

IPRO HQIC Sepsis Change Pathway Part 2

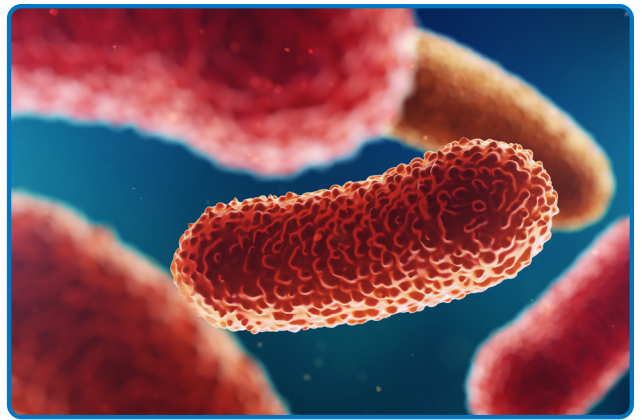
Exploring Sepsis Strategies Part 2: Care Coordination & Preventing Sepsis-Related Readmissions

Thank you for registering for and/or attending [HQIC Sepsis Webinar!](#) Hospital leaders from across the country attended the event. The small, rural, critical access and large urban hospital voice were amplified through sharing of barriers and best practices alike. Furthermore, subject matter experts shared their perspectives and their favorite resources.

Now, it is time to act!

Why Now

Sepsis, a life-threatening medical condition, is the body's extreme response to infection and it can occur in both bacterial and viral infections, including COVID-19. Sepsis can worsen chronic conditions, is a leading cause of death for critically ill patients and a top cause of 30-day readmissions with as many as 19% of patients readmitting and up to 40% within 90 days. Early, equitable sepsis screening and effective transitions in care strategies are crucial to preventing sepsis-related harm and/or readmissions. Survivors of sepsis are more likely to be discharged to a place other than home, such as a skilled nursing facility. The COVID-19 pandemic has resulted in an increase in critically ill patients, underscoring the importance of vigilant sepsis screening, care coordination and early treatment.

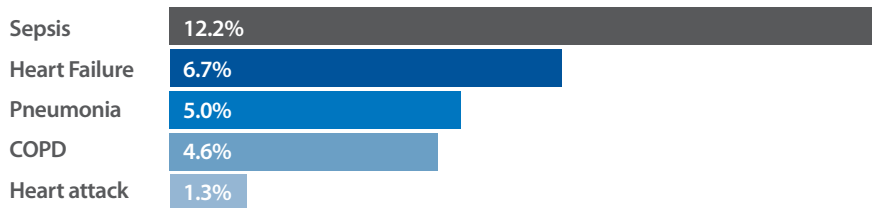


Review the Data

National Sepsis Data

Hospital readmissions and healthcare costs after sepsis

Percentage of hospital readmissions



1 in 3 readmitted
within 90 days

Estimated average cost per readmission



15% of total
readmission-related
costs

From "Proportion and Cost of Unplanned 30-Day Readmissions After Sepsis Compared With Other Medical Conditions."
JAMA 2017;317(5):530-531

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Consider Common Barriers

Review common barriers identified during the webinar and brainstorm ways to mitigate challenges to implementation in your organization.

- Understanding the interconnectedness of early sepsis identification, provider and patient/family education and disparities in care to enhance patient safety
- Lack of effective hospital and skilled nursing facility partnering strategies to prevent sepsis-related harm and readmissions
- Gaining buy-in from providers across the continuum with sepsis protocols to reduce readmissions
- Challenges of COVID-19 affecting care coordination and hand-offs to the next level of care
- Difficulty collecting and utilizing sepsis-related data

Perform a Root-Cause Analysis

Fill in the [Five Whys template](#) to identify the cause of your hospital's sepsis readmissions.

Identify Promising Practices

Beginner	Intermediate	Expert
Implement a sepsis screening protocol in your hospital's emergency department to increase early identification. Click here to view an example.	Develop a 1-hr sepsis bundle that includes standing orders for positive screens .	Establish a collaborative partnership with your local Skilled Nursing Facility.
Provide annual sepsis education to all clinical staff.	Develop a tracking tool and monitor time from presentation to screening performed and documented.	Stratify sepsis data using race, ethnicity, age, and language (REAL) categories to direct QI efforts toward underserved populations.

Patient and Family Engagement & Health Equity Promising Practices

- Share sepsis [patient stories](#) with staff to create awareness and prompt buy-in to screening protocol
- Provide education to staff on sepsis-related health disparities using the [sepsis and health equity fact sheet](#)
- Share facts and [educational tools](#) with local long-term care facilities to aid in sepsis awareness in older adults. Begin collaborative discussions on the impact of sepsis on readmissions.
- Use the [Sepsis Fact Sheets and Discharge Checklist](#) to provide sepsis related education to patients/families and to staff



Craft Your AIM Statement

Identify your organization's goals related to sepsis screening and treatment. Fill in the blanks with your AIM.

By (date), the team at (hospital) will implement (intervention) to improve (the problem) by (how much) to benefit (for whom).

Example AIM

By December 30th, 2021, the hospital and nursing home collaborative will implement a new sepsis screening tool to be performed on all patients upon arrival to the ED to decrease unnecessary sepsis-related readmissions.

Next Steps

Not sure how to identify your organization's root cause?

Need help getting started on implementing your selected intervention(s)?

Seeking feedback on your Aim statement?

Reach out to your IPRO HQIC quality improvement partner for assistance.



Reference Materials

- [Exploring Sepsis Strategies Part 1 Slide Deck](#)
- [Sepsis Part 1 Change Pathway](#)
- [IPRO All-Cause Harm Resource](#)
- [IPRO HQIC website](#)
- [IPRO HQIC Resource Library](#)
- [CDC Clinical Tools](#)
- [Sepsis Alliance](#)
- [Surviving Sepsis Campaign](#)
- [INTERACT Communication Tools- create a free account for access](#)
- [Seeing Sepsis Cards](#)
- [Facility Sepsis Algorithms](#)



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HQIC
Hospital Quality Improvement Contractors
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