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Georgia Quality Improvement Program & NSQIP Collaborative Update

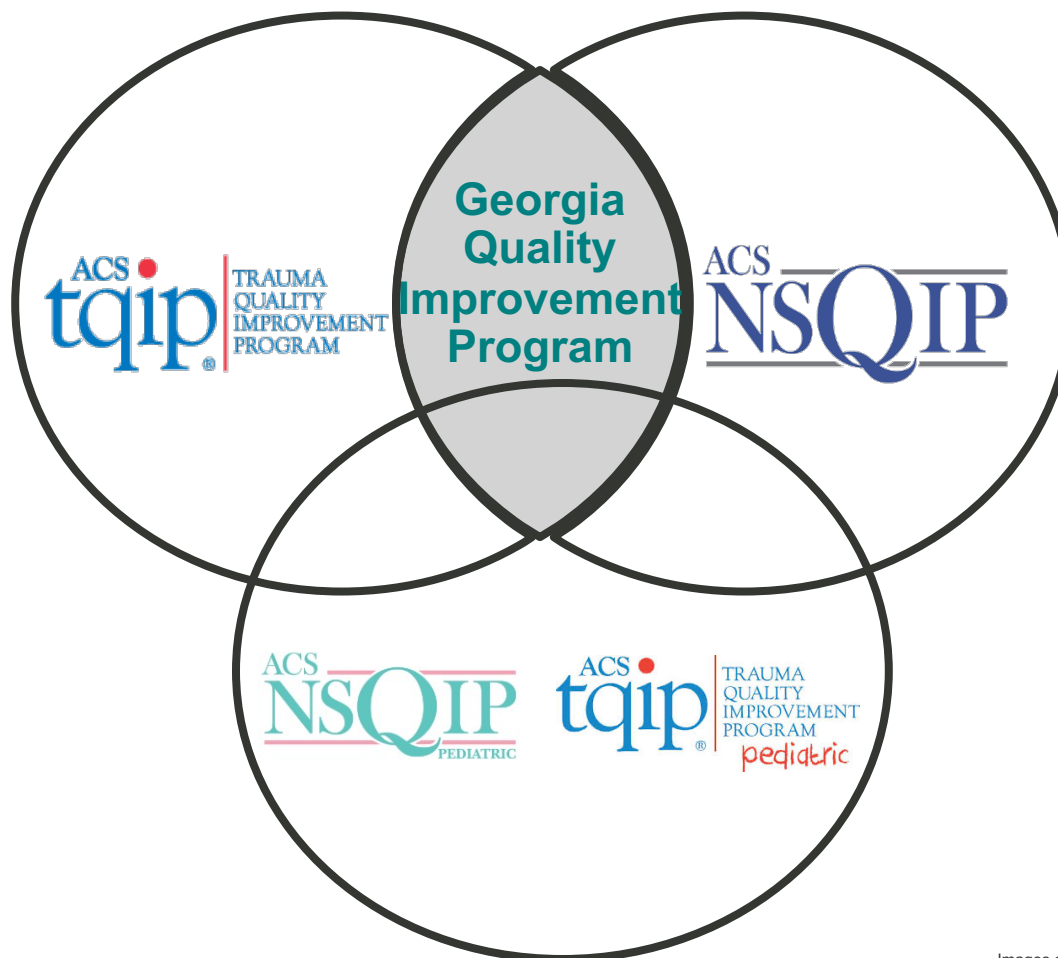
Joe Sharma, MD, FACS, FACE

GQIP Chair

August, 2022



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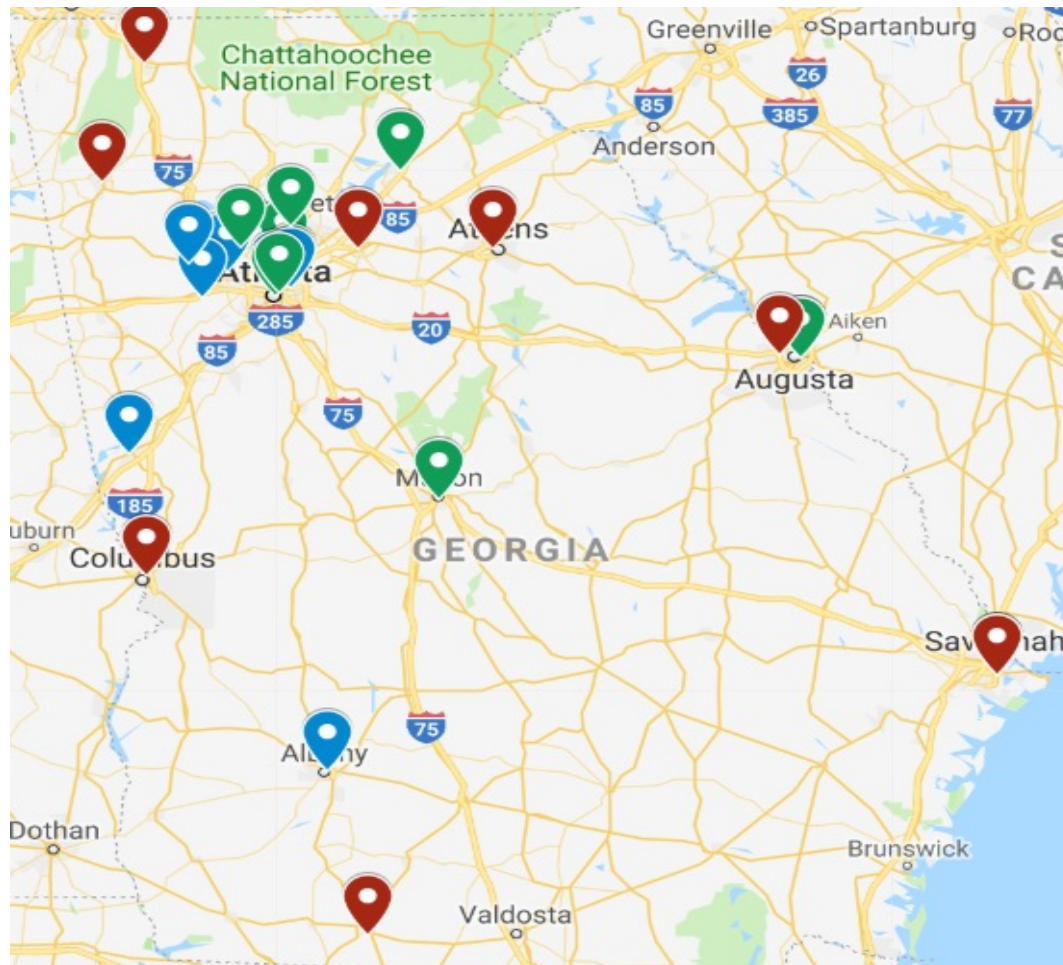
Images obtained from the American College of Surgeons

TQIP & NSQIP Centers



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TQIP Only	NSQIP Only	TQIP & NSQIP
Archbold	Eisenhower Army	Atrium Navicent
Piedmont Columbus	Emory Johns Creek	Augusta University
Northeast Georgia	Emory St. Joseph's	Grady
Northside Gwinnett	Emory University	Hamilton
Piedmont Athens	Emory Midtown	Wellstar AMC
Piedmont Walton	Martin Army	Wellstar Cobb
Crisp	Northside Hospital-Atlanta	Wellstar Paulding
Doctors Hospital	Phoebe Putney	Wellstar Kennestone
Memorial Health	Wellstar Douglas	Wellstar North Fulton
Atrium Floyd	Wellstar Spaulding	Winn Army
Redmond	West Georgia	Hamilton
Fairview Park		
Piedmont Cartersville		



- **Red** marker = TQIP participating center only
- **Blue** marker = NSQIP participating center only
- **Green** marker = NSQIP and TQIP participating center

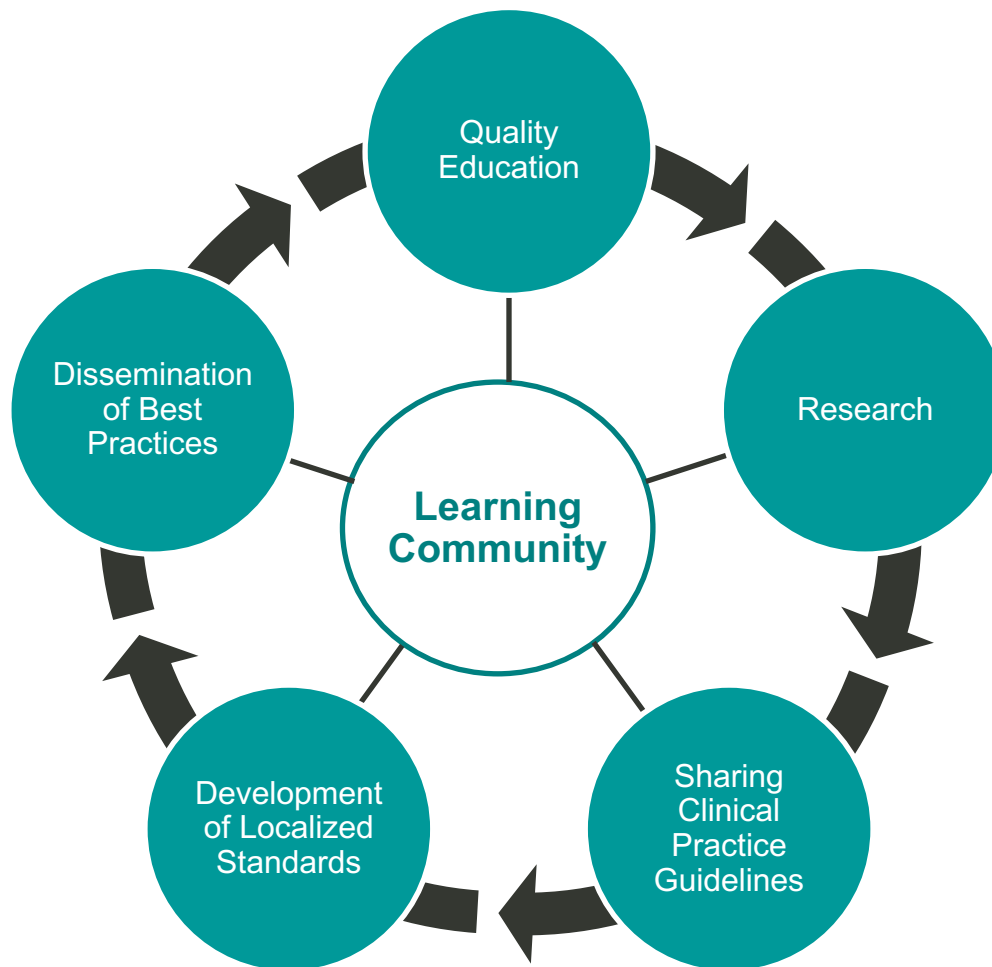


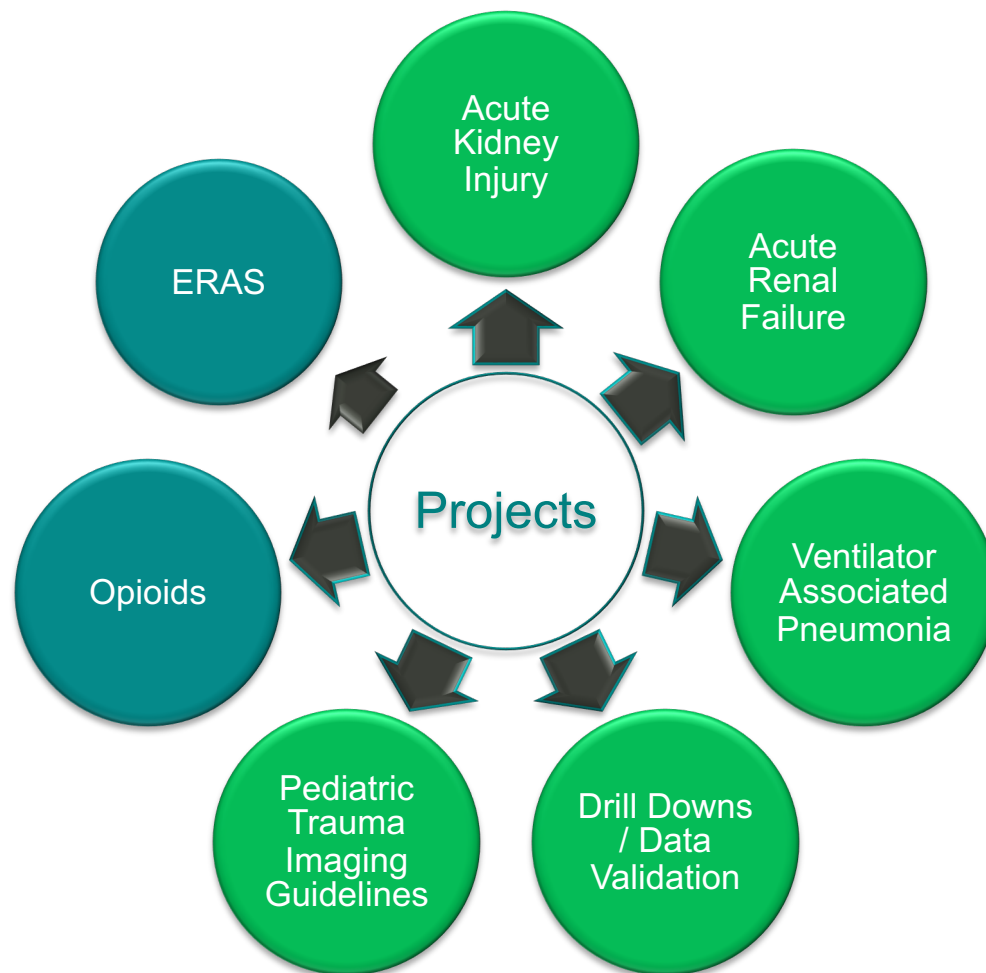
Vision

- Transparent, collaborative, supportive, non-punitive culture.
- Forum to share knowledge and best practices.
- Continually improve quality of care and prevent complications.

Goals

- Use available risk-adjusted clinical datasets
 - Maximize the exchange of information, quality improvement strategies, and best practices.
 - Participate in outreach to educate providers and the public on patient safety and quality improvement.
-







- Flagship project- opportunities in general surgery and trauma
 - Collection of common variables additional to NSQIP and TQIP
 - Important state-wide view of this complication across populations
 - Predictive tools and protective bundles (individually and joint)
-



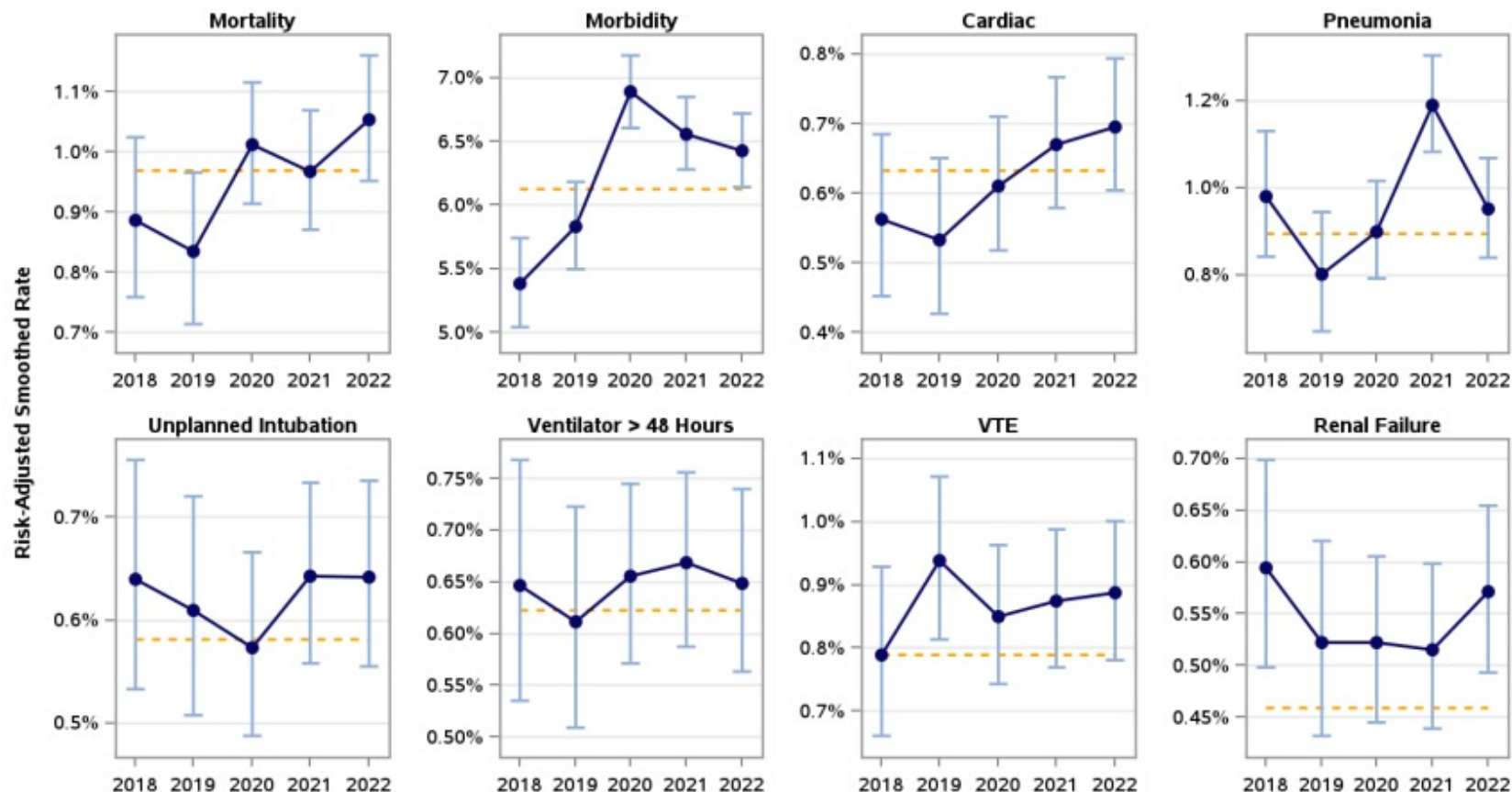
JULY 2022 SAR ACS-NSQIP



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ALL CASES

These graphs depict the risk-adjusted smoothed rates, with confidence intervals, computed for the collaborative over time compared to the NSQIP population rate over time. Each collaborative rate is calculated using 12-months of independent, non-overlapping data.



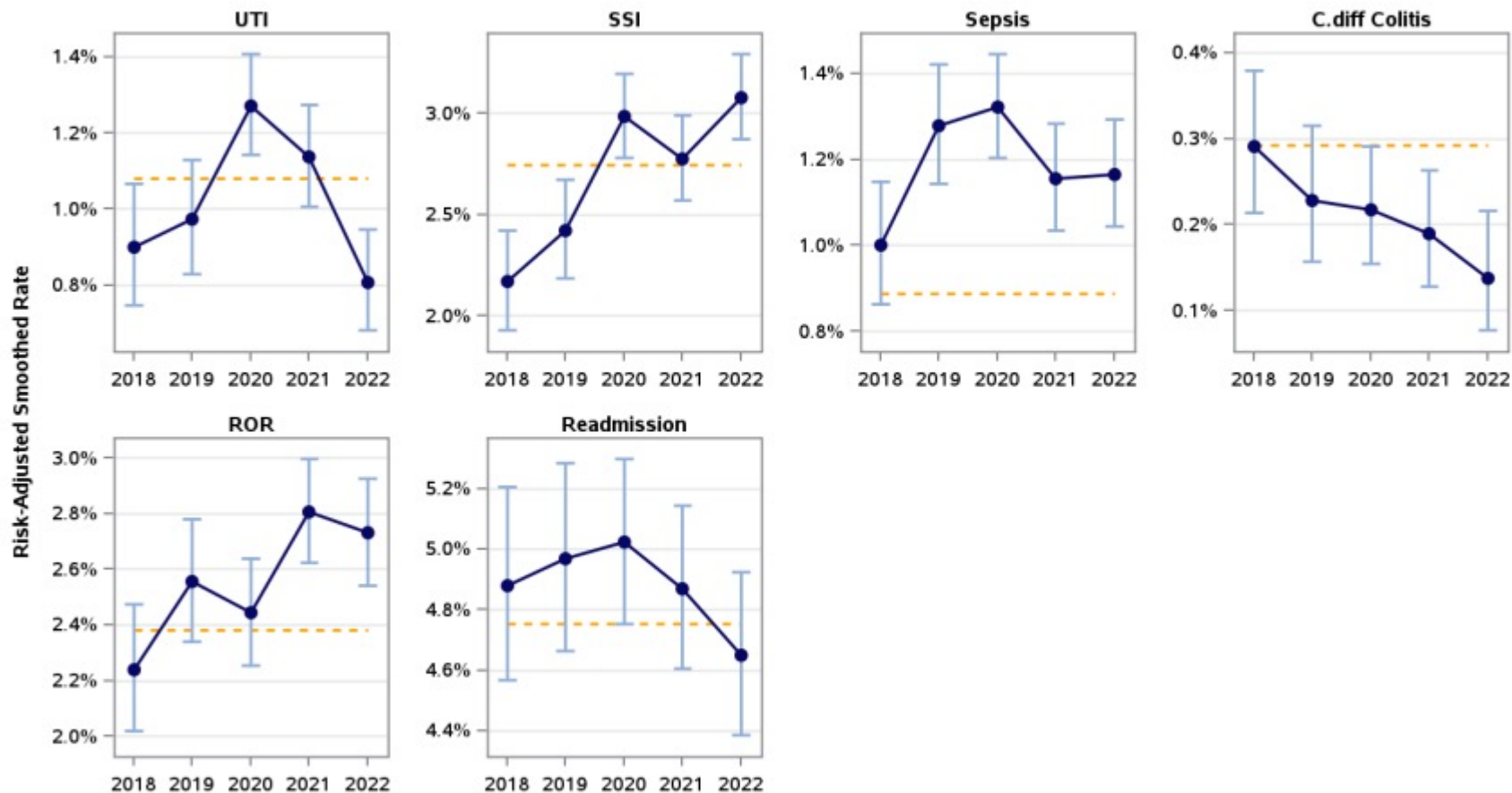
Semi-Annual Report - July

—●— Collaborative
- - - NSQIP Population



ALL CASES

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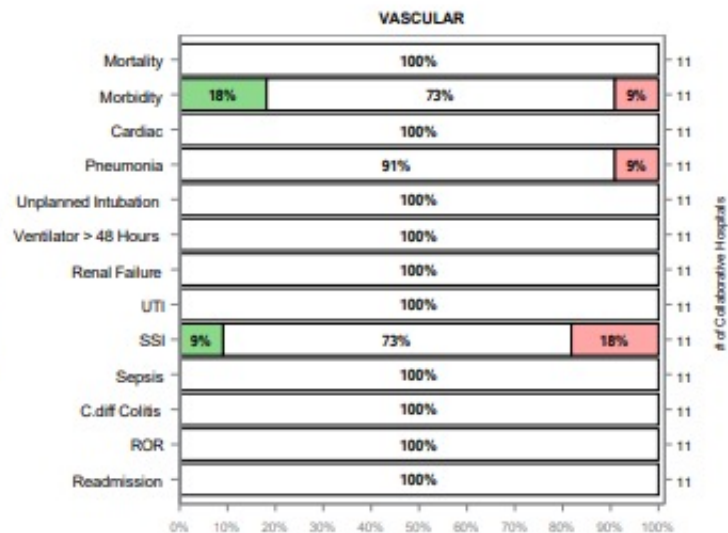
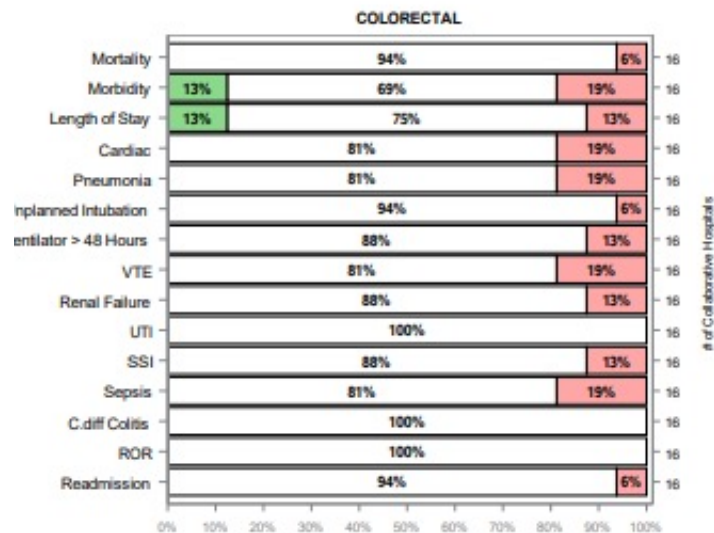
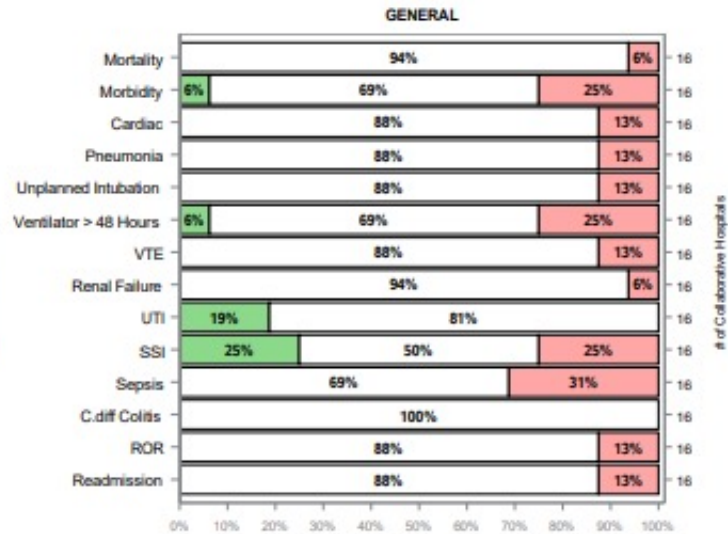
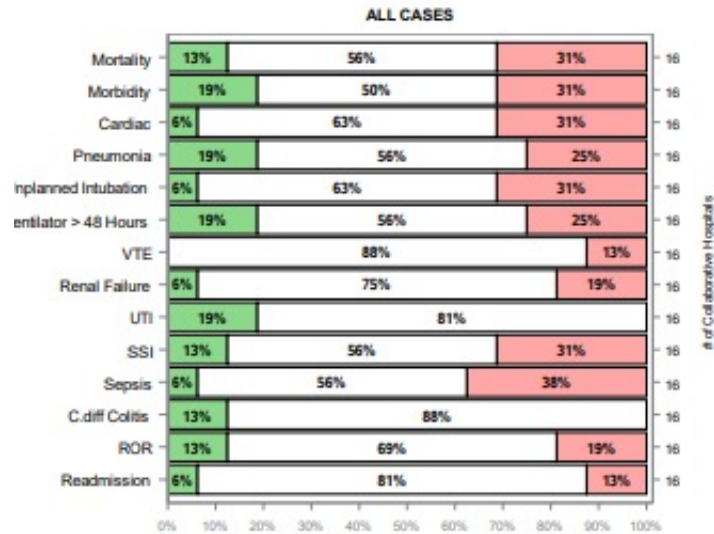


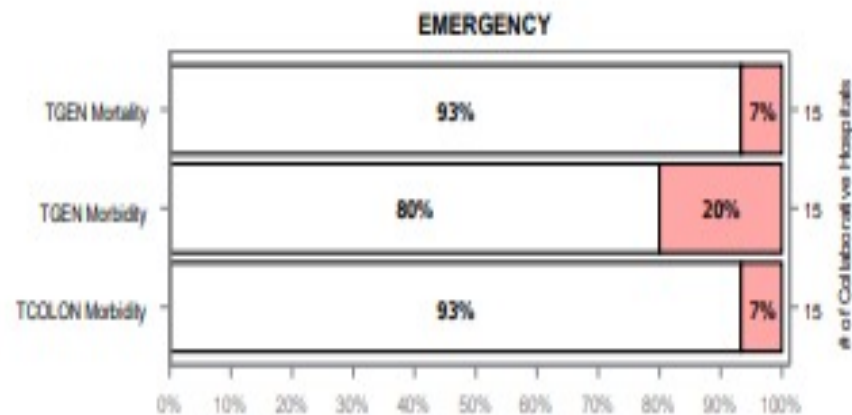
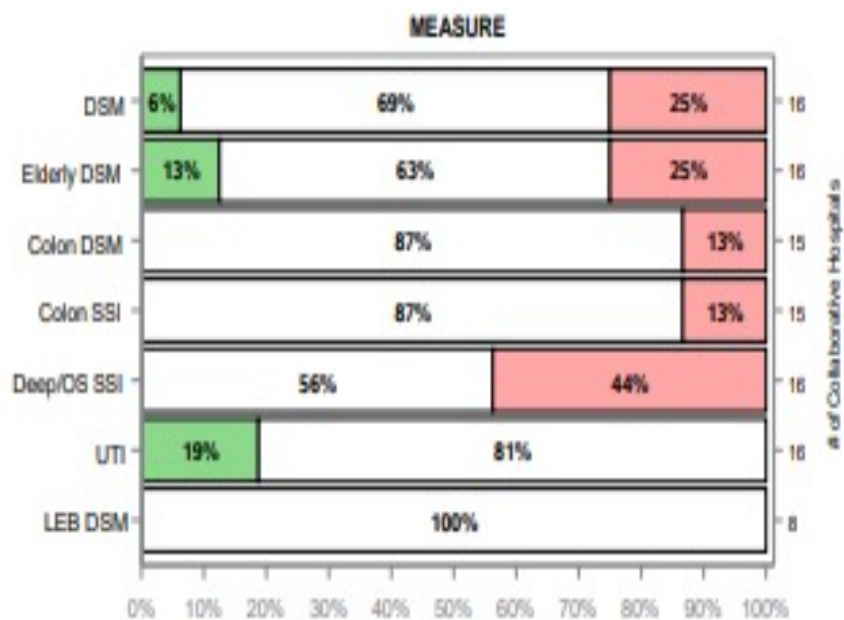
Semi-Annual Report - July

ACS NSQIP
GSQC Collaborative July 2022 SAR Performance Dashboard
Surgery Dates January 1, 2021 to December 31, 2021



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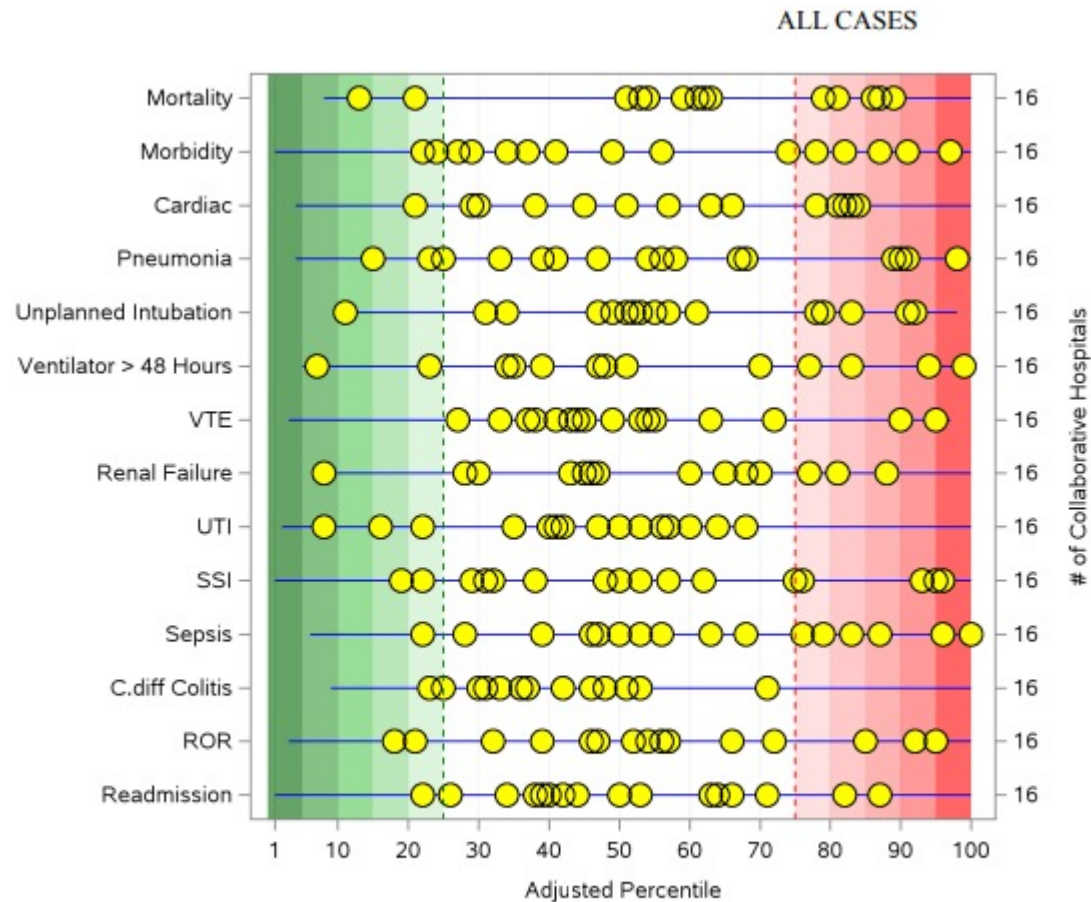




All case Outcomes GQIP



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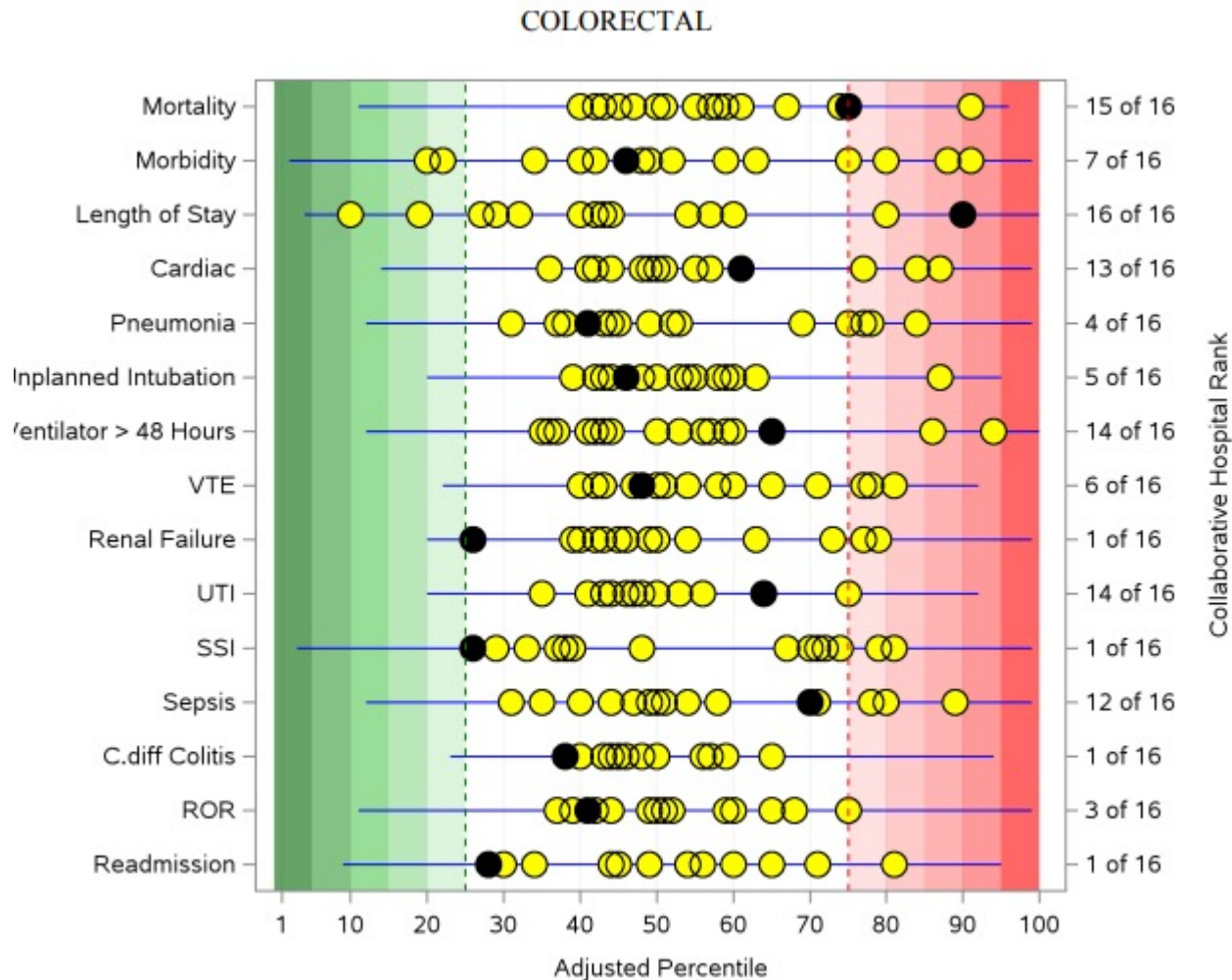


Lower values are indicative of better performance, while higher values warrant review for improvement.

COLORECTAL @hospital X



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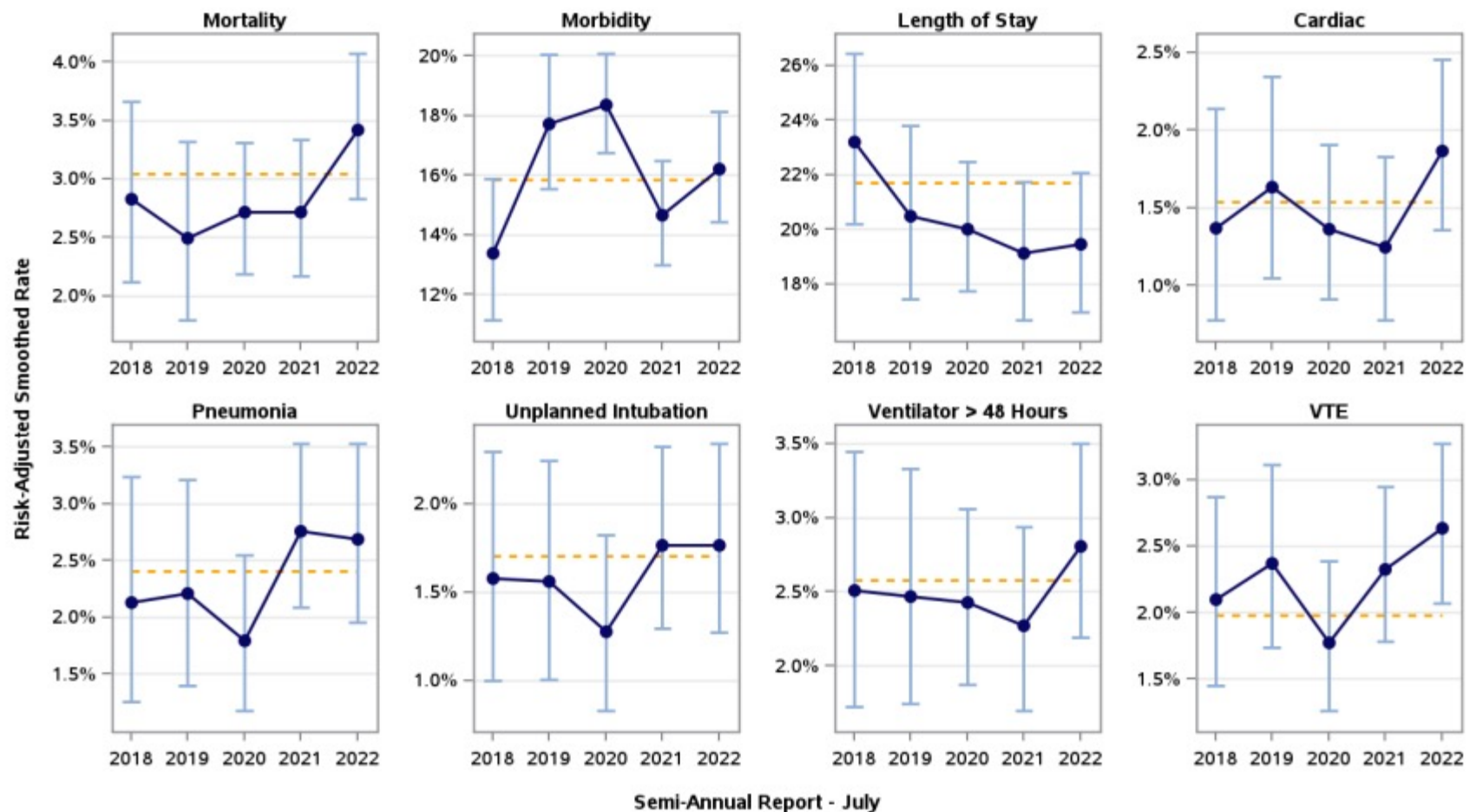
COLORECTAL GQIP (ERAS)



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COLORECTAL

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Semi-Annual Report - July

—●— Collaborative
- - - NSQIP Population

COLORECTAL ERAS

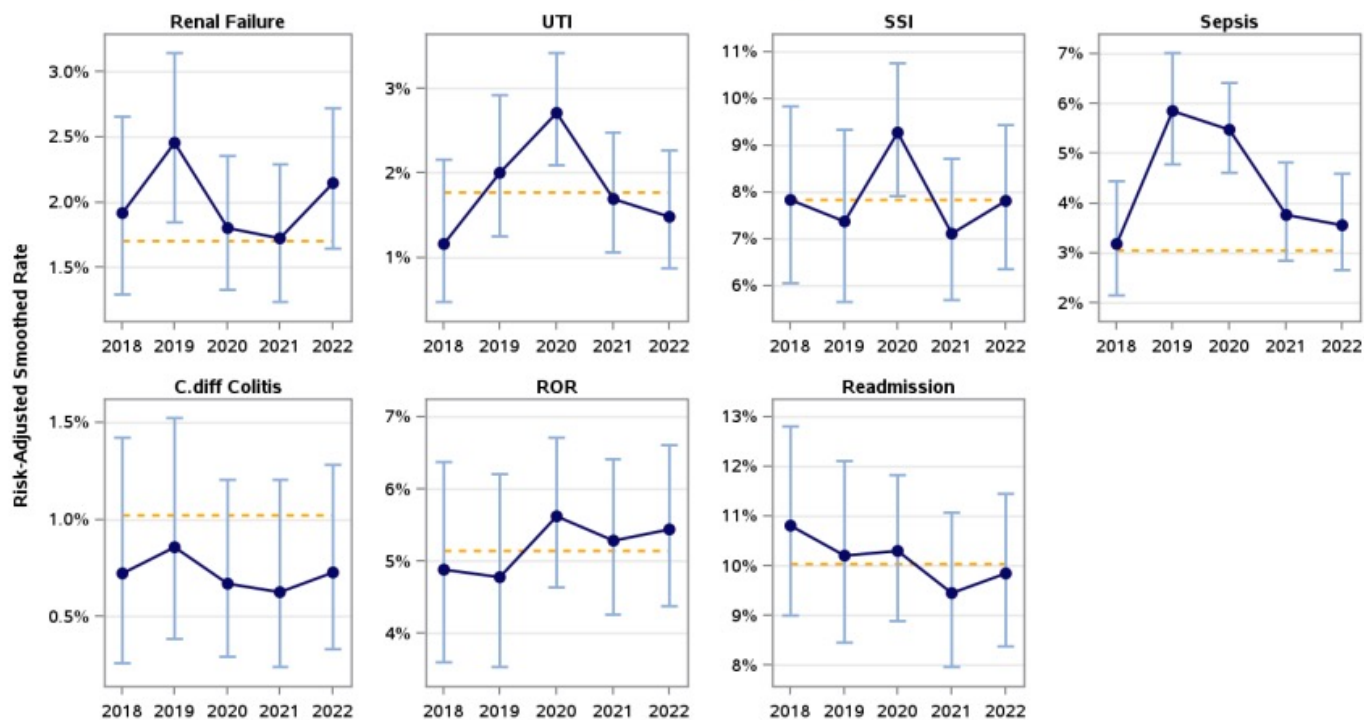


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ACS NSQIP GSQC Collaborative Over Time Summary

COLORECTAL

These graphs depict the risk-adjusted smoothed rates, with confidence intervals, computed for the collaborative over time compared to the NSQIP population rate over time. Each collaborative rate is calculated using 12-months of independent, non-overlapping data.



Semi-Annual Report - July

—●— Collaborative
- - - NSQIP Population

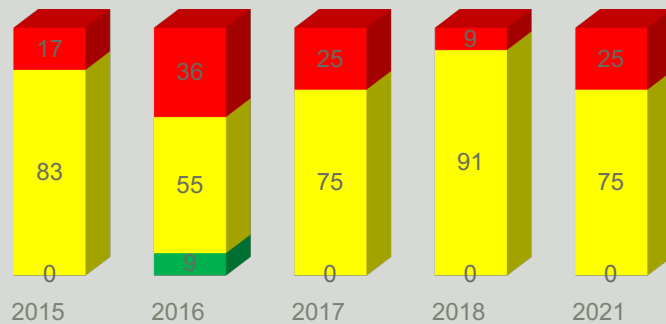
Value of QI (ERAS/W.I.P.P.)



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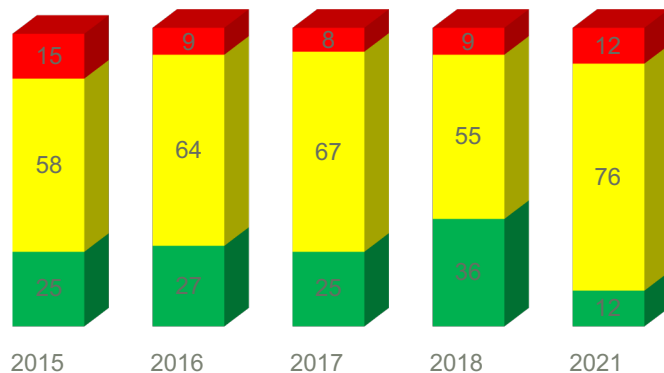
COLO Pneumonia

■ Exemplary ■ As-expected ■ Needs Improvement



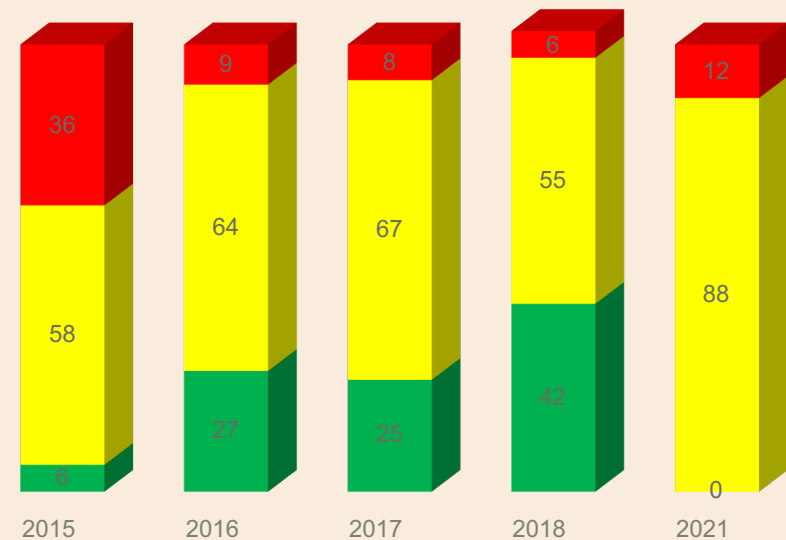
COLO LOS

■ Exemplary ■ As-expected ■ Needs Improvement



COLO SSI

■ Exemplary ■ As-expected ■ Needs Improvement





Complication	Number Avoided	Cost without a complication	Cost with complication	Diff	Cost Savings in Resource
Pneumonia	662	18939	49060	30121	\$19,940,102
UTI	233	19048	27166	8118	\$1,891,494
Superficial SSI	143	18851	28180	9329	\$1,334,047
Deep SSI	0	19178	32973	13795	\$0
Organ Space SSI	0	18990	35477	16487	\$0
Sepsis	272	18499	45361	26862	\$7,306,464
PE	0	19215	31405	12190	\$0
Readmission	0			11300	\$0
				TOTAL	\$30,472,107

TOTALS	
2014	18899
2015	21393
2016	18956
2017	17458
2018	15250
Total Pts 2014-2018	91956

Essentials of a Collaborative



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Resources

- Common Data Registry
- Leadership
- Culture
- Infrastructure
- Engaged Clinicians

Education/Training

- Guideline/Best Practices dissemination
- Training for QI

Key considerations

- Payor
- Benchmarks
- Bandwidth
 - Support staff
 - Research Scholars

ACS BOG Report



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Board of Governors
American College of Surgeons

By Oscar D. Guillamondegui, MD, MPH, FACS

As Secretary of the Board of Governors (BoG), along with Chair Danielle Walsh and Vice Chair Ross Goldberg, I was privileged to attend the BoR meetings on June 10-11, 2022. Below is a summary of the Top 10 items discussed during the meeting. We encourage you to share this report with your Chapter or Society.

JUNE 2022 BOARD OF REGENTS MEETING **TOP 10 LIST**

- 1) The **2022 Quality & Safety Conference** was held July 15-18 in Chicago. [Highlights](#) included sessions on Improving Surgical Outcomes for Older Adults, Leadership Pearls, Quality Care is Equitable Care, and Why Is Standardization So Difficult? During the Conference the College announced the first 25 ACS Quality Verification Program (QVP) hospitals that have met the standards defined in the Optimal Resources for Surgical Quality and Safety 2021 ACS QVP Standards. 100-year anniversary celebrations also continued for the ACS Committee on Trauma and ACS Commission on Cancer.



“Quality is not an act, it is a habit.” – **Aristotle**