

# HQIC Patient Safety: Sepsis

## Welcome!

- All lines are muted, so please ask your questions in Q&A.
- Please actively participate in polling questions that pop up on the lower right-hand side of your screen.
- Please be aware that this event will be recorded.

## We will get started shortly!

# HQIC Sepsis



November 17, 2021



Rhonda Bowen, BSHS, CIC, CPPS, CPHQ, CPHRM

Amy Ward, MS, BSN, RN, CIC

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# Making Health Care Better *Together*

## **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!



# HAI Reduction Co-Leads



**Amy Ward, MS, BSN, RN, CIC**

**INFECTION PREVENTION SPECIALIST**

Amy is a registered nurse with a diverse background in acute care nursing, microbiology, epidemiology and infection control. She is passionate about leading and mentoring new and future infection preventionists in their career paths.

Contact: [Amy.Ward@Allianthealth.org](mailto:Amy.Ward@Allianthealth.org)



**Rhonda Bowen, BSHS, CIC, CPPS, CPHQ, CPHRM**

**SENIOR IMPROVEMENT ADVISOR, PATIENT SAFETY**

Rhonda has worked in rural and critical access hospitals for over 30 years and directed patient safety, quality and infection prevention and control for the past 14 years. She is passionate about all aspects of patient safety and infection prevention and control, especially the effects of health literacy and organizational safety culture on patient outcomes.

Contact: [RBowen@Comagine.org](mailto:RBowen@Comagine.org)



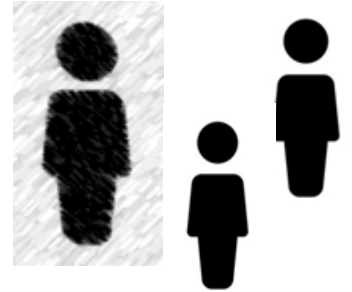
# Learning Objectives

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- Learn Today:
  - Understand the HQIC CMS Sepsis Measures
  - Availability of sepsis data in the Alliant portal
  - Tool to conduct gap assessment
- Use Tomorrow:
  - Access your facility's data in the Alliant portal
  - Review portal and internal data
  - Conduct gap analysis

# Sepsis – The Big Deal!

- Over 1.1 million Medicare sepsis cases annually in the U.S.
- Contributes to 270,000 deaths
  - 1 in 3 patients who die in a hospital is diagnosed with sepsis.
- Six-month mortality rate: About **60% for septic shock** and **36% for severe sepsis** among inpatient Medicare Fee-For-Service patients.
- Annual Medicare Fee-For-Service inpatient cost: \$22.4 billion
- Medicare inpatient and SNF admissions are estimated at \$41.5 billion.



<https://www.healthleadersmedia.com/clinical-care/new-data-sepsis-prevalence-and-costs-astonished-dhhs-researchers>

# Sepsis Mortality Measure

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- Numerator:
  - Number of Medicare patients who died within 30 days of being diagnosed with sepsis.
- Denominator:
  - Number of Medicare patients who were admitted with a primary or secondary diagnosis of sepsis; including sepsis present on admission.
- Display: numerator and denominator as ratio
- Baseline = Calendar Year 2019
- RIR Improvement Goal: Year 1 = 2% Year 2 = 6% Year 3 = 9%
- Measure Shorthand in Graphs: SEPSIS\_MORT 2

# Sepsis Shock Measure

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- Numerator:
  - Post-operative sepsis cases, secondary diagnosis
- Denominator:
  - Elective surgical discharges of persons over age of 18
- Display: numerator and denominator as ratio
- Baseline = Calendar Year 2019
- RIR Improvement Goal: Year 1 = 2% Year 2 = 6% Year 3 = 9%
- Measure Shorthand in Graphs: SEPSIS\_SHOCK



# Sepsis: Mortality

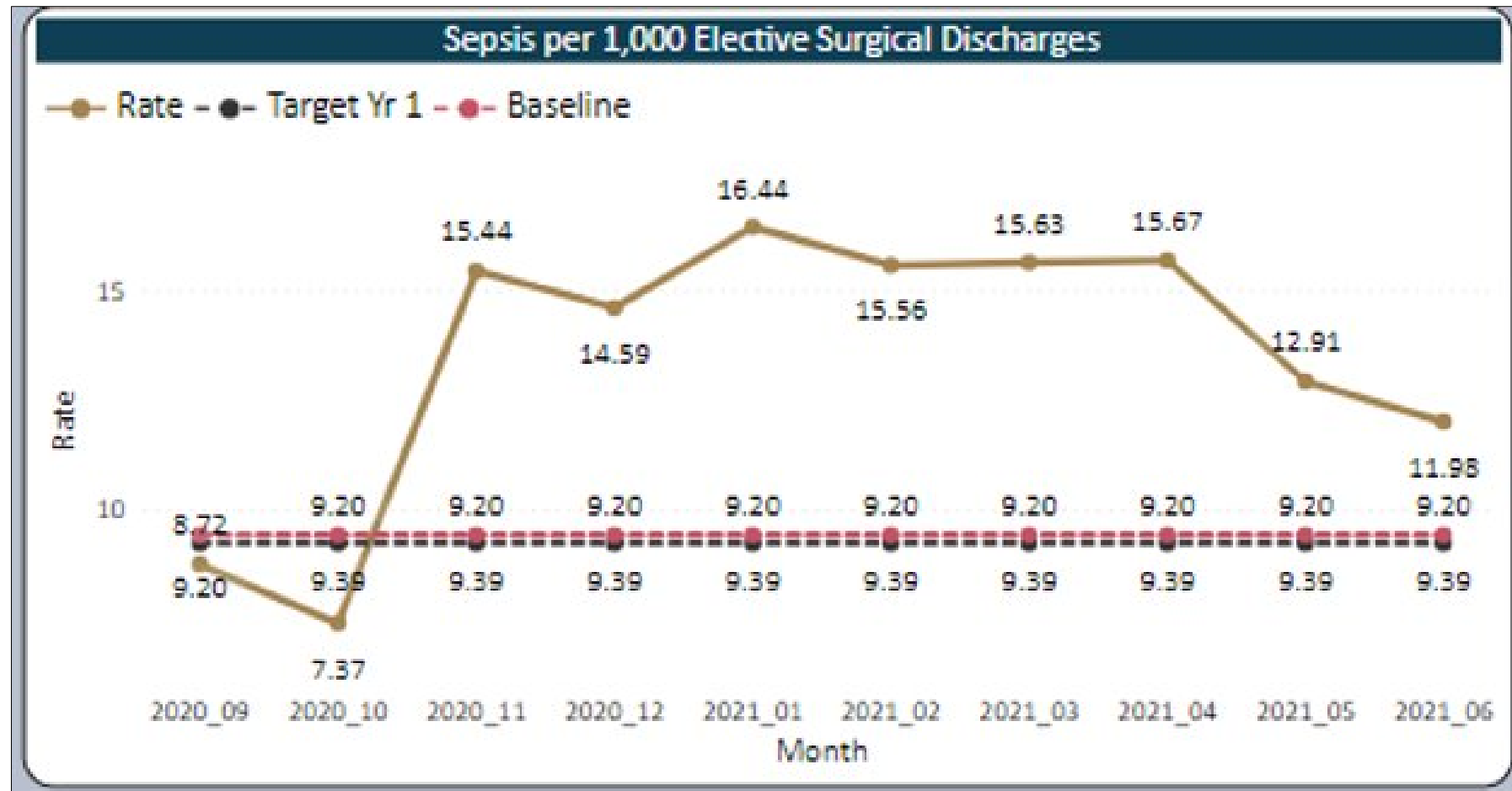
## Relative Improvement Over Baseline

CCN	Hospital Name	BaselineRate	Target for Year 1	Running Numerator	Running Denominator	Running Ratio	RIR Achieved
	TO3	264.581	259.289	3,366.00	9,983.00	337.17	-27.44%

Events Avoided to date (based on baseline rate)

-725

# HQIC Sepsis Shock



# HQIC Sepsis Shock

Relative Improvement Over Baseline									
CCN	Hospital Name	BaselineRate	Target for Year 1	Running Numerator	Running Denominator	Running Ratio	Difference from Target Yr1	RIR Goal	RIR Achieved
	▲								
	TO3	9.549	9.358	134.00	10,009.00	13.39	-4.03	2.00%	-40.20%

Events Avoided to date (based on baseline rate)

-38

Relative Improvement from Baseline Group

Worsen

# Measurement Data vs. Improvement Data

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- Sepsis data in the portal is Medicare Claims Data; 4-6 month data lag
  - Great for monitoring, evaluation and validating local sources of data
- Need to identify and generate local, identifiable real-time data source
  - Electronic Health Record
  - Health Information Exchange

# HQIC Reaching Our Goal

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- Identify your hospital real-time data sources
- Where is your organization today?
- Gap assessment tool

# Key Takeaways

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- Learn Today:

- CMS measures
- Alliant Data Portal
- Gap assessment tool



- Use Tomorrow:

- Access and review data on Alliant Portal
- Review internal data resources
- Conduct gap assessment

**How will this change what you do? Please tell us in the chat box.**



# Next Sessions

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Session 2: Gap assessment findings

Session 3: Integrating Health Literacy and Patient Safety

Session 4: Best practice tools

Session 5: Discussion: Share your successes and challenges



# Resources

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- [AHRQ PSI 13 Postoperative Sepsis Rate.pdf](#)
- [Hospital Toolkit for Adult Sepsis Surveillance - CDC](#)
- [Hospital Toolkit for Adult Sepsis Surveillance - CDC](#)
- [Sepsis Early Recognition and Treatment Tool](#)
- [Alliant Hospital Quality Improvement Website](#)
- [Alliant HQIC Sepsis Coaching Package](#)

# Questions?

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Email us at [HospitalQuality@allianthealth.org](mailto:HospitalQuality@allianthealth.org) or call us at 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 optimal care for super utilizers
- ✓ Reduce community-based adverse drug events

# Upcoming Events

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**December 15, 2021**



## **Sepsis: Gap Assessment Findings**

**12:00 p.m. Eastern, 10:00 a.m. Mountain, 9:00 a.m. Pacific**

**Amy Ward and Rhonda Bowen**

Event registration and information:

[www.quality.allianthealth.org](http://www.quality.allianthealth.org)

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

Alliant Health Solutions



AlliantQIO



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