ERAS®
Implementation

Table of Contents

Perfecting the Surgical Journey

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IMPLEMENTATION CHECKLIST

Creating a Case for Change

1. Gap analysis of a service line
 	
    a. Follow patient through the surgical experience
    b. Process/value stream mapping
    c. Determine what is currently working and where challenges exist
    d. Teamwork: determine communication gaps between providers in all phases of care
	☐

2. Create vision of future pathways
 	
    a. How will the interdisciplinary team work in delivering pathways?
    b. Look at the evidence and decide which elements to incorporate
    c. Obtain patient feedback on their experience of surgical case
    d. Identify clinical stakeholders necessary to make the change
    e. Recognize what is going well and what needs to change
	☐

3. Collect baseline data of service line (include any metric that is related to opportunities or would be affected by implementing new protocols):
 	
    a. Outcome measures:
        i. Patient Reported Outcomes
        ii. LOS, reoperation, reintubation, readmissions
        iii. Mortality rates
    b. Process measures:
        i. Cost of the pathway
        ii. Cost of treating postoperative complications
        iii. Return on Investment
        iv. Compliance
   *Leverage your governing society's data (STS, EACTS)
	☐

4. Customize per institutional needs	☐
5. Customize per institutional needs	☐

IMPLEMENTATION CHECKLIST

Communicate the case for change:

1. **Done by executive sponsor and clinical lead (champion)** 2. **Communicate all information collected during Step #1** 3. **Communicate to all internal clinical areas** 4. **Communication to be consistent** 5. **Address any and all negativity/pushback** 6. **Clinical Change: All clinical change is vetted through the ERAS Committee with opportunity for input and approval from key stakeholders**	☐

Building the ERAS Team: Include name and contact information

1. **Anesthesiology Champion(s):**	☐
2. **Surgeon Champion(s):**	☐
3. **Hospital Administration** (institute leader, surgical services leader, etc):	☐
4. **ERAS Coordinator:**	☐

5. **Nurse Managers or designee:**
  • PAT/PAV/Wellness Clinic
  • Preop holding
  • PACU/ICU
  • OR
  • Floor
	☐

6. **CRNA(s):**	☐
7. **Service Line Navigator:**	☐

➔

IMPLEMENTATION CHECKLIST →

8. **Pharmacist:**	☐
9. **Physical Therapist:**	☐
10. **Nutrition:**	☐
11. **Administrative support staff:**	☐
12. **Case Manager**	☐
13. **Quality Improvement:**	☐
14. **IT:**	☐
15. **Capital Equipment Committee member:**	☐
16. **Other:**	☐

1. **Goals (established during first committee meeting):**	☐
2. **ERAS Committee Meeting Schedule Established:** **who owns the meeting invite and agenda development? **helpful to keep the meeting date/time the same each month	☐
3. **Committee Chair(s):**	☐
4. **Protocol Development Team established:** **set deadline for protocol completion	☐

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IMPLEMENTATION CHECKLIST

5. **Patient Education Materials Team established:** **set deadline for patient education materials	☐
6. **Nursing Education Team established:**	☐
7. **Order Set Development Team established:**	☐
8. **ERAS Data Collection Team established:**	☐
9. **Capital Needs Assessment: Complete and submit EARLY**	☐

Patient Education Materials

1. **Begin early in process and finalize after protocol finalization**	☐
2. **Considerations: hospital process to approve patient materials**	☐

IMPLEMENTATION CHECKLIST

Create ERAS dashboard/database

1. **Determine metrics**	☐
2. **Determine who will collect and report the data**	☐

Questions to Consider

1. **How will patients be identified as ERAS? (EMR identifier?)**	☐
2. **Postoperative patient location(s)?**	☐
3. **Who will provide patient education and where, how will it get documented? Carb loading, where will it be stored, who will provide it to the patient, who will order?**	☐

Other Completion Items

1. **Protocol Checklists in ORs (in binders, computer desktop-easy accessible)**	☐
2. **Protocols/Checklists in Anesthesiology Office**	☐
3. **Protocols/Checklists binders in pre and postoperative care areas (preop, PACU, floor, outpatient)**	☐
4. **Protocols/Checklists available on hospital intranet**	☐

IMPLEMENTATION CHECKLIST

Implementation Day

1. **Have patient sign marketing release (possible story on hospital intranet)**	☐
2. **Make sure all MD orders are complete and correct**	☐
3. **Designated person in care areas, following patient, available for questions/help as needed**	☐
4. **Celebrate**	☐

Future Planning

1. **Review outcome and process data**	☐
2. **Report data to ERAS Committee and disseminate to all care areas, including front line staff**	☐
3. **If low compliance, discuss with front line staff to assess for barriers**	☐
4. **Review PDSA**	☐
5. **Plan future regular cadence team member education, new hire education**	☐
6. **Plan for expansion of program**	☐

PROJECT SCHEDULE

Project Schedule

	Original Plan	Actual Dates
1. **Kickoff Meeting**		
2. **Committee Formation**		
3. **Nursing Education**		
4. **Protocol Completion**		
5. **Implementation Date**		
6.		
7.		

Please explain the reasons behind schedule changes, if any:

LESSONS LEARNED

Project Development Lessons Learned

Please describe lessons learned in each of the categories below. Think about what went well, what went wrong, what you would do differently next time, and how you would advise someone else going through this process.

Initial Decision-Making Process and Feasibility:

Design, Stakeholder Interaction

Equipment Procurement:

CAPITAL NEEDS

Capital Needs Cost Assessment: Complete and Submit EARLY

Equipment Description	Hospital Unit	Manufacturer	Address of Manufacturer	Quantity	Unit Cost	Total Cost
						$
						$
						$
						$
						$
					Equipment Costs	$
					Other	$
					Other	$
					Other	$
					Total Cost	$

PDSA WORKSHEET

Objective:

1. Plan: Plan the test, including a plan for collecting data.

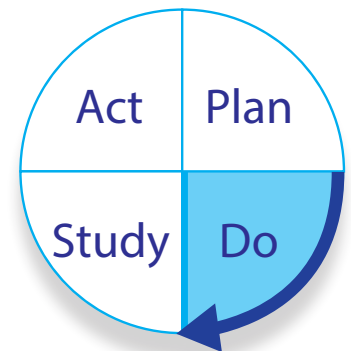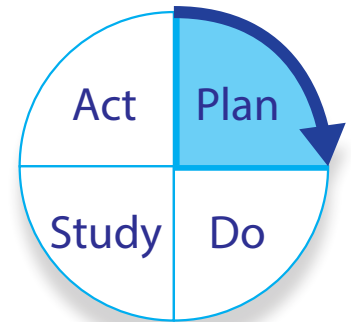**Questions and predictions:**

Who, what where, when:

Plan for collecting data:

2. Do: Run the test on a small scale

Describe what happened:
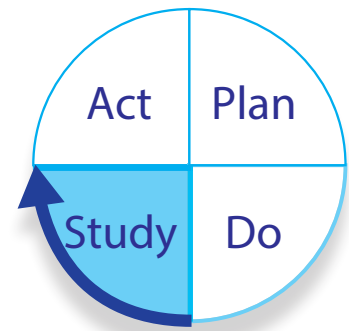
What data was collected?

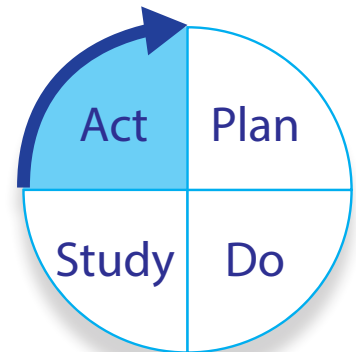**What observations were made?:**

PDSA WORKSHEET

Objective:

3. Study: Analyze the results and compare them to predictions made.

Summarize and reflect on knowledge gained:

4. Act: Based on knowledge gained from the test, create future plans.

Determine what modifications should be made – adapt, adopt, or abandon:

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