

Connecting Your Audio

Want to ask a question over the audio?


Make sure you are dialed-in.

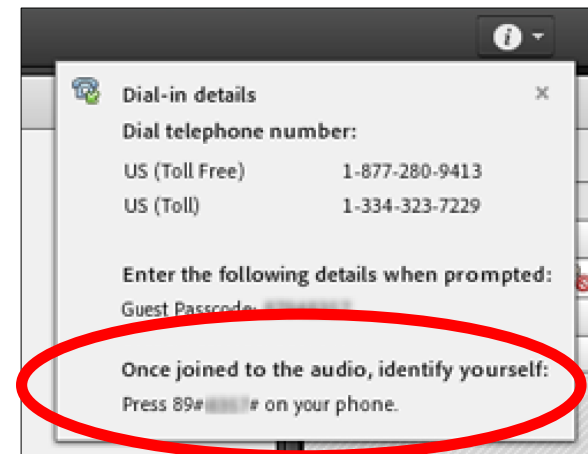
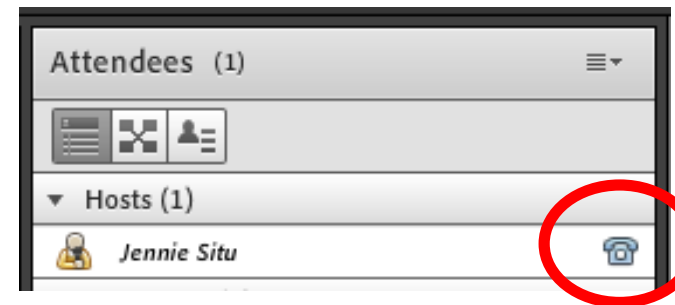
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Learning Action Forum:

Sharing Infection Prevention Strategies that Work



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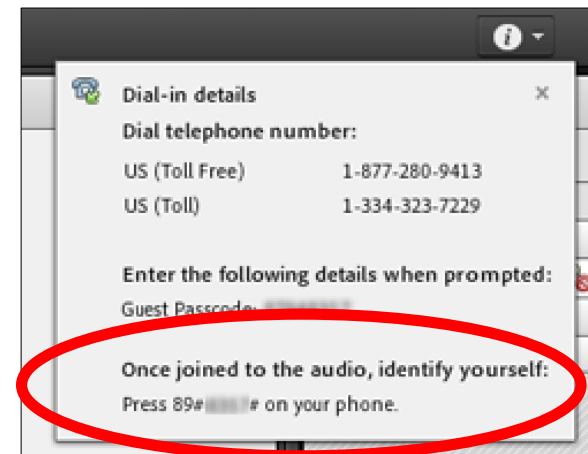
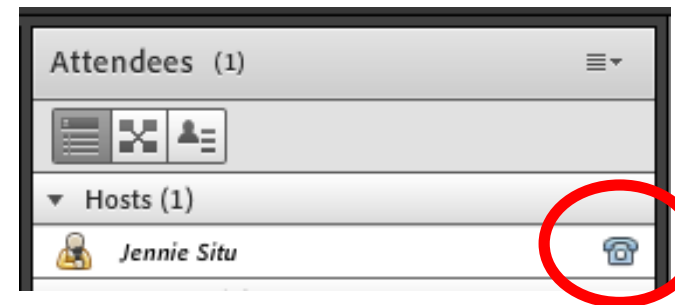
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Open Discussion

Please use the all chat or “raisehand” feature to ask a question to the subject matter experts or to start a discussion with your peers.



Today's Agenda

- Sharing Success –St. Alexius Medical Center
- Engaging Senior Leaders as HAI Champions Using Practical Strategies
- Open Forum
- Upcoming Events and Dates



Today's Presenters



Shelby Lassiter, BSN, RN, CPHQ
Clinical Content Development Lead
HRET



Sue Collier, MSN, RN, FABC
Clinical Content Development Lead
HRET



Benefits of APIC-ICAR in Preparation of Joint Commission Survey

- Utilize expert services to our organization at no cost
- Learning opportunities (i.e. vulnerable areas, new standards)
- To have a new set of eyes overview the organization
- Concentrated observations of areas that were to be areas of focus
- Time required was one full day



The AHAA Moments Perspectives

- **AHAA Moments for the Novice ICP:** Vast amount of areas to learn and observations across the organization. Toured various services and parts of facility yet to totally understand role and responsibilities.
- **AHAA Moments for the Experienced ICP:** In discussion recalling vulnerability of infections that may result from diversion of drugs.
- **AHAA Moments for Management:** Focus of the clinical competencies questions, resources, and time that would be needed if annually done in all areas and 1:1 staff. How this survey will help get resources to fix vulnerable areas in environment of care.



Benefits of Having a Site Visit

- Assist staff to demonstrate and speak the practices regarding the great work being done
- Learning opportunities for all those involved
- Helps to gain increase engagement and support for resources in areas
 - Examples:
 1. Amount of ceiling tiles needing to repaired.
 2. Outside vendor to repair laminate and flooring in ER.
- Provides a comfortable setting to ask questions and discuss concerns
- Gain knowledge of trends and experiences at other facilities



ENGAGING SENIOR LEADERS AS HAI CHAMPIONS

Sue Collier and Shelby Lassiter



Top Issues Confronting Hospital CEOs

- Financial challenges
- Patient safety and quality
- Government mandates



(Top Issues Confronting Hospitals in 2015, American College of Healthcare Executives, 2016)



Leaders to Engage

- The key senior leaders in preventing HAIs are the Chief Nursing Officer and Chief Medical Officer
- But other leaders are important; consider recruiting:
 - Unit managers
 - Service line chiefs
 - Hospital epidemiologists
 - Infection preventionists
 - Quality professionals
 - Finance professionals
 - Education professionals
 - Patient-Family Engagement leader



Executive Partner Tasks

- Advocate project goals and share project progress with senior leaders and your Hospital Board
- Meet with the project team to review data and progress
- Assist the team with prioritization of safety efforts
- Facilitate removal of barriers
- Help provide the necessary resources



Let's Hear from Participants

What are some things you've asked
your executives to do?

*(Please speak up or type your responses into the chat box – all
share, all learn.)*



Ideal Characteristics of the Executive Partner

- Strong communication skills
- Approachable and willing to commit time
- Commitment to patient safety
- Respected by peers and others
- Potential candidates include: CMO, CNO, Chief Quality or Patient Safety Officer



The Constant Challenge of Balancing Priorities...



Benefits of a Business Case

- Ensures sufficient resources are identified and available to sustain performance
- Summarizes the goals, vision and evaluation of infection prevention initiatives
- Defines how the organization will avoid errors and prepare teams for success
- Provides an opportunity to connect infection prevention with other quality and safety initiatives
- Connects infection prevention and organizational performance









Key Elements of an Effective Business Case

- Executive Summary
- Situation Summary
- Program overview
- Financial Analysis
- Non-financial Impact
- Risk Analysis
- Evaluation
- Conclusions/Recommendations

(New Ways of Working in Hospitals, AHA, 2008)



Share Data in a Concise Manner

HAI	Baseline SIR (2015) for Star Trek Hospital	Current Status YTD 2017	Goal	Progress	At-Risk for HAC and/or VBP Penalty?
CAUTI	1.0	1.03	0.8		✓
CLABSI	1.56	1.0	0		✓
C. Diff	2.3	1.94	0		✓
MRSA Bacteremia	0.6	0.2	0		
SSI:					
• HYST	.65	.56	0		
• COLO	1.2	1.23	0		✓



Effectively Stating the Case

- Get to know your audience
- Understand the decision making process
- Know any looming budget deadlines
- Avoid acronyms and clinical terms
- Be clear and concise
- Share how all champions are supporting a united front

(Pennsylvania Patient Safety Advisory, 2010)



The Voice of the Customer

Dorthea's Story



How Much Do HAIs Cost?

HAIs	Cost (per case) ⁶	Length of Stay (per case)	Mortality Rate
CLABSI	\$45,814	10.4 days	12-25% ³
<i>CLABSI –MRSA</i>	<i>\$58,614</i>	<i>15.7 days</i>	<i>26-36%⁴⁻⁵</i>
SSI	\$20,785	11.2 days	
<i>SSI –MRSA</i>	<i>\$42,300</i>	<i>23.0 days</i>	<i>26-36%⁴⁻⁵</i>
CDI	\$11,285	3.3 days	6-30% ¹
CAUTI	\$896	Not Recorded	2.3% ²

Total Annual Costs of the Top 5 HAIs is Estimated to be \$9.8 billion⁶

Benefits of infection prevention range from:

- low of \$5.7 to \$6.8 billion saved (20 percent of infections preventable)⁷
- high of \$25.0 to \$31.5 billion saved (70 percent of infections preventable)⁷

(1. Hota SS, *Emerg Infect Dis*, 2012; 2. Gould CV, *Infect Control Hosp Epidemiol*, 2010; 3. Centers for Disease Control and Prevention, *MMWR Morb Mortal Wkly Rep*, 2011; 4. Pastagia M, *Emerg Infect Dis*, 2012; 5. Shurland S, *Infect Control Hosp Epidemiol*, 2007; 6. Zimlichman E, *JAMA Intern Med*, 2013; 7. Scott RD, CDC, 2009)



How Do HAIs Impact Reimbursement?

1. Value-Based Purchasing

Infection-related VBP Measures - 2017	Year Effective
IMM-2 Influenza immunization	FY2017
CDI – <i>C. diff</i> infection	FY2017
MRSA Bacteremia	FY2017
Consumer Assessment: Cleanliness , quietness of hospital environment	FY2017
CAUTI	FY2017
CLABSI	FY2017
PSI-90 Composite	FY2017
SSI for Colon and abdominal hysterectomy surgeries	FY2017

Can result in a cut of 2% for Medicare Reimbursement in FY2017 and FY2018



How Do HAIs Impact Reimbursement?

2. Hospital Acquired Condition Reduction Program

- Called HACRP or “HAC”
- Began FY2015
- Adjusts Medicare payments based on hospital rank in risk-adjusted HAC quality measures - 1% reduction in payment if Total HAC Score >6.5700 in FY2017.
- Measures: (Publicly reported)
 1. PSI-90 Composite (Domain 1; 15% of Total HAC Score)
 2. HAIs (Domain 2; 85% of Total HAC Score)
 - a. CLABSI
 - b. CAUTI
 - c. SSI for colon surgery and abdominal hysterectomy
 - d. CDI (added for FY17)
 - e. MRSA bacteremia (added for FY17)



QUESTIONS?

We Want To Hear From You!!!



Project Next Steps

- Review your PCA/ICAR report with your team
- Review the Uber Adaptive Strategies and Building a Business Case modules
 - Share content with senior leaders
 - Make specific requests concerning how leaders can support the work
- Reach out to your State Partners for help
- Mark your calendar for the next Learning Action Forum: **Thursday April 6 at 1:00 pm CT**



References

1. Hota SS, Achonu C, Crowcroft NS, et al. Determining mortality rates attributable to *Clostridium difficile* infection. *Emerg Infect Dis.* 2012; 18(2):305-7.
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3. Centers for Disease Control and Prevention. Vital signs: central line-associated blood stream infections – United States, 2001, 2008, and 2009. *MMWR Morb Mortal Wkly Rep.* 2011; 60(8): 243-8.
4. Pastagia M, Kleinman LC, Lacerda de la Cruz EG, et al. Predicting risk for death from MRSA bacteremia. *Emerg Infect Dis.* 2012; 18(7):1072-80.
5. Scott RD. The Direct Medical Costs of Healthcare-associated Infections in U.S. Hospitals and the Benefits of Prevention. Centers for Disease Control and Prevention, CDC; March 2009. Publication CS200891-A
6. Shurland, S, Zhan M, Bradham D, Roghmann M. Comparison of mortality risk associated with bacteremia due to methicillin-resistant and methicillin-susceptible *Staphylococcus aureus*. *Infect Control Hosp Epidemiol.* 2007; 28(3):273-9.
7. Zimlichman E, Henderson D, Tamir O, et al. Health Care-Associated Infections. A Meta-analysis of Costs and Financial Impact on the US Health Care System. *JAMA Intern Med.* 2013; 173(22): 2039-2046. doi:10.1001/jamainternmed.2013.9763.
8. CMS Hospital Acquired Conditions website: https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/Hospital-Acquired_Conditions.html
9. CMS website: Linking quality to payment. <https://www.medicare.gov/hospitalcompare/linking-quality-to-payment.html#>



Thank You!

Event Evaluation

