Health Watch USA Newsletter

US Last in Health Care Rankings:

New Seven Year Study Finds the US Last in Healthcare Compared to Six Other Nations: Australia, Canada, Germany, the Netherlands, New Zealand, and the United Kingdom) – The Commonwealth Fund, June 2010. The biggest negative change in the US Healthcare System has been a reduction in access.   http://www.commonwealthfund.org/Content/Publications/Fund-Reports/2010/Jun/Mirror-Mirror-Update.aspx

US Maternal Mortality is on the Rise:

http://www.medscape.com/viewarticle/720152?src=ptalk&uac=123591HV
http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2810%2960518-1/abstract?_eventId=login

CMS Considers New HAC

CMS proposes that Central Line Associated Bloodstream Infections and Surgical Site Infections as Healthcare Associated Infection Measures and for possible adoption into the RHQDAPU (Reporting Hospital Quality Data for Annual Payment Update) program.
http://www.healthwatchusa.org/publications/201007-downloads/201006--CMS_proposed_hai_measures.pdf

> Consumer Union and Healthcare Advocates Comments on this proposed rule:
> http://www.chathamjournal.com/weekly/living/health/public-reporting-of-hospital-infection-rates-100620.shtml
> APIC Comments on this proposed rule:
> http://www.healthwatchusa.org/publications/201007-downloads/APIC_Comments_on_IPPS_FY_2011.pdf

Poor Infection Control in Surgery Centers

A new study in JAMA reports that over two-thirds of surgery centers had at least one lapse in infection control.   http://jama.ama-assn.org/cgi/content/abstract/303/22/2273

MRSA Continues to Develop Resistance:

1) An article published in JAMA reports a MRSA strain with resistance to linezolid
http://www.ncbi.nlm.nih.gov/pubmed/20530779

2) Multiple articles report developing resistance to Mupirocin (Bactoban)
http://www.ncbi.nlm.nih.gov/pubmed/20421433
http://www.ncbi.nlm.nih.gov/pubmed/20542641

Some opponents of universal screening of MRSA have stated we should use the same strategies that were used in the HIV epidemic.

However, emergence of resistance to Mupirocin, is a testament to why the non-identification of MRSA carriers and the treatment of all patients as if they are carrying MRSA is not an effective long-term strategy. If Mupirocin is placed in all pre-op patient's nostrils it may hasten the development of even stronger resistant strains of MRSA. In addition, covering all surgical patients with preoperative antibiotics may not only increase bacterial resistance but also the patient may not be given an antibiotic which MRSA is susceptible to.

Ironically, the CDC now does recommend universal screening for HIV

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State Plans for Addressing Healthcare Associated Infections are now Available on CDC's Website.   http://www.cdc.gov/hai/HAIstatePlans.html
Kentucky's plan has phases of development, however, Kentucky does not mandate the reporting of healthcare associated infections, only outbreaks.

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Veterans Administration MRSA Study Results Obtained by HW USA.

HW USA has obtained the results of the VA MRSA prevention study.   Data was collected while patients were treated under VHA Directive 2007-002
http://www.healthwatchusa.org/mrsa/pdf_downloads/VHA-MRSA-Directive-2007-002.pdf

Results were excellent using a bundle approach of universal active surveillance/screening of all patients admitted to the VA Hospital (except psychiatric units), contact precautions and hand hygiene.
(http://www.healthwatchusa.org/mrsa/pdf_downloads/VAH-MRSA-2010-Results.pdf)

Healthcare Acquired Infections, CDC and Public Reporting:

The director of the CDC's HAI prevention program, Dr Srinivasan, recently stated that the "CDC does believe that increased transparency, public reporting of healthcare-associated infections is an important part of a comprehensive effort to prevent healthcare-associated infections and eliminate these infections ..."
http://www.cdc.gov/media/transcripts/2010/t100527.htm

AHRQ--Prompt Reporting and Investigation of Medical Errors Reduces Average Malpractice Claims Costs   http://www.innovations.ahrq.gov/content.aspx?id=2731

Common Formats Version 1.1   AHRQ & NQF – Introduces Standardized Methodology for Reporting Medical Incidents, Near Misses and Unsafe Conditions
http://www.pso.ahrq.gov/formats/commonfmt.htm

Software Now Available to States to Report Hospital Quality and Conditions
The software's reporting includes:

- Quality of care for specific hospitals—provides information about patient safety, patient deaths in the hospital and other quality-related issues to answer questions such as, "Which hospitals have the lowest mortality rates after coronary bypass surgery?"

- Provision of services by hospital for health conditions and procedures—provides information about the number of patient discharges, charges, costs and length of hospitalizations for specific hospitals to answer questions such as, "Which hospitals perform the largest numbers of hip replacement surgeries? And what is the cost?"

- Potentially avoidable hospitalizations—creates maps of county-by-county rates for potentially avoidable hospitalizations to answer questions such as, "Which counties have the highest rates of hospitalization for uncontrolled diabetes? And how much could be saved if these rates were reduced?"

- Rates of health conditions and procedures—provides information about the prevalence of diseases or medical procedures through maps of county-by-county rates for selected conditions and procedures to answer questions such as, "Which counties have the highest rates of lung cancer?"

http://www.ahrq.gov/news/press/pr2010/monahrqpr.htm

Proposed Model Statue for Public Reporting of HAI for Kentucky.

This is posted as a resource to be modified and used as a basis for legislation.
This sample has been constructed from prior proposed Kentucky and Federal Legislation.

http://www.healthwatchusa.org/downloads/20100118-KY%20HAI%20bill.pdf

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Health Watch USA 2010 Conference

2010 Conference Topic: Value Purchasing and Hospital Acquired Conditions.   Date: Nov 19, 2010, Lexington Embassy Suites on Newtown Pike, Lexington, Kentucky.   ON-LINE REGISTRATION NOW OPEN Brochure:
http://healthconference.org/2010conference_downloads/HCTPA_Brochure.pdf

Scheduled speakers include:

1) Richard Wild, MD, JD, Chief Medical Officer, Atlanta Regional Office
   Centers for Medicare and Medicaid Services (CMS), will present "CMS Perspectives on Value Based Purchasing, P4P, and Meaningful Use of Electronic Health Records."

2) Dr Jim Battles, PhD, Center for Quality Improvement and Patient Safety, AHRQ - Presenting Quality and Safety Provisions in the New Health Care Reform Law.

3) Jill Rosenthal, Program Director, National Academy for State Health Policy -- Presenting on State Medicaid Policy on Hospital Acquired Conditions.

4) Jeannie Cimiotti, DNSc, RN, Center for Health Outcomes and Policy Research, University of Pennsylvania – School of Nursing. Co-Author of "Implications of the California Nurse Staffing Mandate for Other States." http://www.ncbi.nlm.nih.gov/pubmed/20351541

5) Lisa McGiffert, Senior Policy Analyst on Health Issues, Consumer Union. Presenting on Hospital Acquired Infections.

6) Alicia Cole, Patient Advocate, Actress, and Necrotizing Fasciitis Survivor - A Hospital Acquired Condition. http://www.aliciacole.com/

7) Joycelyn Elders, MD, former US Surgeon General.

8) Marvin Feit, PhD, Editor of the Journal of Health and Social Policy.

Continuing education credits will be applied for RN, MD, JD, OT, PT, Social Work and Human Resource Managers.

To register go to: www.healthconference.org

To register as an exhibitor go to: http://healthconference.org/exhibits.htm   View Exhibitors

The 2009 Conference Presentations Can be Viewed at:
http://www.healthwatchusa.org/conference2009/index.html

Speakers now available on Healthcare Transparency and Value Purchasing (How to shop for quality and price in our healthcare system) for more information contact healthwatchusa@gmail.com