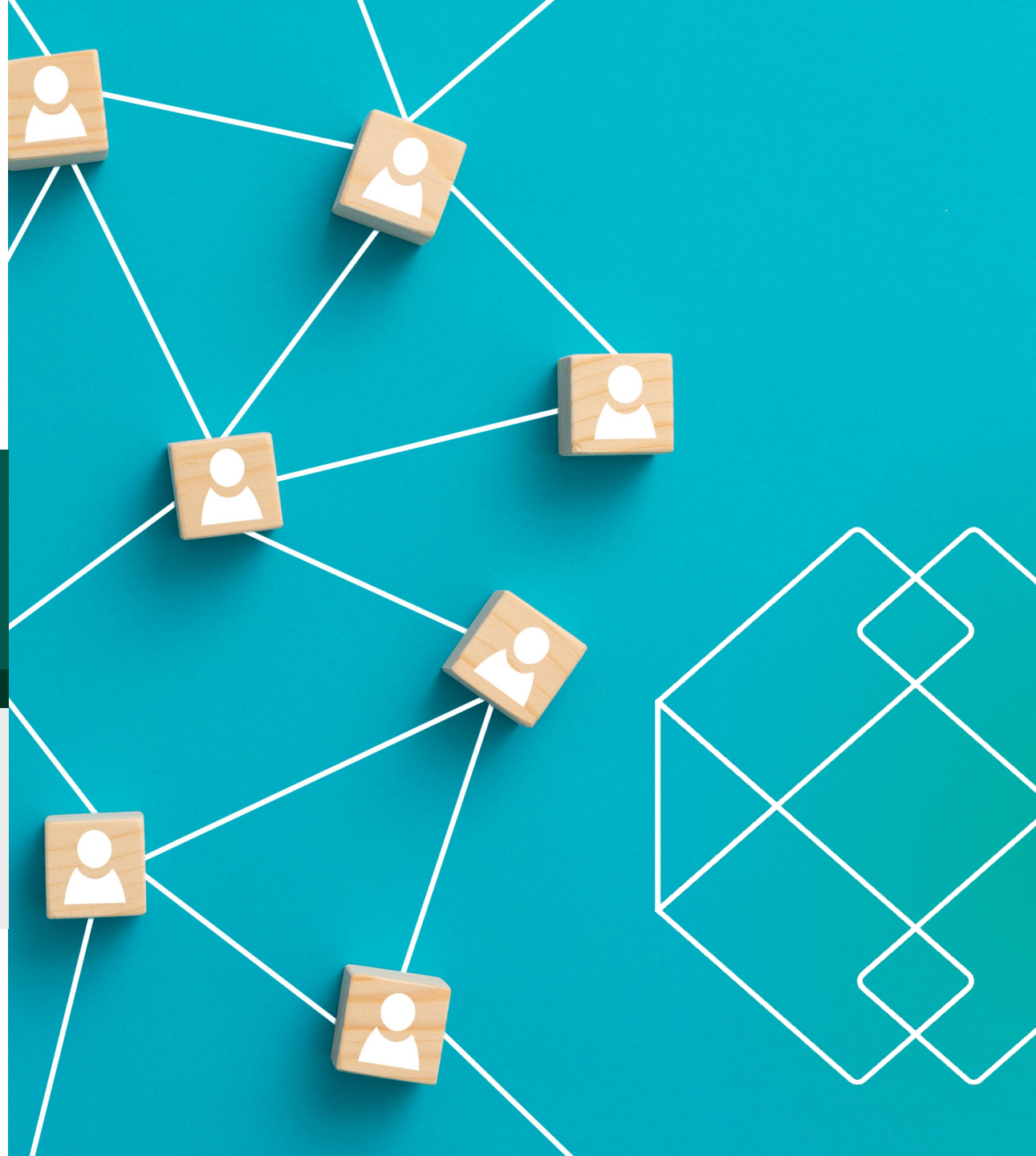
VMG HEALTH

Streamlining Communication from ASC to Clinic Part 2:

Improving Postoperative Communication

Apryl McElheny, MBA, MSN, RN, CASC, CIC
Laurie Brown, MBA, COMT, COE, CPC

August 25, 2025



DESCRIPTION

In continuation of the 2023 webinar, *Streamlining Communication from Clinic to ASC*, Apryl and Laurie pick up where they left off in the surgical scheduling journey. The patient's surgical date has come and gone, but what's next?
Surgical scheduling doesn't end when the patient has been discharged.

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Background | 2 Part Series

Streamlining Communication from ASC to Clinic

2023

PART 1
BEFORE SURGERY

- Assessed communication between a surgeon's clinic and the ASC.
- Identified common interfacility communication pitfalls.
- Described the importance, critical components, and best practices of effective interfacility communication.
- Correlated the relationship of effective communication and stakeholder outcomes.
- Evaluated proof of concept via case study analysis.

2025

PART 2
POST SURGICAL
FOLLOW UP

© VMG Holdings LLC. All Rights Reserved. I **vmghealth.com**

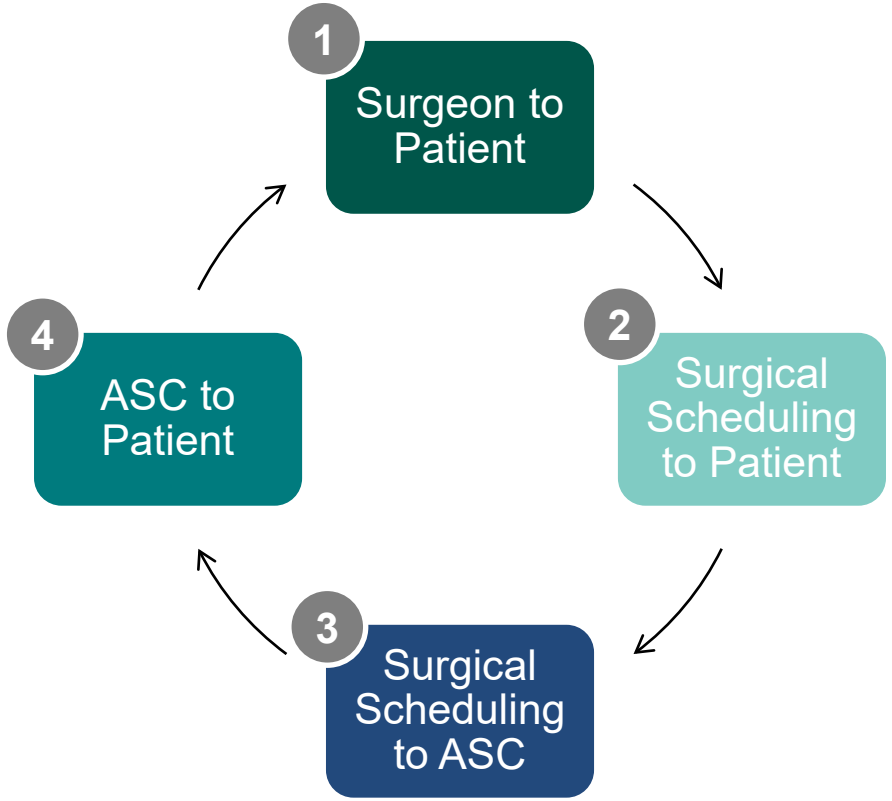
Part 2 | LEARNING OBJECTIVES

- Outline the importance of continuous improvement in the surgical scheduling process.
- Describe the potential sources of feedback data such as patient, surgeon, and staff satisfaction.
- List objective data sources to consider such as time studies, efficiency issues, and complications rates.
- Describe methods of implementing improvements and process control.

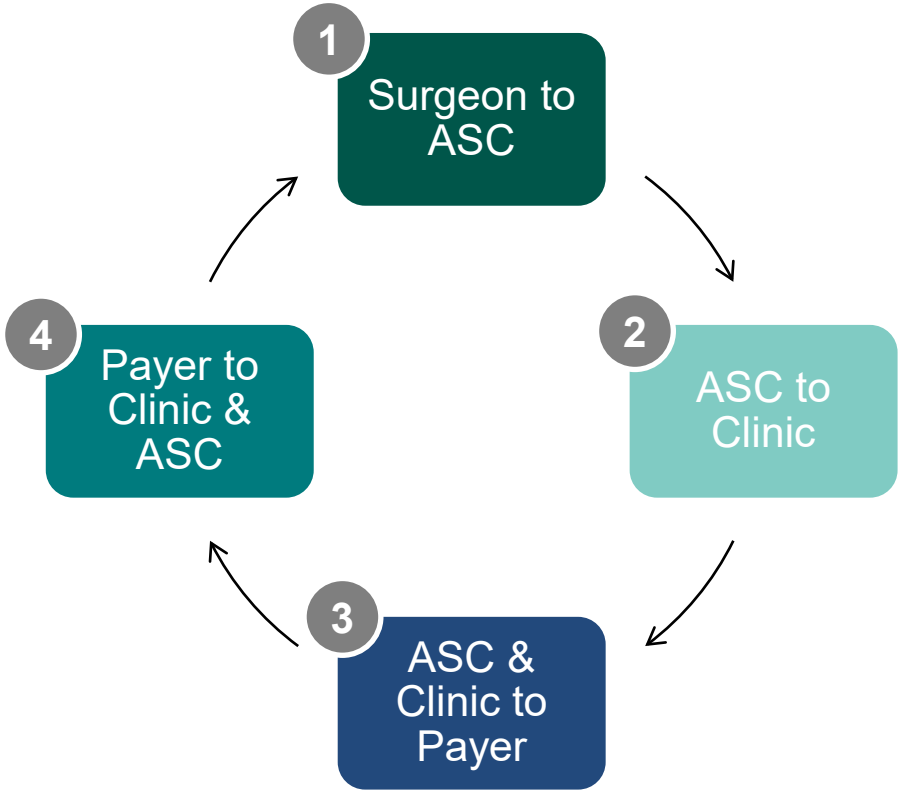
© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Surgical Scheduling Process Flow

Surgical Scheduling

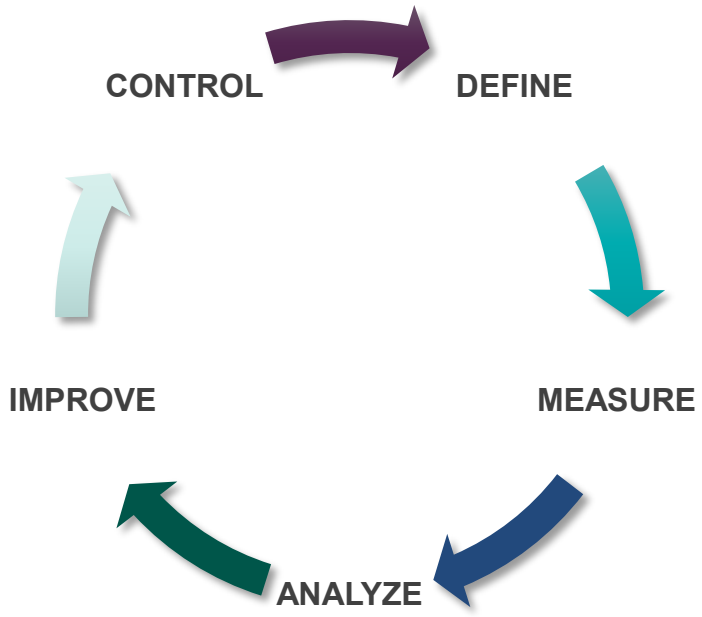


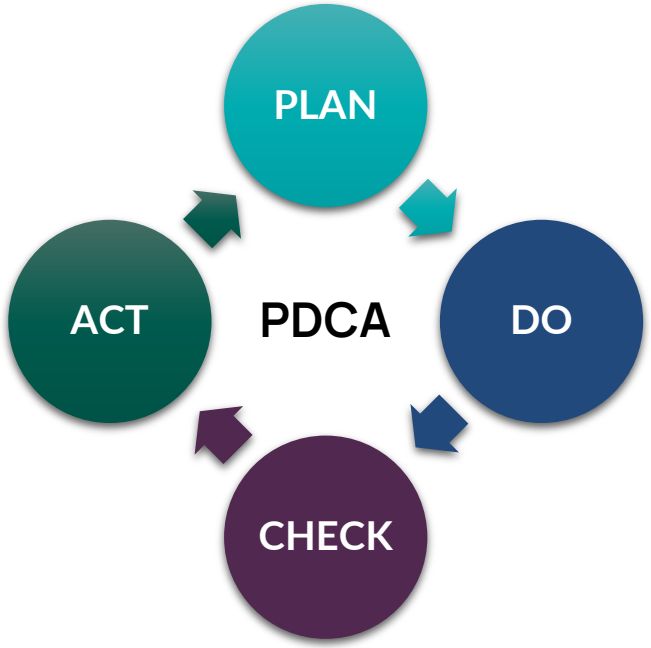
Post Surgical

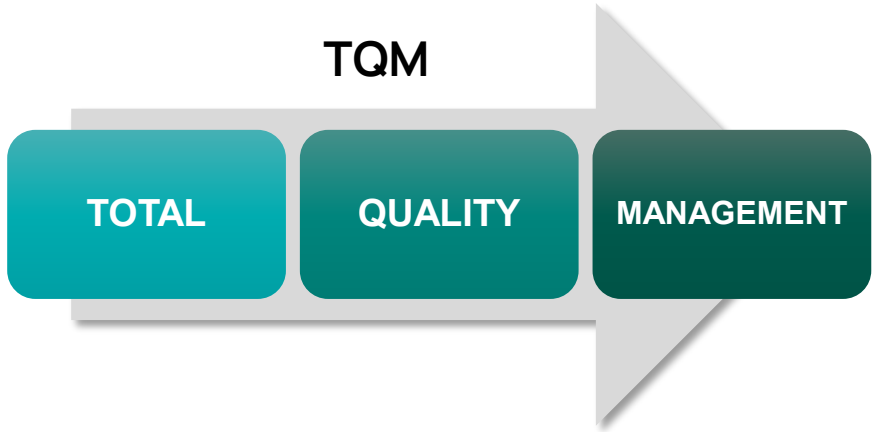


© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Process Improvement







↓ Errors + ↑ Quality = Improved Outcomes

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

QAPI Program

§416.43 Condition for Coverage
Quality Assessment and Performance Improvement

The ASC must develop, implement and maintain an ongoing, data-driven quality assessment and performance improvement (QAPI) program.

- §416.43(a) Standard: Program Scope
- §416.43(b) Standard: Program Data
- §416.43(c) Standard: Program Activities
- §416.43(d) Standard: Performance Improvement Projects
- §416.43(e) Governing Body Responsibilities

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Continuous Improvement Data Sources

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Potential Sources of Feedback Data

Patient, Surgeon, and Staff Satisfaction

- Continuous, organic
- Formal surveys, annually
- Performance appraisals, exit/stay interviews
- Social Media feedback

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Patient *Satisfaction*

CLINIC

- Organic feedback
- Electronic tools surveys
  - Review data at staff meetings
- Formal survey
  - Ran over 2 weeks

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Patient *Satisfaction*

ASC

- Ongoing, reviewed quarterly
- Self-selected tool
  - Not ASCQR participants
- OAS CAHPS
  - Questions related to scheduling process
  - Specific to target processes that may require improvement
  - Sharing info between clinic and ASC
- Complaints, grievances
- Internet/social media reviews
- Reported to QAPI Committee, Governing Body, and staff

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

OAS CAHPS Review

Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems

- Part of the CMS-mandated ASC Quality Reporting Program
- Voluntary to mandatory in 2025
- CMS-approved vendor conducts the survey

ASC-15a	About Facilities and Staff
ASC-15b	Communication About Procedure
ASC-15c	Preparation for Discharge and Recovery
ASC-15d	Overall Rating of Facility
ASC-15e	Recommendation of Facility

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

OAS CAHPS Domains

OAS CAHPS Domain	Description
Pre-operative Communication	*Clarity and completeness of instructions before surgery*
Preparation for Discharge & Recovery	*Patient readiness for recovery at home*
Facility Cleanliness	*Perceptions of hygiene and environment*
Facility Staff	*Interpersonal and professional behavior*
Overall rating of the facility	*Patient's general satisfaction with the facility*
Willingness to recommend the facility	*Loyalty and perceived quality*

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Staff *Satisfaction*

- What staff encountered
- Staff concerns
- Where process can be improved
- What patient's report to the staff
  - Formalizing patient feedback
- Culture that welcomes open communication and feedback

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Surgeon *Satisfaction*

- Development and initiation of surgeon satisfaction surveys
- Showing the tools
- Patient experience
- Surgeon experience in surgical scheduling
- Close the loop on surgeon feedback
  - Feedback on corrective actions, effectiveness, and outcomes

**Samples available on eSupport*

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Objective Data Sources

TIME STUDIES

- **EHR**
  - Anesthesia
  - OR times
- **Industry benchmarks**

EFFICIENCY ISSUES

- **Gaps in processes**
- **Redundancies**
- **Payroll**

ASC	20-30% of revenue
Clinic	25-35% FTE Support Staff Payroll

- **Scheduling Staffing** adequate, approximate **1 FTE per:**

2,000 intravitreal injections
1,000 cases for facility-based surgeries
500 elective procedures *includes premium IOLs, LASIK*

COMPLICATIONS RATES

- Tools* for capturing this data
- **Postop infection/ complications rates**
- **Investigations**
- **Root cause analysis**

**Tools available on eSupport*

© VMG Holdings LLC. All Rights Reserved. I **vmghealth.com**

Other Data Sources

- **Reports**
  - Leveraging EHR/EPM
- **Cancellation rates**
  - Preop, intra-op
  - Capturing reasoning for cancellations
  - Workflows for capturing data
- **Block time utilization**
  - KPI: 70 – 85%+
- **Physician timeliness**
  - Start times, late start, case lengths

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

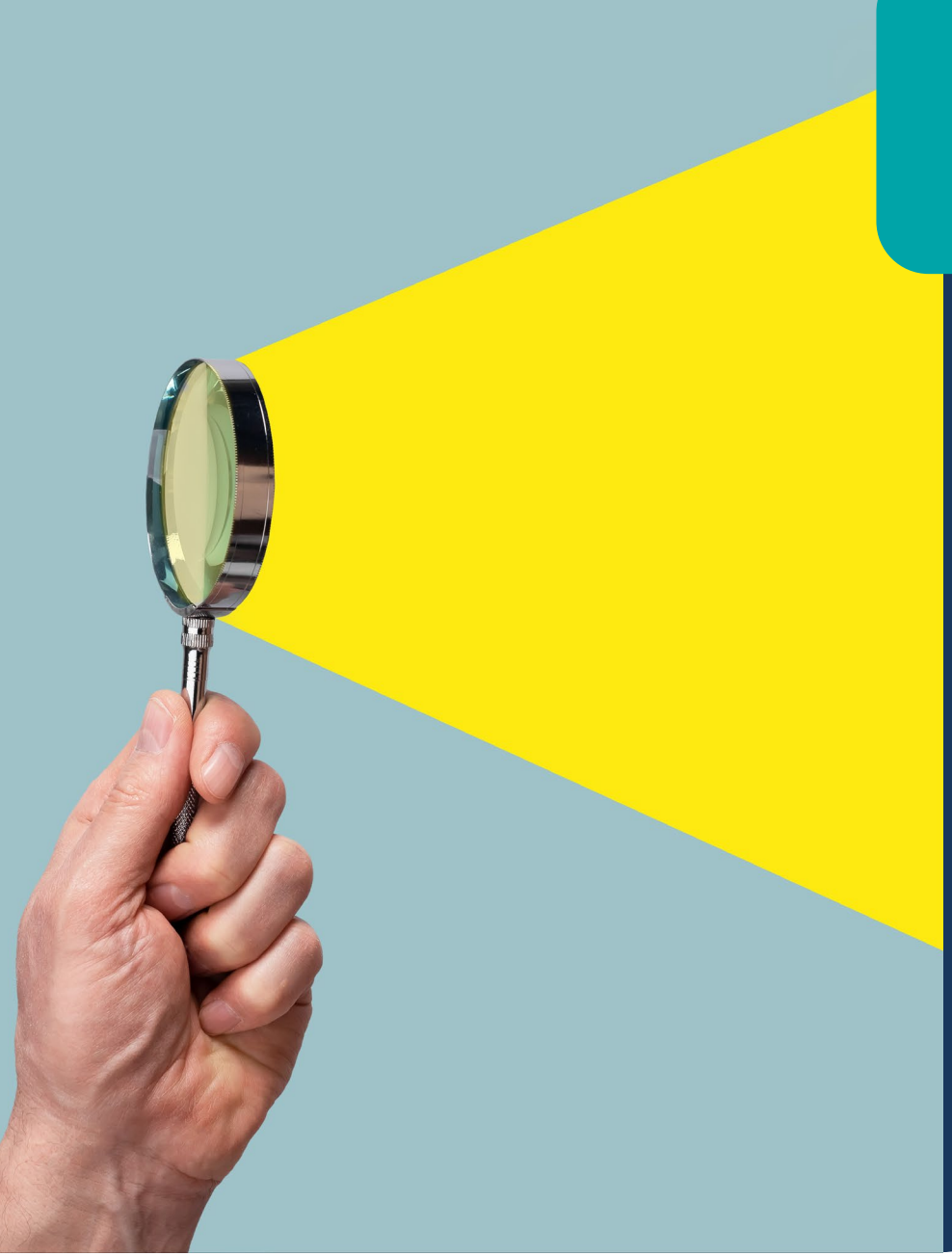
Other Data Sources

- **ASC Check In**
  - Patient financial responsibility
  - Updated insurance cards, photo ID
- **Right Information to Clinic**
  - Procedure updates, matching claims
  - Operative report to clinic
- **Billing Hiccups**
  - Rejections, denials
  - Capturing reasoning for issues
  - Preauthorizations, non-par/out-of-network

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Improvement and Process Control In Action

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com



CASE STUDY ANAYLSIS

- The ASC has been experiencing an increase of patients with IFIS (Intraoperative Floppy Iris Syndrome) in the operating room and being unprepared.
- There were three cases in one month where advance notice was not provided to the surgeon and ASC staff. While these three patients were not on Flomax or Saw Palmetto, they each had the history of use of these IFIS risk drugs.

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

CASE EVALUATION

- It was determined that the clinic surgical scheduler was not asking about a history of IFIS risk medication use and using the drug reference list.
- Subsequently, the ASC intake staff were also not confirming a past history of IFIS risk drugs, only confirming current medications.

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

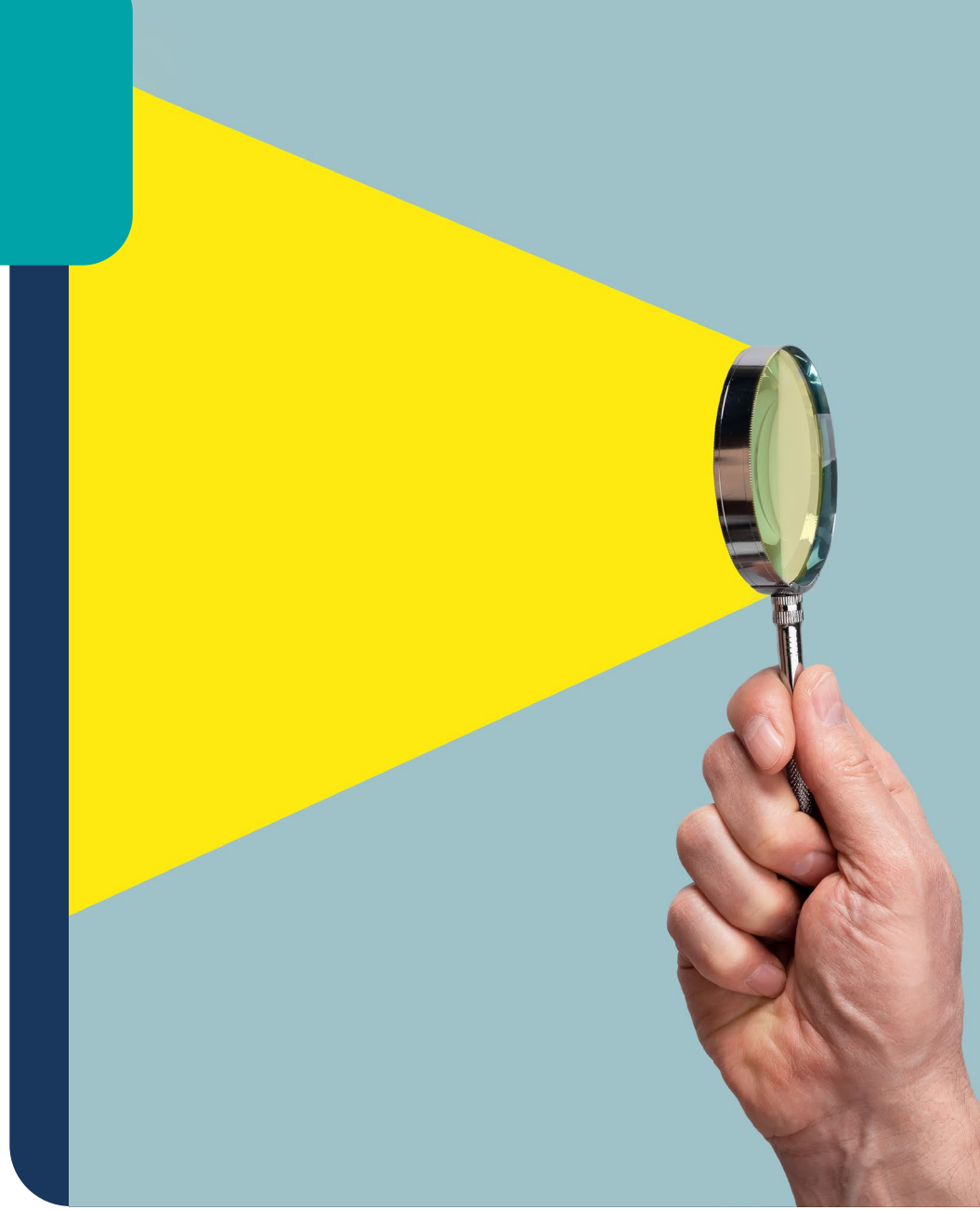
SOLUTION

- Through the assessment of the current clinic & ASC surgery scheduling & intake checklists, the addition of the specific IFIS-risk medication history questions were added to ensure improved patient safety and efficiency was gained.
- This was a collaborative change in policy for the ASC and clinic

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

CASE STUDY ANAYLSIS

- The ASC has been experiencing an increase of surgical cancellations due to patients presenting not NPO.
- There was an increase of 1 surgical cancellation due to NPO status in Q1 to 4 surgical cancellations due to NPO status in Q2.
- This resulted in a loss of ASC efficiency and patient dissatisfaction.



© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

CASE EVALUATION

- It was determined that the clinic surgical scheduler was only providing preoperative instructions in writing and not verbally reviewing instructions with the patients.
- 2 cancelled patients reported they didn't read the instructions, and 1 reported losing the paperwork. All 3 received a preop phone call from the ASC.

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

SOLUTION

- The clinic and ASC collaboratively reviewed each case and implemented corrective actions.
- Preoperative instructions are now given both verbally and in writing by the surgical scheduler. These instructions were simplified for clarity and ease of understanding.
- The ASC developed a checklist for preop calls to ensure patients are reminded to stay NPO and to review their instructions.

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Process Control

Measure and monitor

- Inputs
- Process
- Outputs
- Control mechanisms
- Adjustments

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

PERFORMANCE IMPROVEMENT

- QAPI
- Culture
- The Why
- Closing the Loop

© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Conclusion

- Identify issues, potential areas to improve
- Consider all data sources
- Implement positive changes
- Continue to track and trend on an ongoing basis
- Keep patient safety as a top priority

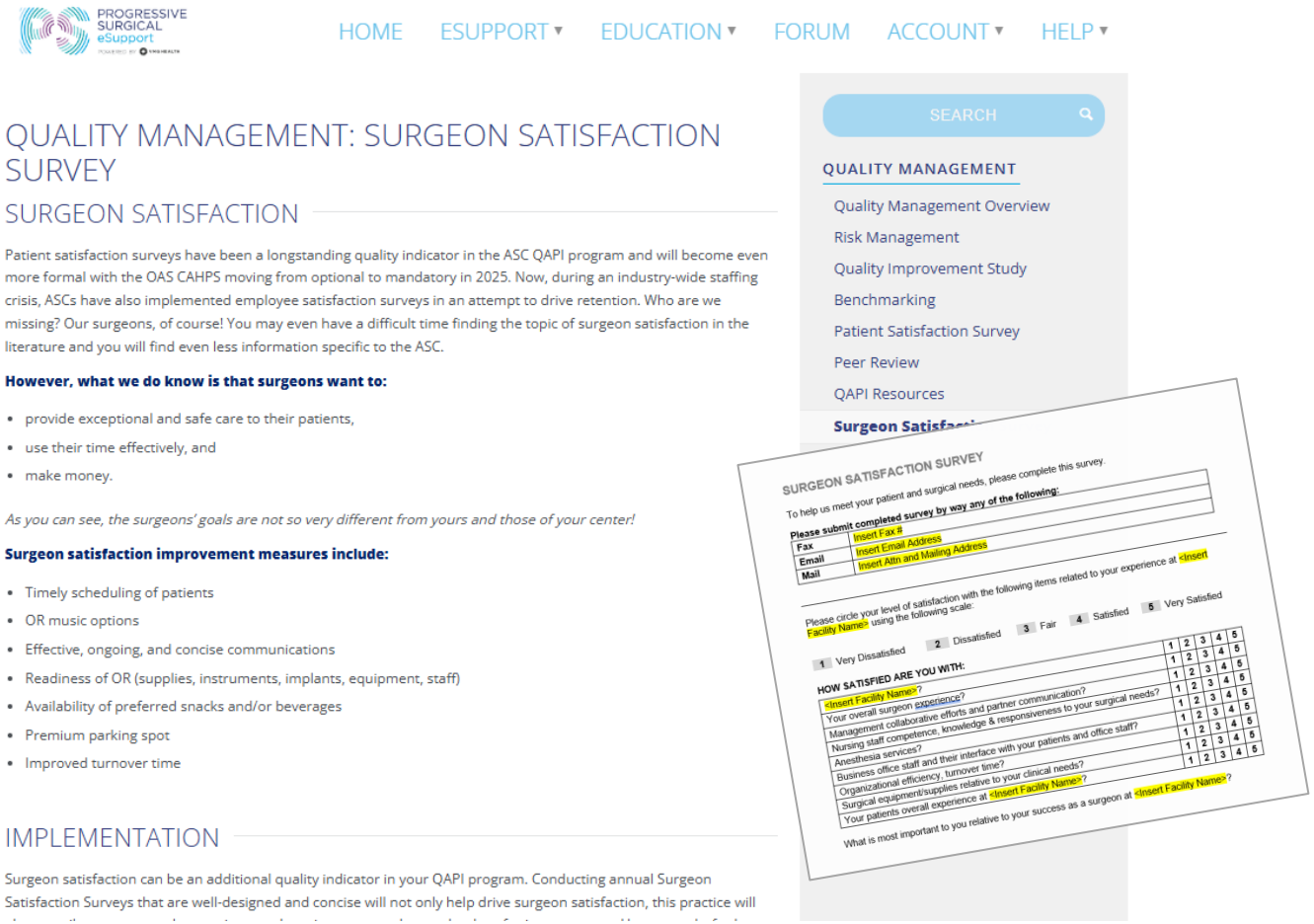
© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Available to eSupport Members

PROGRESSIVE SURGICAL eSupport
POWERED BY VMG HEALTH

eSupport > Quality Management > Surgeon Satisfaction Survey

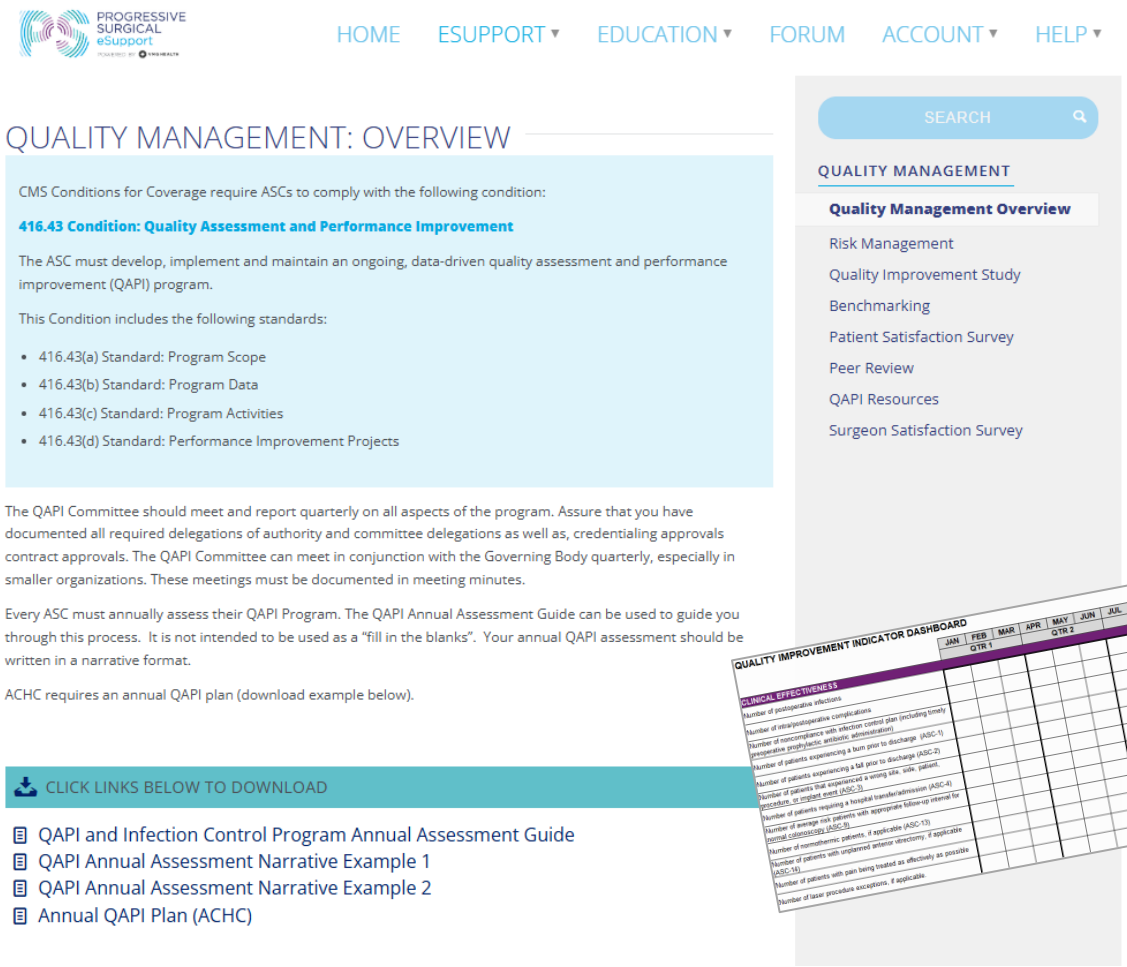
- Measures and implementation
- Survey Templates



© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

eSupport > Quality Management

- QAPI Indicator Dashboard



© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

eSupport > Infection Control > Infection Prevention & Investigation

- SSI Investigation Toolkit

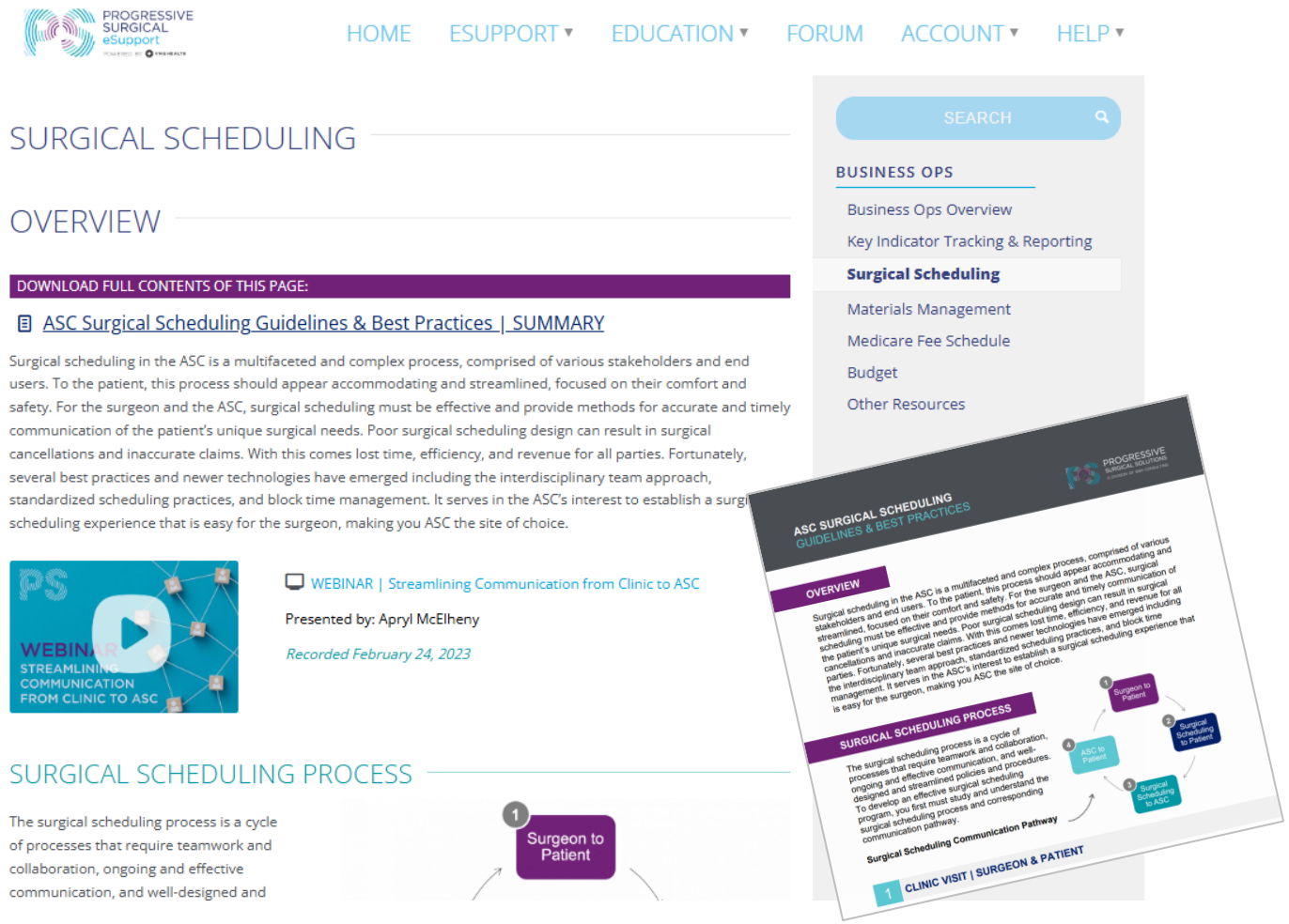
© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Available to eSupport Members

PROGRESSIVE SURGICAL eSupport
POWERED BY VMG HEALTH

eSupport > Business Ops > Surgical Scheduling

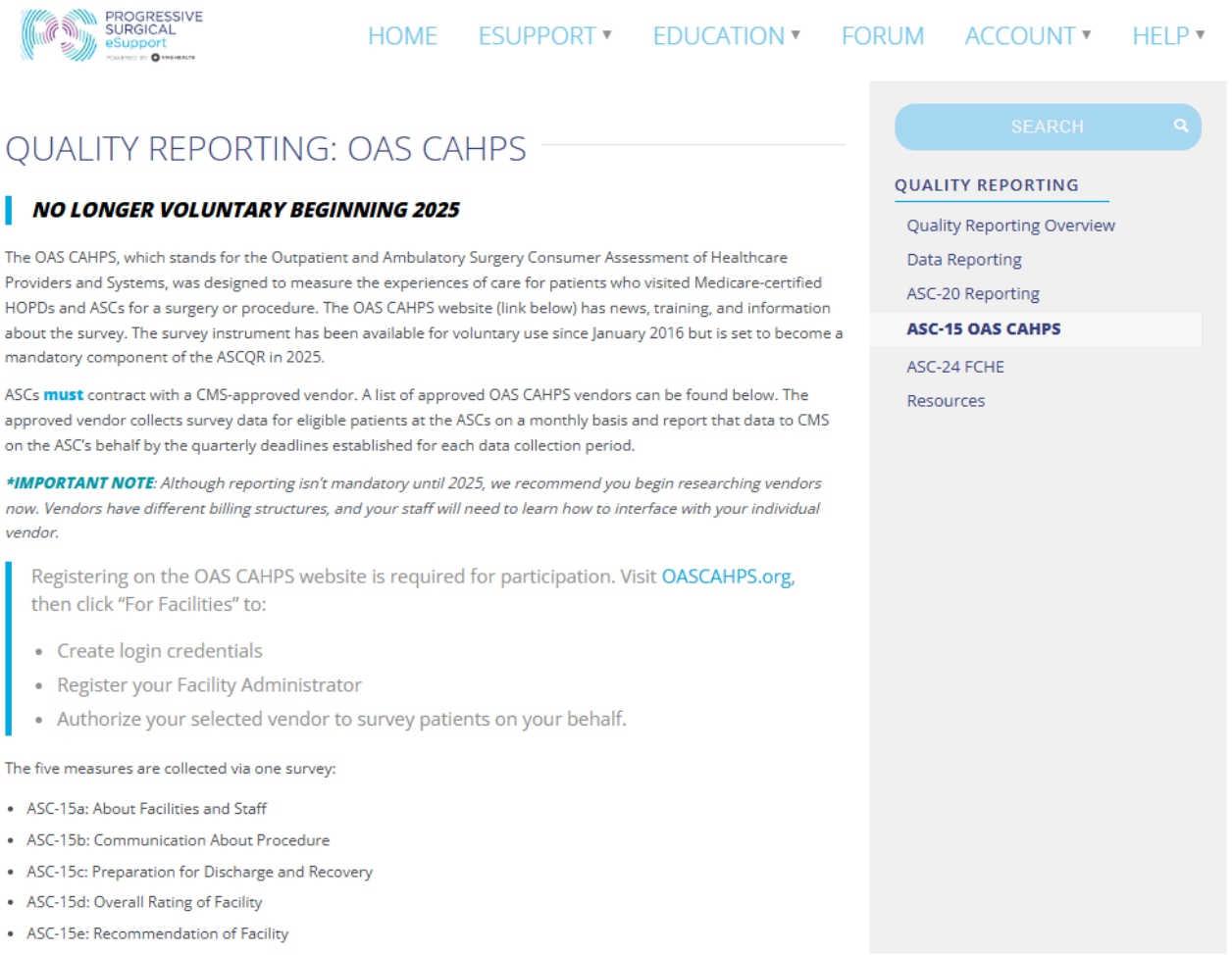
- ASC Surgical Scheduling Guidelines and Best Practices



© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

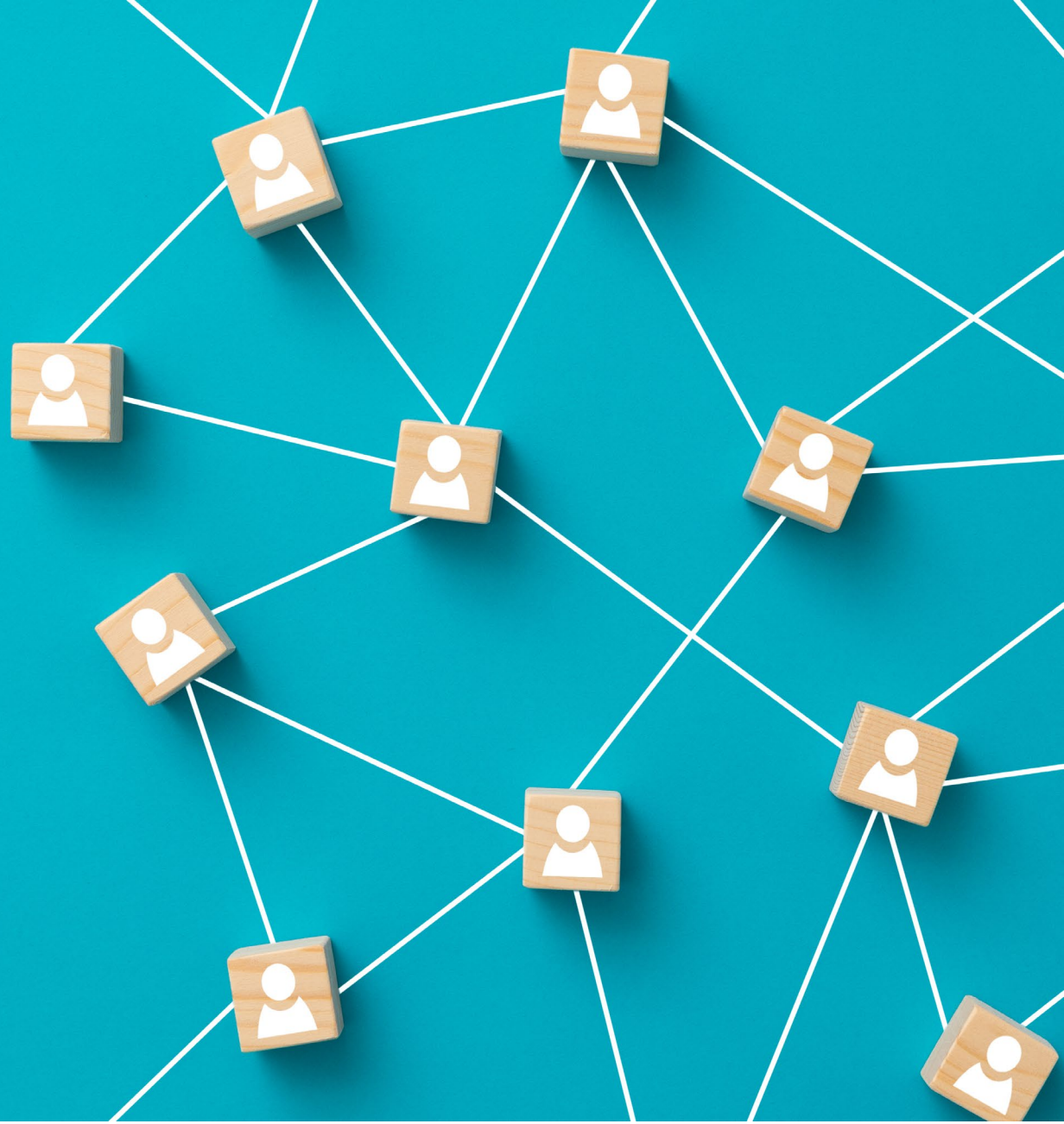
eSupport > Quality Reporting > ASC-15 OAS CAHPS

- Guidelines, resources, and FAQ



© VMG Holdings LLC. All Rights Reserved. I vmghealth.com

Questions?



© VMG Holdings LLC. All Rights Reserved. I **vmghealth.com**

VMG HEALTH

PROGRESSIVE SURGICAL eSupport
POWERED BY VMG HEALTH

The leading consulting firm
for **healthcare business performance**.

CONTACT US:

(800)-832-0609

Apryl.McElheny@vmghealth.com
Laurie.Brown@vmghealth.com

PROGRESSIVE SURGICAL eSupport

POWERED BY VMG HEALTH

The leading online membership for ASC nurse leaders who want to run a compliant, efficient, and profitable ASC with confidence.

RUNNING AN ASC CAN BE less OVERWHELMING

CE Credit

VMG Health is approved by the California Board of Registered Nurses, Provider #17841 and BASC, Provider #1016.

RN	1 CE Contact Hour
CASC	1 AEU

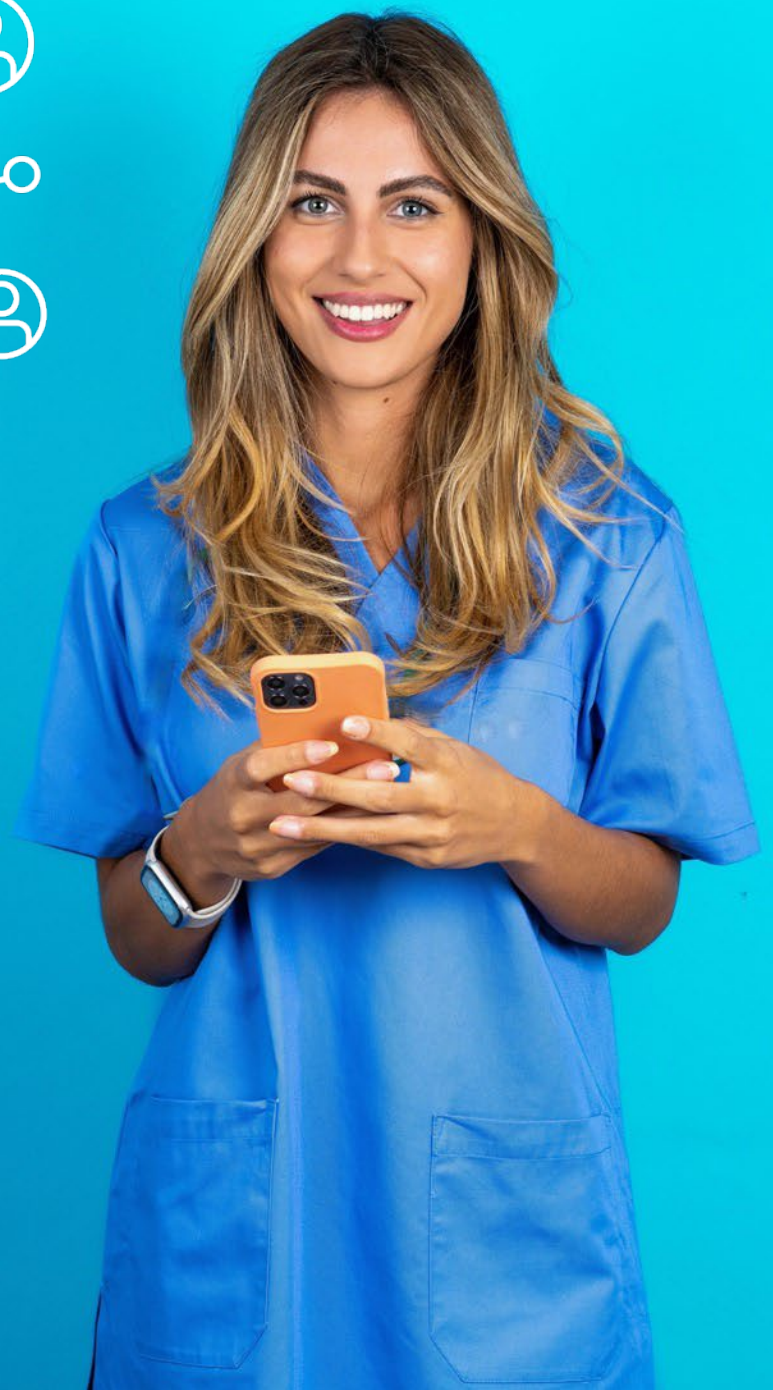
Complete Course Evaluation sent via email by **Monday, September 22**

Allow up to 2 weeks to process your certificates

Any questions regarding CE Credit, contact Customer Support

support-asc@vmghealth.com

© VMG Holdings LLC. All Rights Reserved. I **vmghealth.com**



Join our *Private* Facebook Group

A place to **connect**, **support**, and **network** with other ASC managers all over the country.

Upcoming Webinars

DATE		CE	WEBINAR TOPIC	SPEAKER
SEP 29	20		**Hot Topics in Pharmacy Compliance for the ASC**	**Nick Bockmann, Pharm.D.** *The Fawks Company*
OCT 24	60		**Inventory Management: Key Strategies for Enhancing ASC Financial Health and Profitability**	**Vanessa Sindell MSN, BSN, RN, CAIP** **Nancy Stephens** *VMG Health*
NOV 10	20		**Annual ASC Survey Watch Report 2025**	**Crissy Benze, MSN, BSN, RN** *VMG Health*

www.ProgressiveSurgicalSolutions.com/webinars

VMG HEALTH

PROGRESSIVE SURGICAL eSupport
POWERED BY VMG HEALTH

2025
WEBINAR CALENDAR