

Empowering Multidisciplinary Collaboration: Streamlining the

Ambulatory Perioperative Check in Process for U



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PURPOSE

Pre-operative patient satisfaction and wait times have been shown to influence post-operative behavior. Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OASCAHPS) is a governmental program used to quantify and evaluate patient experience. The purpose of this project was to increase the score to 93% in the “check in run smoothly” question. Since the GI/MPU and ASC are both outpatient areas, we collaborated to demonstrate a unified UCLA system.

CLINICAL PROBLEM

Both units were underperforming. Negative patient comments strongly feature the following in both units: wait times, conflicting information in regard to check in, incorrect directions, and multiple phone calls from different departments. In June 2022, the GI/MPU and ASC’s top box scores were 89.91% (10th percentile) and 91.43% (16th percentile) respectively for the OASCAHPS question “check in run smoothly”.

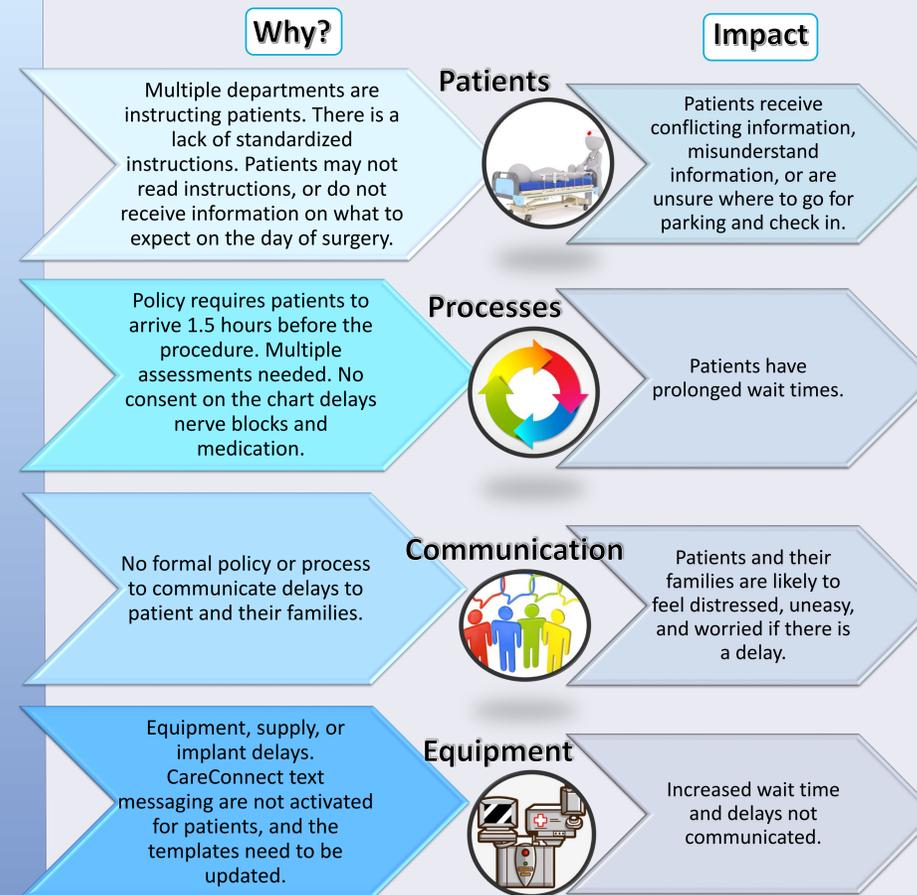
DESCRIPTION OF TEAM

Nursing informatics, surgery schedulers, admissions, surgeons, anesthesiologists, primary care physicians, nursing leadership, and floor nurses (pre-operative and OR) were consulted for assessment and implementation.

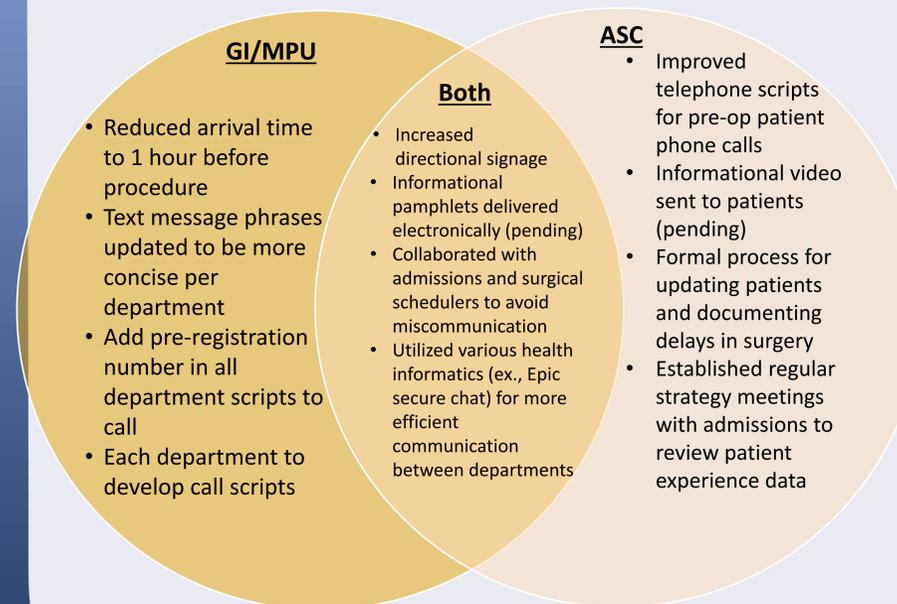
PREPARATION

Several studies correlate prolonged wait times with negative patient satisfaction scores. The most effective way to reduce wait time is through a comprehensive strategy that integrates technology and PDCA/LEAN Methodologies. The average pre-operative patient wait time was computed from the EHR and brought to nursing administration and medical directors from each respective sites. Surveys were given to the admissions and pre-operative staff for input. A root cause analysis using flow maps with timestamps was used to identify main themes for improvement. A meta-analysis noted regular patient updates improved satisfaction.

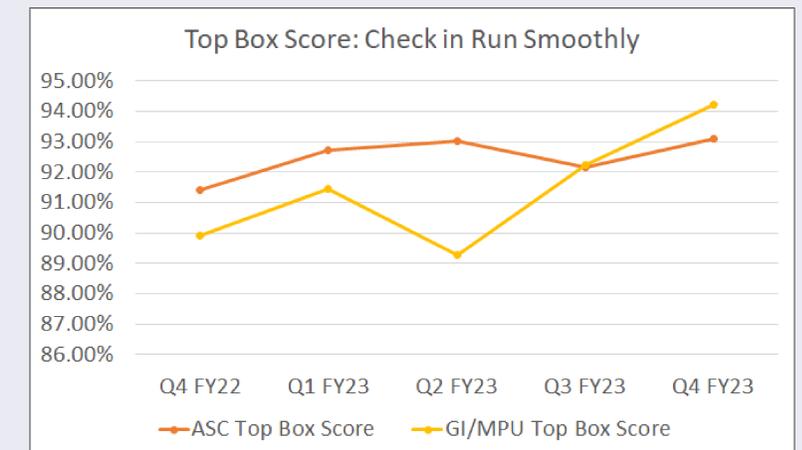
PLANNING: ROOT CAUSE ANALYSIS



IMPLEMENTATION



OUTCOME



ASC					
Time Period	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23
n	245	234	258	306	261
ASC Top Box Score	91.43%	92.74%	93.02%	92.16%	93.10%
Percentile Rank	16	24	24	16	18

GI/MPU					
Time Period	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23
n	228	246	233	284	278
GI/MPU Top Box Score	89.91%	91.46%	89.27%	92.25%	94.24%
Percentile Rank	10	15	7	16	28

Both GI/MPU and ASC’s OASCAHPS scores are going in an upward trend, indicating interventions done have a positive effect.

IMPLICATIONS FOR PERIOPERATIVE NURSING

The tools used can quantify the patient experience preoperatively and assist units to harness a more holistic approach towards a common problem. This project has opened up communication between departments to unify and streamline ambulatory areas across the UCLA Health System. Our plan is to expand collaboration to all physician’s offices.

REFERENCES

