

HQIC Patient Safety: Adverse Drug Events

Welcome!

- All lines are muted, so please ask your questions in the Chat Panel
- For technical issues, chat to 'All Panelists'
- Please be aware that this event will be recorded

We will get started shortly!

HQIC Adverse Drug Events: Data Access and Definitions



Jennifer Massey, PharmD Alliant Health Solutions Carol Snowden, RN, BSN Alabama Hospital Association





COLLABORATORS:

Alabama Hospital Association
Alliant Health Solutions
Comagine Health
Georgia Hospital Association
KFMC Health Improvement Partners
Konza

Hospital Quality Improvement

Welcome from all of us!













Adverse Drug Event Co-Leads



Carol Snowden, RN, BSN
Carol has over 20 years of experience in clinical nursing and quality improvement. She joined the Alabama Hospital Association as Quality Director in March 2021.

Contact: csnowden@alaha.org



Jennifer Massey, PharmD

Jennifer has 15 years of health care experience, including clinical pharmacy in the acute care hospital setting and in various roles at Alliant Health Solutions working on the CMS contract for the Quality Innovation Network–Quality Improvement Organization (QIN–QIO). She currently serves as the SME for Opioids and Adverse Drug Events for HQIC.

Contact: Jennifer.Massey@allianthealth.org

Learning Objectives

- Learn Today:
 - Understand data definitions
 - Availability of the Alliant Data Portal
 - Future plans for ADE Patient Safety Network Series
- Use Tomorrow:
 - Access the Alliant Data Portal
 - Review available data and use the data to initiate adverse drug event (ADE) interventions



Combined ADE Performance Groupings

4. Reduce ADE (Measure 2.4)			
Groups	# Hospitals		
0-6.9% Reduction	5		
7-12.9% Reduction	5		
Greater than 13% Reduction	42		
Maintaining Zero Rate	31		
Worsening	67		
Total	150		

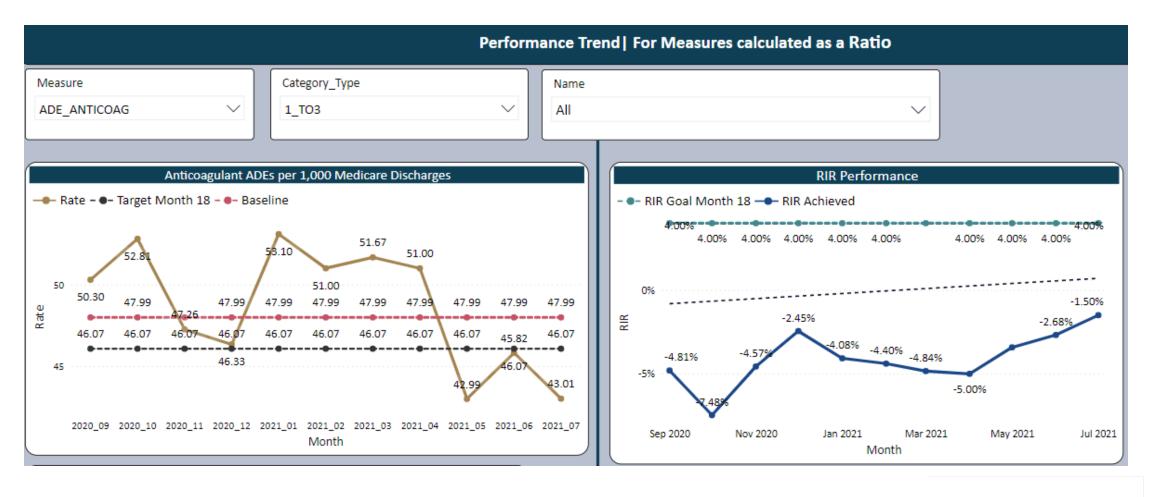


Anticoagulant ADE Measure Definition

Measure Name	Anticoagulant Related Adverse Drug Events per 1,000 Acute Inpatient Admissions	
Flat File Measure Name	ADE_ANTICOAG	
Measure Type	Outcome	
Measure Description	Adverse Drug Events (ADEs) related to Anticoagulants found in an inpatient claim not present on admission (POA)	
Numerator	Number of admissions with an ICD-10 code for an Anticoagulant ADE documented that was not present on admission	
Denominator	Number of Medicare FFS discharges	
Denominator Exclusions	None	
Rate Calculation	(number of admissions with an Anticoagulant ADE not POA / number of Medicare FFS discharges) x 1000	
Data Sources	Medicare FFS part A claims	
Specifications/Definitions/ Recommendations	See HQIC_ICD10_Codes.xlsx for list of Anticoagulant ADEs	
Baseline Period	Calendar Year 2019	
Reporting Period	Monthly beginning Sep 2020	



Comprehensive Anticoagulant ADE Rate and RIR





Hospital Specific ADE Anticoag Rate – Portal Access View



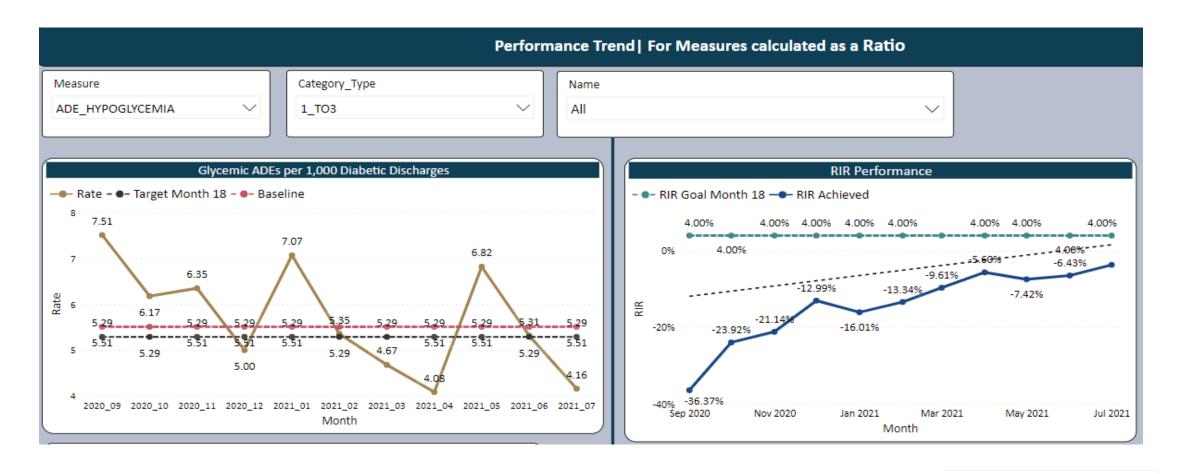


Hypoglycemic ADE Measure Definition

Measure Name	Hypoglycemic Related Adverse Drug Events per 1,000 Acute Inpatient Admissions with Diabetes	
Flat File Measure Name	ADE_DIABETES	
Measure Type	Outcome	
Measure Description	Adverse Drug Events (ADEs) related to Hypoglycemia found in an inpatient diabetic claim not present on admission (POA)	
Numerator	Number of admissions with an Hypoglycemic ADE documented not present on admission	
Denominator	Number of Medicare FFS discharges where a claim for diabetes was present as a primary or secondary diagnosis	
Denominator Exclusions	Medicare FFS claims without a primary or secondary diagnosis of diabetes	
Rate Calculation	(number of diabetic admissions with a Hypoglycemic ADE not POA / number of Medicare FFS discharges with a dx of diabetes) x 1000	
Data Sources	Medicare FFS part A claims	
Specifications/Definitions/	See HQIC_ICD10_Codes.xlsx for list of Hypoglycemic ADEs and Diagnosis Codes for	
Recommendations	Diabetes	
Baseline Period	Calendar Year 2019	
Reporting Period	Monthly beginning Sep 2020	



Comprehensive Glycemic ADE Rate and RIR





Hospital Specific ADE Glycemic Rate – Portal Access View





Anticoagulation Interventions

	ADE - Anticoagulants	
Pharmacy Led Interventions	Anticoagulation Stewardship by Pharmacist	
	Warfarin dosage adjustments were made based upon known drug-drug interactions.	
	Warfarin dosage adjustments were made based upon known food-drug interactions.	
Lab Value Based Interventions	An INR was obtained and resulted before the first inpatient dose was ordered.	
	Daily INRs were obtained.	
	Critical Lab values called to nursing unit directly.	
	Dosage adjustments were made based on the last daily INR result.	
	Schedule post-discharge INR appointment before leaving hospital and transition to outpatient Coumadin clinic or PCP.	
Protocol Based Interventions	Utilize a standard Coumadin dosing protocol.	
	Utilize a standard Lovenox dosing protocol.	
	Establish evidence-based process for reversal of bleeding events related to anticoagulant medications.	
Education Based Interventions	Warfarin counseling by pharmacists for all patients who have sub or supra-therapeutic INR on admission.	
	Patient education by nurse for all maintenance Coumadin patients will INR in range on admission.	
	Patient education by pharmacist for all new start Coumadin patients.	



Glycemic Interventions

	ADE – Glycemic Agents	
Pharmacy Led Interventions	Establish process for administering insulin supplied by pharmacy – not using home meds while inpatient.	
	Establish double check system for U-500 administration.	
Prescriber Led Interventions	Patient was NOT receiving Sliding Scale Insulin alone.	
	If Glucose < 100 occurred, the insulin regimen was reduced.	
	Multidisciplinary Diabetes Safety Team	
Notification/Documentation Interventions	Notification process for patients who are prescribed BG lowering agents who are suddenly NPO.	
	Notification process for patients who have BG < 100.	
	Documentation exists showing appropriate meal-insulin coordination.(insulin within 15 minutes before or after meal delivery to patient)	
	Review nutritional intake documentation and confirm accuracy.	
Education Based Interventions	Discharge counseling for all patients who received glucose elevating or glucose-lowering agents on admission.	
	Patient education related to insulin written by dietician and computer-generated at discharge.	



Future ADE Series Schedule

Date	Main Topic	Interventions Covered	High Performing Hospital
November 30	Data/Portal	Overview of All	
December 28	Anticoagulants	Lovenox protocol	Russell Medical Center
January 25	Glycemics	Prescriber Led – focus on SS/Basal Insulin	
February 22	Anticoagulants	Coumadin protocol	
March 22	Glycemics	Notification/Documentation	
April 26	Anticoagulants	Lab Value Based Interventions	



Resources

Alliant/HQIC Portal Training Videos

- Registration and Multi-Factor Authentication: <u>http://youtu.be/qSDHMpcFbNc?hd=1</u>
- Portal Navigation and Feature Overview: http://youtu.be/vEvpgaMIXRs?hd=1



Key Takeaways



Learn Today:

- Understand data definitions
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- Future plans for ADE Patient Safety Network Series

• Use Tomorrow:

- Access the Alliant Data Portal
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How will this change what you do? Please tell us in the chat.



Questions?



Email us at HospitalQuality@allianthealth.org or call us 678-527-3681.



HQIC Goals



Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services



Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce *C. diff* in all settings



Quality of Care Transitions

- ✓ Convene community coalitions
- ✓ Identify and promote optical care for super utilizers
- ✓ Reduce community-based adverse drug events

Upcoming Events

December 28th, 2021 12:30pm EST

(occurring the fourth Tuesday of each month)



Anticoagulant and Glycemic ADE Patient Safety Network
Jennifer Massey and Carol Snowden

www.quality.allianthealth.org



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Thank you for joining us! How did we do today?



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