Patient Care and Quality Improvement Initiatives

The maintenance of high quality cardiac surgery outcomes will begin with appropriate patient selection and the performance of the correct surgical procedure in a safe and timely manner. The selection of patients and operative procedures will be done in a manner consistent with good clinical practice based upon AHA/ACC guidelines as well as the usual and customary practice employed at the JHU Division of Cardiac Surgery. Post -operative management will be based upon established protocols and pathways in place at JHU.

The approach to Quality Improvement Initiatives will be multi-faceted and will be done in conjunction with those at Johns Hopkins Hospital.

AAMC cardiac surgery program will participate in the Society of Thoracic Surgeons (STS) database. The program will have its own unique program identification. There will be a single individual responsible for the collection and submission of data hired by AAMC and JHU with protocols already in place at JHU. Quarterly and annual reports will be reviewed by the AAMC Cardiac Surgery Advisory committee independently and in conjunction with the leadership of JHU on an annual basis.

AAMC cardiac surgery program will participate in the Maryland Cardiac Surgery Quality Initiative (MCSQI). This is a collaborative statewide program begun independently in 2014 by the Cardiac Surgery programs in the State of Maryland. The goal of the program is to share data amongst all of the programs in the state to identify best practices and help all programs in the state of Maryland to achieve the highest quality outcomes in a cost effective fashion. It is based on similar effective statewide programs in Virginia and Michigan. Meetings and conference calls occur monthly and on an ad hoc basis to discuss ongoing projects along with an annual meeting to discuss organizational strategies and priorities.

Bi-weekly cardiac surgery Morbidity and Mortality (M&M) conferences will be held at AAMC to discuss cardiac surgery cases amongst AAMC stakeholders. The cardiac surgery program will participate in the larger Department of Surgery M&M program at AAMC. A separate monthly joint M M&M conferences will be held with the Cardiac Surgery program at JHU. A detailed Phase of Mortality analysis will be performed for all deaths.

A bi-weekly quality improvement program meeting will be held on alternate weeks from the M&M conference with AAMC stakeholders. AAMC specific considerations will be addressed. In addition, joint QI projects will be coordinated with JHU to address larger issues in common with both JHU sites to review and establish joint protocols. Appendix A includes recent and ongoing QI initiatives at JHU.

Additional topics to be discussed at the QI meetings will include review of costs to help assure value of the AAMC cardiac surgery program, patient flow to help insure patient satisfaction and adequacy of patient and referring physician communication.

Patient education will begin at the initial consultation for elective patients where materials specific to the disease and its surgical and non-surgical treatment options will be provided. This information will also be available at the AAMC cardiac Surgery website. Patients and their family will meet with patient service coordinators who will do pre-operative teaching and help set reasonable expectations for post-operative care, discharge and follow up. All patients will receive an AAMC cardiac surgery patient wrist bracelet which they will wear until released form follow up care. These bracelets will contain routine and emergency program contact information to enable efficient and clear communication.