How to Choose a Surgeon

Larry H. Hollier, Jr., MD
Chief, Plastic Surgery
S. Baron Hardy Chair in Plastic Surgery
Texas Children’s Hospital
Professor and Chief, Division of Plastic Surgery
Baylor College of Medicine

Outcomes
That which is not measured cannot be managed or improved.
Outcomes

• What are the necessary elements to achieve outcomes?
• What is measured?
• What type of results can be achieved?

What does it take to deliver good outcomes?
Total Surgical Cases by Academic Year

- PFW
- WC
- TMC

Growth in Texas Children’s Surgeons

- 2006: 32
- 2007: 34
- 2008: 36
- 2009: 38
- 2010: 41
- 2011: 50
- 2012: 59
- 2013: 69
- 2014: 79
- 2015: 83
- 2016: 92
**APP Program Growth**

- **Number of APPs**
  - 2011: 9
  - 2012: 21
  - 2013: 46
  - 2014: 52
  - 2015: 63
  - 2016: 80

---

**Anesthesia**
Nursing Skill
What to measure?

“Quality”
From The Patient’s Perspective

Data Driven
(EMR, TCH IDS/TCP, Outcomes Service, Data Specialists, Statisticians)

Team
Everyone Is On It
Physicians, Nurses, Administrators Staff

Affordable
(Value)

Visible
(Obvious To All)

Culture and Commitment

Patient Experience

Transparent

Humble
(Capable of Self-analysis)

Understandable
(Format, Language, e.g., Spanish)

Execution – Facilitating Durable Change – Who?
Answering Parents’ Questions

• Will my child ever look “normal”?  
  − We have no data on how many children are viewed as “normal” looking by the general public  
  − We also don’t know what percentage of children and their parents feel that they look “normal”

• How many surgeries will my child need?  
  − We don’t have this broken down by cleft type and severity

• How will my child do in school? If they have sleep apnea? If they need time off for multiple surgeries? If they have speech difficulties?  
  − We currently don’t know how our speech scores correlate with social and school functioning and performance

• How will my child feel about themselves? What are the risks for depression? Will they be bullied? How do we best deal with that as a family, and with the school?
Quality of Life Components

Case Study 1

124 adolescents patients with cleft lip and palate enrolled in a quality of life study - 33% meet the threshold for a referral to psychology for depression and other psychosocial support needs.

Response

Initial Study

124 adolescents patients with cleft lip and palate enrolled in a quality of life study

Response

Started Camp
Keep Smiling
I’ve never seen my child smile as much as she did at camp
Created first parent support group

Ongoing efforts

Over 2,500 previous patients have been entered into a longitudinal study database

Over 2,500 previous patients have been entered into a longitudinal study database
What Type of Results Can Be Achieved?

Time Process Map for Appendectomy Patients

Appendectomy Same-Day Discharge Protocol

- Implemented in several institutions to decrease LOS, hospital resource utilization and increase patient satisfaction
- Appendicitis patients (age 4-18) with intraoperative diagnosis of simple appendicitis
- Strict inclusion and exclusion criteria
Appendectomy Same-Day Discharge Protocol

Exclusion Criteria

Pre-operative Exclusion
- Complex appendicitis
- Pre-existing medical conditions
- Social indications
- Late operation

Post-operative Exclusion
- Intraoperative findings of complex appendicitis (gangrenous or perforated)
- Fever
- Hemodynamic instability
- Unable to void
- Unable to tolerate oral intake
- Inadequate pain control
What does it take to measure outcomes?

1 Institutional Support and Oversight

Texas Children’s Hospital Board of Trustees

- Medical Executive Committee
- Professional Practice Evaluation Committee (PPEC) (Surgical Peer Review)
- Surgical Department Executive Committee

Quality Service and Safety Committee of the Board
- Orthopedics
- Neurosurgery
- Otolaryngology
- Plastic Surgery
- General Surgery
- Urology
- Trauma Committee
- Dental
- Ophthalmology
- Medical Executive Committee
- Quality Operations Council
- Quality Service and Safety Council
- Quality Service and Safety Council: Main
- Quality Service and Safety Council: West
- Quality Service and Safety Council: PFW
- Nursing Coordination Council (NCC)
- Texas Children’s Health Plan Quality
- Texas Children’s Pediatric Quality
- Rehab Quality

- OR Committee
- Woodlands Surgery
- Patient Satisfaction
- West Campus
- Medical Executive Committee
- Quality Operations Council
- Quality Operations Council: Main
- Quality Operations Council: West
- Quality Operations Council: PFW
- CHS
- Trauma Committee
- Transport Quality
2 IT Infrastructure

Metadata: EDW Atlas

Security and Auditing

Common, Linkable Vocabulary

FINANCIAL SOURCES
(e.g. EPSI, PeopleSoft)

ADMINISTRATIVE SOURCES
(e.g. API Time Tracking)

EMR SOURCE
(e.g. Epic)

DEPARTMENTAL SOURCES
(e.g. Sunquest)

+25 Evidence Based Cohorts with Basic Metrics

Pregnancy
Appendectomy
Acute Asthma
Cancer Outcomes
Radiology
Labor Productivity
HR Service Desk

Patient Access Data

Human Resources
(e.g. Compensation)

Acute Asthma
Appendectomy
Diabetes-DKA
Acute Asthma
Pregnancy
Acute Asthma
Labor Productivity
HR Service Desk
Measuring Outcomes That Matter

External Accountability

Press Ganey

Best Hospitals

U.S. News & World Report

Honor Roll

American College of Surgeons

Omnibus Per Artem

Fidemove Foredesse
To improve is to change; to be perfect is to change often.

Winston Churchill