Health Watch USA Newsletter

www.healthwatchusa.org Sep 23, 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

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Groups Call for Transparency in Hospital Accreditation Survey Findings

Health Watch USA in the News !!!

http://www.healthleadersmedia.com/content/HEP-271207/Groups-Call-for-Transparency-in-Hospital-Accreditation-Survey-Findings

http://www.kentucky.com/2011/09/07/1872850/groups-push-for-congress-to-open.html

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Financial incentives to promote health care quality: The hospital acquired conditions nonpayment policy.

HW USA Healthcare Policy Article on the Non-Payment of Hospital Acquired Conditions - Published September 8, 2011. http://www.ncbi.nlm.nih.gov/pubmed/21902485

http://www.tandfonline.com/doi/abs/10.1080/19371918.2011.533554

Norovirus and C. Diff Infections in Facilities

An article in the Canadian Medical Association Journal which strongly questions the effectiveness of alcohol rubs to prevent these infections.
http://www.cmaj.ca/content/183/12/E799.full

The Use of Checklists not Only Saves Lives But also Money !!

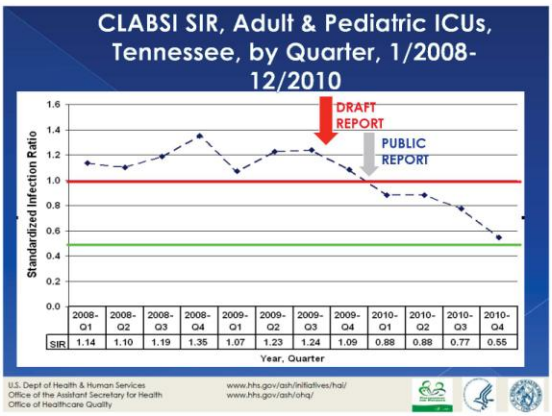
"More than 100 Michigan ICUs were able to cut bloodstream infections by an average of two-thirds, with many hospitals eliminating the infections entirely."
http://www.ama-assn.org/amednews/2011/09/12/prbf0912.htm

Economic analysis of the Keystone Project could save as much as 1.1 million dollars per hospital: http://www.ncbi.nlm.nih.gov/pubmed/21856956/
http://www.ama-assn.org/amednews/2011/09/12/prbf0912.htm

Central Line Blood Stream Infections Should be Close to Zero.

"In the 3 years following the intervention, the 6 hospitals averaged 4532 catheter line days per year. The intervention resulted in a decrease in the mean level of CLABSIs from 7.7 to 1.1 per 1000 catheter days at the end of 36 months; the median rate decreased from 2.7 to 0 over the same time period."
http://www.ncbi.nlm.nih.gov/pubmed/21856956/
http://www.ncbi.nlm.nih.gov/pubmed/20133365

With the Help of Public Reporting, The State of Tennessee has Released Their Hospital Acquired Infection Report.



Found a 21% decrease in MRSA Infections and a 36% decrease in central line infections !!!!
http://www.tnpatientsafety.com/LinkClick.aspx?fileticket=uu-qSnn0igk%3d&tabid=36

Number of Uninsured in United States Grows to 49.9 Million

The Commonwealth Fund reports on newly released US Census Bureau data and finds more people are now uninsured than ever before.
http://www.commonwealthfund.org/Blog/2011/Sep/Number-of-Uninsured-in-United-States-Grows.aspx?omnicid=20

The Washington Post also reports that the number of people living at or below the poverty level is now 15.1%.
http://link.email.washingtonpost.com/r/HXJVEI/OJHNUS/HS3M3I/ZS0YZT/YNUDH/D5/h

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2011 Dept of Health and Human Service Conference in Dallas

The Conference stressed how State Initiatives were Important for Control of Healthcare Acquired Infections and How Transparency Is an Important Part of this Initiative.

The picture on the right shows Dr. Arjun Srinivasan from the CDC at the podium and Dr. James Battles from AHRQ in the foreground.

At the Conference the Michigan Health Department reported A 70% decrease in Ventilator Associated Pneumonia using protocols and checklists.

OIG Report - Adverse Events in Hospitals: Methods for Identifying Events. Office of US Inspector General. March 2010

“The implications of hospitals’ failure to identify and capture event information can be significant. First, although we did not assess hospital compliance with Federal requirements to “track medical errors and adverse patient events,” it raises concerns that only four of the seven most serious events had no associated hospital incident reports. Further, the lack of incident reports for 93 percent of events suggests that hospital incident-reporting systems may be an unreliable source of information for PSOs, States operating adverse event reporting systems, and other entities. These entities often seek to learn from the combined experiences of many hospitals to generate lessons to improve patient safety. Unless events are reported within the hospital first, the event information is unlikely to be available to outside entities for learning."

The Center For Disease Dynamics, Economics & Policy Has Published Their Key Findings Regarding MRSA.

"However, the striking growth in CA-MRSA infections has implications for hospital epidemiologists – outpatients could be a major factor in the spread of MRSA in facilities, and there is already evidence of the invasion of community strains in inpatient wards."

Some important conclusions and observations:

• "Surveillance is needed to track changes at the population, as well as the microbiological level."

• "The United States has one of the highest rates of MRSA among developed nations (51.7%), ranking behind Malta and Israel and ahead of countries from Southern and Eastern Europe. By comparison, MRSA rates were as low as 1% in the Netherlands and Sweden."

• "Hospital administrators should evaluate widespread adoption of proven infection control measures such, as the active detection, reporting and isolation of resistant infections, in addition to the implementation and improvement of existing education and stewardship programs that promote judicious antibiotic use."

View Resistance Map's Key Findings: http://www.cddep.org/ResistanceMap/key-findings

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Nov. 11, 2011 HW USA's 5th Annual Conference on Healthcare Transparency and Patient Advocacy.

The conference will be held on Nov. 11th, 2011 at the Embassy Suites. It is now time to register. This year's conference has a number of exciting speakers.

Download Presentation Objectives:
http://www.healthconference.org/2011conference_downloads/ContinuingEducationlDocument.pdf

Download Conference Brochure:
http://www.healthconference.org/2011confreence_downloads/2011-Brochure.pdf

Speakers Include:
a. John Santa, MD, Director of the Health Ratings Center for Consumer Reports.
b. Maryn McKenna bestselling author of SUPERBUG: The Fatal Menace of MRSA.
c. Frances A. Griffin, Senior Manager of Clinical Programs, BD Medical and Faculty at the Institute for Healthcare Improvement (IHI).
d. Dr. Joycelyn Elders, Past US Surgeon General on Transformational Leadership.
e. Dr. Marvin Feit, Editor of the Journal of Social Work in Public Health.
f. Patty Skolnik, Patient Advocate and Founder of "Citizens for Patient Safety"
g. Helen Gulgun Bukulmez, Juris Doctor, Presentation on Full Disclosure of Medical Errors by Healthcare Providers and the Legal Consequences of Such Disclosure.
h. Keith Sinclair, MD, Bluegrass Oakwood Community Center, Somerset, KY, presenting how Oakwood in Somerset Kentucky used transparency to virtuality eliminate pressure ulcers.
I. Ben Yandell, PhD, Norton Healthcare Systems, Louisville, KY, will present on Healthcare Transparency.

J. Representative Tom Burch, Chairman of the Kentucky House Health and Welfare Cmt.

COST: $50 per person including a box lunch and CME Credits.
To register go to: http://www.healthconference.org/payment-fax-check.htm
The conference's website can be viewed at www.healthconference.org.

As with previous years' conferences, CME credits are available for RNs, MDs, PT, and Human Resource Managers (PHR, SPHR ande GPHR). Application has been made for Occupational therapists, social workers and attorneys (CLEs).

Please note speakers may change without notice.

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(Note MS Explorer users may need to right click on the links and open in a new window!!)