



RECENT ACCOMPLISHMENTS

Patient Safety

Through the Quality Improvement Organization (QIO) Program, hospitals and nursing homes nationwide have delivered safer, more effective health care to thousands of Medicare beneficiaries over the last three years. Their achievements in preventing health care-associated infections and health care-acquired conditions demonstrate what every provider with the will to improve can accomplish. The success of facilities that worked with their local QIO also has established a foundation for related, future QIO Program initiatives.

Bringing best practices to the bedside

QIOs in every state and territory, united in a national network administered by the Centers for Medicare & Medicaid Services, have the ability to focus health care quality improvement resources and expertise at the community level. Here are some examples from the recently concluded National Patient Safety Initiative (NPSI):

In Indiana, three hospitals joined with their QIO and a local school of pharmacy to pinpoint the root causes of their difficulty following evidence-based best practices for the post-surgical administration of antibiotics. Adhering to these practices helps reduce the risk of surgical infections and prevents antibiotic resistance. By opening the lines of communication between all levels of staff, from all of the disciplines involved in surgical care, the group developed an improved tracking process that ensures patients receive only three doses of antibiotics in the first 24 hours after surgery. This simple solution resulted in better performance; one of the hospitals improved its rate of properly administering antibiotics by 55.4%.

In Arkansas, 32 nursing homes reduced pressure ulcer rates as a result of participating in their QIO's improvement campaign. They implemented a checklist that helped them identify gaps in their facility's skin care protocols, along with other strategies that the QIO recommended, including the assessment of each resident's pressure ulcer risk within 24 hours of admission.

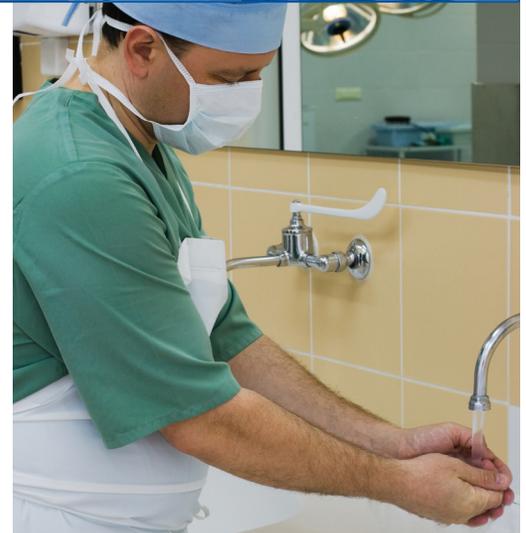
Contributing to national health quality goals

From August 2008 through July 2011, health care providers participating with their QIO in the NPSI increased their capacity for improvement and contributed to safer patient care on a national scale:

Health care-associated infections

- Hundreds of hospitals improved the timing of presurgical antibiotics by 21.4% relative to their baseline performance; they also improved the timing of postsurgical antibiotics by 50.7% relative to baseline.
- A total of 453 hospitals developed the capability to report data about methicillin-resistant *Staphylococcus aureus* infections to the Centers for Disease Control and Prevention's national surveillance network.

Continued



The QIO Program is an integral part of the U.S. Department of Health and Human Services' National Quality Strategy and is the largest federal program dedicated to improving health quality at the community level. As a major force and trustworthy partner for the continual improvement of health and health care for all Americans, QIOs work with patients, providers and practitioners across organizational, cultural and geographic boundaries to spread rapid, large-scale change. The work that QIOs perform spans every setting in which health care is delivered, even the critical transitions between those settings. The Program focuses on three aims: better patient care, better individual and population health, and lower health care costs through improvement.

Quality Improvement Organization Program

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Health care-acquired conditions

- A total of 1,253 nursing homes reduced the incidence of pressure ulcers in long-stay residents by 22.2% relative to their baseline performance.
- The use of physical restraints in 1,297 nursing homes decreased by 60.1% relative to their baseline performance.
- Hospitals, nursing homes, physician practices, Medicare Part D drug plans and other stakeholders participated in QIO-led, locally focused drug safety projects that contributed to an 8% reduction in national rates of drug-drug interactions and a 15.5% reduction in national rates for the use of medications that are potentially inappropriate for older patients.

Building on success, aiming even higher

Moving forward, QIOs will be convening local health care providers for patient safety initiatives that include a broader focus on health care-associated infections, and continued, intensive work on pressure ulcer reduction. They also will be bringing community pharmacists, physicians and facilities together in collaboratives to improve drug safety and care coordination for patients who take multiple medications.

These initiatives are structured to rapidly produce and spread significant change. Most will be delivered through local learning networks that offer online convenience, peer-to-peer sharing and resources with proven effectiveness.

For more information

The QIO Program invites all health care providers and health quality stakeholders—including patients and their families—to be a part of its new patient safety initiatives. To express an interest, contact your local QIO. A directory is provided in the Program’s “Advances in Quality” report. More information also is available at www.cms.gov/qualityimprovementorgs.