Reducing Patient Harms

Region 1 MT Flex DON/QIC Meeting
October 24, 2019

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Learning Outcomes

- Define patient harm
- Describe at least 3 types of patient harms
- Describe 2-3 improvement initiatives to reduce patient harms
- Discuss various methods of analyzing and interpreting data to identify trends, issues.

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Definition

- Countermeasure:
  - Actions taken to reduce or eliminate the root causes of problems that are preventing you from reaching your goals.
  - Needs to be measurable

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What is patient harm?

- Institute of Medicine: "To Err is Human" (1999) and "Crossing the Quality Chasm" (2001)
- Patient harm = Any physical or psychological injury or damage to the health of a person, including both temporary and permanent injury.
- Versus "Medical Error" which is a preventable adverse effect of care, whether or not it is evident or harmful to the patient.

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HRET/HIIN Harms

- ADE
- Airway Safety
- Antibiotic Stewardship
- CAUTI
- CDI
- CLABSI
- Culture of Safety
- Diagnostic Error
- Iatrogenic Delirium
- Falls
- Malnutrition
- MDROs
- PFE
- Pressure Ulcers/Pressure Injuries
- Radiation Exposure
- Readmissions
- Sepsis
- SSI
- VAE
- VTE

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Safety Pillar

Measures
Readmits
Surgical Site Infections/Post Operative Infections
All Facility Falls (Visitors, Patients, Employees)
Adverse Drug Events/Reactions
Medication Errors
Emergency Department: Left Without Being Seen
Inpatient: Left Against Medical Advice

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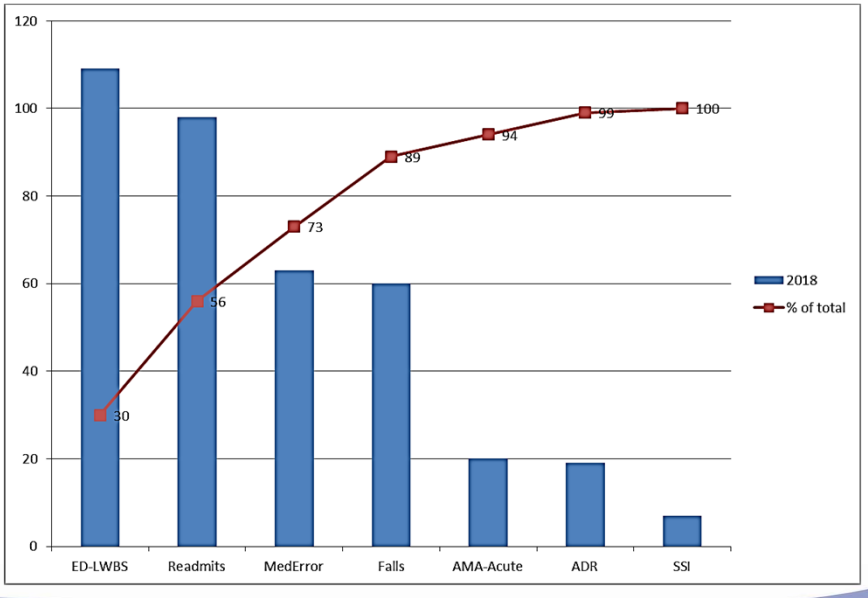

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HIIN Q42018 Cumulative Report

Harm Measure	Baseline Rate per 1000	Target Rate	Project To Date Numerator	Project To Date Discharges	Project To Date Rate per 1000	Harms Prevented	Cost Per Harm	Costs Avoided	Lives Saved
ADE Anticoagulant Safety	*	*	*	*	*	*	$ 5,746	*	*
ADE Glycemic Management	*	*	*	*	*	*	$ 5,746	*	*
ADE Opioid Safety	*	*	*	*	*	*	$ 5,746	*	*
CAUTI Rate - All Settings	0.00	0.00	0	3,393	0.00	0	$ 13,793	$0	0
CLABSI Rate - All Settings	1.24	1.00	0	3,393	0.00	4	$ 48,108	$203,023	1
Falls with Injury	8.29	6.63	14	3,393	4.13	14	$ 6,694	$94,615	0
MRSA Rate	0.00	0.00	0	3,393	0.00	0	$ 17,000	$0	0
SSI Rate, Colon	0.83	0.66	1	3,393	0.29	2	$ 28,219	$51,173	0
SSI Rate, Abd	0.00	0.00	0	3,393	0.00	0	$ 28,219	$0	0
SSI Rate, Knee	0.00	0.00	1	3,393	0.29	(1)	$ 28,219	($28,219)	(0)
SSI Rate, Hip	0.00	0.00	2	3,393	0.59	(2)	$ 28,219	($56,438)	(0)
Clostridium difficile rate	0.00	0.00	2	3,393	0.59	(2)	$ 17,260	($34,520)	(0)
Post-Op Sepsis Rate	0.00	0.00	2	3,393	0.59	(2)	$ 17,000	($34,000)	(1)
VTE /DVT	0.00	0.00	1	3,393	0.29	(1)	$ 17,367	($17,367)	(0)
Readmission Rate 30-Day All Cause	60.95	53.63	240	3,393	70.73	(33)	$ 14,394	($478,063)	0
Total Harm (per Discharge)**	**71.31**	**57.05**	**263**	**3,393**	**77.51**	**(21)**		**($299,796)**	**(0)**

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Readmission Countermeasure

- Follow up phone calls by Case Managers
- Targeted 5 high-risk diagnoses
  - CHF
  - COPD
  - Cellulitis
  - DKA
  - Pneumonia
- Made within 3 business days of discharge

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Barriers	Tactic
CMs did not recognize value and importance of reducing readmissions	Shared HIIN report with financial implications
CMs did not recognize value of the calls	CNO and CM Director established expectations
Philosophy that CM overseeing discharge had to be the one to make the call	Monthly audits with feedback • Included CM who oversaw discharge planning vs. CM who made call. • Showed cross-coverage occurred
Lack of standardized method to identify patients at high risk for readmission upon admit.	CNO implemented LACE tool October 1st • To be done by CM upon discharge • 100% of high risk patients will be called (not just the 5 diagnoses)
Measurable goal not clearly established (i.e., align with HIIN ↓12%)	Compare 2019 to 2018 and set goal accordingly

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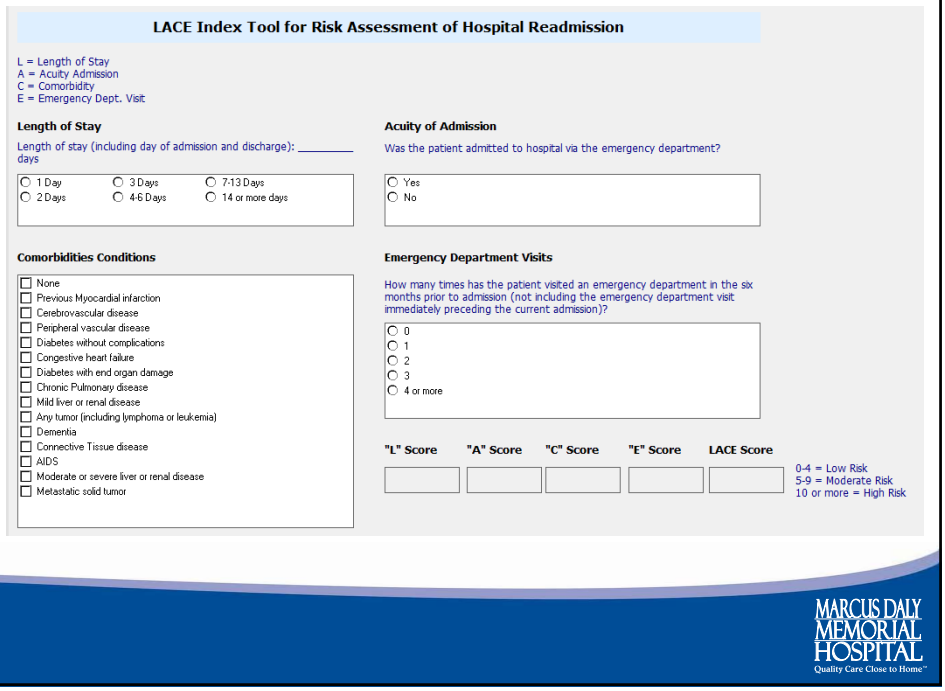

LACE Index Tool for Risk Assessment of Hospital Readmission

L = Length of Stay
A = Acuity Admission
C = Comorbidity
E = Emergency Dept. Visit

Length of Stay

Length of stay (including day of admission and discharge): _____ days

○ 1 Day ○ 3 Days ○ 7-13 Days
○ 2 Days ○ 4-6 Days ○ 14 or more days

Acuity of Admission

Was the patient admitted to hospital via the emergency department?

○ Yes
○ No

Comorbidities Conditions

☐ None
☐ Previous Myocardial infarction
☐ Cerebrovascular disease
☐ Peripheral vascular disease
☐ Diabetes without complications
☐ Congestive heart failure
☐ Diabetes with end organ damage
☐ Chronic Pulmonary disease
☐ Mild liver or renal disease
☐ Any tumor (including lymphoma or leukemia)
☐ Dementia
☐ Connective Tissue disease
☐ AIDS
☐ Moderate or severe liver or renal disease
☐ Metastatic solid tumor

Emergency Department Visits

How many times has the patient visited an emergency department in the six months prior to admission (not including the emergency department visit immediately preceding the current admission)?

○ 0
○ 1
○ 2
○ 3
○ 4 or more

"L" Score	"A" Score	"C" Score	"E" Score	LACE Score

0-4 = Low Risk
5-9 = Moderate Risk
10 or more = High Risk

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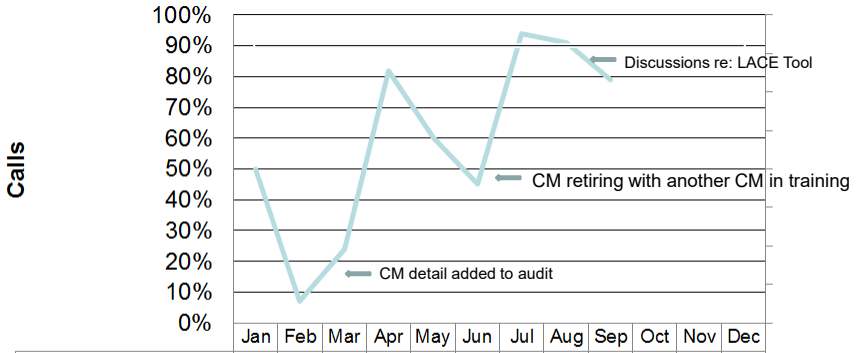
Follow up Call: Trend Analysis



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# Calls Made ≤3 Days	9	1	5	14	9	5	15	10	15			
% F/U Calls Made	50%	7%	24%	82%	60%	45%	94%	91%	79%			
Benchmark	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%

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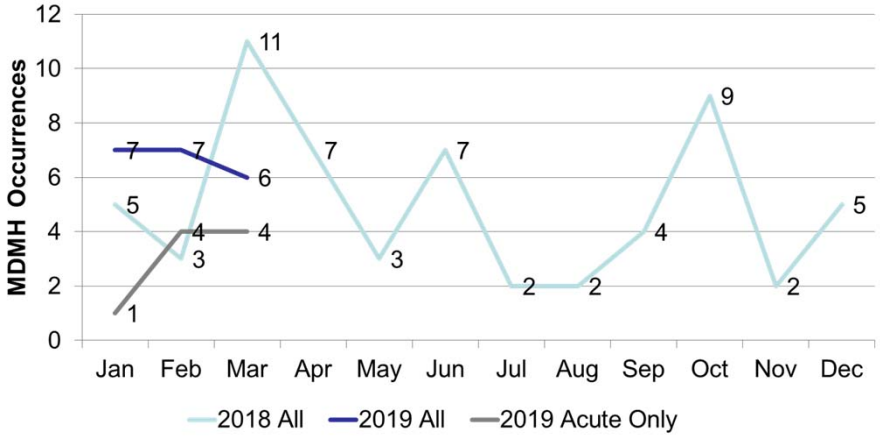
Inpatient Falls – Prior to Countermeasures



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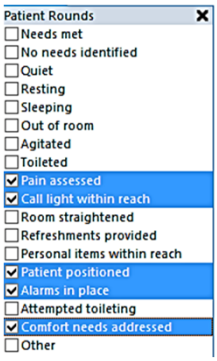
Falls Countermeasure

- Implementing purposeful rounding in acute care (March 2019) assessing 7 Ps:
  - Pain
  - Position
  - Personal needs
  - Placement of phone/call light
  - Pump
  - Prevent (remind to call and are bed alarms on?)
  - Promise to Return in 1 hour
- Chart audits to verify rounding was documented
  - No Pump and No Promise ☹



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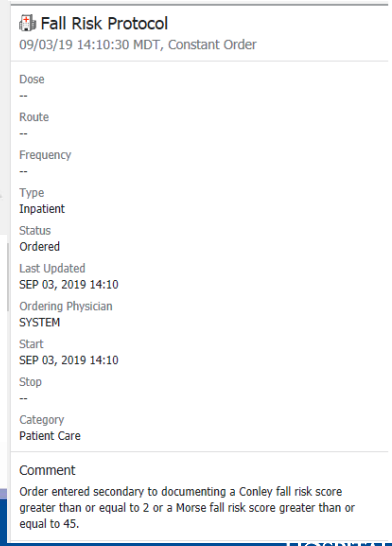

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Barriers	Tactic
Majority of falls during night shift with reduced staffing	Designated rooms with CNA station
Did not have a true comprehensive, multidisciplinary fall reduction program.	Joined HIIN SPRINT: Falls/Delirium with support from SME
EMR did not address all 7 Ps	Stopped audit; focused on developing IPOC for fall risk
High risk patients not visibly identified	Magnet, socks, arm band
Post-fall assessment not completed in EMR	Re-education ?Post-fall huddle
Lack of patient engagement in fall reduction	Multidisciplinary team to develop PFE program; Whiteboard in rooms
High census, designated fall risk rooms with other patients	Move lower fall risk patients to other rooms

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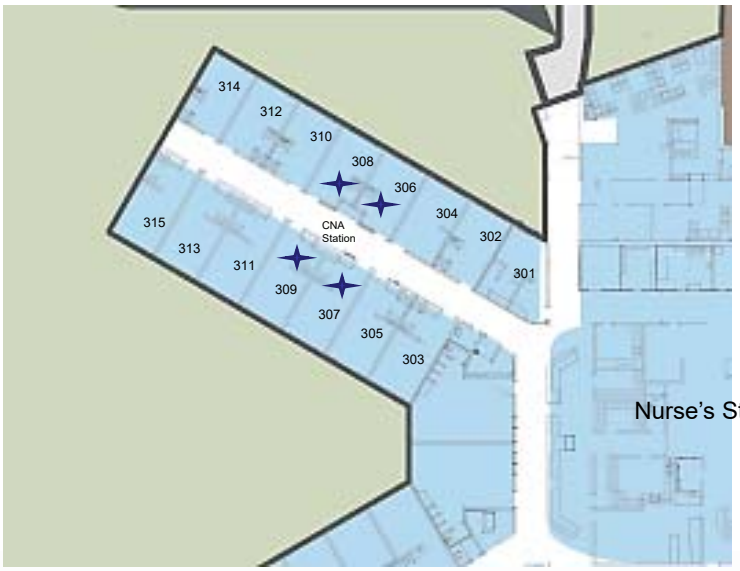

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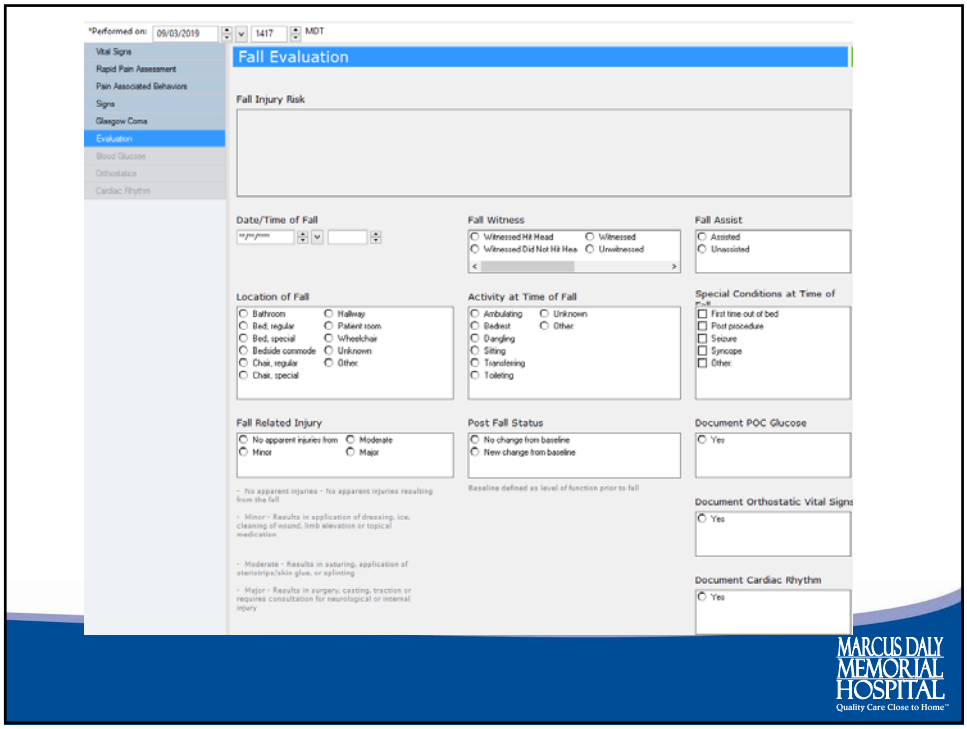
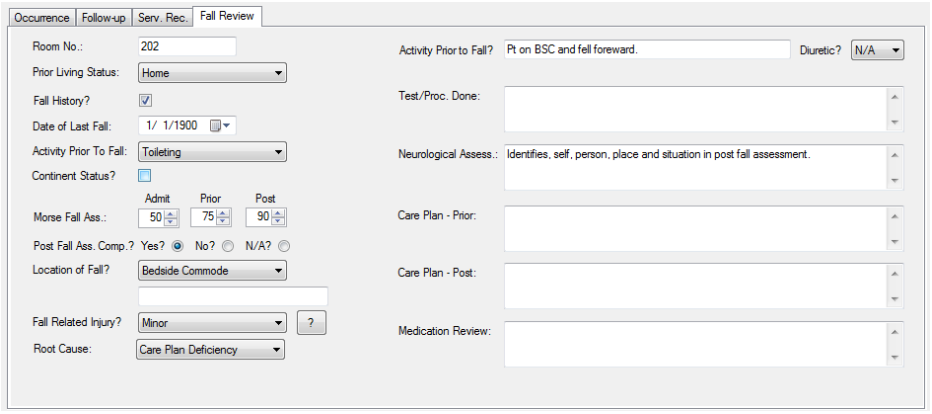


Fall Investigation Tool



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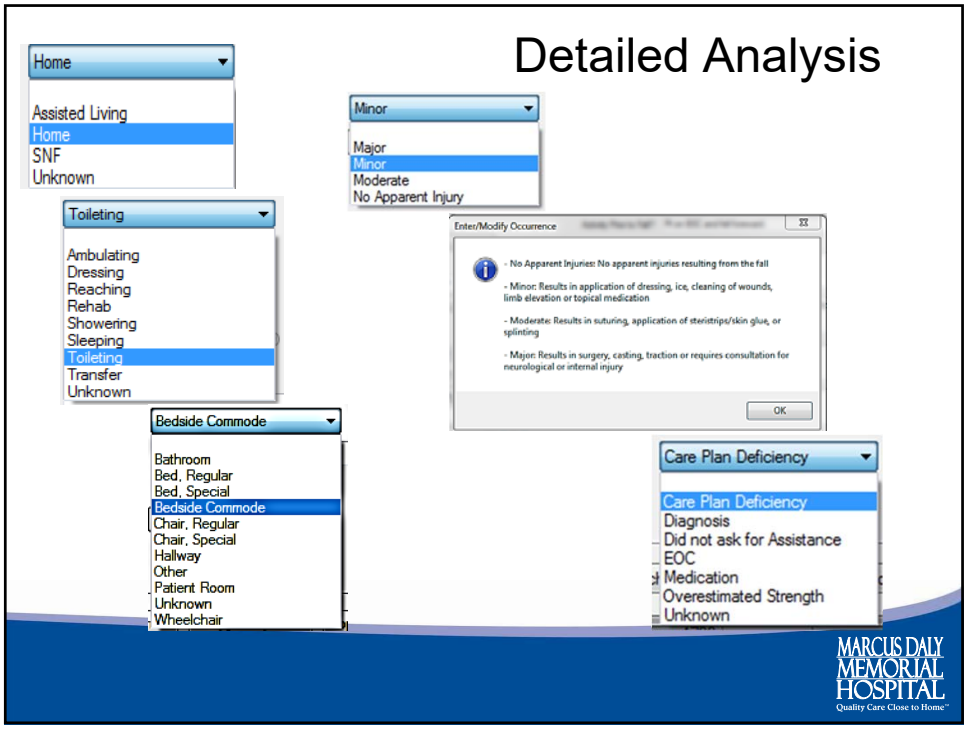
Detailed Analysis
Home
Assisted Living
Home
SNF
Unknown
Minor
Major
Minor
Moderate
No Apparent Injury
Toileting
Ambulating
Dressing
Reaching
Rehab
Showering
Sleeping
Toileting
Transfer
Unknown
Enter/Modify Occurrence
- No Apparent Injuries: No apparent injuries resulting from the fall
- Minor: Results in application of dressing, ice, cleaning of wounds, limb elevation or topical medication
- Moderate: Results in suturing, application of steristrips/skin glue, or splinting
- Major: Results in surgery, casting, traction or requires consultation for neurological or internal injury
OK
Bedside Commode
Bathroom
Bed, Regular
Bed, Special
Bedside Commode
Chair, Regular
Chair, Special
Hallway
Other
Patient Room
Unknown
Wheelchair
Care Plan Deficiency
Care Plan Deficiency
Diagnosis
Did not ask for Assistance
EOC
Medication
Overestimated Strength
Unknown
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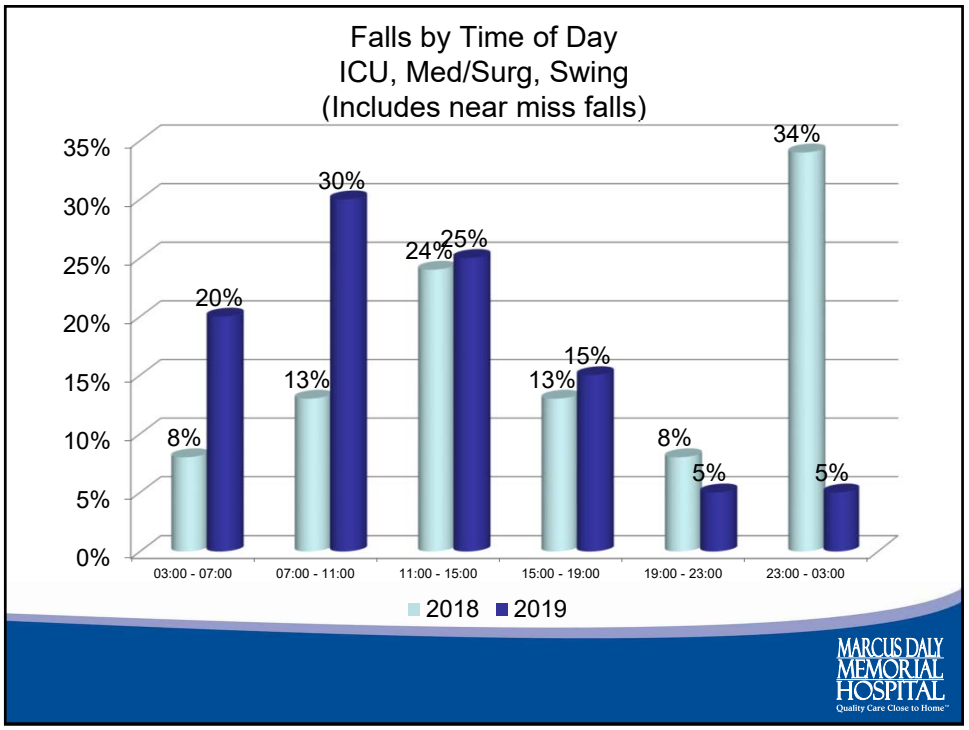
Falls by Time of Day
ICU, Med/Surg, Swing
(Includes near miss falls)
35%
30%
25%
20%
15%
10%
5%
0%
8%
20%
13%
30%
24%
25%
13%
15%
8%
5%
34%
5%
03:00 - 07:00
07:00 - 11:00
11:00 - 15:00
15:00 - 19:00
19:00 - 23:00
23:00 - 03:00
2018
2019
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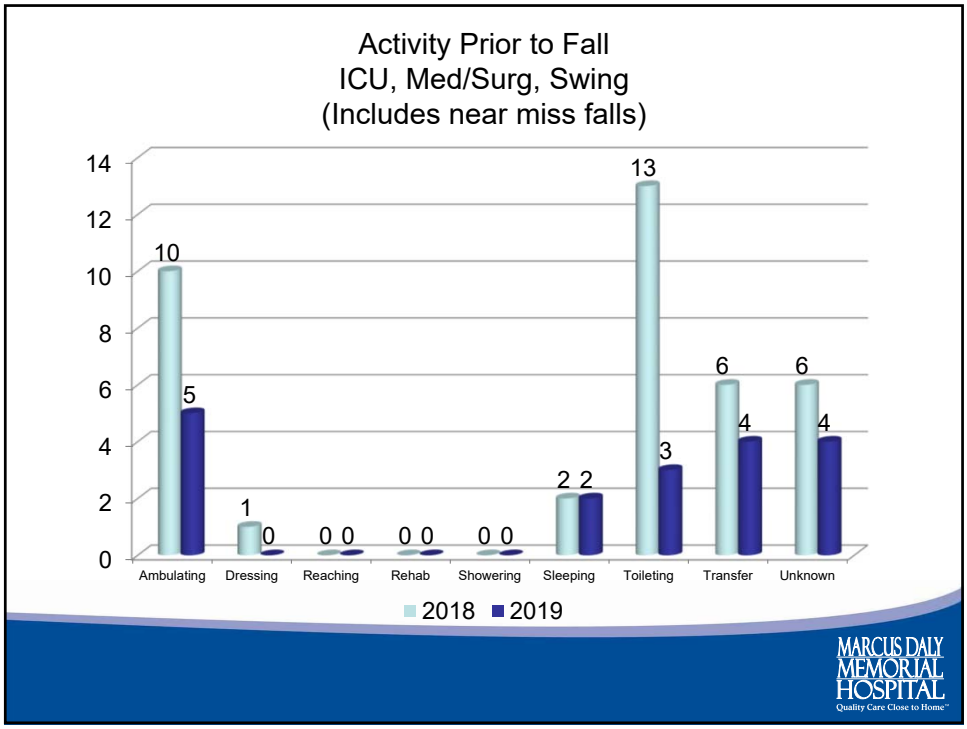
Activity Prior to Fall
ICU, Med/Surg, Swing
(Includes near miss falls)
14
12
10
8
6
4
2
0
10
5
1
0
0 0
0 0
0 0
2 2
13
3
6
4
6
4
Ambulating
Dressing
Reaching
Rehab
Showering
Sleeping
Toileting
Transfer
Unknown
2018
2019
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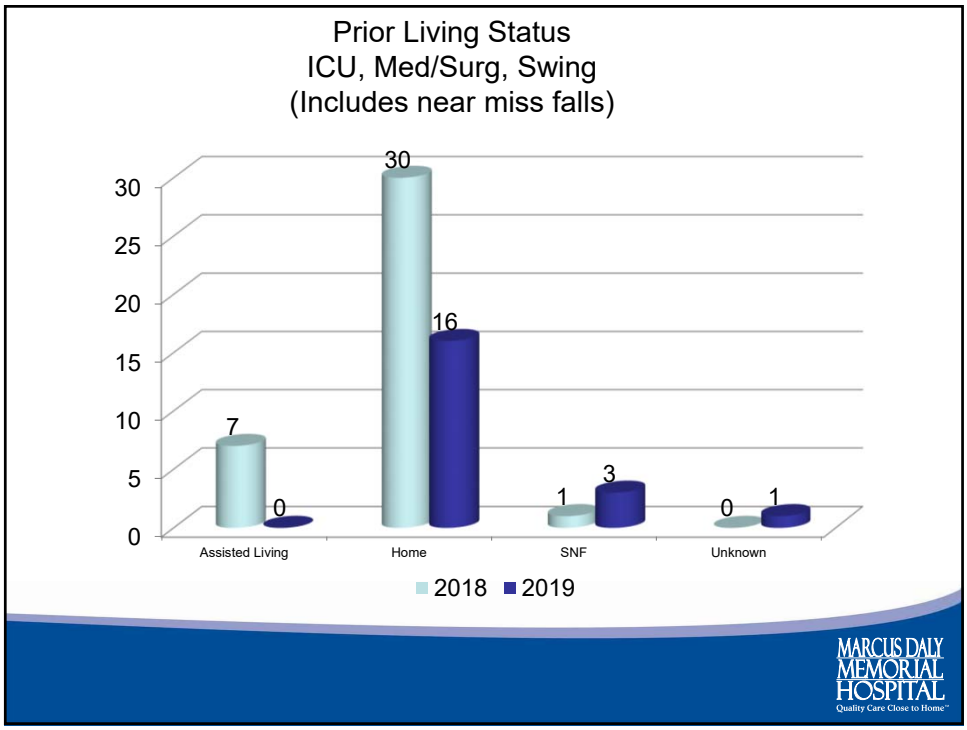
Prior Living Status
ICU, Med/Surg, Swing
(Includes near miss falls)
30
25
20
15
10
5
0
7
0
30
16
1
3
0
1
Assisted Living
Home
SNF
Unknown
2018
2019
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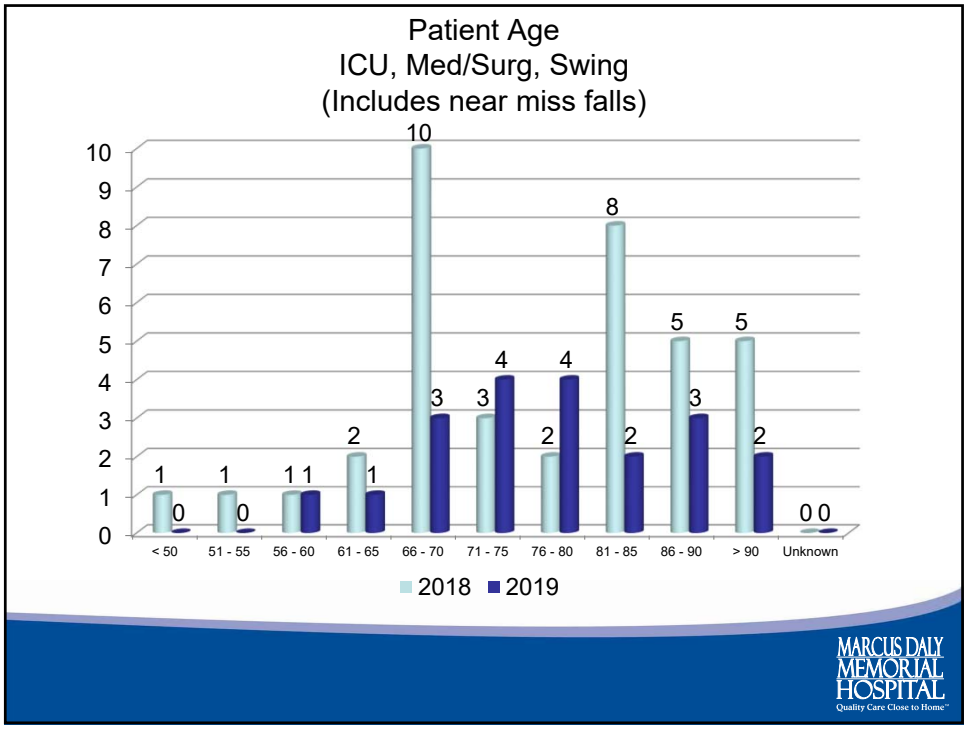
Patient Age
ICU, Med/Surg, Swing
(Includes near miss falls)
10
9
8
7
6
5
4
3
2
1
0
1 0
1 0
1 1
2 1
10 3
3 4
2 4
8 2
5 3
5 2
0 0
< 50
51 - 55
56 - 60
61 - 65
66 - 70
71 - 75
76 - 80
81 - 85
86 - 90
> 90
Unknown
2018
2019
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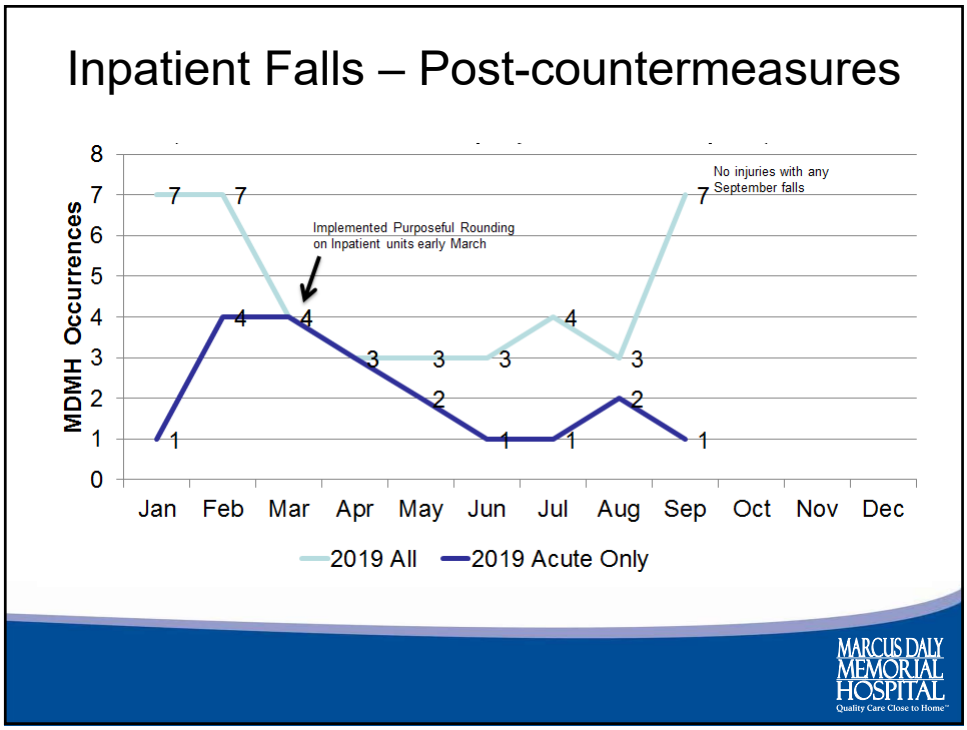
Inpatient Falls – Post-countermeasures
MDMH Occurrences
8
7
6
5
4
3
2
1
0
7 7 4 3 3 3 4 3 7
1 4 4 3 2 1 1 2 1
Implemented Purposeful Rounding on Inpatient units early March
No injuries with any September falls
Jan
Feb
Mar
Apr
May
Jun
Jul
Aug
Sep
Oct
Nov
Dec
2019 All
2019 Acute Only
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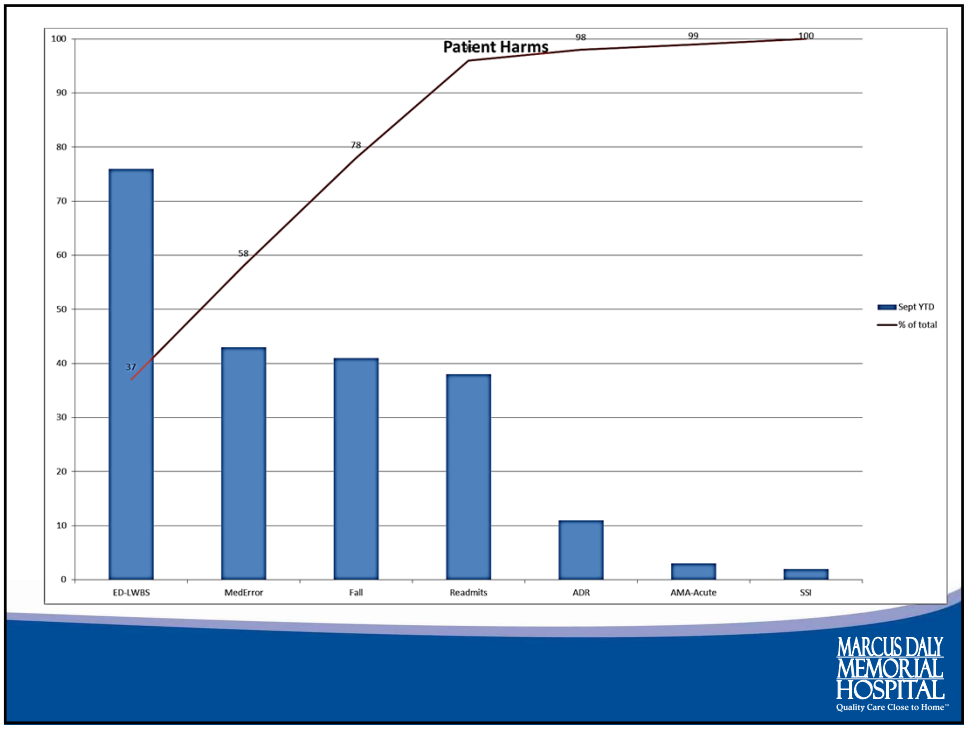

Lessons Learned

- Are you asking the right questions?
- Sometimes you have to ditch the data (no value)!
- Get other perspectives
- Before moving on: Are the improvements due to scrutiny or are they truly hardwired?

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References/Resources

- Forster, A., Murff, H., Peterson, J., Gandhi, T., Bates, D. The incidence and severity of adverse events effecting patients after discharge from the hospital. 2003 *Annals of Internal Medicine*. Feb 4; 138 (3): 161-7.
- http://www.hret-hiin.org/topics/index.shtml
- https://asq.org/quality-resources/pareto
- NQF Patient Safety Terms and Definitions. NQF. 2/18/2010

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