

Sooner, Safer, Smarter



**Saskatchewan
Surgical Initiative**
putting the Patient First



“Knowing which procedures are done by each specialist helps me direct my patients to the right surgeon.”

Dr. David Stoll
Family Physician,
La Ronge

“The health care team listened to me. I became a partner with those involved in my knee replacement and recovery.”

Harriet Greenhow
Patient, Regina

“We’re working together as teams, making our operating rooms more efficient to provide surgeries to more patients.”

Dr. Edmund Royeppen
Surgeon, Prince Albert

“New technology is helping our team provide the safest, most pleasant experience possible for our patients.”

Crystal Hope
RN, Swift Current

A message from the Saskatchewan Surgical Initiative

A year ago, taking action on a mandate commitment, the Minister of Health tasked the health system with improving the patient’s surgical experience. Acting on Government’s priority to transform surgical care in Saskatchewan, it’s important to share our progress thus far and our goals for Year Two. We have made notable progress in reducing wait times, though we will need to see greater improvement in the coming year to meet our challenging targets.

Particularly encouraging are the implementation of safer surgical practices in operating rooms across the province and better coordination of care throughout the system. These things are of prime importance to our patients when they come to us for care. Our achievements would not be possible without the leadership and support of many partners, providers and health system leaders. Together, we will succeed by continually reminding each other that “safer” and “smarter” are every bit as important as “sooner”.



Dr. Peter Barrett
Physician Leader



**Saskatchewan
Ministry of
Health**

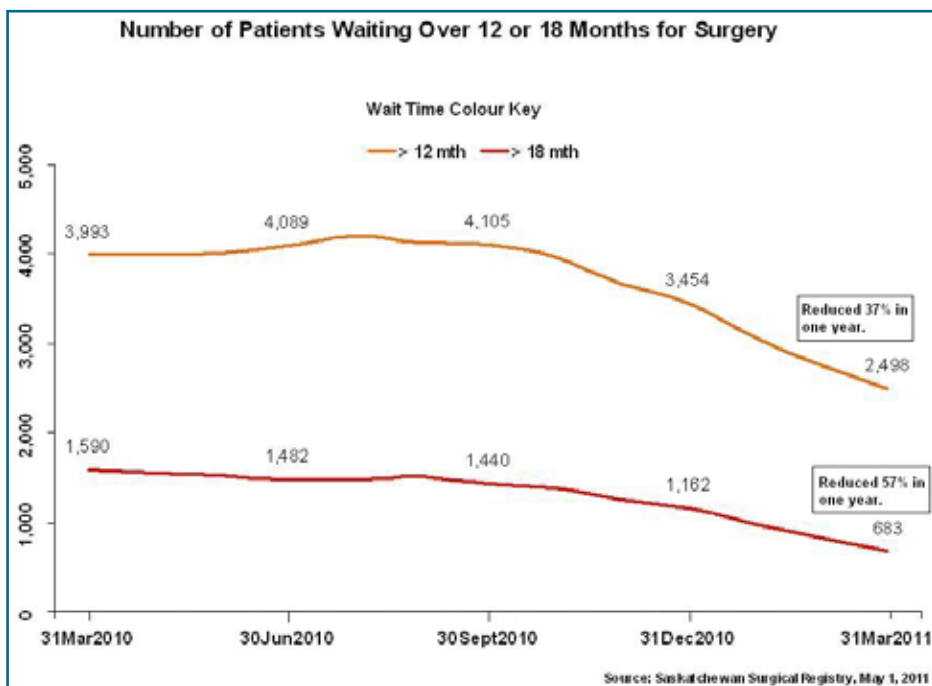
Year One Report

May 2011

Sooner

During Year One of its four-year plan, the Saskatchewan Surgical Initiative chose to focus on the province's longest-waiting surgical patients.

The number of patients waiting over 18 months for surgery was reduced by 57 per cent, while the number of patients waiting over 12 months was reduced by 37 per cent. While this represents significant progress, the Initiative did not meet its Year One target of having no patients in the 18 month category. The shortfall is due to various factors, including limited recovery bed capacity for surgical patients, delays in capacity expansions, limited lead time to develop and implement strategies, and an imbalance in the distribution of waiting surgical patients among specialists. The Saskatchewan Surgical Initiative is working with health system partners to address these issues.



DID YOU KNOW?

- *Almost 60 per cent of Saskatchewan's long-waiting surgical patients (those waiting more than 18 months) are distributed among 10 surgeons.*
- *Patients on a very popular surgeon's list may wait two to three times longer than those referred to an equally qualified surgeon. The Ministry of Health is working with physicians, surgeons and health regions toward more effective, patient- and family-centred distribution of surgical cases.*

- Introduced in June 2010, the online **Specialist Directory** at www.health.gov.sk.ca/specialist-directory helps patients work with their family doctors to understand options and learn which specialists have the shortest wait times.
- Five surgical practices in Saskatchewan will soon be using **pooled referrals**. This will give patients faster access to the first available surgeon with the required expertise. Patients may still choose any surgeon they prefer, but know they may wait longer.
- Saskatchewan is using **third-party providers** to increase surgical and diagnostic capacity in our publicly funded and administered health care system. Contracts have been signed with third-party providers to do dental surgeries, knee and shoulder arthroscopies and CT scans – so that patients can be treated sooner.

Saskatchewan Surgical Patients	March 31, 2010 (Start of SkSI)	March 31, 2011 (End of Year 1)
All patients waiting over 18 months	1,590	683 (↓ 57%)
All patients waiting over 12 months	3,993	2,498 (↓ 37%)
Hip/Knee replacement patients waiting over 18 months	28	18 (↓ 36%)
Hip/Knee replacement patients waiting over 12 months	162	152 (↓ 6%)

Since 2007, the number of patients waiting more than 18 months for surgery has dropped 75 per cent (over 2,000 cases) and the number waiting more than 12 months has dropped 55 per cent (over 3,000 cases).

Safer

- **Surgical safety checklists** will soon be standard procedure in all Saskatchewan hospital operating rooms. The checklists promote improved communication among the surgical team and consistent use of practices that are proven effective in increasing patient safety before, during and after surgery.
- Infections contracted at the site of a surgery can jeopardize or delay a patient's recovery and extend a hospital stay by days or even weeks. **Safer Healthcare Now!** – a Canadian Patient Safety Institute initiative – has developed processes to prevent surgical site infections. Implementation of these **surgical site infection prevention** protocols is underway. By March 2012, all Saskatchewan health regions that perform surgeries in operating rooms will be using the protocols.
- Saskatchewan health regions are implementing **medication reconciliation** at admission to acute care. MedRec prevents errors by ensuring that a patient's medication history is verified, medication and doses are appropriate, and any medication changes are documented throughout the patient's care experience.
- Injuries due to falls are a significant cause of hospitalization and often result in surgery, especially among seniors. A **falls prevention** initiative now helps identify risk factors that can contribute to senior falls, and promotes ways to prevent these injuries. Fifty per cent of Saskatchewan's long-term care facilities now use these protocols, and the remainder will have introduced them by March 2012.



A surgical team goes through the Surgical Safety Checklist.
Photo courtesy Medical Media Services, Regina Qu'Appelle Health Region

Smarter

- **Hip & Knee Pathway:** Family physicians can now refer potential hip or knee surgical patients to **multidisciplinary clinics** in Regina, Saskatoon, Prince Albert and Moose Jaw. At the clinics, patients are assessed and evidence-based pathways are used to guide the patient to the most appropriate treatment. When surgery is felt to be the best option, the patient is referred to a surgeon with the necessary expertise. Throughout the experience, the patient is aware of what to expect.
- **Releasing Time to Care™** is a quality improvement program designed to free up caregivers' time so they can spend more time with patients. It has helped improve patient and staff satisfaction, reduce staff injuries, and increase the amount of time nurses spend on direct patient care. With support from the Health Quality Council, 52 facility and hospital wards in Saskatchewan are implementing the program.
- **Spine Pathway:** Saskatchewan is introducing a new way to assess and treat patients with lower back pain. Primary health care providers (family physicians, chiropractors and physiotherapists) can now take an online continuing education course on handling lower back pain. The course provides a simple, accurate system to determine whether a patient's back pain can be resolved with simple exercises and rest, or whether they need an MRI or surgical referral. This will help provide standardized, high quality care, reduce unnecessary wait times for patients, and help get them on the road to recovery sooner. Regina Qu'Appelle and Saskatoon Health Regions will support this process with multidisciplinary assessment clinics to help determine patients' additional treatment options for back pain.

More "smarter" on next page.

“Smarter” (continued)

- Saskatchewan’s new computerized **Surgical Information System** is in place at Prince Albert’s Victoria Hospital and at Cypress Regional Hospital in Swift Current. It will soon be introduced in Prairie North and Five Hills Health Regions, followed by all five hospitals in Saskatoon and Regina. The system electronically books and manages surgical cases, tracks patient preparation, medication, and procedure times, and automates supply management. It streamlines the surgical process, making it more efficient and transparent for patients, their families and providers.
- Front-line providers and health care administrators in Saskatchewan health regions are introducing **improved, leaner processes** – to become more efficient and work smarter without compromising patient care – so more time and resources can be focused on surgical and diagnostic care.
- With support from the Health Quality Council and Ministry of Health, a growing number of specialists and family physician practices are undergoing **clinical practice redesign**, adopting tools and methodologies to improve access to care, office efficiency and communication between health care providers.
- The Saskatoon Health Region has received funding to train 21 additional OR nurses through a **condensed perioperative-nurse training program** at the Saskatchewan Institute of Applied Science and Technology (SIAST). Saskatchewan Health and SIAST are also partnering to **double the number of seats in the perioperative nurse program to 36 in 2011-12**. This means more OR nurses to accommodate more surgeries.
- The Health Quality Council has a new resource, Quality Insight Online, to measure health care quality. It can help managers and health care providers evaluate progress and identify areas that need improvements. Follow the progress of the Saskatchewan Surgical Initiative at www.qualityinsight.ca.

Year 2 Targets

Saskatchewan has invested an additional \$40.4 million to continue to transform surgical care and reduce wait times.

This funding will support an additional 5,700 surgeries this year, more than one-third of them in hospitals outside of Saskatoon and Regina. Among other priorities, the funding will purchase diagnostic equipment, train more OR nurses, enhance post-operative rehabilitation services, and support quality improvement and innovation.

We will also focus on ensuring our gains are sustained in the future, through wise resource management and appropriate use of surgical services. For example, by **improving and promoting the online Specialist Directory**, we can help patients and family doctors make more informed choices about surgical options. We also want to engage patients and providers in ensuring that surgery, when recommended, is the appropriate route.

Our goals for 2011-12 include the following:

- Reduce wait times to the point where every surgical patient in Saskatchewan is offered a surgery date within 12 months of their specialist consultation.

Our targets are challenging. But by listening to our patients, respecting their input, and letting their perspective guide our work, we will succeed in improving surgical care in Saskatchewan.

- Work with more physicians to make their clinical practices more efficient, and expand the use of pooled referrals.
- Maximize surgical capacity in hospitals outside of Regina and Saskatoon using available surgeons, operating rooms and staff resources, so more patients have the option to have their surgeries sooner.
- Ensure availability of hospital beds for surgical patients by improving patient flow through the health system.
- Implement a “long waiter strategy” to reduce the wait lists of particular surgeons who have the longest wait lists and wait times.
- Confirm through auditing that 100 per cent of Saskatchewan hospital operating rooms have implemented a Surgical Safety Checklist.
- Open multidisciplinary clinics for spine pathway patients. We will also introduce new pathways for prostate cancer and gynaecological patients.

For more information, call (306) 787-9901 or visit www.health.gov.sk.ca/saskatchewan-surgical-initiative