

GOOD PRACTICES ASSESSMENT FOR CARDIAC SURGERIES- A REAL WORLD ANALYSIS



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INTRODUCTION

One of the major challenges of health economics today is how to identify and evaluate resource consumption variables. By demonstrating the results by indicators, it was possible to present a vision for decision making by team managers and / or paying sources, showing which team has the highest positive index, for example, procedures performed with a lower death rate and without high readmission rates.

OBJECTIVE

Identify, based on data from the Brazilian National Health System (SUS), obtained from the SUS data base system (DATASUS), good practices in cardiac surgeries in the state of São Paulo in 36 months, to construct and evaluate decision-making performance indicators.

METHODS

An overview of all cardiovascular surgery procedures from July 2013 to July 2016, was carried out in order to identify Institution who underwent cardiologic surgical interventions and procedures held during this period. The physicians who participated in the same surgery were not identified but grouped as "team". The data were consolidated by teams and then submitted to the calculation of the indicators. As a result, the following indicators were created: volume of hospitalization and re-hospitalization, quantity and percentage of Administrative Death (up to 30 days after the procedure) and Operational (in the procedure), death in 6 months, average hospital and intensive care unit stays.

RESULTS

Overall, the search resulted in the identification of 6,068 teams, which treated 45,563 patients, generating a total of 48,945 hospitalizations.

	TEAM	VOLUME OF HOSPITALIZATION S	ADMINISTRATIVE DEATH	OPERATING DEATH	DEATH 6M	AVERAGE DAILY	AVERAGE ICU DAILIES
All cardiac surgery procedures	TOTAL - 2492 TEAMS	13.013	236	300	11	22.340	15.021
	AVERAGE	5,22	1,55	1,49	1,00	9,15	6,12
	TOP 73 TEAMS (50%)	7.495	118	134	3	520	281
	AVERAGE	102,67	1,62	1,84	0,04	7,12	3,85
Valve prosthesis implant	TOTAL GENERAL (6068 TEAMS)	48.945	1.192	1.190	62	8	6
	GENERAL AVERAGE	8,10	1,90	1,90	1,10		
	TOTAL TOP 100	26.213	451	440	17	5	3
	AVERAGE TOP 100	262,10	5,90	5,60	1,20		
Myocardial revascularization	TOTAL - 1040 TEAMS	4.319	149	165	3	9.704	5.888
	AVERAGE	4,15	1,35	1,43	1,00	9,64	5,81
	TOP 50 TEAMS (50%)	2.152	67	70	1	476	225
	AVERAGE	43,04	1,34	1,40	0,02	9,51	4,49
Pacemaker Implant	TOTAL - 775 TEAMS	7.579	31	42	3	2.763	1.240
	AVERAGE	9,78	1,24	1,40	1,00	3,73	2,62
	TOP 25 TEAMS (50%)	3.538	15	20	1	59	19
	AVERAGE	141,52	0,60	0,80	0,04	2,36	0,75

CONCLUSIONS

The evaluation of the cardiac surgery teams performance might be a tool to improve the results and the quality of the assistance provided. Knowing and disseminating the results may have a positive impact, since it would allow the elaboration of strategies for improvement with the involvement of the surgical team and the managers.