

Gaining Momentum in Sepsis Care in Pennsylvania

Janette Bisbee, MSN, RN-BC, NHA

The Hospital and Healthsystem Association of Pennsylvania

STOPPING SEPSIS
Saving Lives in Pennsylvania



➤ Partnership for Patients (PfP) HEN 2.0

HAP PA-HEN addressed severe sepsis and septic shock to assist hospitals to hardwire evidence-based interventions in order to reduce the rate of mortality via early detection and goal directed therapy.

- Required project for HEN 2.0
 - Fifty-four project hospitals
 - The highest number of projects chosen
 - Appealing to hospitals struggling to deal with SEP-1 measures

HAP PA-HEN Strategy

- Robust education following evidence-based best practices
- Electronic hospital self-assessment tool
- Physician champion “Office Hours”
- One-to-one coaching calls
- Expert faculty presented webinars
- PassKey collaborative website
- Frequent communication from project manager
- Align data collection with SEP-1 measures

HAP PA-HEN Process Measure #1

Severe Sepsis:

Within 3 hours of presentation of severe sepsis:

- Initial lactate level measurement
- Broad spectrum or other antibiotic administered
- Blood cultures drawn prior to antibiotics

AND received within 6 hours of presentation of severe sepsis:

- Repeat lactate level measurement only if initial lactate level is elevated

HAP PA-HEN Process Measure #2

And ONLY if Septic Shock present:

➤ Received within 3 hours of presentation of septic shock:

Resuscitation with 30 ml/kg crystalloid fluids

➤ And ONLY if hypotension persists after fluid administration, received within 6 hours of presentation of septic shock:

Vasopressors

➤ And ONLY if hypotension persists after fluid administration or initial lactate ≥ 4 mmol/L, received within 6 hours of presentation of septic shock:

Repeat volume status and tissue perfusion assessment

HAP PA-HEN Outcome Measure

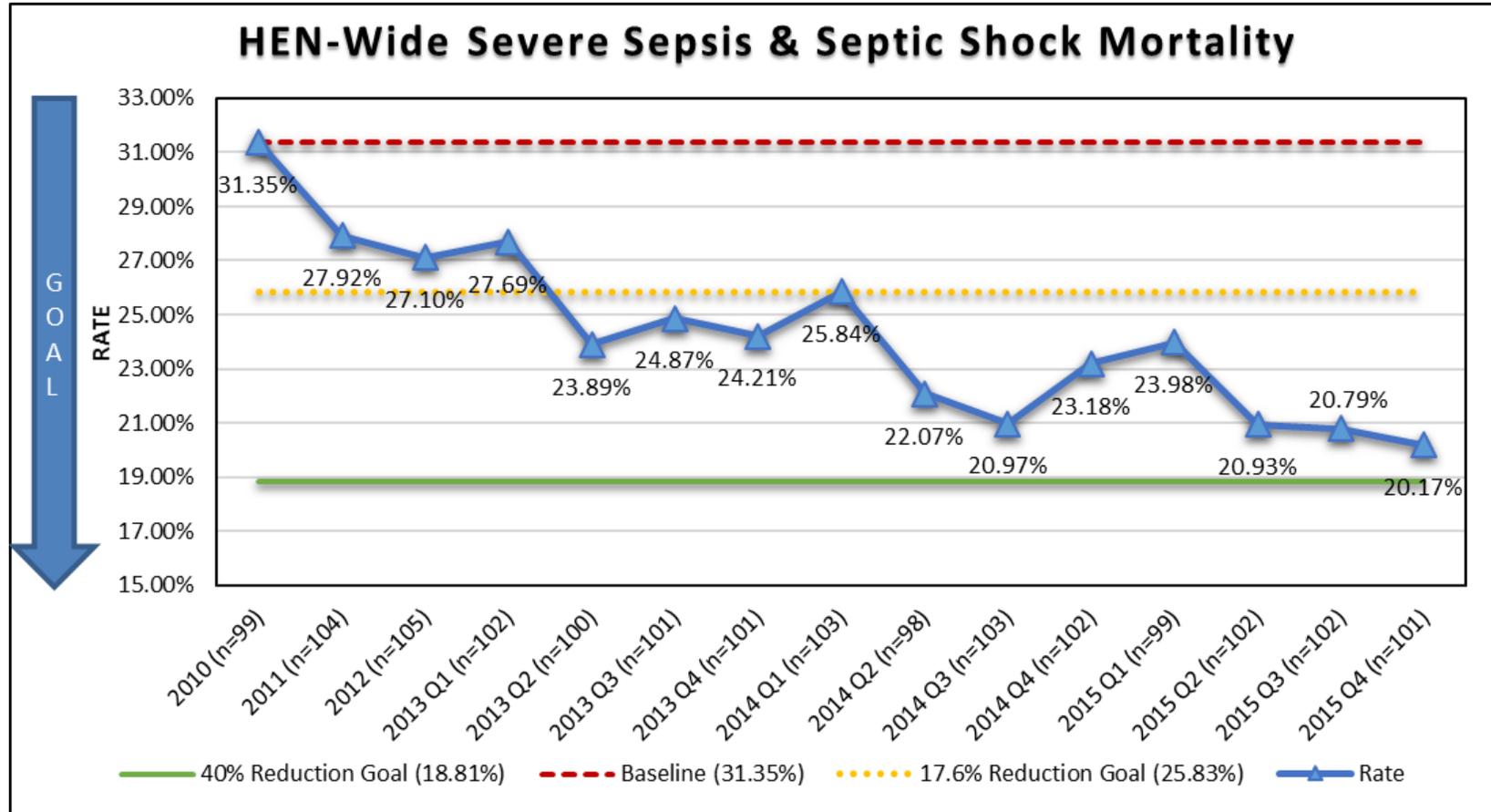
Immersion Project:

- CMS Goal: a 40% reduction in mortality rates from severe sepsis or septic shock; baseline taken from initial data submission
 - Numerator: Total number of patients over the age of 18 with a primary or secondary diagnosis of severe sepsis or septic shock who died during the hospital stay
 - Denominator: Total number of patients over the age of 18 with a primary or secondary diagnosis code of severe sepsis or septic shock

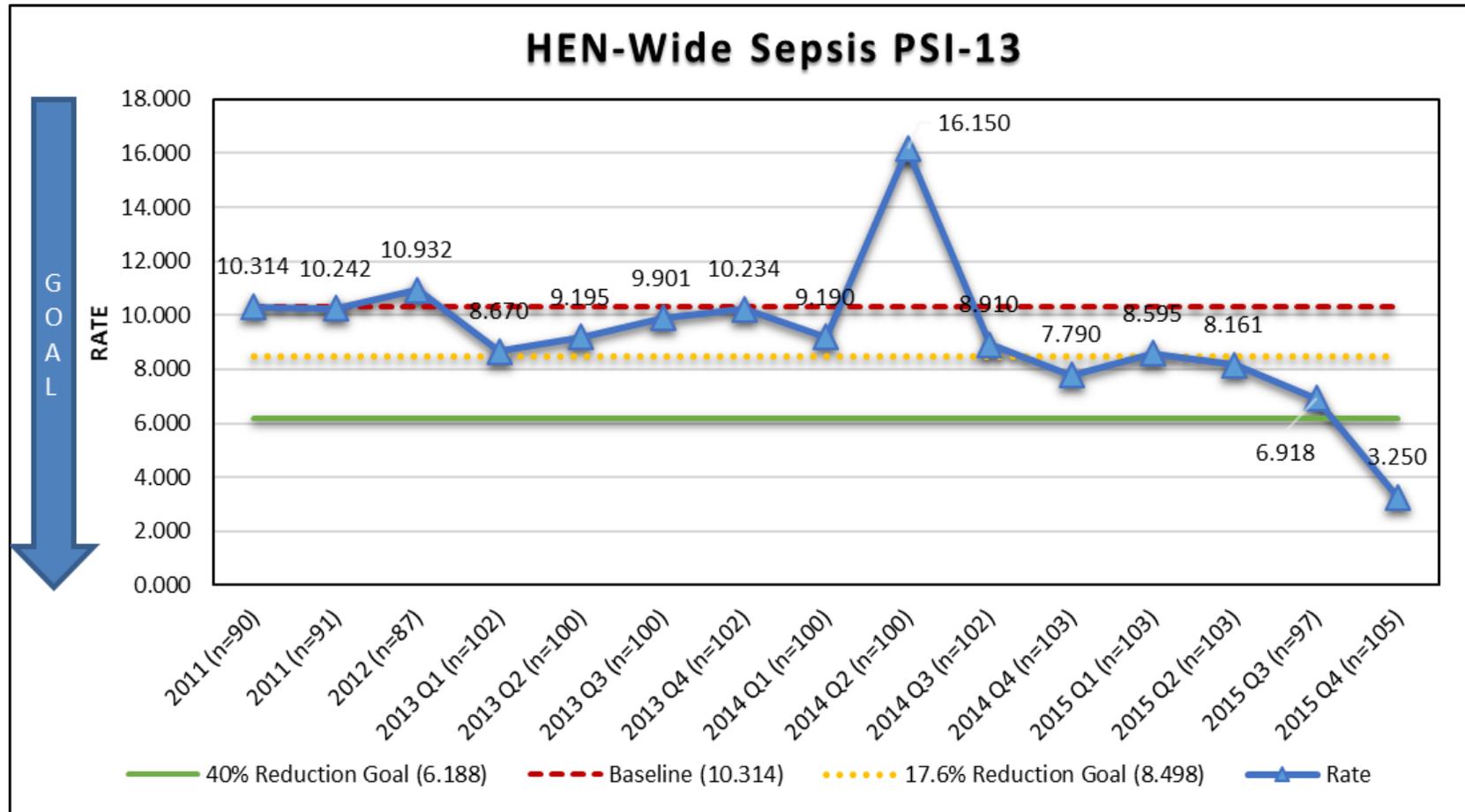
Hospital Challenges

- Correct application of SEP-1 core measures
- Lack of early sepsis recognition and treatment protocols
- Delay in orders for antibiotics, etc.
- Lack of provider buy-in for 3 and 6 hour bundles
- Incomplete hand-off communication
- Documentation (EHR vs. paper)
- Absence of sepsis executive and physician champions
- Little in-house education for healthcare practitioners

HAP PA-HEN Results: 36% Reduction



HAP PA-HEN Results: 68% Reduction



Lessons Learned

- Identify and engage champions early
- Convene a multidisciplinary team
- Hold practitioners and providers accountable
- Data sharing and transparency
- Educate, educate, educate
- Include front line staff in information sharing
- Create orders sets and pathways based on 3 and 6 hour bundles

➤ Moving Forward

Hospital Improvement Innovation Network (HIIN)

- Two years with third option year PfP CMS Collaborative
 - Collaboration with QIO-QIN
 - Preventing readmissions from sepsis
 - Continued opportunity to decrease mortality
 - Assist to sustain gains made in HEN 2.0
 - Promote focus and adherence to 3 and 6 hour bundle practices
 - Addition of data analysts on HAP team – will work closely with hospitals for real-time improvement

Final Words From Our Hospitals

“Thank you for the opportunity to participate in this program, and for helping us to improve patient care.”

“This program was highly successful.”

“Thank you for the opportunity to use a collaborative approach for improving safe and appropriate patient care.”

“We have enjoyed the opportunity to participate in this collaborative allowing open sharing of process improvement projects and dialogue with other hospitals in PA on this important focus to save lives.”

“Can’t thank you enough for your guidance, transparency and recommendations on how we are making a dent in sepsis!”

Questions?

Contact Information

Janette Bisbee, MSN, RN-BC, NHA
jbisbee@haponline.org
717-561-5372



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