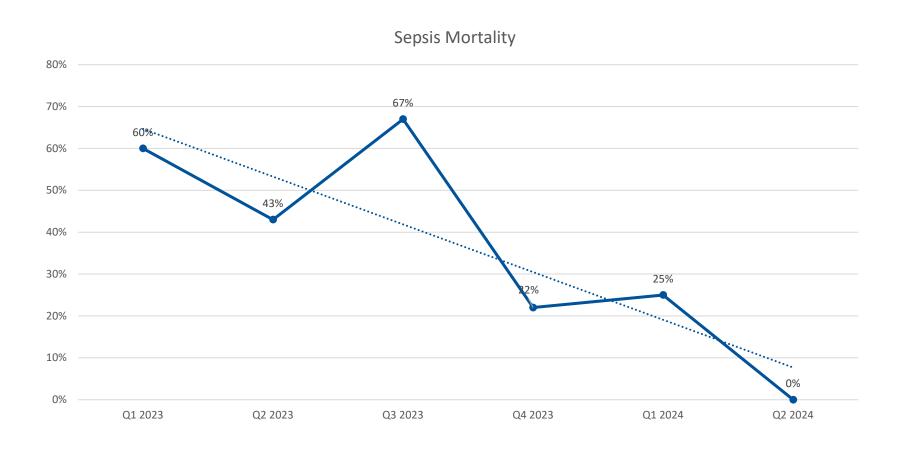
# Improving Sepsis Care

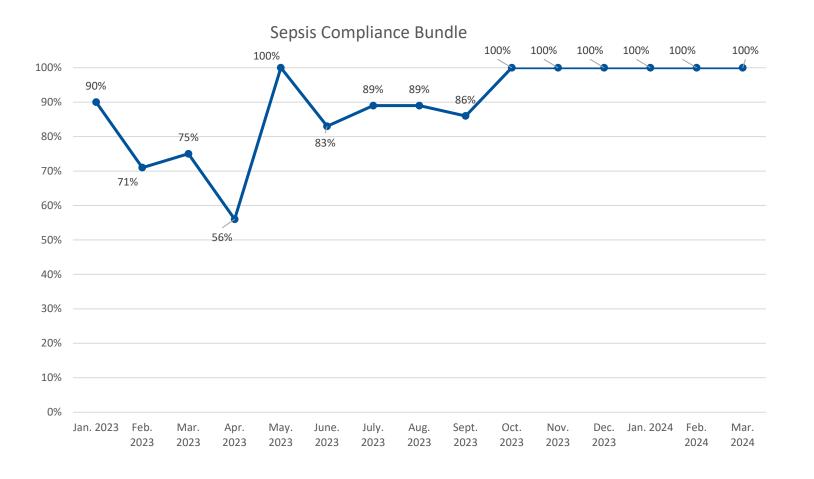
Collaborations improving the delivery of care for patients across the continuum

- Healthcentric Advisors Qlarant
- Kentucky Hospital Association
  Q3 Health Innovation Partners
- Superior Health Quality Alliance

# Improving Sepsis Care: Data Story



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# The Opportunity to Improve Sepsis Care

- What was the issue/problem?
- Identifying SEPSIS patients that don't meet SIRS in the triage assessment
- *Meeting all bundle elements*
- Why was it important?
- Early detection and administration of Fluids and Antibiotics means better patient outcomes/saves lives.
- Describe what patients and staff were experiencing
- Attempting to meet all the requirements in a timely manner is taxing on the staff.
- Explain the impact on them (burnout, patient safety, near misses, etc.)
- Hard on staff- Frustration with failing measure if missing one small section.

# What did you do:

- Summarize your project steps: (Walk through the process)
  - Collecting and using data
  - Reviewed daily by Data Abstractor and Quality
  - Emphasize correlation between Sepsis and Mortality (Improving Sepsis care = better patient outcomes)

#### Quality tools used

- Sepsis Checklist to guide action steps (prevent omissions)
- Sepsis Checklist forwarded to physician (ensure we are using same Sepsis guidelines)
- Nurse driven protocols (Positive Sepsis Screen in EMR during Triage)
- S magnet for the door (SIRS & suspected infection)

#### Intervention or change implemented

- Utilization of the checklist (staff involvement)
- Sepsis Team Meetings Lead by Data Abstractor (review case studies)
- Concurrent communication / Q2 hour rounding

#### How staff/patients were involved in your work

- Ownership in the nurse driven protocol
- Reviewing each sepsis chart with staff involved.



# Your Results: How you made a Difference

- How did the intervention(s) change/improve processes?
- Better quality care of our patients with earlier detection.
- Decreased mortality rates in charts final coded Sepsis/Severe Sepsis or Septic Shock
- Describe the staff experience. (Firsthand accounts when possible)
- Better understanding of the measure and requirements and what effect it has on patient outcomes.
- What impact did this work have on patient experience? (use patient stories when possible)
- Saves lives
- What is your plan to sustain improvement over time?
- Continue to share case studies, conduct as much as possible concurrent audits of charts, celebrate successes

# Key Takeaways: Lessons learned

- Include all staff in the improvement project. ED Staff were the primary focus initially, but we also educated all ICU, Med Surg & Supervisory staff on the sepsis measure to assure success when the patient condition changes after admission.
- Real time monitoring the key to success to prevent fallouts. Checks at about every 2.5 hour and prior to leaving the ED to assure all documentation is complete.
- Sepsis resources posted for visual aids to all staff & physicians. Staff available for questions about the standard of care.

### **Contact Information:**

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