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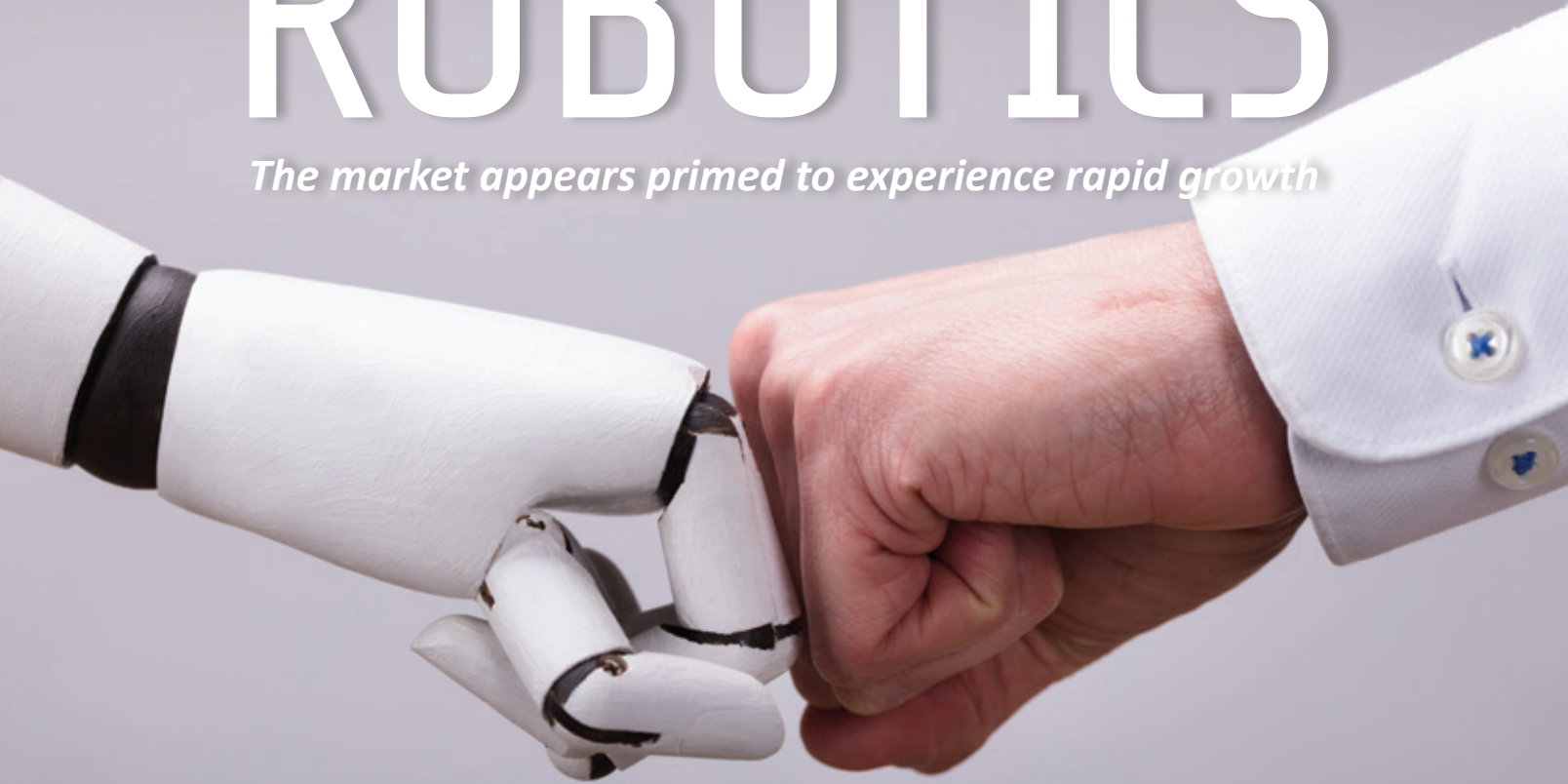
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Stop Guessing, Start Measuring

Choose meaningful, data-based QAPI study topics

BY DAREN SMITH



The purposes of quality assurance and performance improvement (QAPI) for ASCs are quite clear. In fact, they are spelled out for you: “quality assurance,” meaning care is maintained at an acceptable level, and “performance improvement,” meaning changes are implemented to strengthen operations.

Achieving the objectives of QAPI, however, can be a challenge for some ASCs. Failure to properly perform QAPI studies can put an ASC into regulatory hot water with the Centers for Medicare & Medicaid Services (CMS) and jeopardize accreditation status. Just as importantly, a poorly performing QAPI program can cause an ASC to miss opportunities to make changes that can positively affect clinical, operational and/or financial performance.

Fortunately, maximizing the benefits of QAPI while meeting requirements and standards is not difficult. Doing so essentially boils down to using data most ASCs already collect.

Understanding Expectations

To understand the importance of data for QAPI, it is important to first understand the QAPI requirements. They are fairly vague, with CMS stating ASCs must perform QAPI studies but not providing a specific number. The recommendation one typically hears in the industry is that the number is dependent upon facility size. If you work in a smaller ASC with low case volume, there is an expectation that you should perform at least one or two studies annually. Work in a larger ASC with thousands of cases, this figure should fall in the four-to-six studies range.



One reason CMS does not specify a number of studies that an ASC must perform might be that the number should change on an annual basis to reflect activity within the facility. Identify a topic worthy of a study, then do it. Going back to our discussion on the purpose of QAPI, a good program will help you flag issues that might be affecting your ASC, which should prompt you to investigate those issues further and then, if necessary, make improvements.

Surveyors—whether from CMS or the accreditation organizations, which follow CMS’ methodology for QAPI, albeit with subtle differences and nuances—will be looking to see whether your ASC is using data to identify and resolve those issues.

Why data? It is difficult to confidently state whether there is truly a

problem without evidence, i.e., data, and difficult to claim improvement has been achieved without evidence.

What Goes Awry

On the surface, QAPI seems straightforward, but ASCs can get tripped up in their efforts to perform appropriate, worthwhile studies. One place an ASC could err is to focus on an area not worthy of attention. For example, many people working in the ASC industry will recall when recommendations stating that use of a straight-edged razor was not appropriate for surgical site hair removal were issued. At that time, when some providers were still using straight-edged razors in ASCs, a QAPI study could have looked at the frequency of physicians using such razors and the effectiveness of changing protocol to move away from the razors.

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As time passed, the practice of using straight-edged razors was abandoned industry-wide. Performing a study of straight-edged razor use now would be unnecessary as ASCs have been at 100 percent non-razor use for years. If you achieve such a level, you probably do not need to be measuring it anymore.

Another way an ASC might struggle with QAPI would be by failing to establish an end for a study. Every study should reach a point where it ends, either by achieving the desired goal or determining that the issue that was studied is not actually an issue (more on this shortly). A study should not go on indefinitely.

A third way would be misunderstanding what is acceptable to call a study. For example, your front desk receives multiple complaints from patients claiming they are spending an unreasonable amount of time in your waiting room. This is a good topic for a QAPI study, but what if your data shows that no one is typically waiting more than 10 minutes? Your examination has shown that what was believed to be a possible problem is not a problem. ASCs are sometimes hesitant to present this process and conclusion as a study, but it is acceptable as it meets the quality assurance component of QAPI.

A final way ASCs can miss the mark is believing that the topic for a study performed by another ASC is an appropriate topic for themselves. Just because another ASC is experiencing an issue worthy of attention—and a study—does not mean your ASC is experiencing the same issue. With that said, there is no harm in starting to track the subject to determine whether you might have a similar problem and, thus, an issue worthy of study.

Leveraging Data

Despite vague requirements and several ways QAPI studies could come up short, QAPI can still be simpler than many people realize.



“Analyzing data is not just for identifying problems. It also is for determining whether your improvement efforts are accomplishing what was intended.”

—Daren Smith, Surgical Information Systems

What data are you tracking already?

Every ASC should conduct patient satisfaction surveys. What are they telling you? What possible problems are patients noting? If you conduct physician satisfaction surveys, what are those telling you? What about staff surveys? What is the information they are showing you?

Then, there is the data collected for routine evaluations of your ASC's operations where you are gathering clinical, operational and financial values. The purpose of tracking these areas is to identify trends, both good and bad. There also are likely opportunities in the data you document and share for state and federal reporting. Can you use that data to identify possible problem areas?

How do you know what areas to focus on? Try to conduct a variety of studies. One approach to consider is concentrating studies in four areas: patient satisfaction, physician satisfaction, financial gain and clinical outcome. Rotate through these areas with a mindset that none of your ASC's departments will escape scrutiny. This will help ensure you do not focus on just one or two areas and can work to achieve significant improvements that will touch all aspects of your operations.

Make the identification and analysis process easier by ensuring data is presented in a format that is simple to read and understand. A graphical format can help you quickly identify possible concerning trends that you can drill down into further to solidify theories about the reason(s) for the trends.

Keep Your Eyes on the Prize

As previously stated, analyzing data is not just for identifying problems. It also is for determining whether your improvement efforts are accomplishing what was intended. If the data indicates they are not, determine whether there are other ways to achieve the desired changes to the data set.

Assuming you achieve improvements, you need to determine when you will consider the problem solved, which will dictate how long to continue studying the problem.

Recognize that in some instances, changes you try might fail to ever move the needle the way you hoped. It is possible that impacting the data might be out of your control. If you suspect that undertaking additional efforts would prove just as futile, examine your data to find a new study topic worthy of attention and one that might be more likely to deliver on the great promise of QAPI. ‹‹

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