

Surgical Care Improvement Project (SCIP) Abstract

Introduction: In 2006, the Joint Commission added the Surgical Care Improvement Project (SCIP) metrics to the indicator monitoring program. After reviewing the initial data Tripler Army Medical Center implemented a number of initiatives to improve their underperforming SCIP measures. These efforts resulted in improvement in all six of the metrics, most with sustained scores above 95%.

Methods: The initiatives included education and training of the department of surgery staff, assigning a nurse to track the cases and metrics and to review all failed records. Metrics and failed cases were reviewed at the monthly departmental performance improvement meeting where individuals were held accountable for failures or successes. A number of reminder prompts were placed in Essentris, the electronic inpatient medical record to remind providers to record antibiotic start and stop times, and route given. Nursing staff in the operating room and the surgical wards were educated on the metric requirements as well thus meeting the metrics has become a team effort for physicians, nurses and the informatics staff.

Results: Pre and post intervention data was abstracted from the clinical inpatient records on a quarterly basis by an external DOD contractor and analysis done by the contractor then posted to a secure website. Implementation of the initiatives resulted in a decrease in variation between data points and an overall improvement in each metric to above the 90th percent Joint Commission goal.

Conclusion: A multipronged effort providing education to the clinical staff along with automated reminder prompts in the inpatient electronic medical record and feedback on successes and failures resulted in significant improvement of the data and quality of care delivered. Using a team approach helped keep staff aware of the metrics and focused on the goals one patient at a time.

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Surgical Care Improvement Achieving the Goal

Tripler Army Medical Center

Surgical Care Improvement Program (SCIP) Background

- › National quality partnership of organizations interested in improving surgical care by significantly reducing surgical complications
- › Measures are fully supported by evidence-based research
- › Reported to Joint Commission/MEDCOM as of July 1, 2006
- › Currently ten measures

Scope of the Problem

- › Initial Data Review – Problem Identified
 - Data 1 July 2006–December 2007
 - Six of ten measures not acceptable
 - Individual providers unaware of the metrics
- › Initial attempts to improve=minimal results
 - Quarterly data and preliminary reports and fall out cases sent to department
 - Data lag impacted ability to stay on top of issues
 - Education given to department leaders

Department of Surgery Initiatives

- › Nurse assigned to review records and track data
- › Providers & Nursing educated on the measure requirements
- › SCIP posters on wards
- › Prompts placed in Essentris to remind providers
- › Service Chiefs and individual providers held accountable at monthly departmental meeting
- › Glucose tracked at Command morning report
- › Success recognized

