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Primary Care and the Perioperative Surgical Home

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Primary Care and the Perioperative Surgical Home

**AIMS**
Describe the perioperative surgical home model and its relationship to primary care and the Patient-Centered Medical Home (PCMH)
- Identify primary care providers' perceptions and needs around transitions in care during a surgical episode
- Identify lessons learned and interventions to improve coordination of care across the surgical and primary care teams
  - Intervention
  - Data Collection
  - Analysis

**BACKGROUND**
- A Perioperative Surgical Home (PSH) is a patient-centered, physician-led, multidisciplinary, and team-based system of coordinated care for surgical patients
- The PSH coordinates care and transitions from the decision to operate through the intraoperative course and return to primary care, using the anesthesiologist to coordinate care
- The PSH model has been developed using the guiding principles of the PCMH, which focuses on coordinated care in the primary care practice

**PILOT PROGRAM**
UMass Memorial Health Care (UHHMC) PSH Pilot

**Outcomes**
- Prevention of complications
- Increased operational effectiveness
- Patient satisfaction increased
- Staff satisfaction increased
- Increased coordination of care
- Decreased length of stay

**Primary Drivers**
- Clinical Intervention for QI
- Systems Improvement
- Patient-Centered Care
- Engaged Leadership

**Secondary Drivers**
- Discharge planner and schedule follow-up appointments with PCP and specialists
- Prepare for visits
- Coordinate among and between teams
- Leverage EMR
- Family and patient education for self-management
- Respond to family issues
- Shared decision-making in all teams
- Identify possible surgical complications
- Use data transparently
- Set the direction and maintain interest in PSH
- Plan for sustainability and spread
- Align policy and procedure

**RESULTS SUMMARY**
Concise, useful communication about mutual patients is important to PCPs
- No need for immediate follow-up appointments with PCPs unless necessary; suggest appointments 2–4 weeks post-discharge
- Defining roles of PCP and surgeon is important

**QUALITY IMPROVEMENT INTERVENTIONS:**
- **Communication**
  - Pre-operative: PCP is notified about patient’s upcoming surgery
  - Post-operative: Discharge note sent to PCP
- **Patient Education**
  - Provided at pre-op and post-op
  - Patient packet created so patient can carry materials throughout PSH stages
  - Calls from Urology Department at 2 and 30 days post-discharge to identify patients’ issues and answer questions
- **Follow-up Appointments**
  - Prior to discharge, PCP follow-up appointments are made for 2 weeks after discharge

**NEXT STEPS**
- New survey will be sent to PCPs who have patients involved in the pilot
- Questions will be more focused, based on findings from this initial survey
- Continue interventions and measure changes over time
- Add PCP involvement in the Pilot Steering Committee

**PRIMARY CARE PHYSICIAN SURVEY**
Objective:
Primary care physicians (PCP) were surveyed to understand how the surgical teams can better coordinate care with primary care

**Methods:**
- Email request to UMMHC primary care physicians to complete a survey on Survey Monkey
- 38 Primary Care Clinicians completed the survey
- Responses were aggregated, analyzed and shared with the PSH Pilot Team

**Survey Question #1:**
What is the current level of communication in perioperative care with you, specifically in regard to pre-operative and post-operative communication about your patient’s planned surgery and the outcome of the surgery?

**Survey Question #2:**
What would be the best way to communicate information to you about your patient’s surgery and outcome?

**Survey Question #3:**
How would you like to see your patients after major urologic surgery?

**Survey Question #4:**
Within a week
- 5.56% 2
- Within 2 weeks
- 22.22% 8
- 2–4 weeks after surgery
- 50% 18
- Total
- 36
- Comments:
  - "It is very useful to have a contact person available for the PCP.
  - "It is very helpful to have a designated point of contact.

**Survey Question #5:**
As part of the Perioperative Surgical Home, pre-operative communication will be streamlined and post-operative communication and appointments will be established before discharge from the hospital. How valuable do you think this will be toward maintaining continuity of care?

**Survey Question #6:**
When you prefer to see your patients after major urologic surgery?

**Survey Question #7:**
What would be the best way to communicate information to you about your patient’s surgery and outcome?

**Survey Question #8:**
As part of the Perioperative Surgical Home, pre-operative communication will be streamlined and post-operative communication and appointments will be established before discharge from the hospital. How valuable do you think this will be toward maintaining continuity of care?

**Survey Question #9:**
What is the current level of communication in perioperative care with you, specifically in regard to pre-operative and post-operative communication about your patient’s planned surgery and the outcome of the surgery?

**Survey Question #10:**
What would be the best way to communicate information to you about your patient’s surgery and outcome?