

# Learning Collaborative to Advance the Perioperative Surgical Home (PSH)

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## Executive Summary

**Overview:** The American Society of Anesthesiologists invites you to participate in a learning collaborative of provider organizations to advance the Perioperative Surgical Home (PSH) model. The PSH model is a patient-centric, team-based system of coordinated care that guides patients through the entire surgical experience, from the decision to undergo surgery to discharge and beyond, with the goal of providing cost-effective, high quality surgical care and exceptional patient experiences. This will be achieved through shared decision-making and seamless continuity of care for surgical patients.

The PSH Learning Collaborative will bring together a group of leading healthcare organizations from across the country to define the model, pilot the model, and assess whether the model proves superior to conventional perioperative care.

**Timeline:** The projected timeline for the learning collaborative is July 2014 through late spring of 2015. There will be three in-person collaborative meetings, currently scheduled to take place in July 2014, November 2014 and Spring 2015 in the Chicago area. Prior to and in between in-person meetings, a variety of remote learning opportunities will be offered.

**Participation Criteria:** Participation in the learning collaborative will be limited. Organizations interested in participating in the collaborative should complete an application and send a cover letter indicating their desire to participate. Applications will be accepted until May 30, 2014.

**Program Fee:** \$25,000 per participating health care facility.

**Contact:** If you have questions, or are interested in learning more, please contact Celeste Kirschner, PSH Executive, American Society of Anesthesiologists, [c.kirschner@asahq.org](mailto:c.kirschner@asahq.org).

## What is a Learning Collaborative?

The published literature often takes years to become standard practice. However, there are often pockets of excellence that exist and the knowledge is not shared through formal publication, making it nearly impossible for broad based rapid adoption. Collaborative learning is designed to help organizations close that gap by creating a network structure in which interested organizations can learn from each other and recognized experts in the areas for improvement.

The PSH learning collaborative will involve clinical and administrative staff from health care facilities working together to redesign their delivery systems to achieve a better patient-experience of care at lower cost. Participants share best practices across the collaborative to ensure that all members learn from one another to realize rapid improvement gains. Best practice sharing will occur in a number of different ways, including face-to-face educational meetings, resources and materials, and knowledge transfer tools to facilitate communication and distribution of materials. The knowledge will then be applied at the individual organizational level within the framework of well established performance improvement techniques, with a new cycle of knowledge gained that is then shared across the collaborative. With such methodology, providers from various health care organizations leverage collaborative learning to accelerate breakthrough performance improvement. (See figure)

To participate in the learning collaborative, an organization appoints several staff members to a team. Over the course of the collaborative, the teams from various organizations that share common goals meet in learning/working sessions. Collectively, they learn how to improve the performance and accelerate progress. Participants will monitor the quality of care delivered, using both internal measures and external reporting. Because no two organizations will have the same infrastructure or patient population, the objective is to emphasize the development of facility appropriate processes and to share best practices and lessons learned.

Each organization should plan to send three staff members to each in-person meeting (three per year); however, additional staff members from a variety of departments (e.g., Care Management and IT) will be required to dedicate time and resources to the initiative as well.

The figure below illustrates the collaborative methodology and approach.



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## Why Participate?

The PSH Learning Collaborative will bring together a group of leading healthcare organizations from across the country to further define the PSH model and assess whether the model proves superior to conventional perioperative care in the following domains:

- Increased adherence to evidence-informed guidelines and pathways
- Improved quality and safety of perioperative care
- Reduced complication and readmission rates
- Reduced surgical costs and superior value
- Enhanced patient and family experiences

Pending testing and evaluation, the Learning Collaborative will also seek to facilitate the development of innovative payment models to support the new delivery model.

Key benefits of the PSH Learning Collaborative will include: (1) peer-to-peer networking and shared learning opportunities; (2) access to subject matter experts in a variety of areas across the field of population health management; (3) and access to tools and resources to support successful implementation of the PSH model.

Peer-to-peer networking and shared learning opportunities will include:

- In-person collaborative meetings (three during the course of the collaborative)
- Monthly educational webinars
- Bi-weekly committee conference calls
- An interactive online PSH community

Subject matter experts will be available in areas such as:

- Clinical integration
- Care management
- Transitions of care
- Post-acute care
- Payor contracting
- Performance improvement

Tools and resources to support successful implementation will include:

- Educational materials (e.g., case studies, white papers, and literature reviews)
- Implementation resources (e.g., sample job descriptions and contract templates)
- Best practices and lessons learned from early PSH adopters
- Project specific data from the Anesthesia Quality Institute (e.g., NACOR)
- Benchmarks for key metrics to assess performance and drive improvement

## How to Apply

Letters of interest and the completed applications should be submitted to Celeste Kirschner, [c.kirschner@asahq.org](mailto:c.kirschner@asahq.org). If your application is approved, we will notify you by email. A member contract will be sent that details the terms of participation in the learning collaborative.