

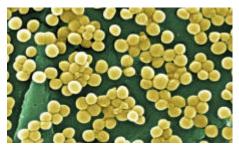
Health Watch USAsm Newsletter

www.healthwatchusa.org Sept. 15, 2014

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

Op-Ed: Beshear moving to protect Kentuckians from health-care associated infections

Lexington Herald Leader, Sept. 15, 2014: <u>http://www.kentucky.com/2014/09/15/3429866/beshear-moving-to-protect-kentuckians.html</u>



The revised regulation to control HAIs is in production and will do the following:

- "Better defines an outbreak so it will be harder to not report the data needed to address these epidemics."
- "Gives the Kentucky Department of Public Health ready access to information regarding infections once they are reported to the U.S. Centers for Disease Control and Prevention. Presently, unless a facility gives permission, access is delayed, making the information less useful."
- "There are provisions which enable health departments to require laboratory reporting of Methicillin-resistant *Staphylococcus aureus* or MRSA."
- "Most importantly, there will be mandatory reporting of virtually untreatable bacteria called CRE (carbapenem-resistant *Enterobacteriaceae*)."

This regulation is designed to help combat HAIs in Kentucky, a state where recent data shows it has the fourth highest rate of MRSA bloodstream infections in all of the 50 states.



Dr. Peter Pronovost Discusses Hospital Acquired Conditions, Checklists and Promotion of Quality

Dr. Peter Pronovost, Director Armstrong Institute for Patient Safety and Quality, Johns Hopkins along with Dr. Kevin Kavanagh from Health Watch USA discuss the prevention of adverse events, hospital acquired conditions, checklists and quality Improvement in Healthcare

Jack Pattie Radio Show & Webinar Sept. 9, 2014 - 29 Mins WVLK-AM Lexington, KY

View YouTubeVideo At: <u>http://youtu.be/L-FNN_xiZoU</u>

Infections

The Risk of Infection From a Multi Resistant Drug Organism Increases 1% for Each Day a Patient Is In the Hospital

ICAAC 2014: ASM Events: Sept. 7, 2014: "A strong relationship between time to infection and infection with an MDR pathogen was found (p=0.0002). Each day of hospitalization increased the likelihood of infection with an MDR pathogen an additional 1%"

http://www.icaac.org/index.php/newsroom/92-icaac-2014/newsroom/322-each-day-in-thehospital-raises-risk-of-multidrug-resistant-infection

Up to 78% of Hospitals May Use Inappropriate Antibiotics

ICHE, Sep. 9, 2014: "We found evidence of potentially inappropriate, redundant antimicrobial coverage for 23 different antimicrobial combinations in 394 of the 505 (78%) hospitals, representing a total of 32,507 cases."

http://www.jstor.org/stable/10.1086/678066

Ebola May Boost Infection Control Software

Only "41 percent of hospitals with more than 150 beds routinely use computerized IC information and real-time surveillance systems"

Fierce Health IT <u>http://www.fiercehealthit.com/story/ebola-scare-hai-crackdown-boost-sales-infection-control-software/2014-09-11</u>

New York Proposes Changes to Their HAI Reporting Requirements

"The New York State Department of Health requires that hospitals report certain hospital-acquired infections using CDC's National Healthcare Safety Network (NHSN). In 2014, hospitals were required to report central line-associated bloodstream infections (CLABSIs) in intensive care units, surgical site infections following colon, hip replacement, coronary artery bypass graft, and abdominal hysterectomy procedures, Clostridium difficile infections, and carbapenem-resistant Enterobacteriaceae

infections." <u>https://www.health.ny.gov/statistics/facilities/hospital/hospital acquired infections/</u> 2014-09-05 proposed changes to hai reporting requirements.htm

Healthcare Reform

Feds Reverse Course on Hospital-Acquired Conditions. Will Release Data

"CMS says it will make this data on eight "hospital-acquired conditions" (HACs) available on its website. "

USA Today: <u>http://www.usatoday.com/story/news/nation/2014/09/07/hhs-change-reporting-hospital-mistakes-foreign-objects/15084175/</u>

Hospital Administrative Costs Now Account for 25% of their Healthcare Dollar.

"Administrative costs account for 25 percent of total U.S. hospital spending, according to a new

study that compares these costs across eight nations. The United States had the highest administrative costs; Scotland and Canada had the lowest. Reducing U.S. per capita spending for hospital administration to Scottish or Canadian levels would have saved more than \$150 billion in 2011."

Commonwealth Fund: <u>http://www.commonwealthfund.org/publications/in-the-literature/2014/sep/hospital-administrative-costs</u>

ACA Insurance Premiums are not decreasing

"Annual premiums for employer-sponsored family health coverage reached \$16,834 this year, up 3 percent from last year, with workers on average paying \$4,823 towards the cost of their coverage, according to the Kaiser Family Foundation/Health Research & Educational Trust (HRET) 2014 Employer Health Benefits Survey.

Kaiser Family Foundation: <u>http://kff.org/health-costs/report/2014-employer-health-benefits-</u> <u>survey/</u>

Patient Safety

Titan Spine Offers 5 Year Warranty on Their Spine Implant http://www.titanspine.com/content/news/Guarantee.htm

Upcoming Events:

World MRSA Day Oct 2, 2014

For more information go to www.worldmrsaday.org

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HW USA Annual Patient Safety Conference



Nov. 7, 2014: Health Watch USA's Annual Health Policy Conference, Lexington, KY. Continuing Education Credits for physicians, nurses, social workers and physical therapists will be offered. This year's conference will focus on patient safety, advocacy, healthcare associated infections and multi-resistant drug organisms. (A working agenda can be viewed at

http://www.healthconference.org/agenda.htm

In the Conference's Patient Advocacy Section, we have a number of nationally renowned speakers, including Past Surgeon General Joycelyn Elders, MD, Kathy Day, RN, and Karen Meyers, JD. In addition, the following presentations will deal with full disclosure.

- Patient Advocate David Anton will present on how a lack of transparency can inhibit the correction of medical errors that are found on CMS Surveys. (David Anton is the patient advocate who was involved in the CMS, Cleveland Clinic, VA Secretary Appointment Issue.) <u>http://www.modernhealthcare.com/article/20140607/MAGAZINE/306079939/-clevelandclinic-cases-highlight-flaws-in-safety-oversight</u>
- Dr. Steve Kraman, will give an update on the full disclosure initiative. Dr. Kraman was one of the first to start the full disclosure initiative back in the late 1990's. It has since been adopted by Stanford University and the University of Michigan and found to lower malpractice costs.
- James Anderson, will give the morning keynote address on disclosure of adverse events. Mr. Anderson is on the Board of Directors for the Institute for Healthcare Improvement (IHI) & Former President and Chief Executive Officer, Cincinnati Children's Hospital. <u>About the James M. Anderson</u> <u>Center for Health Systems Excellence.</u>

In the Conference's Adverse Events and Healthcare Associated Infections Section, Dr. Richard Wild, Chief Medical Officer CMS Atlanta Region will present on the CMS initiative on decreasing Hospital Acquired Conditions (HACs). Representative Tom Burch, Kentucky House Health and Welfare Committee Chairman and Dr. Kraig Humbaugh, Director of the Kentucky Department for Public Health (KDPH) Division of Epidemiology Planning will present on the revised Kentucky regulation for reportable diseases, including CRE. Dr. Kevin Kavanagh will present on the prevention of surgical site infections, and Dr. Raul Nakamatsu will present the Louisville, VA experience of universal surveillance to control MRSA. Conference registration is \$50. To register go to: <u>http://www.healthconference.org/payment-fax-check.htm</u>

Full conference agenda can be viewed at: <u>http://www.healthconference.org/agenda.htm</u>

For more information go to: <u>www.healthconference.org</u> Registration is now open

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