

Sepsis Gap Assessment and Action Steps

A gap analysis is used to assess the difference between actual practice and expected performance (i.e., facility policies and procedures, regulations, or practice guidelines). It is useful to compare best practice guidelines against your currently accepted practices. It is important to assess practice through observation and audit rather than relying on policy wording alone, as practice can vary from policy.

TR - QII ID: _____ CCN: _____

Facility Name: _____ Date: _____

COMPONENTS	YES	NO	NA	COMMENTS/ACTION STEPS
Organizational Commitment and Leadership Support				
Does the facility have a sepsis program or sepsis prevention initiatives? Describe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does your sepsis program have leadership support, including CEO, facility administrator, medical director, director of nursing, and clinical staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the facility have one leader or two co-leaders responsible for sepsis initiatives or outcomes? (CDC recommends physician and nurse co-leaders)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are medical staff, nursing staff and clinical leadership actively involved in sepsis prevention and management? How so?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is managing sepsis aligned with the facility's quality, safety, or organizational goals, as evidenced by documented strategic plans, goals, or committee charters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the facility have a multidisciplinary team to address sepsis and share sepsis data updates provided at regular meetings (i.e., infection control committee meeting, quality assurance performance improvement meeting, antimicrobial stewardship meeting) with facility leadership, medical director, providers, and clinical and nursing staff to promote continual improvement? If yes, what is the meeting frequency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the team report sepsis data and outcomes to QAPI Committee regularly as evidenced by meeting minutes, data presentations, action plans, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is sepsis data shared with staff? What data? How is data shared with staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the facility provide feedback to individual clinicians regarding the care of recent residents with sepsis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is sepsis data shared with patients/families?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Early Identification/Screening/Risk

Has the facility implemented a standard process to screen for sepsis on admission to the facility, routinely throughout their stay, and when there is a change in clinical condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the facility have standard care pathways, order sets, or processes in place for the management of sepsis that addresses:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Admission screening for sepsis risk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Early recognition of sepsis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Sepsis care pathway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Change in condition communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Clinical evaluation and diagnosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Antimicrobial selection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Indications for treatment escalation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Resident & family education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the process include specific actions by a nurse when a positive screen is obtained, such as a nurse-driven protocol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

System Design and Policies

Sepsis order sets are in place and utilized by providers (CPOE/paper).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the facility have structures and processes in place to support effective hand-offs of residents with sepsis, such as templated notes to document sepsis diagnosis and treatment information?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
How does the facility identify concerns/resistance/barriers to components of bundles and developed solutions (e.g., sepsis care pathways)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Do you audit care plans for implementation of interventions for those identified as at risk for sepsis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Measurement/Continuous Improvement

Does the facility have a process for real-time monitoring of residents with early signs of sepsis? (i.e., sepsis log, electronic alert)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the facility have a concurrent review process for bundle adherence and defects review?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a system to address deviations from evidence-based care processes with physicians, nurses, and other clinical staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Education			
Do you have a sepsis early recognition training program and, which staff is required to attend?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the facility provide sepsis-specific training and education in the hiring or on-boarding process for healthcare staff and trainees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does hospital staff have an annual training and competency assessment for sepsis recognition and response/treatment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How do you utilize skills days for clinical staff sepsis training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the facility post information on recognition of sepsis in prominent areas for patient-facing staff (e.g., attached to vital signs machines, in staff break rooms)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What tools are used to educate staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What tools do you use to educate patients and families?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does your patient and family advisory council review sepsis education materials for patients and families?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you provide information/education to the community? If so, list.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the facility implemented tools (e. g., pocket cards, checklists, posters) to assist bedside staff with sepsis recognition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Comments:			

REFERENCES:

Sepsis Coordinator Network [Gap Analysis Tool](#)

HQIN [Hospital Sepsis Gap Analysis](#)

[CDC Hospital Sepsis Program Core Elements](#)

[CDC Hospital Sepsis Program Assessment Tool](#)

This material was prepared by Alliant Health Solutions, a Quality Innovation Network – Quality Improvement Organization (QIN – QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No.12SOW-AHS-QIN-QIO-TO1-NH-5582-04/15/24



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