



# Case Study: Metrics

## Hospital Information

**Ascension All Saints Hospital**  
Racine, Wisconsin

- 8,500 surgical procedures annually
- 60,000 ED visits

## TeamHealth Services

**Anesthesia**

## Results

- 78% reduction in total doses of opioids used in the post-operative period
- 1 day reduction in length of stay and 1 day reduction in time to ambulation among colorectal surgery patients
- 77% reduction in pain medication within first 12 hours post-op among hip fracture patients



TeamHealth brought the expertise and leadership necessary to achieve fast and dramatic improvements in our surgical data. We are excited to continue improving our surgical processes and results through the perioperative surgical home model.

**Mary Ouimet, DNP, RN**

*Senior Vice President and Chief Nursing Officer*

**TEAMHealth**

## Challenge

In 2014 Ascension All Saints Hospital conducted a review of its surgical data, revealing a number of challenges. The hospital was facing declining surgical volumes, mediocre patient satisfaction scores for ambulatory and inpatient surgery, too many canceled and delayed surgical cases and higher-than-expected lengths of stay for joint replacement and colon surgeries (1.2 days).

## Solution

The hospital worked with TeamHealth to adopt a new model of surgical care, called the perioperative surgical home (PSH). Through this model, TeamHealth helped All Saints implement new protocols and standardized care pathways designed to enhance outcomes and reduce costs by increasing multi-disciplinary clinician coordination and expediting treatment and recovery.

Specifically, TeamHealth and All Saints implemented an “Enhanced Recovery After Surgery” protocol for colorectal surgery patients. The ERAS approach focuses on patient optimization before surgery and is driven by evidence-based care pathways and protocols that require collaboration between anesthesiologists, surgeons and the entire care team with the goal of helping surgical patients recover more quickly, shortening their length of stay and reducing pain. In addition, they targeted patients with hip fractures using a “Rapid Hip” protocol. Through Rapid Hip, emergency department, hospital medicine, orthopedic and anesthesia teams coordinate as soon as hip fracture patients present to the hospital in order to get patients to surgery within 24 hours to speed recovery and improve pain control.

## Results

Through ERAS, colorectal surgery patients experienced:

- 78% reduction in total doses of opioids used in the post-operative period
- 50% reduction in post-operative pain scores for first two days after surgery (2.6 vs. 3.9)
- 1 day reduction in length of stay (3.3 vs. 4.1)
- 1 day reduction in time to ambulation (0.9 vs. 1.8)

Similarly, results in the hip fracture population included:

- 77% reduction in pain medication administration (narcotic and non-narcotic) within first 12 hours post operatively (36 vs. 156)
- 51% reduction in post-operative pain scores within first 12 hours after surgery (3.3 vs. 6.53)