure to be performed <input type="checkbox"/> Surgical site <input type="checkbox"/> Essential imaging available <input type="checkbox"/> Has antibiotic prophylaxis been given within the last 60 minutes? <ul style="list-style-type: none"> - Plan for redosing discussed <p>Briefing</p> <p>Surgeon Shares:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Operative Plan <input type="checkbox"/> Possible difficulties <input type="checkbox"/> Expected duration <input type="checkbox"/> Anticipated blood loss <input type="checkbox"/> Implants or special equipment needed <p>Anesthesia Provider Shares:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Anesthetic plan <input type="checkbox"/> Airway concerns <input type="checkbox"/> Other concerns <p>Circulating Nurse and Scrub Tech Share:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Sterility, including indicator results <input type="checkbox"/> Equipment issues <input type="checkbox"/> Other concerns <p>Surgeon says: "Does anybody have any concerns? If you see something that concerns you during this case, please speak up."</p>	<p>Nurse reviews with Team:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Instrument, sponge and needle counts are correct <input type="checkbox"/> Name of the procedure performed <input type="checkbox"/> Specimen labeling <ul style="list-style-type: none"> - Read back specimen labeling including patient's name <p>Debriefing</p> <p>Entire Surgical Team Discusses:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Equipment problems that need to be addressed. <input type="checkbox"/> Key concerns for patient recovery and management <input type="checkbox"/> What could have been done to make this case safer or more efficient



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This checklist is not intended to be comprehensive. Additions and modifications to fit local practice are encouraged. Based on the WHO Surgical Safety Checklist. URL: <http://www.who.int/patientsafety/safesurgery/en>. © World Health Organization 2009. All rights reserved.