



# Health Watch USA Newsletter

[www.healthwatchusa.org](http://www.healthwatchusa.org) March 16, 2011

Member of the National Quality Forum and a designated "Community Leader" for Value-Driven Healthcare by the U.S. Dept. of Health and Human Services

## 2011 HW USA 5th Annual Conference Starting to Take Shape

This year's topic is Healthcare Acquired Infections, although other issues involving transparency or patient advocacy can be presented. The date is Nov. 11, 2011 and is being held at the Embassy Suites.

Initial confirmed speakers are:

- a. John Santa, MD, Director of the Health Ratings Center for Consumer Reports.
- b. Maryn McKenna best selling author of SUPERBUG: The Fatal Menace of MRSA
- c. Dr. Joycelyn Elders, Past US Surgeon General
- d. Dr. Marvin Feit. Editor of the Journal of Social Work in Public Health

We also have exhibits which are FREE for non-profits who provide two registrations. The cost for attendance is \$50 and \$25 for students.

The conference's website can be viewed at [www.healthconference.org](http://www.healthconference.org)

As with previous years' conferences, CME credits are planned to be available for RNs, MDs, JDs, Social Workers and Human Resource Managers.

If you would like to give a 25 minute presentation at the conference, please submit a 300 word abstract for consideration to [contact-mail@healthwatchusa.org](mailto:contact-mail@healthwatchusa.org)

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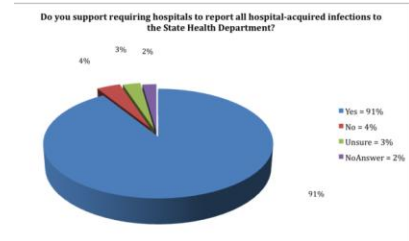
## New Poll Shows American Public Wants Better HAI Control

"84 percent of Americans surveyed believe reducing sepsis deaths and hospital acquired infections should be a top priority for hospital staff and resources." " with 20 percent rating care as poor compared to only 8 percent who rated care as excellent."

<http://www.pnewswire.com/news-releases/new-research-unveils-high-support-for-programs-to-reduce-infections-in-hospitals-117646513.html>

This is similar to Senator Harper-Angel's poll of her constituents where over 90% wanted Hospital Acquired Infections to be reported to the Health Department.

<http://www.healthwatchusa.org/publications/201101-Documents/HAI-Reporting.jpg>



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## Medication to Prevent Premature Pregnancy increases in cost from \$10 to \$1500 per Injection

"...recently, KV Pharmaceutical of suburban St.Louis won government approval to exclusively sell the drug, known as Makena."

<http://www.msnbc.msn.com/id/41994697/ns/health-pregnancy/>

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## Importance of Nursing Staffing Reaffirmed in AHRQ Study

"...staffing of RNs below target levels was associated with increased mortality, which reinforces the need to match staffing with patients' needs for nursing care."

<http://www.nejm.org/doi/full/10.1056/NEJMsa1001025>

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## Alcohol Wipes Found to Harbor Spore Forming Bacteria

"Spate of serious infections caused by rare bacteria sparked massive recall, investigation" Wipes were found to be infected by a very hard to kill spore forming bacteria Bacillus cereus. Like C. Difficile, alcohol does not reliably kill it.

[http://www.msnbc.msn.com/id/41914778/ns/health-infectious\\_diseases/](http://www.msnbc.msn.com/id/41914778/ns/health-infectious_diseases/)

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## Texas Mandates Coverage of Questionable Expensive Tests to Detect Heart Disease

<http://www.theheart.org/article/1190599.do>

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## **Healthcare Reform Waivers For Mandatory Insurance and Premium Expenditures**

Maine is the first State to Get a Waiver from the Requirement that at least 80% of the Premium is Spent on the Patient. Kentucky has a pending application

<http://thehill.com/blogs/healthwatch/health-reform-implementation/148179-maine-gets-relieve-from-health-reform-insurance-requirement>

Number of healthcare reform law waivers climbs above 1,000

<http://thehill.com/blogs/healthwatch/health-reform-implementation/147715-number-of-healthcare-reform-law-waivers-climbs-above-1000?page=22>

Second House panel investigating waivers from Obama health law

<http://thehill.com/blogs/healthwatch/health-reform-implementation/148303-second-house-panel-investigating-health-law-waivers?page=2>

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## **CDC Lists 10 Things Patients can Do to Help Prevent Healthcare Acquired Infections**

<http://www.cdc.gov/Features/PatientSafety/>

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## **Health Grades Releases Hospital Rankings of the 50 Best US Hospitals**

"Study Finds More than a Half Million Preventable Deaths in Last Decade."

On average, there was a 30% lower risk adjusted death rate at the top 50 US Hospitals

<http://www.healthgrades.com/business/news/press-releases/americas-50-best-hospitals-2011.aspx>

And "Patients 46% Less Likely to Experience Patient Safety Incident at Top-Rated Hospitals, Study Finds"

<http://www.prnewswire.com/news-releases/patients-46-less-likely-to-experience-patient-safety-incident-at-top-rated-hospitals-study-finds-117627863.html>

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## How Much is a Life Worth ?

A new Op-Ed in the New York Times discusses the cost of a human life and how this cost is used by various Federal Agencies to determine Cost Effectiveness of proposed programs and protocols. Agencies have estimated the dollars lost per life is between 6 to 9 million. For healthcare protocols this factor is often not considered when determining cost effectiveness. Health Watch USA's position is that a life is invaluable.

[http://www.nytimes.com/2011/02/17/business/economy/17regulation.html?\\_r=2&pagewanted=all](http://www.nytimes.com/2011/02/17/business/economy/17regulation.html?_r=2&pagewanted=all)

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## National Quality Forum Currently Voting on Newly Reportable Events

HW USA has sent in a comment regarding the following event:

"2B. Patient death or serious injury associated with the use or function of a device in patient care, in which the device is used or functions other than as intended."

In response, the NQF has done the following modifications in the final Serious Events to be voted upon: "Definition of device added to glossary. Suggested addition significantly expands the event and will be considered at next update."

Thus, a device can now be defined as an Endotracheal Tube or Feeding Tube. Passage of a feeding tube into the lungs and then feeding the patient will now be clearly reportable under this event.

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## Central Line Bloodstream Infections - Highlighted on the CDC's Vital Signs Web Report

- 1) In 2009, 18,000 bloodstream infections occurred in ICU patients with central lines.
- 2) In 2009, 23,000 more bloodstream infections happened to patients who received treatment in other areas of the hospital.
- 3) In 2008, about 37,000 bloodstream infections occurred in hemodialysis outpatients with central lines.

One in 20 die of the infection <http://www.cdc.gov/VitalSigns/HAI/index.html>

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## New Dartmouth Atlas Reports on Patient Choices

[http://www.dartmouthatlas.org/downloads/reports/Decision\\_making\\_report\\_022411\\_embargoed.pdf](http://www.dartmouthatlas.org/downloads/reports/Decision_making_report_022411_embargoed.pdf)

There is a very interesting statement on page 15. Back surgery per 1,000 Medicare beneficiaries among hospital referral regions (2003-07) for Low Back Pain. Rates are adjusted for age, sex and race.

"The greatest variation within a single region was seen in Lexington, Kentucky, where the rate of back surgery ranged from 0.8 per 1,000 beneficiaries in the Jackson HSA to 5.4 per 1,000 in the Somerset HSA."

However, since the average rate of back surgery in the entire U.S. was 4.3 per 1,000. The above discrepancy is indicative of the lack of service in the Jackson Health Service Area.

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## **Presentation on Healthcare Associated Infections - National Journal Video Lectures**

A two-hour presentation on hospital acquired infections which is in two parts. The first is an interview with Donald Berwick. The second is a panel discussion. The presentation can be viewed with the link below:

<http://nationaljournal.com/video-donald-berwick-on-healthcare-associated-infections-20110302>

Below are some of the comments in the presentation -- The time of statement on Timeline is denoted by ():

Donald Berwick, MD – Director of the Centers for Medicare and Medicaid Services. The system which is unsustainable at the current level of cost. The solution is Quality – Improvement. 20% of patients who go home from the hospital are readmitted within 30 days.

9.2 million dual eligible (Medicaid and Medicare) are responsible for 40% of Medicaid costs.

Lisa McGiffert, Consumer Reports– Outcome measures are the most important (1:34) “...outcome measures like mortality rates, readmission rates, infection rates and those kinds of measures are going to be what we should be looking for in the future” (1:48). More infections of CLBSI occur in the Non-ICU setting then in the ICUs.

Jerome E. Granato, MD, FACC, FAHA, Chief Medical Officer Excelsa Health – CLBSI infections were observed to have dropped from 50-60 per year to zero in 18 to 20 months(1:24). There is a 20%-30% mortality rate at a cost of \$20-30,000 per infection(1:25).

Nancy Foster – “If I may, I join Lisa (McGiffert) in thinking public reporting is an important aspect here.” Stressed that outcome measures need risk adjustment so not to disadvantage patients or hospitals(1:29:15).

Donald Wright, MD – Asst. Deputy Secretary for Healthcare Quality.  
“I don't think we can wait. We need to take the best that we have right now, apply those quality measures and then modify them moving forward as better measures are identified based upon evolving science and evolving knowledge.”(1:47)  
He also complimented Lisa McGiffert on efforts for State Public Reporting which are important.(1:51:45)

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## **HW USA Meeting April 20th**

Speaker Helen Haskell - Founder of Mother's Against Medical Error

To attend contact Kevin T Kavanagh, MD 606-875-3642

