

ACS NSQIP® Partners with Johns Hopkins and Dr. Peter Pronovost to Develop Surgical CUSP Program



Johns Hopkins University and the American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP®) are partnering to develop, implement and evaluate a program to improve surgical patient outcomes and prevent complications based on the successful Comprehensive Unit-Based Safety Program (CUSP).

Funded by a contract from the Agency for Healthcare Research and Quality (AHRQ), this unique program brings learnings from CUSP to a new level by incorporating clinical, risk-adjusted, 30-day outcomes data from ACS NSQIP.

ACS NSQIP provides the best possible metrics for measuring outcomes and improvements in the program, which will focus on implementing evidence-based protocols to prevent complications, improving teamwork, and understanding process to implement and sustain organization changes. The goal is to develop an educational toolkit that can be used nationally to improve surgical care.

The program will focus on IMPLEMENTING evidence-based protocols, IMPROVING teamwork and SUSTAINING organizational change.

CUSP was developed in 2001 at Johns Hopkins University to improve the culture of safety in intensive care units. CUSP focuses on educating and improving awareness of patient safety and quality of care, empowering staff to take charge to improve safety, building partnerships between units and hospital administration to improve organizational culture, and providing tools to investigate and learn from mistakes.

Many of the important learnings from the CUSP program will be used in developing Surgical CUSP. Initially, participating hospitals will use Surgical CUSP tools to improve colectomy outcomes and prevent surgical site infections (SSI). In the future, the team's goal is to expand the program into other surgical procedures and address other complications/outcomes.

ACS NSQIP Hospitals will work together to implement specific quality improvement initiatives, including a recognized teamwork program developed by the Department of Defense and AHRQ, and a modified version of the World Health Organization's (WHO) surgical checklist. The program has been expanded nationally and all ACS NSQIP participating hospitals are encouraged to enroll.

ACS NSQIP hospitals will have a distinct advantage in measuring outcomes and driving improvement based on clinical, risk-adjusted data.

The program's principal investigators are Dr. Peter Pronovost, Johns Hopkins University, and Dr. Clifford Ko, American College of Surgeons.

Watch for more information in the coming months. For questions, contact:

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Phased Rollout of Surgical CUSP

INITIAL PHASE: 100 ACS NSQIP participating hospitals – 10 in 10 states

CURRENT PHASE: Enrollment open to all ACS NSQIP Hospitals



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