

ABO NON-CLINICAL QUALITY IMPROVEMENT (QI) APPLICATION

Topic

Quality Improvement Topic:	
In-office Procedure Checklist Protocol	Incorporate into practice "time out" and additional procedures. Please see Procedure Protocol designed which is attached below.
	<hr/> <hr/>
What is the reach of this QI activity?	Local
Please explain/identify:	Implement protocol to enhance patient safety for office procedures. Study patient number twelve.
Please identify the funding source(s) for this QI activity?	None

Project Description

1. Describe the quality gap or issue addressed by this activity. (Included in your response to this question should be a description of the resources that informed your decision to pursue this topic, a description of what the literature says about the issue you identified, and the rationale for choosing to address this Non-Clinical QI project.)	<p>My solo practice already incorporates most of the steps in the protocol but does not routinely use "time out" prior to procedures and does not have a formalized checklist protocol as created for this project.</p> <p>The literature shows that "time outs" significant help to avoid wrong site and wrong type of procedures. Having and implementing a checklist protocol akin to airline safety helps to avoid unnecessary errors.</p>
	<hr/> <hr/>
2. Describe the specific aim(s) of this activity (explanation of the numeric goals and importance to your work processes and your organization).	The goal is to implement the procedure checklist protocol for all in-office procedures going forward. The study will use the checklist for all office-based patient procedures over the next 45 days and report results back with an expected minimum number of 12 patients. The population of patients will be all patients undergoing procedures including but not limited to SLT, YAG capsulotomy, laser iridotomy and incisional procedures in the office setting.
3. Identify the measures that were evaluated in your workplace and provide a summary of pre- and post-intervention data for each measure. (Please provide source information for each measure.)	A "time out" will be implemented with all office-based procedures. Currently, each patient's chart is reviewed prior to each procedure but a formal "time out" as used in the operating room is not used for all procedures in this solo practice. The goals are to use the standard O.R. "time out" method combined with the check list above which will be used to standardize all patient procedures in the office.
4. What was the source of your data (check all that apply)?	Patient Paper Chart
Please Specify	Chart Review
5. What methods were used for data collection (check all that apply)?	Going forward, each patient procedure will follow the checklist protocol designed.
6. What was the comparison group in this activity (e.g., a regional or national benchmark)?	Comparison to patients who had in-office procedures in this private solo practice prior to implementation of the procedure protocol checklist.
7. Will the identified measures address important issues for your processes of care and/or patients?	Yes; adding formal "time-out" and checklist of protocol prior to all in-office procedures to ensure safety and uniformity.

8. Describe the process you went through to develop the QI plan and the tests of change that will be undertaken to improve care (i.e., quality improvement plan design, implementation, and re-evaluation)	Evaluated our usual method of doing procedures and compared with in-operating room protocols and standards.
9. Present baseline data that supports the need for your change concept, then specify the intervention(s) that will be implemented in your practice and why they were chosen.	While no lapses of care have been identified, adding a "time out" and documenting a protocol for procedures helps to ensure safety going forward and adequate documentation in future. The protocol will help the process and streamline procedures for patients with greater efficiency.
10. What benefit do you believe these interventions will have on your processes of care and/or patient population?	Improved processes of care; Less variation in processes; Less waste (greater efficiency).

Project Outcomes/Results

1. Describe in detail your role in this activity (i.e., your role in identifying measures and reviewing data, identifying the QI topic, developing the QI plan, identifying interventions, implementing the QI plan and interventions into your practice, etc.).	As a solo practitioner with one assistant, I piloted the project. I designed the template for in-office procedures [checklist attached with my project submission] after identifying the topic and plan. My assistant helped to confirm that documentation was done and our new checklist system was used. The intervention was successful in standardizing my approach to in-office procedures and also increasing efficiencies.
2. Were other members from your care team involved in this activity?	Yes
If yes, please describe their role(s) in this activity.	Please see above. My assistant was able to begin the screening and preparation of patients earlier and with greater confidence by using the checklist system of tasks.
3. Describe the impact this QI effort had on your practice and the care that you provided to your patients.	While these steps were previously taken in my practice, utilizing a standardized checklist system increased the efficiencies, decreased patients' waiting time, and enhanced the ability to render a high quality of care to potentially more patients. Patients appeared to have a greater level of satisfaction with their procedure experience.
4. What data can you provide to demonstrate that your change concept produced meaningful improvement in your current processes or patient outcomes? (i.e. percentage reduction in post-operative complication, percentage improvement in a specific cohort of patients etc.)	The system checklist was applied to in-office laser procedures. Time-out use for these procedures is now 100%. Over length of time from the patients' registration to completion of the laser and post-op check decreased by 40%.

Project Reflection

5. Reflecting on this self-directed Non-Clinical QI project, how do you plan to sustain your improvement?	By continuing to use the checklist system and applying it to all in-office procedures, not just lasers.
6. Was this Non-Clinical QI project beneficial to your processes, patient population or practice?	Yes. As a solo practitioner with one staff member, it is useful to delegate tasks more and have a standardized way of approaching and evaluating these tasks.
7. Please describe any lessons learned about your work processes by participating in this self-directed Non-Clinical QI project?	While all the elements of pre-op, procedure and post-op were previously completed, having a standardized checklist helps my practice to be more efficient, allows me to work more cohesively with my assistant by delegating her more tasks, and appears to make the patients' experiences more positive.
8. What do you plan to do next to improve i.e. reduce variation in your processes of care?	Expand the standardization where it is applicable with protocols and/or checklists.

<p>9. Please describe whether or not you found participation in the self-directed Non-Clinical QI project to be meaningful, impactful and a valuable use of your time.</p>	<p>It helped to create a tool to assist in my practice which is customized protocol/checklist. As a result, I found the experience to be meaningful and to have a positive impact on my practice.</p>
<p>Please provide additional details about how the ABO can improve upon this self-directed QI activity.</p>	<p>Consider having a pool of recommended projects to choose from and help direct the applicant.</p>